

## Lessons learnt from the Spanish Flu pandemic

Dear Editor,

I have read the discussion article entitled, ‘Homoeopathy in pandemic Spanish flu 1918’, by the author Shinde<sup>[1]</sup> published in the *Indian Journal of Research in Homoeopathy*. I wish to congratulate the author for this successful discussion article while making contributions to our homoeopathic academic field. In this discussion article, the author has distinctly indicated that the Homoeopathic system of medicine has proved its mantle in the past epidemics such as the Spanish

Flu and holds massive potential in the wake of COVID-19 disease. This global pandemic continues to grow by each hour and has pushed the entire world towards mitigation tactics that were once applied in the times of Spanish Flu. The effective containment measures, unprecedented lockdowns and *cordon sanitaire* in 2020, almost draw a similar picture of the frightful past of 1918. Although the probability of the mortality rate of COVID-19 reaching close to that of the Spanish Flu outbreak seems remote, a stark comparison can be drawn between the two epidemic diseases [Table 1].

**Table 1: Comparison of Spanish flu and COVID-19**

Comparison title	Spanish Flu	COVID-19
Mortality rate	Crude death rate of 218.4/100,000 persons <sup>[2]</sup> 2% of the world's population	110 deaths per million population <sup>[3]</sup>
Causative agent	<i>Haemophilus influenzae</i>	SARS-CoV-2
Predisposition	Infants below the age of 5 years, healthy adults of age 20–25 years and elderly population <sup>[4]</sup>	Elderly population and/or those with pre-existing underlying medical condition
Fever duration	3–5 days <sup>[5]</sup>	0–12 days in survivors and 0–13 days in non-survivors <sup>[6]</sup>
Cause of death	1. Bronchopneumonia 2. Acute respiratory distress syndrome 3. Cerebrospinal meningitis 4. Coma	1. Pneumonia 2. Acute respiratory distress syndrome 3. Generalised multiple organ failure
Symptoms	High-grade fever <sup>[7,8]</sup> with shivering <sup>[9]</sup> (temperature above 40°C) Joint pains Malaise Cough Running nose <sup>[10]</sup> Sore throat Nosebleed, nasal haemorrhage Headache Nephritis-like blood-streaked urine <sup>[11]</sup> Cyanosis	Fever with chills  Myalgia Malaise Cough Rhinorrhoea Sore throat Haemoptysis Headache  Shortness of breath Fatigue Diarrhoea Respiratory rate >24 breaths/minute Confusion Chest pain Nausea and vomiting Conjunctival congestion Nasal congestion Throat congestion Tonsil swelling Enlargement of lymph nodes Rash Pharyngalgia Loss of taste and loss of smell Abdominal pain Anorexia

Contd...

**Table 1: Contd...**

Comparison title	Spanish Flu	COVID-19
Vaccine	No vaccine was available in 1918	As of 8 September 2020, more than 160 potential vaccines have reached different stages of pre-clinical and clinical trials, of which 32 have already entered the critical human testing phase <sup>[12]</sup>

COVID-19: Coronavirus disease 2019

As the countries grapple with the spiralling case counts and overrun emergency rooms, an intense fight is ongoing to control this pandemic's narrative. The author has rightfully sketched the rich history of Homoeopathy in the times of Spanish Flu (1918) claiming excellent recovery rate and decreased mortality with Homoeopathy as compared to any given treatment procedure of that time, but this also raises two key questions in front of the Homoeopathic community to contemplate upon. First, would it be justified for the homoeopathic global fraternity to move ahead with extreme optimism or idealism in believing that Homoeopathy will give the same triumphant result this time too as effectively demonstrated during the times of Spanish Flu? Will the new deadly COVID-19 disease provide the Homoeopathic global fraternity a universal opportunity to prove itself as an evidence-based medicine? And, second, does the evidence discussed in the article wraps the global Homoeopathic fraternity in an intense false hope that correct research strategies and research methodologies were not used while recording the results in the times of Spanish Flu, upheaving one more research challenge to fill gaps into. We shall also question that, is mitigation approach the only option to stop COVID-19 spread as was seen in the Spanish Flu? A comparison of mitigation approach with Homoeopathy was not done at that time. Shall we now ponder upon comparing both strategies in order to furnish our global policymakers some food for thought?

With advances in public health, improved standard of living and mitigating policies at play, the future scenario of COVID-19 cannot be predicted with certainty. However, amidst crowding, rapid global movement, public health crisis and geopolitical rivalries, a fierce struggle is underway that command us to learn from the past pandemic.

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### Conflicts of interest

None declared.

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