

EPIDEMICS & OUTBREAKS

A Timeline of Major Disease Outbreaks & Epidemics in Britain



The earliest records of 'Plague' or 'Pestilence' in Britain, date from the year 597 AD, and Dr. Robert William (1757-1812), the one English writer who appeared to have paid any attention, surmised that it came to these shores from the continent even earlier. [1]

He estimated that it arrived in the year 597, when the conversion to the Christian religion “led to such frequent intercourse with Italy, France & Belgium, that the epidemical and contagious disease prevailing on the continent, at the end of the 6th century, must necessarily be communicated from time to time through the Heptarchy”.

Prior to Bede's '*Ecclesiastical History of the English People*', the only written records were the 'Irish Annals', and within those, is found the first mention of '*A Great Plague*', which does correspond with Bede's date of 664 AD. [2]

The plague of 665 AD, was therefore, the first [recorded] outbreak of disease in the British population, which can be considered as being an 'Epidemic'.

It broke out suddenly, and without warning, and after 'de-populating the southern part of

England, the appeared in Northumbria', where it raged un-checked for a long period of time, “destroying an immense multitude of people”.

The epidemic is then said to have spread to Ireland during 664 or 665 AD, and, - according to what have to be said, are vague estimates only – 'the mortality in Ireland was so great, that only a third part of the people were left alive.'

The plague in England and Ireland in 664 is believed to have lasted for twenty years, and there are several accounts of incidences in monasteries, which show that sporadic outbreaks occurred as late as 685 AD, a number of these at the 'new' monastery, at Barking, Essex, which was founded in 676 AD.

The only medical detail that has survived – albeit from an unreliable source – tells us that the disease was a '*Pestis Ictercia*', which was identified by a '*Yellow-ness of the skin*', and not dissimilar to jaundice.

The root cause, or even the nature of those diseases, can only be speculated upon, of course, and for the next seven-hundred-years, the plagues and pestilences that appeared in Britain, were mainly the result of famine, so should, therefore, be regarded as being of indigenous origin.

The following timeline, is based around contemporary writings and documentary evidence from the 9th century to the present day. Place names (in brackets) signify areas where the outbreaks were especially deadly.

Not all recorded epidemics are listed, however, as diseases such as Tuberculosis, Cholera, Scurvy, Syphilis, Dysentery, Infantile Diarrhoea, Enteritis, Measles, and a number of respiratory ailments, etc., occur periodically, and consistently took their toll on the British population, especially in cities and crowded industrialised centres throughout much of the 15th, 16th, 17th and 18th centuries.

1046

'Very hard winter, pestilence and 'Murrian' throughout the country.[3]

1069

'The Wasting of Yorkshire' [4]

1079-1093

Floods, hard winter, severe famines, universal sickness and high mortality in England. [5]

1112

'Destructive Pestilence' throughout England. [6]

1172

Dysentery among British troops in Ireland. [7]

1201

'Unprecedented plague of people and Murrian found in cattle'. [8]

1247

A 'Great Pestilence' rages from September to November.

Death and famine throughout England. [9]

1257-1259

Famine and Fever throughout London and the rest of England. [10]

1258

'Spotted Fever' pandemic, called 'New disease'.

1294

Epidemics of 'Flux' throughout England. [11]

1347-1349

Bubonic Plague epidemic, more commonly known as the infamous 'Black Death'.

1358-1350

The Black Death (Pneumonic, Septicemic and Bubonic plagues).

"The seventh year after it began, it came to England, and first began in the towns and ports joining on the seaports. In Dorset, where, as in other countries, it made the country quite void of inhabitants, so that there were almost none left alive. But at length, it came to Gloucester, yea, even to Oxford and to London, and finally

it spread all over England, and so wasted the people, that scarce the tenth person of any sort was left alive".

1360-1369

Bubonic Plague epidemics. There are few written records of the true number of the dead, as parish registers did not begin until 1538. However, manorial records indicate a loss of between one-third and two-thirds of tenants during a 21-year period.

The disease was transmitted to humans, by fleas, carried by the black rat, and remained endemic in Britain until the 1600s.

1391-1420

Localised Bubonic Plague outbreaks and epidemics.

1494-1496

'Great or French Pox' (Syphilis) outbreaks in England.

1506

'Sweating Sickness' breaks out in London and spreads to the rest of England.

1509

'Great outbreak' of plague.

1543-1547

'Great outbreaks' of plague.

1563

Major Bubonic Plague outbreak in London.

1600s

Influenza pandemics in summer, shifting mid-century to the Spring/Winter period. Smallpox was already a killer disease, and the Plague returned in 1665, but in smaller outbreaks.

1663-1665

A 'new disease' emerges in Britain (possibly Typhoid) and reached its peak. 1665 was the 'Year of the Great Plague', which started in China, and decimated Europe. It was said that "corpses littered the streets of Britain as there was nobody left to bury them".

1670

A Measles epidemic in London, followed by a Smallpox epidemic. Whooping Cough & Diarrhoea in children.

1674

Measles epidemics throughout London.

1675

Influenza first identified in written records in London, and a Europe-wide epidemic later that year.

1679

Whooping Cough epidemic throughout England.

1700

Smallpox epidemic – (2000 deaths per year in London).

1705-1706

Measles epidemic (London).

1717

Smallpox epidemic (8000 deaths in Manchester).

1718

Measles epidemic (London).

Localised Smallpox epidemics in London, followed by Influenza throughout the rest of England.

1719

Measles epidemic (London).

1721-1722

Measles epidemic (York).
Smallpox epidemic (Halifax, Ripon & York).

1723

Smallpox inoculation developed and began gaining acceptance.

1726

Measles epidemic, followed by Whooping Cough & Scarletina/Diphtheria epidemics (Ripon).

1727

Scarlatina/Diphtheria epidemics (Ripon).

1728

Scarlatina/Diphtheria epidemics (York & Plymouth).

1730

Whooping Cough & Measles epidemics (London).

1733

Measles & Smallpox epidemics (York).

1734-1736

Scarlatina/Diphtheria epidemics (Plymouth, Devon & Cornwall).

1739-1740

Scarlatina epidemic (London).

1741-1742

Severe Typhus outbreak (London).

1745

Scarlatina epidemic (Sheffield).

1746-1747

Scarlatina/Smallpox epidemics (London).

1748-1749

Scarlatina epidemics (centred on London, St. Albans, Cornwall & Kidderminster).

1750

Widespread Scarletina epidemics rife throughout the 1750s.

1752

Smallpox epidemic.

1755

Measles epidemic.

1756

‘Putrid Fever’ outbreaks.

1757

Smallpox epidemic (19,839 deaths in Manchester).

1758

Influenza-like illness epidemic.

1759
Measles/Scarlatina epidemics (Newcastle & Yorkshire).

1760
Measles epidemic.

Influenza-type epidemic noted in horses.

Dysentery epidemic (London).

1763
Smallpox epidemic.

1768
Measles epidemic (London).

1770
Scarlatina epidemic (London).

1773
Typhus epidemic (Chester).

Smallpox epidemic (27,246 deaths in Manchester).

1777
Scarlatina epidemic (Worcester).

1778
Scarlatina epidemic (Worcester).

1779
Typhus/Scarlatina/Measles/Smallpox epidemics (London).

1781-1782
'Plague Ague' [possibly Malaria] epidemic (Severn Valley, Worcester).

1783
The Laki volcano erupts in Iceland, followed by a volcanic winter in England. Typhus &

Dysentery epidemics throughout the entire country.

1784
'Plague Ague' epidemic (Severn Valley).

1785-1786
Measles/Typhus/Scarlatina/'Sore Throat'

epidemics.

1787
Measles/Typhus/Scarlatina''Sore Throat' epidemics (3,124 Typhus deaths in London).

1788
An extremely hot and long summer, followed by Scarlet Fever and Typhus epidemics (3000+ Typhus deaths in London).

1789
Scarlet Fever/'Sore Throat' epidemic (2500+ deaths in London).

1790
Scarlet Fever/'Sore Throat' epidemics.

Typhus epidemic (160 cases a week in Liverpool and 3120 deaths).

1791
Diphtheria & Typhus epidemics among the 'well-to-do'.

1792-1794
'Sore Throat' disease and Typhus epidemics in London.

1795
Typhus epidemics (3124 deaths).

1796
Measles epidemics become more frequent and becoming more severe. Typhus still prevalent throughout the country.

1797-1798
Influenza-type illness epidemic reported in domestic cats.

1799
Typhus and Scarletina spreads from London to the rest of Britain.

1800
Typhus and Scarletina epidemics.

1801-1802
Severe Measles epidemics (Middlesex). Scarletina epidemic (initially in Middlesex, but spreads to the rest of Britain).

1803

Influenza epidemic (London, British troops in Ireland, Bath & Chester). The infection is noted as spreading along coach routes.

1804-1806

Scarlatina epidemic (South-West England & Manchester).

1807

Scarlatina crops up in severe outbreaks country-wide.

1808

Severe Measles epidemic, which exceeds Smallpox as the biggest killer of children. Adult deaths also at significant numbers (London).

1810

Typhus and Scarlatina epidemics (Nottingham & Suffolk).

1811-1812

Measles epidemics throughout the country.

1814

Severe winter Measles and Scarlatina epidemics.

1815

Severe Measles epidemics.

1816

'The Year without a Summer'. Very poor harvests leading to famine and rioting over food. The Welsh have to beg England for food.

A Smallpox epidemic arrives in the autumn (100,000 deaths in Ireland).

1817-1819

'The Irish Disease' [possibly Typhus with a relapsing fever], spreads through Britain. One in four people in London succumb and die. 1 in 10 people die elsewhere. In Newcastle it was milder in severity, but longer lasting, and badly affected the servants of the 'well-to-do'. (Halifax, Leeds, Ripon, Huddersfield, Wakefield, Atley and Carlisle).

1824

Measles epidemic in the South-West of England (especially Exeter).

1826

Extended periods of very high temperatures and excessive rainfall, followed by the 'Great Drought', general 'Fever' and Typhus epidemics throughout Britain (31,474 deaths in Manchester).

1827-1828

High temperatures and prolonged rainfall followed by country-wide drought.

1830

Highly virulent strain of Typhus [Spotted Typhus] reaches epidemic levels.

1831

First cases of Cholera recorded – Asiatic Cholera (Sunderland, Newcastle on Tyne and Newburn). A ship carrying sailors who had the disease docked in Sunderland. The ship was allowed to dock because the Port authorities objected to, and therefore ignored, instructions from the government to quarantine all ships arriving from the Baltic States. The disease spreads throughout England, attacking all classes of people, and before it had run its course, 52,000 people had lost their lives.

'Malignant Scarlatina' epidemic kills 30,000 in England.

Highly virulent strain of Typhus (Plymouth and Staffordshire).

1832-1834

Cholera outbreak in Nottingham (289 deaths). Cholera outbreak in Wales (Merthyr Tydfil 160 dead, Swansea 152 dead, Newport 13 dead). Highly virulent strain of 'Spotted Typhus' reaches epidemic levels.

1836

Excessively wet spring and summer this year.

1837-1838

Measles and Typhus epidemics (London, Manchester and Liverpool, 18,775 deaths in the north of England).

1839

Smallpox epidemic (South-West England and Wales).

Scarlatina and Typhus epidemics (Manchester & Liverpool).

1840

Smallpox and Scarlatina epidemics. Scarlet Fever outbreaks continued for the next 30-40 years.

1841

Typhus epidemic (18,846 deaths in London).

1842

Typhus epidemic (16,201 deaths in London).

1844

'The Great Scarlatina epidemic'.

1846

Excessively hot summer leads to drought – all diseases flare up all over the country. 'Famine (Irish) Fever' epidemic, between 500,000 and 1,000,000 die between 1846 and 1848. Lancashire and Cheshire very badly affected by the epidemic, and there are floating hospital ships moored on the River Mersey. Birmingham, Dudley, Wolverhampton, Shrewsbury, Leeds, York, Hull, and Sunderland all see dramatically increased death rates.

1847

Famine and a Typhus epidemic led to 30,320 deaths.

1848-1849

Typhus epidemic (21,406 deaths).

Cholera epidemic (30,000 affected and 15,000 deaths in London).

'I am sorry to say that the accounts of the cholera at Dowlais are fearfully bad. They are beyond anything I could have imagined, sometimes upward of twenty people dying in one day, and eight men constantly employed in making coffins – one of our Infant School Mistresses is dead. One of the medical assistants sent down from London is dying, and the whole place seems in a most lamentable state'. [12]

1853

Cholera epidemic (26,000 deaths in Newcastle, 10,000 deaths in London).



Vaccination against Smallpox made compulsory but not always done.

1854

Cholera epidemic (23,000).

1856

Typhus epidemic (London) followed returning soldiers from the Crimean War.

Diphtheria epidemic.

1857

Diphtheria epidemic.

1858

Diphtheria and Scarlatina outbreaks all over the country.

1859

Scarlatina epidemic.

1861-1862

The American cotton crop fails and a Typhus epidemic ravages the cotton towns of Lancashire.

1863

Scarlatina epidemic (South-West of England) followed by a chronic Measles epidemic.

Typhus epidemic (Lancashire).

1865

Typhus epidemic in towns in Lancashire.

1866

Typhus epidemic (Lancashire).

Whooping Cough and Cholera epidemics in Wales (2,545 deaths in South Wales).

‘THE STRICTEST CLEANLINESS SHOULD BE MAINTAINED – in person and in habitation – and having done all that should be done to effect this object should calmly proceed with our usual occupations, placing firm reliance in the merciful providence of an all-wise deity. The circumstances in which we are placed should induce caution, but not nervous agitation or faithless misgivings. In the year 1832, when the Cholera committed sad havoc in Swansea, a little boy told his mother that he had discovered an effectual remedy for the complaint in the 91st Psalm – a portion which we commend to perusal of our readers’. [13]

‘THE CHOLERA IN EDINBURGH – For the last 14 days there has been an entire cessation of choleraic attacks in Edinburgh, and the number of Diarrhoea cases has fallen for the usual average. About 100 cases of Asiatic Cholera have occurred in Edinburgh since the outbreak of the epidemic in the beginning of October. Of these, fully one-half have proved fatal. The cholera hospital, which has been managed with much success, has now been closed, the last convalescents having left it. The recent visitation of cholera is the lightest ever experienced in Edinburgh, but there is every reason to believe that had it not been for the prompt action of the sanitary committee it would have been one of the heaviest. The epidemic appeared in nearly every quarter of the town, and was not confined to the closes and lanes, though it found its nidus there. In the week before the hospital was fully organised whole families were sometimes seized before anything could be done; as soon as its arrangements were completed, the effects of isolation began to appear. Three departments were opened – the hospital, the convalescent wards, and the reception-house. Immediately on an attack being reported, the patient, if content, was removed to the hospital, while the other members of the family were taken to the reception-house and put into new clothing. The patient’s clothes were burnt, along with anything

in the house likely to retain infection, and the house, and the house was taken possession of and thoroughly cleaned, and the family were not allowed to return to it for some weeks. The relative mortality of the epidemic was in a great measure due to the ignorant fears of patients, who in many cases would not go to the hospital till the time for remedial measures were past. In the village of Methil-hill, Fifeshire, three deaths from cholera took place last week, making 76 in all, in a population of 300 to 400. About one-half of all the houses in the village are empty, and the fugitives are as yet afraid to return. In the neighbouring villages, the epidemic has all but disappeared. Great inconvenience is felt from the closing up of the wells, to which the extreme virulence of the malady was attributed; and in some of the villages, where the epidemic has evidently abated, it is proposed to re-open a few of the least tainted, pending arrangements for a better supply.’

1867

Typhus and Cholera epidemics (Lancashire).

Cholera epidemic in the East End of London (5,596 deaths).

1868

Scarlatina epidemic followed by ‘Relapsing Fever’ and Typhoid epidemics (London).

1869

Scarlatina and Typhus epidemics (London, Liverpool, Manchester, Leeds and Bradford).

1870

Scarlatina and Smallpox epidemics kill 23,100 and are followed by a marked decline in Tuberculosis and Typhus outbreaks.

1871-1873

Country-wide Smallpox epidemic kills over 25,000.

1874

Severe Measles and Scarlatina epidemics, and a severe Smallpox outbreak (Sheffield).

1875

Smallpox epidemic.

1878

Whooping Cough epidemic.

1879-1880

Severe Measles and Scarlatina epidemics, and a severe Smallpox outbreak (Sheffield).

1881

Smallpox epidemic, and hospital ships are moored on the River Thames.

1883

The Krakatoa explosion, followed by a severe Measles epidemic.

1885-1887

Country-wide Measles epidemic.

1888

Severe Measles epidemic among infants (London).

1889-1892

Severe Measles epidemic, followed by an Influenza pandemic, which leaves between a third and one-half of the British population ill.

1893

Cholera outbreak in Ilkeston Urban Sanitary District, Yorkshire.

1894

Severe Measles epidemic among infants (London).

1896

Severe Diphtheria outbreak (Lewisham, Kent).

1918

The Spanish Influenza Pandemic. Est: 50-100,000,000 deaths worldwide, 228,000 of which were in Britain.

The most devastating Influenza pandemic in recent history was caused by a strain of H1N1 Influenza that killed many millions of people world-wide. The pandemic spread in three, more or less simultaneous waves through Europe, Asia and North America. Unusually, the virus was particularly lethal in young adults. There is some evidence to suggest, that the UK epidemic among civilians, began in Glasgow, travelled

throughout Scotland, and then spread to England and Wales. The origins of Spanish Influenza are still subject to conflicting scientific and medical opinion.

1947

Polio epidemics affects more than 8,000 people.

1957-1958

‘Asian Flu’ epidemic. First identified in China, an H2N2 virus caused roughly 2 million deaths worldwide. (The virus was claimed to have emerged after a human form of H2N2 combined with a mutant strain in Ducks.) most of the people who died were elderly.

1964

Typhoid outbreak in Aberdeen, Scotland.

1967-1968

There were 4134 deaths from Influenza.

1968-1969

‘Hong Kong Flu’ pandemic. A H3N2 was first detected in Hong Kong and killed around 1,000,000 people around the world, with people over the age of 65 being most vulnerable. Over 30,000 Hong Kong Influenza deaths were recorded in Britain.

1981

HIV/AIDS was first diagnosed in Britain. As of 2018, 160,493 people have been diagnosed with HIV, and 7,500 people were estimated to be living with the infection and remain undiagnosed. New diagnosis are notably highest in Gay/BiSexual men, with an estimated 51% of diagnosis’ reporting male same-sex activity as the probable route of infection.

1997

‘Avian [Bird] Flu’ for the first time, an influenza virus was found to spread directly from birds to people. The H5N1 Bird Flu infections were linked to poultry markets. The first outbreak in Hong Kong killed six of the 18 people it infected. The World health Organisation recorded 598 cases since 2003, with 352 deaths. Most deaths from Avian Influenza, were in Egypt, Indonesia and Vietnam and China.

1999-2000

Over 21,000 extra deaths were recorded over the winter, due to seasonal Influenza.

2001

Foot-And-Mouth Disease was discovered at an abattoir during February, and quickly spread across the country. Following samples being sent away for analysis it was discovered that the virus had already spread to 57 farms nationwide. The outbreak was eventually brought under control, and Britain was declared free of the disease at midnight on 14 January 2002.

2009

'Swine Flu' was one of the new [novel] strains of influenza that originated in Mexico reached Britain during April. It was declared a pandemic on 11 June by the World Health Organisation. The virus, a combination of a Eurasian Swine Flu virus with another strain, that was itself a mix of bird, swine and human Influenza virus. It reached its peak in July, with 110,000 cases being reported. It went on to kill 457 people in Britain, and upwards of 18,000 people worldwide. An estimated 540,000 people had symptomatic flu during this period [approximately 1% of the British population]. Around 203,000 people died worldwide.

An E-Coli outbreak among visitors to a Surrey farm occurred between August and September. 93 people were affected, most of who were under 10 years of age. 27 people were hospitalised, and 17 people developed Hemolytic Uremic Syndrome.

2019-2020

'Coronavirus'. Believed to have arrived in Britain on 31 January 2019, from its epi-centre, believed initially to be a wet food market in the Wuhan district of China. The first two cases of the respiratory disease COVID-19, caused by the [novel] Corona Virus, SARS-CoV-2, were confirmed in Newcastle On Tyne in a family of Chinese nationals, who were staying at a hotel in the City of York. As soon as cases began appearing, a public health campaign was launched to advice people how to lessen the risk of spreading the virus. COVID-19 was declared a pandemic by the World Health Organisation on 11 March 2020.

NOTES:

[1]. **Dr. Robert Willan (1757-1812)** was an English physician and the founder of Dermatology as a medical speciality. He received his M.D., at Edinburgh in 1780, and from 1781, he practiced medicine in Darlington and then moved to London in 1783, as physician to the new Carney Street Public Dispensary, where he taught until 1803. he was elected a Fellow of the Royal Society in 1809.

Willan's book, 'On Cutaneous Diseases', was a landmark in the history of Dermatology, and in medical illustration, and contains the first use of the word 'Lupus', to describe Cutaneous Tuberculosis. His study of the sulphur water at Croft on Tees, published in 1782, has recently been re-published.

[2]. **Bede (672-735 AD)** was an English Benedictine Monk at the monastery of St. Peter and its companion of St. Paul in the kingdom of Northumbria. He was sent to Monkwearmouth at the age of seven, and later joined Abbot Ceolfrith at Jarrow, both of whom survived a plague that struck in 686 AD, which killed most of the people there. While he spent the greater part of his life in the monastery, Bede travelled to several abbeys and monasteries across the British Isles, even visiting the Archbishop of York and King Ceolwulf of Northumbria.

He is best known as an author and chronicler, a teacher, and a religious scholar, and his most famous work, 'The Ecclesiastical History of the English People', gained him the title, 'The Father of English History'. Bede was known as being one of the greater teachers and chroniclers of the Early middle Ages, and is considered by many historians, to be the single most important scholar of antiquity for the period between the death of Pope Gregory I, in 1604, and the Coronation of Charlemagne in 800 AD.

[3]. The Anglo-Saxon Chronicle.

[4]. Simeon of Durham.

[5]. Annals of Winchester. William of Malmesbury.

[6]. Annals Cambriae.

[7]. Radulphus de Diceto.

[8]. 'Murrian' is an antiquated term for various infections of cattle and sheep. It literally means 'death' and was used in medieval Britain to signify just that. The term also referred to an epidemic of a disease.

[9]. Matthew Paris. Higden Annales Cambrae.

[10]. Annals of Tewkesbury.

[11]. Florence of Worcester.

[12]. Lady Charlotte Guest (1812-1895).

[13]. The Cardiff and Merthyr Guardian. May 1849.