

PLAGUE: A Challenge for Urban Crisis Management

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Abstract

Plague is a severe infectious disease caused by bacterium *Yersinia pestis*. Three pandemics have swept across the world claiming many millions of lives and causing untold misery. The first recorded outbreak of plague in India occurred in the year 1031-32 AD. The disease is estimated to have caused 12.5 million deaths during 1889-1950.

The return of unforgotten scourge of mankind once again reminds that plague continues to smoulder in population of wild rodents in natural foci throughout the world, and occasional outbreaks of human plague bring a reminder of the devastation it caused in the past. However with the improved hygiene and living standard, the availability of effective drugs (for treatment and prophylactics) and large scale application of insecticides reduced the number of cases in the entire world in the 20th century.

The outbreak in Surat caused local panic (Mass hysteria) and international concern, leading to the imposition of travel and trade restriction by number of other countries. The authenticity of the crucial decision in declaring the epidemic as 'Plague' and later, institutional initiatives (NICD, CDC, IPTI, WHO etc.) taken for isolating the germ (*Y.pestis*) were subject of many controversies. The uniqueness of extra band in protein profile created much speculation in the media. This gave momentum to various notions among people, as to whether the disaster was natural or man made, remained unanswered. Hospital with pathetic conditions, irregularities were found in setting clear definition as well as proper screening and management protocol.

Much politics was involved in declaring the epidemic as plague. Among experts, possibilities for *hanta virus*, *melodises*, *Plasmodomonas pseudomallei* etc, were predicted while other raised objections regarding the procedure adopted in collection and testing the serum of the victims. Constant intervention of higher up's and exaggeration made by the media, crumpled the confidence of the masses including doctor's community. Attacks and counter attacks were very common in political circle for the removal of the "garbage"; as considered the only potent source of infection for this epidemic.

However, proper action plan with communication network, coordination and sensing of individual responsibility, caused the case fatality rates to come down rapidly and entire catastrophic incident was controlled within a week.

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