THE HISTORY OF CHOLERA IN ETHIOPIA

by

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CHOLERA was one of the major epidemic diseases of traditional Ethiopia and resulted, in times of the worst outbreaks, in a high rate of mortality as well as considerable social disorganization, the disease giving rise to a terror second only to the muchdreaded smallpox. Unlike the latter disease, which originated within the country, cholera came to Ethiopia, as to other lands, from India and the East, Ethiopian outbreaks forming part of great international epidemics.

Ethiopian evidence is valuable in helping to document at least one of the prenineteenth-century epidemics, records of which are in all countries hard to come by.2 Though royal chronicles were produced in Ethiopia since at least the fourteenth century their references to epidemics are usually too brief and obscure to allow any identification of disease.3 In 1634, the second year of the reign of Emperor Fasiladas, two chronicles, however, tell of the outbreak of an epidemic which is referred to by the name of fangal, the word subsequently used for cholera. The epidemic was also mentioned by a Portuguese visitor, Diego de Matteos, who reported as of 1634-5 that his companions had learnt from a Turk that the disease was raging around the mountain of Lamalmo and had entered the province of Tigre. 5 It would seem probable that this outbreak was none other than an Ethiopian extension of the epidemic reported in Java around 1629.6

The society's reaction to such early epidemics, be they of cholera or smallpox, is clearly stated by the seventeenth-century German historian, Job Ludolf, who says of the Ethiopians that 'if a Pestilence chance to break out, they leave their Houses and Villages, and retire with their Heards into the Mountains, putting all their Security in flying from the Contagion'. This practice, as we shall see, was often followed in later times for which we have far more adequate documentation.

Later evidence reveals that Ethiopia encountered at least five cholera epidemics in the nineteenth and early twentieth centuries, several outbreaks coming in more than one wave. Outbreaks are thus reported between 1831 and 1836, during which time the cholera was thought to have made itself manifest on two separate occasions; in 1856 and 1866-7, when it greatly discomforted the reforming Emperor Tewodros; during the great famine of 1889-1892 when it again seems to have struck twice; and, finally, in 1906 when the disease appears to have wrought relatively little damage.

¹ R. Pankhurst, 'The history and traditional treatment of smallpox in Ethiopia', Med. Hist., 1965,

<sup>9, 343-55.

&</sup>lt;sup>a</sup> F. Henschen, *The History of Diseases*, London, 1966, p. 70; N. C. Macnamara, *Asiatic Cholera*, London, 1892, p. 1; Major Greenwood, *Epidemics and Crowd Diseases*, London, 1935, p. 165.

R. Pankhurst, An Introduction to the Economic History of Ethiopia, London, 1961, pp. 238-41.
R. Basset, Etudes sur l'histoire d'Ethiopie, Paris, 1882, p. 133; J. Perruchon, 'Le règne de Fasiladas', Revue Sémitique, 1897, p. 85. See also I. Guidi, Supplemento al vocabolario amarico—italiano, Rome 1940, col. 264.

⁵ C. Beccari, Rerum Aethiopicarum Scriptores Occidentales, Rome, 1903-17, I, 157.

⁴ Henschen, op. cit., p. 70.

⁷ J. Ludolf, A New History of Ethiopia, London, 1682, p. 377.

The first epidemic of which we have record appears to have occurred in the 1830s when the disease is known to have broken out in many countries, having been reported in Persia and later in several other parts of the east. Hirsch later observed that the outbreak was 'probably the continuation of a pestilential progress from Egypt through Tripoli and Tunis, the wider ramifications of which may be seen in the epidemics that prevailed at the same time in Abyssinia, on the East Coast of Africa from Somaliland to Zanzibar, and in the Sudan countries, Khartoum, Kordofan, Darfur and Waday'.8 The actual chronology in Ethiopia, where at least two distinct outbreaks seem to have taken place, is however, obscure, for the travellers of the period, most of whom learnt of the event at second hand, give differing dates. Thus Johnston writes of 1830-1, Harris of 1833, Kirk of 1834 and 1835, d'Abbadie of 1835, and Krapf, Wolff and Gobat of 1836. All writers nonetheless agree as to the magnitude of the epidemic. Kirk, a British surgeon attached to the diplomatic mission led by Cornwallis Harris, gives perhaps the most exact account. He believed that there were in fact two outbreaks. The first, which took place in 1834, led to 'great mortality' in Shoa. Turning to the geographical incidence of the disease he added: 'Its course is said to have been from north to south, first appearing on the frontiers of the Wollo country, and passing to the districts inhabited by the Galla tribes to the south and southwest, from whence most probably it penetrated to the unknown regions of central Africa. The more elevated regions of Shoa remained nearly free from the disease, a few isolated cases only appearing at Ankobar [the Shoan capital] and Angolalla. In character it appears to have resembled the Asiatic cholera, and to have been marked by vomiting, purging and spasms, the cases usually terminating fatally in twenty-four hours.' The second outbreak occurred in the following year, 1835, when a drought resulted in a 'severe famine' followed by an epidemic characterized by severe pain in the abdomen and frequent purging of blood under which the sufferer usually sank in from eight to ten days. There was then 'a great mortality' throughout Shoa, the population of Ankobar having been 'half depopulated'.9 Johnston, a British ship's surgeon, apparently describing this second outbreak, agrees that it was particularly serious as it came after two successive crop failures had reduced the population to 'the greatest extremity' with the result that at Ankobar 'nearly two thirds' of the poverty-stricken inhabitants perished of cholera which, he records, was locally known as agwert. 10 The intensity of the epidemic owed much to the capital's poor sanitary conditions. 11 Harris observed that the disease 'as might have been anticipated, spread with fearful virulence in the foul city . . . one half of the whole population were speedily swept away'. 12

The northern provinces were also seriously affected. D'Abbadie recalls that an eye-witness told him that on a journey inland from Massawa in the summer of 1835 he had seen no less than forty-four members of his caravan die between dawn and dusk and that though a number of sufferers were taken back to the port of Massawa

⁸ A. Hirsch, Handbook of Geographical and Historical Pathology, London, 1883, I, 423.

⁹ R. Kirk, 'Medical report on the Kingdom of Shoa', Trans. med. phys. Soc. Bombay, 1885, 7, 24.

¹⁰ C. Johnston, Travels in Southern Abyssinia, London, 1844, II, 158. R. Pankhurst, 'Some factors influencing the health of traditional Ethiopia', J. Ethiopian Stud., 1966, 6, No. 1, 47-56.
 W. C. Harris, The Highlands of Aethiopia, London, 1844, III, 166-7.

Richard Pankhurst

all of them perished, 13 while Gobat says that in May 1836 'for about three weeks the daily number of deaths' in the large commercial centre of Adowa 'averaged from thirty-six to forty in a population of about three thousand', 14 a statement which would suggest that some 700 to 800 persons, or about a quarter of the population, perished. Another missionary, Wolff, declares that the epidemic was still raging in the city in the following month.¹⁵ The magnitude of the calamity is further apparent from the statement of another missionary, Krapf, that the population of the provinces of Wallo and Lasta had been 'considerably thinned', 16 and by d'Abbadie's observation that in one fertile province all sowing had been abandoned, the inhabitants having abandoned the area which was in consequence almost entirely depopulated. He adds that the incidence of the disease was, however, considerably greater towards the coast, and that, though serious at Dabra Tabor, where many soldiers and other poor people were quartered, had entered neither Gojam nor the Galla country.¹⁷

The society, according to d'Abbadie, was fully aware of the contagious character of the disease, 18 and King Sahla Sellasé is reported by Harris to have 'sought strict seclusion in the remote palace at Machel-wans, where he would see no person until the plague was stayed; and those who survived of his terror-stricken subjects fled for a season from a hill which was declared by the superstitious priesthood to have been blasted by a curse from heaven'. Belief in the supernatural similarly caused a black bull to be led through the streets of Ankobar, while the inhabitants carried stones upon their heads, the traditional sign of repentance.¹⁹

The next major epidemic occurred a generation later in the 1850s and again apparently formed part of an international outbreak.²⁰ The disease seems to have been particularly serious in the west of the country towards the Sudan frontier. Flad, a missionary, recorded in 1856 that on a two and a half mile journey along the main trade route from Matamma to Wahni he saw no less than one hundred skeletons and that fifteen to twenty persons were dying daily at each of the villages he passed. Once again the people had sought safety in flight: there had been a great exodus from Matamma to the highlands and at the trading centre of Wahni he found only five merchants, all the remainder having fled to the hills.²¹ A contemporary Ethiopian chronicler, Dabtara Zaneb, states that God sent down a major epidemic and that numberless people died all over the country, the disease which took the form of diarrhoea and vomiting killing them irrespective of whether they were standing, sitting or sleeping. Death came so suddenly that the disease was called naftanya fangal, apparently because it struck down its victims as swiftly as did the naftanya, or rifleman, though in Shoa the term agwert continued to be used. 22 Another chronicler

France, Bibliothèque Nationale, Fonds d'Abbadie, 21300 p. 588.
 Samuel Gobat, His Life and Work, London, 1884, p. 177.

¹⁶ J. Wolff, Journal, London, 1839, p. 234.

16 C. W. Isenberg and J. L. Krapf, Journals detailing their Proceedings in the Kingdom of Shoa, London, 1843, pp. 398, 458.

17 Fonds d'Abbadie, 21300, p. 588.

¹⁸ Ibid, p. 588.

¹⁹ Harris, op. cit., III, 167.

N. Longmate, King Cholera: The Biography of a Disease, London, 1966, p. 181.
 J. M. Flad, 60 Jahre in der Mission unter den Falaschas in Abessinien, Basle, 1922, p. 85.
 E. Littmann, The Chronicle of King Theodore of Abyssinia, Princeton, New Jersey, 1902, p. 27;
 M. Moreno, 'La cronaca di re Teodoro attribuita al Dabtara "Zaneb", Rassegna di studi Etiopici, 1942, **20**, 166.

of the period, Alaqa Walda Maryam, likewise refers to the epidemic as naftanya and adds that it broke out among the Emperor's troops, many of whom succumbed of this 'truly terrible' disease which killed large numbers of people between dawn and dusk on a single day.28

The extent of the dislocation wrought by this epidemic was underlined in a report by the British consul, Walter Plowden, who wrote on 23 June that Tewodros, who was then in Gojam, had planned to march into Tigre to suppress a rebellion, but that the 'fatal cholera' had 'disorganized the army'. The epidemic, he adds, 'is ravaging the country, and scarce any who are attacked recover; it last appeared here twenty-two years since [i.e. in 1834], and the consternation it now causes is in proportion to the ignorance of the people, and the inefficiency of medical aid; all business, even markets, are suspended'.24 Later, however, the Emperor struck camp and made for land of higher elevation. Alaga Walda Maryam says that many men fell from their horses and mules on the journey but, on entering the province of Begemder, the disease came to an end through the goodness of Christ.²⁵

A further epidemic, which appears to have originated in the east, reached the Red Sea port of Massawa in October 1865. Dr. Blanc, one of the British envoys to Emperor Tewodros II, reported that the epidemic was 'severely felt' at the port. 'All those who had been suffering from insufficient or inferior food became an easy prey; few, indeed, of those who contracted the disease rallied; almost all died'. Fatal casualties included one European, while the Pasha, or local ruler, 'was several times on the point of death, from great debility and complete loss of tone of the digestive organs'.26 The death rate at the port, according to Douin, a later historian, reached about 300 persons.27

Faced with this outbreak the Ethiopians once more took immediate action to prevent the spread of infection. Douin states that the people of the interior cut off all communications with the coast and refused to allow trade caravans to leave the highlands until the epidemic had ceased.²⁸ Notwithstanding this precaution the disease soon spread inland, first to Tigre, where Blanc says that it made 'havoc', and then to other provinces of the north.²⁹ Shepherd, a later traveller, reports that the disease 'raged with great violence in Antalo and the surrounding villages', several of which were still uninhabited when he visited them a year or so later, 30 while Munzinger says that the cholera also made 'dreadful ravages' among the Dankali tribesmen.³¹ By May 1866 several cholera cases were reported at Qorata on the southern shore of Lake Tana. Blanc notes that on hearing this news the Emperor 'wisely decided upon moving to the highlands of Begemder'. Before doing so, however,

²³ C. Mondon-Vidailhet, Chronique du Theodorus, Paris, 1905, pp. 21-2. See Amharic text, pp. 17-18.

[№] Great Britain, House of Commons, Correspondence respecting Abyssinia, 1868, pp. 169-70.

²⁵ Mondon-Vidailhet, op. cit., pp. 21-2.

²⁶ H. Blanc, A Narrative of Captivity in Abyssinia, London, 1868, p. 71.

²⁷ G. Douin, Histoire du règne de Khédive Ismail, Cairo, 1936-4, III, part I, 278. 28 Ibid, III, part I, 278.

Blanc, op. cit., p. 165.
 A. J. Shepherd, The Campaign in Abyssinia, Bombay, 1868, p. 139. See also A. Girard, Souvenirs d'un voyage en Abyssinie, Cairo, 1873, p. 328.

31 W. Munzinger, 'Narrative of a journey through the Afar country', J. R. geog. Soc., 1868, 39,

^{216;} Blanc, op. cit., pp. 165-7.

Richard Pankhurst

he paid a lightning visit to Qorata, as Blanc thought, 'to judge for himself if the cholera was raging there at the time or not'. He adds that the monarch 'made many inquiries on the subject'. The Emperor's curiosity was, however, disastrous, for within a matter of days the cholera had broken out in the royal camp, and, as Blanc records, 'hundreds were dying daily. In the hope of improving the sanitary condition of his army, the Emperor moved his camp to some high ground a mile or so north of the town; but the epidemic continued to rage with great virulence both in the camp and in the town. The church was so completely choked up with dead bodies that no more could be admitted, and the adjoining streets offered the sad sight of countless corpses, surrounded by the sorrowful relatives, awaiting for days and nights the hallowed grave in the now crowded cemetery. Smallpox and typhus fever also made their appearance, and claimed the victims cholera had spared.'32

Tewodros, fully conscious of the infectious character of the disease, accordingly decided on 12 June to leave, as Blanc records, 'for the higher and more healthy province of Begemder'. 33 The march, according to Waldmeier, one of the missionaries at the court, was, however, 'very difficult . . . We had to travel in the midst of a crowd of 100,000 soldiers, women and children. Some sick, dying and even dead, were carried in the crowd, and many others lay dead on the ground, the multitude passing over them, so that the smell became fearful, and the lamentation for the dead was heart-rending.'84

By 14 June the soldiers were several thousand feet above the lake, but the cholera, smallpox and typhus fever continued unabated, whereupon, Blanc continues, 'His Majesty inquired what was usually done in our country under similar circumstances. We advised him to proceed at once to the higher plateau of Begemder, to leave his sick at some distance from Dabra Tabor, to break up as far as possible his army, and distribute it over the whole province, selecting a few healthy and isolated localities where every fresh case that broke out should be sent'. The same observer goes on to say that 'the sovereign acted upon this advice' which was not surprising in that it accorded so closely with the traditional customs of his country.85

Despite the wisdom of this evacuation there was no immediate respite. Waldmeier relates that several of his servants fell ill and died on the road and that on arrival at his house at Gafat near Dabra Tabor his wife was 'seized with a violent attack of cholera, followed by typhus fever, which was so dangerous that she was brought to the very brink of the grave . . . The cholera prostrated all our servants, and some of them died . . . the angel of death was daily claiming its victims.'36

The epidemic was so serious that Blanc, who had been imprisoned by the Emperor on account of the latter's dispute with the British Government, was at this time released,³⁷ and, according to an Ethiopian chronicler, cured many of the sick fangal victims. 38 The Emperor's policy of flight was in due course successful. Blanc says that

⁸⁸ Blanc, op. cit., p. 167.

³⁸ Ibid, p. 167.
34 T. Waldmeier, Autobiography, London, 1887, pp. 89-90.

⁸⁵ Blanc, op. cit., p. 168. ³⁶ Waldmeier, Autobiography, pp. 90-1.

⁸⁷ Blanc, p. 168.

²⁸ L. Fusella, 'La cronaca dell'imperatore Teodoro II di Etiopia in un manuscritto amarico', Annali dell'Istituto Universitario Orientale di Napoli, 1957, 6, 104.

Tewodros 'before long had the satisfaction of seeing the several epidemics lose their virulence, and, before many weeks, disappear entirely'.³⁹ This is confirmed by Waldmeier who notes that 'by degrees the cholera passed away'.⁴⁰

The magnitude of this epidemic was such that Hirsch may well have been correct in describing it as a 'point of departure' for the southward advance of cholera into the country of the Gallas, who, he suggests, had previously been little affected by the disease.⁴¹

The foreign origin of the disease was clearly understood by the Ethiopians. Parissis, a Greek physician at the court of Emperor Yohannes, discovered a generation later that the oldest inhabitants of Tigre remembered a cholera epidemic—apparently that of 1865–6—and categorically declared that the infection had been brought by Indian traders to Massawa whence it had penetrated inland.⁴²

The last nineteenth-century outbreak or series of outbreaks, though once again international in scope, owed much to local circumstances, rinderpest and other circumstances having led from 1889 to 1892 to a great famine of unprecedented proportions, which caused the debilitated population to fall easy victim to infections of all kinds.48 The exact history of this outbreak is, however, uncertain. An Italian physician at Massawa, Dr. Filippo Rho, states that cholera was brought to that port from Arabia in July 1890 by pilgrims returning from Mecca. 44 A French officer, Paul de Lauribar, suggests, on the other hand, that the disease had already broken out in the interior some months earlier and was actually brought to the Italian colony of Eritrea by destitute persons crossing the frontier from Ethiopia in the hope of finding work in Asmara. The disease was, he says, rampant in Eritrea from the end of 1889 to July 1890, and Italian carabiniers and native troops were continually going up and down the main streets of the town burning corpses, while immigration across the frontier was prohibited and many immigrants were forcibly deported.⁴⁵ Despite the stringency of such measures a further outbreak was reported along the Setit river in western Eritrea in 1891.46

Testimony as to the extent of the destruction is afforded by Theodore Bent, a British traveller who visited the northern provinces in 1893, after which he wrote: 'Civil war, famine and an epidemic of cholera have, within the last decade, played fearful havoc... villages are abandoned, the land is going out of cultivation... It is scarcely possible to realize, without visiting the country, the abject misery and wretchedness which has fallen upon the Ethiopian empire during late years.'⁴⁷ Describing the village of Dabarwa he adds that it had been 'decimated' by cholera and smallpox: 'a few piles of stones, an almost ruined church, and a few wretched hovels are all that is left.'⁴⁸

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Blanc, op. cit., p. 168.
Waldmeier, op. cit., p. 90.
Hirsch, op. cit., I, 423.
N. P. Parissis, Rapport sur la médecine en Abyssinie, Cairo, 1904, p. 18-19.
R. Pankhurst, 'The great Ethiopian famine of 1888-1892: a new assessment', J. Hist. Med. All.
Sci., 1966, 21, 95-124, 271-94.
F. Rho, C. Petella and A. Pasquale, Massaua, clima e malettie, Rome, 1894, pp. 106-7, 208-18.
P. de Lauribar, Douze ans en Abyssinie, Paris, 1898, pp. 193-4.
A. Barkhuus, 'Medicine in Ethiopia', Ciba Symp., 1947, p. 718.
S. T. Bent, The Sacred City of the Ethiopians, London, 1896, p. 11.
Ibid, p. 87. See also A. B. Wylde, Modern Abyssinia, London, 1901, p. 292.
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Richard Pankhurst

The southern provinces were also seriously affected, mainly in 1892 when the epidemic appeared at the Gulf of Aden coast where a heavy mortality was reported. Drake-Brockman says that a large number of the inhabitants of Bulhar were wiped out,49 while a British Consular report for 1893 gave the following statistics:50

Port	Number of stricken	Number of deaths
Zeila	369	277
Bulhar	826	686
Berbera	13	11

Many persons also died at the French port of Jibuti, among them the colonial administrator, Joseph Deloncle, and the military physician, Dr. Aubry.⁵¹

The epidemic rapidly spread inland. At Sheik Husein, Donaldson Smith reports that no less than four-fifths of the population perished.⁵² Harar, the main trading centre of the east, seems also to have been badly affected. The chronicle of Gabra Sellasé reports that among those infected were a number of persons then engaged in conveying cattle from the Ogaden to the famine-stricken areas of the interior. Troops sent to guard them also caught the disease and many of them died, their commander Azaj Walda Tsadeq himself falling ill. Anxious to avoid further spreading of the disease this officer ordered that the animals be kept in Adal and that the roads should be guarded to prevent the disease advancing to Ankobar where Emperor Menilek was then encamped. Azaj Walda Tsadeq then withdrew to the lowland region of Dibbi, south of Ankobar, where he had a tent erected in the forest and lived there in isolation, declaring: 'If I die what matters so long as Menilek is master!' The chronicler declares that God heard these words and permitted the brave chief to recover, though those who survived after having once caught the disease were few in number. He adds that 'many' people died at Ankobar, one of the first victims being Walda Gabriel, a priest renowned for his chanting.⁵³ The epidemic came to an end at Ankobar only after Menilek left the city and made his way south to Entoto which he reached on 20 September 1892.54 Vanderheym confirms that the population of Ankobar was 'decimated'.55 Addis Ababa, which Menilek had established as his capital only a few years earlier, also suffered. A British traveller, Pease, says that the disease made 'great ravages' there, but later 'died out completely'.56

Cholera at this time became known, according to De Coppet, as ye nefas beshita, or disease of the wind, as it was popularly thought to have been spread by the wind, which mainly blew from the north east, that is to say from the coast, where it first appeared, to many parts of the land.⁵⁷

Greater international controls in the twentieth century led to a substantial diminution of cholera in Ethiopia as in the rest of the world. The last epidemic on record,

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    R. E. Drake-Brockman, British Somaliland, London, 1912, p. 43.
    Great Britain, Foreign Office, Report for 1893 on the Trade of the Somali Coast, pp. 1, 5, 6.
    J. G. Vanderheym, Une expédition avec le négous Ménélik, Paris, 1896, p. 28.
    A. Donaldson Smith, Through Unknown African Countries, London, 1897, p. 61.
    Guèbre Sellassie, Chronique du règne de Ménélik II, Paris, 1931, I, 323.
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⁸⁴ Ibid, I, 323.

<sup>Varderheym, op. cit., p. 59.
E. A. Pease, Travel and Sport in Africa, London, 1902, II, 206.
Guèbrè Sellassie, I, 319, & n.</sup>

which occurred in the east around 1902,58 seems to have reached Ethiopia in 1906 but, as far as the present writer is aware, was reported only in Wallo. 59 The once terrifying words agwert and fangal used in the past to refer to cholera, are now scarcely known to the Ethiopian medical profession of today, while the term naftanya is associated only with a rifleman, its secondary meaning having long since been forgotten.

<sup>Henschen, op. cit., p. 70.
F. Martini,</sup> *Il Diario eritreo*, Florence, 1946, IV, 199-20, 223-4, 360.