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Controlling the Ebola outbreak in Western Africa: The historical experience from China

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Many epidemics have taken place in the 20th century, such as Spanish flu, HIV/AIDS, SARS, bird flu, and the recent wave of the Ebola in Western Africa. Facing these 'emerging and re-emerging diseases', our historical experience battling against epidemics may provide us a new perspective. And China's effective experience, as an underdeveloped country, may be more useful for low and middle-income countries. We reviewed the pneumonic plague epidemic outbreak in China's northeast from October 1910 to April 1911 and this plague has been called the worst epidemic of the 20th century, since it took more than 60,000 lives. The recent outbreak of Ebola in West Africa presents many similarities—such as in issues of economy, culture, health systems, and other background environments—with the plague that happened in Northeast China (Manchuria). Manchuria has suffered wars, poverty and inadequate health infrastructure just like the West Africa of today. It is also similar that the particularly devastating courses of these epidemics are attributed to biologic characteristics of the virus. It is more likely that these are the result of the combination of dysfunctional health systems, international indifference, high population mobility, local customs, densely populated capitals, and lack of trust in authorities after years of armed conflict. Summarizing the successful experiences in fighting the pneumonic plague in Northeast China a hundred years ago has importance in dealing with the current Ebola diffusion in West Africa. In addition, China's social motivation and quarantine experience during the 2003 SARS control may help stop Ebola.

Biography

Mingli Jiao completed her PhD at the Public Health School, Harbin Medical University (HMU), in Harbin, China—site of the 1911 pneumonic plague outbreak (it was called Fujadian, Manchuria). The surgeon general at that time, Wu lien-teh, was the first president of HMU. Mingli Jiao studied at the University of Washington and at the Johns Hopkins Bloomberg School of Public Health as a visiting scholar. She is the vice director of Health Policy and Hospital Management Center in HMU.

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