

Abstract

This thesis examines the impact of disease and mortality on the Royal Navy in the West Indies from 1770 to 1806. It also investigates the navy's medical branch which was established to manage the care of sick seamen. Using an interdisciplinary approach, this thesis produces a cohesive understanding of how disease and mortality affected the navy's presence in the West Indies and the ways in which the navy attempted to mitigate their impact. This thesis explores various aspects of naval medicine including the history of the Sick and Hurt Board, the diseases which distressed seamen, the medicines distributed by the navy, the key personnel who were integral in generating changes to the medical system and the development of hospital facilities.

Largely based on Admiralty records including correspondence and minutes from the Sick and Hurt Board, ships' muster books and surgeons' journals, this thesis investigates the most prevalent diseases in the West Indies and the prescribed treatments advocated by the navy. It then examines how these diseases and treatments affected seamen on board ships in that region through a quantitative analysis; then focuses on a number of the integral naval personnel who ushered in sweeping changes to naval medicine; and explores the navy's increasing desire to transition from hired sick quarters to purpose-built naval hospitals on various West Indies islands. It concludes with a case study of the development of Antigua naval hospital which demonstrates the effectiveness of these facilities in convalescing sick seamen.

Through a quantitative analysis of ships' muster books, this thesis argues that the levels of sickness and mortality in the navy in the West Indies during the late eighteenth century are largely exaggerated in historical studies while also discrediting the myth that those islands were the 'white man's graveyard' for many naval personnel. By surveying over 100,000 seamen on board ships in that region, sickness and mortality figures emerge which indicate that, on average, less than 4 per cent of seamen were on the sick list at any given time and only a small percentage died, meaning that the majority remained on active duty. This thesis then argues that many of the changes to the navy's medical system that facilitated such low percentages were primarily instigated by surgeons, physicians and captains who identified beneficial medicines and championed their general distribution among the entire fleet. By looking at these aspects of naval medicine through a multidisciplinary lens rather than a purely administrative one, it is possible to understand the true state of health of British seamen in the West Indies during the last quarter of the eighteenth century.