The 1918 influenza pa

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MCH, 2020t

1890 p.92

‘A deadly new virus’

Many people believed that the second wave of the 1918 influenza pandemic arrived in New Zealand as ‘a deadly new virus’ on board the RMS *Niagara*. The ship arrived in Auckland with cases of influenza on board a fortnight before the second wave took hold in the city. Speculation was further fuelled by rumours that the vessel had been cleared only because two prominent passengers, Prime Minister William Massey and his deputy Sir Joseph Ward, had refused to be quarantined.

Influenza before 1918

The 1918 influenza pandemic was an anomaly in New Zealand and the world's experience of influenza. New Zealand experienced intermittent outbreaks of influenza throughout the 19th and early part of the 20th century. But since a serious outbreak in 1907, the rate of death had steadily declined. By 1913 other infectious diseases, such as smallpox and tuberculosis, were of greater concern to health authorities. Influenza was ‘such a familiar disease of the winter months that most people regarded it as more of a nuisance than a threat, on a par with the common cold’. Even when the disease was at s worst, during the

The official Health Department report on the 1918 pandemic, compiled by Dr Robert Makgill in 1919, provided evidence that the *Niagara* carried nothing more than ‘ordinary influenza’. Makgill pointed out that the ship left North America well in advance of the second wave arriving there, making it ‘hard to see where [it] could have picked up a new "killer" virus’. He also noted that ‘all three doctors who examined the passengers and crew’ declared that the type of influenza on board was ‘no more severe than the type that already existed in the city’. It was this information, rather than pressure from politicians, that had led health authorities to clear the ship. Massey and Ward took ‘no part in the quarantine decision’, insisting that they be ‘treated like ordinary passengers’.

The timing of the *Niagara*'s arrival may have fuelled speculation, but for Makgill it was further evidence that the ship had carried only ‘ordinary influenza’. He pointed out that if it had been carrying a deadly new virus to which people had no

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1890s, annual deaths did not exceed the low hundreds.

immunity, 'a rash of local epidemics' should have appeared as people returned to their homes. They did not. Auckland's 'explosive outburst', and outbreaks of severe influenza in most other parts of the country, occurred 'well outside of the 48 hour incubation period'.

Geoffrey Rice's research supports these observations. He determined that if the *Niagara* had been carrying a deadly new virus, the peak of mortality for the whole country should have occurred on or about 7 November, not 23 November. Rice concluded that:

> A balanced view of the available evidence tends to suggest that the epidemic on the *Niagara* was a last fling of the mild first wave of the pandemic rather than the first outburst of the deadly second wave. [1]

A deadly mutation or hybrid?

Evidence that the *Niagara* was carrying mild influenza rather than a deadly new virus may not exonerate it completely. One of the two remaining 'plausible possibilities' on how the second wave developed in New Zealand leaves room to blame the *Niagara*, as well as other vessels that arrived in the country around the same time.

The first possibility arises out of Magkill's observation that the form of flu prevalent in New Zealand in September was itself changing in October. This suggests that the second wave may simply have been a deadly mutation of the first wave. The existing virus may have lain dormant for a time, reappearing in a more virulent form in October, perhaps triggered by the poor weather the country experienced that month.

The second possibility is that the second wave was a 'deadly hybrid' of the variant prevalent in New Zealand in September and another variant from overseas. The overseas variant may have arrived on the *Niagara*, or on one of the six other ships that arrived in Auckland in October. Either way, if the overseas variant presented as mild influenza until it combined with the New Zealand variant, the authorities would have had no cause to quarantine any ship.

Both these possibilities suggest that the two waves were 'virally related in some way'. This would explain what Rice terms the 'presence of pockets of very low infection and light mortality alongside places of very high mortality'. But he points out that only the second theory could explain why quarantine measures in Australia and American Samoa apparently prevented or delayed the second wave, and why Western Samoa, which was not quarantined, was so badly affected.

[1] Geoffrey Rice, *Black November: the 1918 influenza pandemic in New Zealand*, Canterbury University Press, Christchurch, 2005, pp. 198–9.

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'The pandemic hits New Zealand', URL: https://nzhistory.govt.nz/culture/1918-influenza-pandemic/earlier-outbreaks, (Ministry for Culture and Heritage), updated 22-Apr-2020