

The Bubonic Plague in Fremantle

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At the turn of last century, an international pandemic of Bubonic Plague was rapidly transported by shipping throughout the trading world, taking only a few years to reach every continent. The experience of this pandemic varied dramatically; whilst millions were killed in India, China and Indonesia, Western Australian epidemics were relatively mild. Between 1900 to 1906 approximately twenty-seven residents of Western Australia actually died of bubonic plague, out of around sixty identified cases. The difference between cases of the pandemic can be almost entirely attributed to size of population and living conditions. In Fremantle, sanitary shortcomings and overcrowding certainly led to the bubonic plague taking hold.

In Fremantle, the least sanitary area was the West End, surrounding the harbor. This area was home of much of the town's working population and its tenements and back-alleys provided the perfect environment for the spread of a plague bacillus. Bath water and other 'slops' were discarded into communal backyards and alleyways; the insufficient number of 'privies' per household meant they were fetid more often than they were not. Fremantle was basically built on sand, which meant the town's drainage was woefully inadequate. The town's system of waste disposal, both human and otherwise, was shamefully deficient, and drains were 'choked with filth and offal of every description'. One visitor to the town commented that 'Fremantle cannot claim to be even a moderately sanitary town'. In 1900 the town, had the worst mortality rate in Western Australia.

With only one exception, the victims of Fremantle's plague all lived or worked in the West End.

At the time of the plague's introduction in April, 1900, Fremantle's maritime activity had undergone a recent expansion. The town's pivotal role as a 'gateway' to Western Australia meant that Fremantle was continuously exposed to the threat of disease brought in from other ports. As it turned out, it was in this way, that Fremantle fell victim to the global spread of bubonic plague.

The plague symptoms:

Strange as it is to think, you could actually contract a 'mild form of plague'. This is why there were comparatively so few deaths. The bubonic plague, came in three forms; the mildest of them was known as the bubonic. The others were septicaemic and pneumonic; the septicaemic, as it is in the victim's blood, was usually fatal as was the pneumonic form.

Even in the mildest cases, almost always there were 'buboes' or swellings, but the other symptoms varied for those with only a mild form — usually nausea and vomiting, sometimes just feeling unwell. For the more severe cases, those which proved fatal, the symptoms were much worse. Aside from vomiting, diarroeah and high fevers, alongside the painful buboes, Doctor's notes show patients could have active and violent delirium. The only positive in these cases was the swiftness with which the sufferer died. In most of these cases, death followed only days after diagnosis.

Plague precautions and protective measures:

Medical authorities knew that rats were the source of the plague contagion. The Venice Convention of 1897, the first of its kind to deal exclusively with bubonic plague, had identified the association of the rat with plague epidemics with certainty.

As soon as Fremantle was infected by plague, a new president of the Central Board of Health was appointed. Dr Ernest Black was given the position owing to his previous work in the plague hospitals of Bombay. In dealing with the plague, with its precautions and regulations, Black himself followed the lead set in Sydney by the president of the NSW Board of Health, Dr John Ashburton Thompson. It was almost entirely due to Thompson's influence and example that Fremantle escaped a worse plague crisis. In Sydney, Thompson was responsible for limiting the spread of the disease by focusing on two things; control of the 'vector' (the organism that spread the disease, in this case the rat flea) by the killing of rodents; and secondly, by the use of something which had only very recently been developed - inoculations for prevention and cure. This two-pronged approach limited the spread of the contagion in Sydney and thus was put into action here, firstly in Fremantle and then Perth.

Despite knowing the central sanitary approach needed was rodent control, Fremantle's ambiguous chain of command in relation to the harbour hampered plague prevention. The Local Board in charge of sanitation did not have jurisdiction over any part of the harbour, the edges of which, the local media reported was swarming with potentially plague-ridden rats. The Local Board had very limited authority, in practice, to control the sanitation and rat-menace in its own town. Yet the situation could not have demanded it more - the foreshore beyond the harbour was described as a seething mass of putrified corruption'. Fremantle's resident medical officer, Dr Hope, had been pushing the rat problem into notice since the first plague victim was diagnosed.

Dr Hope advocated for spending money immediately, on getting rid of the rats in the town; it would stop future outbreaks of plague, would save lives and prevent panic and, would stop 'the disorganisation of commerce which result from continued outbreaks of plague'. Hope wrote an impassioned plea to his Local Board, in which he stressed that the outbreak Fremantle was facing was serious and needed immediate action—and that the solution was a commitment to getting rid of the rats: 'WITHOUT RATS, WE WILL PROBABLY BE WITHOUT PLAGUE', he wrote. 'No spasmodic effort will effect this, but it must be one DETERMINED AND PROLONGUED CRUSADE against—and to the utter extermination of—rats'. His conviction was supported by Dr Black and under his stern hand efforts to control the possible spread of plague were put in place. A staff of about 30 men were engaged to remove the garbage and detritus from the jetties and the riverbanks, which was put in boats and taken out to sea.



Hand drawn map from Dr Anderson showing where rats were found in the West End of Fremantle, 1903 Central Board of Health Files AN 120/4, Cons: 1003, Item 1903/0418A, *Outbreak of Bubonic Plague Fremantle, Second Series of Cases*, February 1903, S.R.O. Perth.

In the meantime, the boards of health in the rest of Western Australia were doing a much better job staying plague free. Only Perth and Geraldton were struck with plague outbreaks in the six-year period of its existence in Western Australia.

The focus on keeping the goldfields plague free was certainly imperative. A number of the goldfields 'councils got together to put pressure on the central board to remind them of the importance of ensuring that rats did not leave Perth or Fremantle for the goldfields. Certainly, precautions were taken from the city into country areas. Luggage going by rail from either Perth or Fremantle was fumigated throughout the plague years and the goldfields remained plague free – an enormous physical, social and economic benefit to Western Australia.

By the end of the last outbreak in 1906, the presence of plague had prompted a wideranging sweep of improvements to sanitation and housing in Fremantle: the rubbish services were improved; back yards were laid with tar; noxious wooden drains were replaced by concrete; derelict buildings were demolished.

The legacy of Fremantle's experience of bubonic plague was not about the swathes of dead bodies it left behind. Rather, it was to highlight a crisis of sanitation and health in Perth and Fremantle, cities that had deteriorated to such an extent that it took something as drastic as plague, to become the catalyst for change.