Plague Outbreak Eradication Campaign under Colonial Mysore

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Abstract - Princely State of Mysore in India was under the British colonial rule during 1881 to 1947. This research article aims to document the role of Princely Mysore State in campaigning against the outbreak of plague. The methodology adopted is the historical perspective. Modus operandi adopted by the Princely Mysore state to counter the deadly epidemic is also highlighted. Plague bacillus took away the lives of over 20 million people in India during 1896-1918, merciless in its ravages and sweeping off thousands in a day. The plague outbreak reigned for two decades and took toll of a crore people in the Princely State of Mysore. Lack of medical facilities had brought very high mortality. Historically it has been recorded as the most pandemic & devastating disease in the early 20th century which shook the humanity. There was a serious shortage of medical facilities in Mysore state. To safeguard the people Princely government under the British colonial administration played an important role in disease prevention and adapted vigorous measures to eradicate the disease. The article also deals with the large sums of money spent by the State, the epidemic disease regulation passed, a separate intensive health campaign formed, health camps, special officers appointed, a laboratory, separate hospitals established and various precautionary measures adopted. Genesis of the devastating Plague disease, cause, effect and panacea are also dealt in the research article.

I. INTRODUCTION

Plague is an acute and deadly infection disease caused by the Nitrobacteria Yesinia Pestis. The disease which can be transmitted to humans from animals, primarily carried by rodents (most notably black rats) and spread to humans via fleas. (a small wingless jumping insect) In Asia it was Bubonic plague caused mainly due to rodents and fleas. The infected bacteria multiply inside the flea. Infection in a human occurs where a person is bitten by a flea carrying the disease.\(^1\) In the early period of the 20th century, most scientists and historians came to believe that the ‘Black Death’ was an incidence of this plague.\(^1\) Plague bacillus took away the lives of over 20 million people in India between 1896-1918, merciless in its ravages, sweeping off very often thousand in a day and tens of thousands in a week. The magnitude of this calamity is not to be measured by its number alone, its ravage led to the Unsettlement of the families of their victims and left numerous young children without proper guardians. One sad occurrence which in common with other parts of India beclouded Mysore in this period was the outbreak of the plague which defied all human efforts put forward for its suppression. Lack of medical facilities besides panacea against the disease had brought high mortality. Historically it has been recorded as the most pandemic and devastating disease in the early 20th century which shook the humanity.\(^2\)

II. Plague Appearance in Mysore

Between 1897 and 1923, Mysore state witnessed persistent plague affect. This fell disease prior to its appearances in Mysore states had broken out and was increasing virulence at Hubli in Dharwad district frontier of the Bombay presidency, only 80 miles away from Mysore. It was therefore deemed essential that all possible precautions should be taken to prevent its entry into Mysore. Plague first made its appearance in the Bangalore city on the 12th August -1898 and spread with increasing virulence in every direction of Bangalore, Mysore, Kolar and Tumkur. Severity of the epidemic reached its height in the first year of the outbreak; there were nearly 15,000 attacks and more than 12,000 deaths.

III. Preventive Measures

Every possible help was given to people to effect speedy evacuation of infected places Preventative measures were adopted in the state to avoid the increasing number of deaths under the scheme of Frontier Plague Protection. Public health department played an important role in disease prevention, and it involved with several health activities. There was serious shortage of medical personal and medical facilities in India and especially in Mysore state. To provide more medical facilities and to protect the people both in rural and urban areas the princely state of Mysore adopted certain measures to prevent the disease. Various precautionary measures adopted under this enactment such as the formation of a separate Health campaign to overcome such diseases in a systematic manner. Special health officers were appointed for the cities of Bangalore, Mysore and Kolar Gold Fields. A laboratory was also provided for the Health Department. (1) The establishments of railway and frontier inspection station and outposts. (2) The examination of passengers by rail and road. (3) The establishments of temporary plague hospitals, segregation and health camps.\(^3\)

To protect the people of the state the government passed Mysore Epidemic Diseases Act, II of 1897.\(^4\) Government adopted vigorous measures to check the spread of the disease by

\(^1\) Wikipedia, Encyclopedia and life science library.

\(^2\) Lord Curzon, governor general of India in his letter with appreciation the work of Mysore government.

\(^3\) Sham Roa, Modern Mysore Vol – II, Bangalore p. 233

\(^4\) Ibid
making provision for the treatment of the disease in special hospitals. Government camps provided accommodation for those in contact and persons living in infected houses. Infected persons and houses subjected to systematic disinfection was taken care by Special Plague corpses appointed by the government. Inoculation campaign took its headway.

**New Extensions:** A large number of houses were demolished after payment of compensation and congested portions opened out by the removal of many more in Bangalore and two large extensions Basavanagudi & Malleshwaram covering area of 1000 acres and capable of providing accommodation for 50,000 persons were laid out.

**Financial support:** A large number of temporary health camps were established throughout the state. Free issues of timber and bamboos were offered to the poor classes to enable them to camp out. Advances to government servants an years pay was sanctioned in the Bangalore city to enable them to build houses in the new extensions. Three months pay in certain infected taluks for putting up sheds was also on the anvil.  

**IV. CURATIVE MEASURES**

1. **Special Hospitals:** The permanent hospitals were established in the state called Epidemic Disease Hospitals at Bangalore in 1891, in 1898 at KGF and Mysore in 1926 working throughout the year to treat patients. In other places, establishments were entertained temporarily for the period required, whenever there was an outbreak of Plague. Bangalore city saw Dr.D.A, choksi a civil surgeon as chief plague officer appointed by the government. He was entrusted with the execution of plague measures in the city. The city was divided into 4 wards, each ward being placed under an assistant commissioner, who was assisted by a medical officer of the grade of an assistant surgeon. Rail passengers coming from infected areas to Bangalore were inspected at Yeshawanthpur, Bangalore cantonment and Kengeri station. Passengers found suffering or suspected were sent to Magadi road health camp for treatment or observation. Sheds were constructed at government expense. About 588 sheds were erected. The project consisted of two permanent buildings and three buildings with corrugated iron roofs supported on rails with corrugated iron sides & movable tatty doors. Five buildings were constructed with accommodation for 66 patients. Roof of Mangalore tiles, corrugated iron & bamboo tatty sides supported the disease contention.  

The plague operations in Mysore city were under the control of Mr.Madiah the Deputy Commissioner who was assisted by Mr. Wetherall as chief plague officer. The city was divided into 3 wards each under a ward officer of the rank of assistant commissioner. Health camps with 100 sheds were set up at Viranna’s lines, 166 houses, at Gavikatte, Tavarekatte & other places -269 camps. In 1898 one road outpost at Srirangapatna and in 1899 additional road out posts were established on all other roads leading into the city. Mysore city railway station started Rail-way inspection in 1898. Passengers coming from infected areas were examined by a medical officer on duty & by a nurse besides a hospital assistant for the segregation & treatment of plague patients. Erlangere plague camp with hospital facilities was commenced. Further four wards were newly erected with accommodation for 16 patients consisting of Superintendent. One-woman apothecary, 2-hospital assistant’s one nurse, 9 male wardens, 1 midwife & 14 female wardens were recruited. In Tumkur an old building with a few alterations was converted into a camp for the segregation of vegetarian Hindus. A chatram (charity hall) was set apart for accommodation of Mohammedan contacts. Sheds were set up in a field near railway station for others. A temporary hospital was built near each camp for the treatment of patients. The Kolar district health camps were erected at all head quarters temporarily however some people preferred to erect their own sheds amidst social agony.

2. **Special officers:** Government appointed seven plague inspectors to supervise all the villages around the fields. A midwife & a plague nurse were also appointed to examine gosha (burka clad muslim) ladies. Plague 1909. Closing up of rat holes were the methods adopted. Cyllin was used for plague-infected rooms, kerosene oil emulsion for the rest of the house as a disinfectant. Petroleum was used instead of cullin satisfactory. The temporary plague supervisors employed on frontier plague protection duty in the district of Shimoga and Chitaldurg were replaced by duly qualified Sanitary Inspectors. These officers have now been employed for the work in all the districts except Hassan, where a plague supervisor still continues. (1910.) Plague hospital capable of accommodating 50 patients consisting of one sub assistant surgeon, one lady apothecary, one hospital assistant, one compounder, 6 male wardens & 4 female wardens.

3. **Special Buerocracy:** The Revenue Assistant commissioners, district medical and sanitary officers in the each district, assisted the Deputy Commissioner. In the taluk’s the Amildars assisted by the local police, medical and sanitary officers were entrusted and looked after the plague operations. In Bangalore and Mysore the president of the respective municipalities assisted by health officers were in charge of the plague operations in 1908. Health officers were newly appointed for the Kolar Gold Field and the Plague supervisor employed in Kadur District.

4. **Sanitary measures:** The new extension, Basavanagudi at Bangalore which was opened in 1898, the amount spent for this is Rs 22,000 for widening and mettalling the roads and other sanitary improvements for arresting the spread of Plague government spent Rs.20, 023/-.. In Tumkur Rs 15,323 was spent on opening out new roads, sinking fresh water well’s and constructing drains etc. In Tarike and Biran of Shimoga, 108 and 68 houses were demolished and to accommodate the deserving poor of the town, 50 sheds were built at government cost. In Kolar Gold Field new colonies on sanitary board of about Rs 8000 /- cooies were reported to have been housed. Chemical disinfection was introduced as on experimental measure.

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5 File No 190 of 1913 P 1-8 Medical Department, KSA Bangalore
6 Mysore Gazette, Government Press Bangalore, vol-III. Page no 1454
7 Reports of the chief plague officer in Mysore for the year1889
8 Administrative Reports of Mysore State1909,p.66,. Divisional Archives, Mysore
9 Rao hayavadan, Mysore gazetteer, vol-IV.p.442
5. **Evacuation:** The people restored Evacuation voluntarily. Supply of shed materials, grants of the poor, grants of advances to officials for running up sheds. A few permanent sheds of corrugated iron roofing were constructed for the temporary occupation of people who had vacated their houses. In villages people used their own hutting materials and other places bamboos were freely supplied.

4. **Disinfection:** The unroofing of thatched houses and their exposure to sun and air on a layer of sand, lime washing of houses, chemical disinfection was mostly confined to the towns and villages. Kerosene oil emission was tried in Bangalore. Cleaning, whitewashing and fumigation with burning neem leaves were adapted to the effect of driving out large number of rats from their holes and of causing them to die rapidly.

5. **Destruction of Rats:** In the year 1908, 09,225,116 rats were destroyed in the state at the cost Rs 5,457/- cost per rat being 4 ½ paisa. Trapping method poisoned baits were also used in a small scale.10

6. **Chemical laboratory** was founded in 1895 at Bangalore to give laboratory support in order to investigate the outbreak of the epidemic diseases. Chemical analyses and experiments of Plague bacilli in rats, mice and pigs were conducted.

7. **Vaccine institute** was established in the year 1890 and started manufacturing plague vaccine in 1920 under Dr. Haffkine, the Director of Public Health Institute

V. **SPECIAL RELIEF**

To effect speedy evacuation of infected places and induce the inhabitants every possible help was given such as the supply of shed materials gratis to the poor and at the cost price to others. Grant of small advances of money was given in case of officials. Chemical disinfection was carried out generally & disinfection by desiccations was introduced as on experimental measure. Arrangements were made for the distribution of Multi vitamin tablets. The 30 medical units with the special officers of medical were deputed to tour frequently in the affected areas to take immediate action in case of outbreak of Epidemics.

The intensive anti-rat campaign in epidemic hit areas was continued and arrangements were made for getting Sanitary Inspectors trained for this work in the Health Training Centre, Closepet. A conference of the Director of Public Health of Madras, Bombay, Hyderabad, Mysore, Bangalore and Coorg was held at Davanagere. The various measures for the control of Plague were discussed.11

The posting of a skeleton staff of sanitary inspectors for special duty in the distress areas of Tumkur, Chitaldurg and Kolar District sanctioned. Cyanogas fumigation was undertaken in the infected localities as a further measure of control.12

VI. **CONCLUSION**

There was a marked decrease in the incidence of plague with this rapid implementation of the modern system of anti-plague measures after 1950 its completely eradicated.

**AUTHORS**

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10 Suryanath Kamath, Karnataka State Gejeetteer.Vol-II., P-722

11 1940, P.21, Administrative Reports of Mysore State,, Divisional Archives, Mysore

12 1947, P.142, Administrative Reports of Mysore State,, Divisional Archives, Mysore