

## THE FLU

by Theodore A. Willis

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One day last week my morning paper carried a three-column-wide headline: "Three Die After Flu Shots—Eight States Halt Progress." Near the bottom of the last column was a short paragraph saying that there was no evidence that the shots had caused the deaths. On the same front page there was a photograph of a long line-up of people waiting their turns for inoculation with the Flu vaccine above a report that three of them had collapsed with heart attacks and seven had fainted. All ten had been hospitalized.

I stretched out in my reading chair, closed my eyes, and reminisced of that late summer 48 years ago when the Flu came to Camp Dodge, Iowa, where I was on duty as Ward Surgeon in the Base Hospital. Our beds were filled with wounded soldiers returned from the battlefields of Europe, most of them with bullet and shell-fragment injuries to their bodies and limbs. The wards reeked of pus and corruption. Such conditions were rare in civil life, and we knew little that could be done for them. A complicated method called the Carrell-Dakin treatment had not yet come to Camp Dodge.

We had read of the Flu epidemic occurring in the East but hoped that it would not reach Iowa, or that it could be controlled. But it did and it could not. The infection was said to have been imported by a group of soldiers transported from Chicago to Camp Dodge. It spread through the Camp with the speed of a grass fire on a windy day.

All civilians were ordered out of the Camp; face-masked guards patrolled the isolation areas; only emergency operations were performed; no gatherings were permitted; all possible beds were emptied; hospital personnel and patients were masked, but nothing stopped the spread of the disease and no treatment benefited its victims. The mortality rate was high, and the course rapid. Individuals apparently healthy in the morning might be dead by night.

Autopsies, many of which I watched, all showed the same complete congestion of the lungs. Rather than lobes of tiny air sacs the lungs were masses of bloody tissue. At the start of the epidemic all bodies were autopsied, but they soon arrived in such numbers that this was impossible. After the first several nothing more was to be learned from them, and they were discontinued.

When civilians were ordered out of the Camp some of the officer's wives, including mine, volunteered as nurses aides. They performed no technical duties but helped about the wards, delivered supplies and ran errands for the staff and patients. Clara's tour of duty included the Y.M.C.A. hut that had a lounge on the first floor and quarters for the staff on the second. When some of the staff

contracted the Flu they were hospitalized in their quarters, reached by a ladder on the side wall. One morning on my rounds I found Clara struggling up the ladder with supplies while several of the staff watched her. It was the day of longer skirts not designed for ladder climbing and the day when Ladies didn't have legs. I took the supplies from her, handed them to one of the staff, and used some words not in the Y vocabulary. I reported the instance to the Commanding Officer. He knew some of the words too, and thereafter supplies were delivered at the lounge desk.

The Salvation Army was much more popular among the doughboys than the Y.M.C.A. Its staff was over draft age, and their supplies and services were free. Many of the Y staff appeared young and healthy enough to be in uniform, and things were charged for.

The regular hospital patients were concentrated in "clean" wards, but in spite of masks, gowns, and gloves these were soon invaded. Hospital beds overflowed, and near-by barracks were commandeered. Beds vacated by death were taken out to be sterilized; their replacements promptly filled, sometimes more than once a day. The problem seemed to be to get the patient into the hospital before he died. I have forgotten how many deaths occurred at Camp Dodge, but the paper recently said that the number worldwide was 30 million.

As I reminisced one of my visions was of the great stack of plain pine coffins that appeared at the morgue every morning to be filled and hauled away during the night. I do not know where they went, perhaps to the occupant's home town, not to be opened, or to a military cemetery at the parents' behest.

Fortunately many people were immune to the virus. At the time, because Clara and I were not infected, I attributed our immunity to recovery from a severe sinus and throat cold that had been epidemic at Fort Riley, Kansas, the preceding winter. As far as I knew, none of us who had experienced that illness had the Flu, though exposed to it day after day.

The fury of the epidemic gradually lessened as those susceptible to it either died or recovered, and the hospital resumed its normal activities. In civil life the epidemic spread to every city, town, and village and to farms remote from the outer world where there had been no known contact with the outside.

Throughout the nightmare, morale of the hospital personnel remained high. Doctors, nurses, corps men, and maintenance staff stayed on their jobs working night and day without complaint. The attitude seemed to be "If you get it, you get it. If

you don't, you are lucky." One could not run away from it. It was everywhere.

A surgeon from overseas, well experienced in the Carrell-Dakin treatment of osteomyelitis, was sent to the Base Hospital. The reek of pus gradually gave way to the acrid odor of chlorine. As their wounds healed the patients were discharged, their beds refilled by new arrivals.

Armistice Day arrived, the troops returned from Europe and were discharged, but the wounded continued to arrive. Camp Dodge was gradually closed down. When the last of the injured had been received and those fit for discharge had been released, the remaining patients were transferred to permanent hospitals.

Six months after Armistice Day I was granted my discharge from service and went to New York for another year's training in Orthopaedic Surgery. Years later, as Consulting Orthopaedist for the Veteran's Administration I examined many of the war's victims to determine their degrees of disability due to service.

Now, after 48 years, the Flu threatens again, but this time the virus is known, a vaccine has been prepared, and the nation alerted. Deaths following inoculation with the vaccine have had no causal relation to it. Whether or not I am still immune to the

virus, whether or not there will be an epidemic, whether or not the new drugs will control the virus I do not know. But with the memory of its deadly virulence I won't gamble.

Sunday morning I took my place at the end of a long double line, a cross section of Americans, waiting for inoculation. The County Health service was well organized, and the line moved rapidly. At the door of the Park Pavilion there was a sign advising us to read carefully the instructions, fill out the blank spaces, and sign on the line. It also warned us not to be vaccinated if we were allergic to eggs (the virus is grown on eggs), and if we had any disease to get our physician's approval before being vaccinated.

Inside the building we were handed a sheet of instructions with blanks to be filled and signed. We then went to one or the other of two tables each manned (or shall I say personalized) on both sides by two nurses. The first one pushed up my sleeve and wiped an area of my arm with an alcohol sponge, the second injected the vaccine. She was an expert. Her needle was sharp and I scarcely felt it. Again the alcohol sponge and that was that. An aide stacked the instruction sheets. I had scarcely come to a full stop since entering the line. Pray the Lord that there will not be an epidemic.

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