1918 Killer Flu Offers Important Lessons about Current H1N1 Influenza Virus and Risk for Global Pandemic, According to Interview in Biosecurity and Bioterrorism

New Rochelle, NY, June 4, 2009—From science and medicine to emergency response strategies, public health initiatives, and government policy, a much clearer understanding of the current H1N1 influenza virus and its potential for causing a full-scale, global pandemic can be gained by looking back at the 1918 flu that killed as many as 100 million people worldwide. Historian John M. Barry has extensively studied the 1918 pandemic and offers provocative insights and predictions on the current H1N1 outbreak in a revealing interview in the current issue of Biosecurity and Bioterrorism: Biodefense Strategy, Practice, and Science, a peer-reviewed journal published by Mary Ann Liebert, Inc. (www.liebertpub.com). The interview is available free online at www.liebertpub.com/bsp

History offers "perspective," and "there is much to be learned from past influenza pandemics," says Barry, Distinguished Scholar at the Center for Bioenvironmental Research, Tulane and Xavier Universities, and author of The Great Influenza: The Epic Story of the Deadliest Plague in History. Whereas scientific analysis of the H1N1 virus implicated in the 1918 pandemic and comparisons to the H1N1 virus responsible for the current outbreak are critically important, a broader historical perspective offers insights on the epidemiology and public health implications of the flu virus as well as guidance for policymakers based on control, containment, and prevention methods that were or were not effective in the past.

Overall, compared to the mistakes and miscommunications of previous epidemics, Barry believes the U.S. government has done a very good job of keeping the public informed during the 2009 H1N1 outbreak. He urges continued vigilance, noting: "the virus has gotten a lot better at infecting humans" since it first jumped species in 2005. "I would expect that...it's going to continue to adapt until it becomes a fully explosive pandemic virus...But whether that happens this next influenza season or whether it takes 2 or 3 more years, I don't know."

Barry makes several important points: the current H1N1 virus thus far appears to be less virulent than the 1918 virus, which killed at least 2% and as many as 5.5% of the world population. Closing of schools in an effort to snuff out outbreaks may seem like a reasonable idea, but he believes it to be unwise. Although isolation of patients seems to help in slowing down an epidemic, quarantine, in general, has proved to be ineffective. This was an approach tried by the military, but even when rigorously
enforced in military units under war time circumstances, it proved to be ineffective. Masks were of no value in protecting healthy people except perhaps for those in close contact with patients. Placing a mask on the patient, however, may help to decrease the chance of others becoming infected. A major failure during the 1918 epidemic was the lack of communication with the public by government officials, including public health leaders. This, undoubtedly, led to greater fear and apprehension.

"There are few historians who are as knowledgeable as John Barry about the history of pandemic influenza" says D.A. Henderson, MD, MPH, Distinguished Scholar, Center for Biosecurity, University of Pittsburgh Medical Center. "Thus, his observations on the presently impending pandemic are of particular interest."

**Biosecurity and Bioterrorism: Biodefense Strategy, Practice, and Science**, published quarterly in print and online, covers topics such as bioscience, medical and public health response, infrastructure and institutions, international collaborations, agroterror/food safety, and citizen response and responsibility in all matters related to national and international biosecurity.

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