

1968

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Recommended Citation

Rea, Robert R. (1968) "Graveyard For Britons, West Florida, 1763-1781," *Florida Historical Quarterly*. Vol. 47 : No. 4 , Article 3.

Available at: <https://stars.library.ucf.edu/fhq/vol47/iss4/3>

“GRAVEYARD FOR BRITONS,” WEST FLORIDA,
1763-1781

by ROBERT R. REA

TODAY IT IS KNOWN as the Miracle Strip, and every spring its long white beaches beckon to sun-starved multitudes who flock to that stretch of coast centering upon Pensacola to the east and Mobile to the west. There lie warmth, relaxation, recreation, and health. Few of today's sun-worshippers remember that Pensacola was once the swampy, fever-infested capital of British West Florida, and that Mobile was known as a “graveyard for Britons.”

Whatever the romantic attributes of French and Spanish colonization of the Gulf coast, when the British occupied the region late in 1763 its prospects were far from encouraging.¹ Pensacola had been abandoned by its Spanish population, and the British troops were barracked in “miserable bark huts without any sort of fire places or windows, void of every necessary utensil.”² Mobile boasted a regular fort, but the redcoats who stumbled ashore, “all eat up by the scurvy” after weeks at sea, found Ft. Conde in a state of “very bad repair,” and the town too crowded to provide other accommodations.³ With their first summer the British began to discover the deadly effects of a climate and fevers that decimated their ranks indiscriminately from private soldier to commanding general.

Major Robert Farmer, commander of the British force that occupied Mobile in 1763, reported from that city that the “old

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1. Peter J. Hamilton's assertion that the “continued unhealthfulness was remarkable, for the French had had no such trouble,” reflects a naivety which is contradicted by modern studies such as John Duffy, *The Rudolph Matas History of Medicine in Louisiana*, I (Baton Rouge, 1958), and Jack D. L. Holmes, “Medical practice in the lower Mississippi Valley during the Spanish period, 1769-1803,” *Alabama Journal of Medical Sciences*, I (1964); Peter J. Hamilton, *Colonial Mobile* (Mobile, 1952), 265.
 2. Major William Forbes' Report, January 30, 1764, Dunbar Rowland, ed., *Mississippi Provincial Archives, 1763-1766, English Dominion* (Nashville, 1911), I, 113. Cited hereafter as *MPAED*.
 3. Robert Farmer to Thomas Gage, December 27, 1764, Gage Papers, William L. Clements Library, Ann Arbor, Michigan. Farmer to the secretary of war, January 24, 1764, *MPAED*, I, 11, 19.

worn out Soldiers" of the 34th and 22nd Regiments, both of which participated in the deadly Havana campaign before coming to West Florida, were too sickly to mount the officers' guard or even the common guard at the fort. Two officers died in early August 1764, and as many as eight men were committed to the hospital nearly every day. Farmar took some small consolation in noting that the illness, though general, was not as certainly fatal as he first apprehended.⁴

Care of the sick posed a serious problem under Mobile's crowded conditions. Governor George Johnstone observed that "the state of the town in filth, nastiness, & brushwood running over the houses is hardly to be credited."⁵ By September, Farmar was desperate. He requisitioned private facilities as necessary, turned the proud Chevalier Montault de Monberaut out of his bed in order to provide for a sick officer, and purchased a house from Mme. Grondel to be used as an auxiliary military hospital. The sum of 186.13.4 pounds was an exorbitant price to pay for the medical facility, but Farmar had little choice if he was to care for his ailing soldiers.⁶ It was not until November, however, that three hospital mates were sent to Mobile from Pensacola, and by that time it was reported that "the stench which issues from the barracks & hospital is sufficient to knock a man down!"⁷ As the medical staff in all of West Florida in the fall of 1764 included only six mates - George Brown, Christopher Johnstone, William Pemberton, Edmond Taylor, John Knollis, and Joseph Price - and one surgeon, Samuel Fontinelle, its resources were stretched to the breaking point.

Pensacola was in slightly better condition than Mobile, or so the officers stationed there tried to persuade themselves.

4. Farmar to Gage, August 7 and September 24, 1764, Gage Papers.

5. George Johnstone to Gage, January 2, 1765, Gage Papers.

6. Farmar's certificate of purchase, November 29, 1768, Haldimand Papers, Public Archives of Canada, Ottawa, Canada. According to Johnstone, Farmar deducted a \$40 interpreter's fee from the price paid to Mme. Grondel. The old French military hospital contained only sixteen beds. See Laura D. S. Harrell, "Colonial Medical Practice in British West Florida, 1763-1781," *Bulletin of the History of Medicine*, XLI (November-December 1967), 540.

7. Johnstone to Farmar, November 2, 1764; McLellan to Johnstone, November 15, 1764, Gage Papers. Harrell, "Colonial Medical Practice in British West Florida, 1763-1781," 540, mentions one surgeon and a mate at Mobile in January 1764, but fails to note the arrival of medical reinforcements later that year.

Captain Robert McKinnen admitted that his troops were suffering from "a most inveterate scurvy," but he blamed the death of one lieutenant and the illness of seven others on their having contracted fever at Mobile. "No person that goes to Mobile," he wrote, "but may lay his account to have a very severe fever." The reckoning included the 22nd Regiment, just returned from the Mississippi, whose major reported that most of his officers and 107 privates were very ill.⁸

Winter brought some relief and the promise of more, for in March 1765, Dr. John Lorimer was appointed surgeon to the military hospitals in West Florida, and he sailed from England with the 31st Regiment to take up his post.⁹ Summer arrived before Dr. Lorimer, however, and it found the troops in West Florida sadly weakened by a shortage of fresh provisions. Scurvy was rampant at Mobile, and, anticipating the worst, Lieutenant Colonel Edward Maxwell proposed to send his sick and convalescent out to Dauphin Island where he had stationed a small detachment and erected a hut. It was, said Maxwell, "the only method I can think of to preserve a few men for the defence of that post during the sickly season."¹⁰

In August, the 31st Regiment and Surgeon Lorimer landed at Pensacola. The regiment brought its own afflictions, and these produced a mortality which one hardened veteran declared to be "beyond anything I ever saw in the West Indies."¹¹ Governor Johnstone provided a graphic description of the disease: "To a putrid bilious fever succeeded an epidemic of flux, which, from want of a regular Hospital, and the crowded situation of the sick, in the dirty, despicable, confined huts of the garrison, was followed by the Jail or Hospital fever which became universal." The governor estimated that one-fifth of Pensacola's

8. McKinnen to Gage, September 24 and November 25, 1764, Gage Papers.

9. Halifax to John Lorimer, March 14, 1765, *MPAED*, I, 399. Harrell, "Colonial Medical Practice in British West Florida, 1763-1781," 543, assigns Lorimer to the 21st Regiment. Lorimer apparently entered the service as a surgeon in 1761 or 1762, accompanied the expedition that took Belle Isle in 1762, and was placed on half-pay at the end of the Seven Years War. He returned to active duty with his appointment at surgeon to West Florida in 1765. *MPAED* Transcripts, IX, 63.

10. David Wedderburn to Johnstone; Johnstone to Jacob Blackwell; Blackwell to Johnstone; Johnstone to Wedderburn, June 9, 1765, Haldimand Papers. Maxwell to Gage, June 28, 1765, Gage Papers.

11. Edward Bromley to Gage, July 25, 1765; Simpson to Gage, August 25, 1765, Gage Papers.

inhabitants died in August and September 1765, including Brigadier General Henry Bouquet. His case was all too typical; he arrived in Pensacola on August 24, already indisposed from his voyage, and died on September 3. In less than a month, the 31st Regiment buried four officers, five out of the six officers' wives, and nearly 100 men.¹²

Evidently the colony suffered simultaneous epidemics of yellow fever (putrid billious fever), dysentery (flux), and either typhus (hospital or jail fever) or typhoid. As malaria was also certainly present, the combination was deadly. Unfortunately no very useful descriptions of the symptoms exist. While yellow fever has always been considered the chief killer, it is surprising that no one applied the term to the sickness in West Florida even though the modern nomenclature was in use at the time, both professionally and popularly. It is significant that Captain John Campbell, who visited the area in 1764 and who had personal experience with yellow fever, distinguished it from the fever that ravaged Mobile. The modern historian of colonial epidemiology equates "putrid billious fever" with typhoid and declares that "yellow fever seems to have disappeared from British North America for a thirty year period from 1763 to 1793." British troop transports' West Indian landfalls offered ample opportunity for the introduction of the disease to the Gulf coast, however, so yellow fever may continue to be listed - though only sharing honors - with malaria, dysentery, typhoid, and typhus.¹³

While Pensacola could no longer be considered healthy in comparison to Mobile, the latter still retained its evil reputation. The fever at Mobile was of longer duration than at Pensacola, even if there were fewer fatalities. Captain Campbell swore that in his own case, Mobile fever was worse than the yellow fever he had survived on Martinique. Lieutenant Colonel David Wedderburn, who was too ill to write his own letters, noted that a great number of men were sick with "scorbutick complaints" in April and that by July nine officers had had the fever. Happily he had received a medicine chest (whose virtue

12. Johnstone to Gage, September 21, 1765; John Campbell to Gage, September 7, 1765, Gage Papers.

13. John Duffy, *Epidemics in Colonial America* (Baton Rouge, 1953), 162, 222-23. It must be noted that Duffy generally excludes the Floridas from his otherwise excellent study.

must have been chiefly psychological), and observing that the men were not as sick as they had been the previous year, the young officer devoted his attention to altering the lace and cut of the soldiers' coats and securing approval for a regimental band. Even embarkation for home failed to cure the 22nd Regiment of Mobile fever.¹⁴ Governor Johnstone concluded that "Mobile must be the most unhealthy place on the face of the earth," and he warned that "persisting in quartering troops there is a kind of war against Heaven, by the piling up of dead bodies."

General Thomas Gage, at headquarters in New York, was properly concerned over the state of His Majesty's forces in West Florida and particularly with the shortage of medicine which he thought "must have proceeded from some strange mismanagement." Two chests had been dispatched from New York in April 1765, and the medical storekeeper had assured Gage that they "contained each sufficient quantities of drugs to last a regiment of one thousand men for two years." Nonetheless, the general ordered another medicine chest sent to beleaguered Mobile and urged Surgeon Lorimer to supervise its use most carefully.¹⁵

The year 1766 saw little change. A new brigadier, William Tayler, who had served in St. Augustine, came to Pensacola in May and found everything in a state of decay. Barracks which were being used as a hospital were roofed only with boards, and the windows were open to the rain and cold. The building lacked a kitchen or even a chimney to carry off the smoke of winter fires. Yet Pensacola was still in better condition than Mobile, and Tayler, a well-intentioned if ineffective officer, was quick to order Dr. Lorimer to set out on forty-eight hours notice for Mobile "to consult with Lt. Col. Maxwell the best means of preserving the health of the men by change of ground, encamping or hutting them."¹⁶

Dr. Lorimer was fully engaged in the universal struggle for survival at Pensacola in 1765 and 1766. There was work enough,

14. Wedderburn to Gage, April 9, May 7, July 15, September 3, 1765, Gage Papers.

15. Gage to Edward Maxwell, January 23, 1766; Gage to Lorimer, January 23, 1766, Gage Papers.

16. William Tayler to Gage, April 28, 1766, Gage Papers. Tayler to Gage, September 18, 1766, Haldimand Papers.

but lacking even the simple remedies of the day or any place worthy of the name hospital in which to minister to the sick, and unable to secure effective support from the civil and military authorities, Lorimer must have been more of a grave-digger than a healer. Certainly, like every gentleman who visited the new colony even briefly, he dabbled in real estate. Very shortly after his arrival he secured a house lot in Pensacola, and early in 1766, he was granted thirty acres on the outskirts of the town.¹⁷ During the next two years Lorimer added as much more property to his holdings and thereby became a considerable person in the community. When Governor Johnstone ordered elections for a provincial assembly in August 1766, Lorimer offered himself as a representative of Campbelltown and was chosen by the voters, sixteen to twelve, over David Williams. He was not favored, however, by the returning officer, James Johnstone, who falsified the results in Williams' behalf. The affair was brought to the attention of a committee on privileges and elections when the House met, November 3. Lorimer's petition to be seated was received, and Williams, who at first refused to appear, claiming indisposition, was ordered to apologize and was promptly expelled. James Johnstone, when summoned, pleaded inexperience in his office and was excused - doubtless because of his close political and familial relationship with the governor. Lorimer was an active and successful politician. He served as speaker *pro tempore* in 1767, and in 1770 he secured a sinecure appointment as deputy surveyor and auditor of revenues for the colony.¹⁸ He also interested himself in the western part of the province and secured two large grants of land near Natchez and modern Vicksburg. In February 1774, he visited the Mississippi River in the company of cartographer George Gauld who added Lorimer's name to his carefully plotted "Plan of Manchac." The two friends subsequently journeyed up the Mississippi as far as the Yazoo River, admiring the rich lands which they hoped would compensate them for their sufferings on the Gulf coast.¹⁹

17. Clinton N. Howard, *The British Development of West Florida 1763-1769*, University of California Publications in History, XXXIV (Berkeley, 1947), 66, 69, 104, 106.

18. Cecil Johnson, *British West Florida, 1763-1783*, Yale Historical Publications, XLII (New Haven, 1943), 87-91, 99, 225.

19. William G. Wilton, Manuscript Map of British Land Grants (1774),

"GRAVEYARD FOR BRITONS," WEST FLORIDA, 1763-1781 351

It was painfully apparent that the struggling young colony needed the direction of a firm hand. Civilian authorities, primarily concerned with the accumulation of wealth - and bitterly disappointed therein - could not provide it, but with the arrival of Brigadier General Frederick Haldimand, in March 1767, British West Florida began to enjoy the leadership necessary to bring order out of its early confusion. Haldimand set both the military and civil establishments to their proper tasks, and among those for whom this remarkable Swiss mercenary found employment was the provincial surgeon.

Appalled by the conditions he encountered at Pensacola, Haldimand immediately undertook to improve the "so-called fort" by moving the high pallisades of the stockade farther from the barracks in order to facilitate the circulation of the sea-breeze about the crowded huts - "the only comfort Nature seems to intend for this place." Basic sanitation was implemented by the construction of privies. Ditches were dug to drain the swamp behind the town, and attention was given to the supply of drinking water which came from that same low-lying area. At best it was very bad, and for days after a rain it was as yellow as saffron. Work on a new hospital was begun in May, and by the end of the month the building was roofed and ready for use.²⁰ Temperatures in the high eighties and a shortage of rations pressed hard upon the men; they could not work in the afternoon, and they would not work at all unless encouraged by extra rations of rum. Dr. Lorimer, who appreciated the salutary effects of rum, ran into opposition from headquarters. General Gage was "by no means inclined to open the Sluice of Rum. I have had experience enough," he wrote, "of the hurt it has done this Army." Gage hoped that the men could be satisfied with spruce beer, and he dispatched kettles and other stores for making a brew which he thought "much more wholesome for the men than hot rum new from the still." Haldimand hastened to pacify his commander: "You

Louisiana State University Library, Baton Rouge, Louisiana. George Gauld, "A Plan of Manchac" (1779), William L. Clements Library, Map Collection. See also Harrell, "Colonial Medical Practice in British West Florida, 1763-1781," 557. Alexander Dickson to Frederick Haldimand, February 15 and May 9, 1774, Haldimand Papers.

20. Haldimand to Gage, April 31 [*sic*] and May 22, 1767; Haldimand to Ross, August 6, 1767, Haldimand Papers.

know, Sir, that I am an enemy of Rum . . . but I am convinced that it is necessary here for the troops' health . . . especially during the great heat." In any case, he added, the men could always buy it in town - and bad New England rum at that - by spending their free time "working like niggers" for the merchants. Furthermore, the impoverished redcoat had to purchase his own shirts, breeches, hose, and shoes, all of which wore out very rapidly in the humid coastal climate. Shoes, then as now, were attacked by mildew, and the soldier, accustomed to keeping his footwear in shape with oil, discovered that he must forego even that treatment in West Florida, for the oil attracted cockroaches which devoured the leather itself. All hands agreed that stimulants were beneficial to the convalescent, at least, and between 1767 and 1769, Haldimand supplied the hospital with \$237 worth of good Madeira for medicinal purposes. In 1767, however, when the brigadier switched the sick from rum to wine, he found that they abused their privilege, and he temporarily cut off their supply altogether. Haldimand credited his own good health to his drinking habits. "Doctors say that wine is the best liquor for this country, and it seems that opinion has pretty much prevailed here, without producing any bad effect." He observed to his agent, "I really believe your good Madyra has been the best preservatif I could have wished. . . . I am sorry it is almost gone, as well as the other pyp of sherry and several . . . of claret and vin de Graves." For the future he asked to be supplied with New York wines which he found preferable to any others.²¹

The brigadier's sympathies were with his men; heat in the nineties, and the inevitable fever which cut down his working parties in a couple of weeks, moved him to declare to Gage, "I swear, Sir, every day I yearn for the ice of Canada!" The temperature reached ninety-eight degrees in mid-August, and the hospital proved its usefulness, but Haldimand could credit his reforms with the fact that there were only eight fatalities that month. Having moved the stockade, developed vegetable

21. Gage to Haldimand, May 8, June 4 and 13, 1767; Haldimand to Gage, June 16 and November 30, 1767; Haldimand to Hugh Wallace, November 30, 1767 and March 3, 1768; Account of Money Disbursed, March 24, 1767 to March 24, 1769, Accounts of Pensacola, 1767-1773, Haldimand Papers.

"GRAVEYARD FOR BRITONS," WEST FLORIDA, 1763-1781 353

gardens, built a hospital, and begun to drain the swamps and bring in fresh water to the garrison, he could boast, "I have the satisfaction of seeing that the sickness diminishes every day." The seriousness of the situation was apparent in the return of the deceased for the 31st Regiment. In two years (July 25, 1765 to July 10, 1767) that regiment lost six officers, 190 men, five officers' ladies, twenty-three other women, and forty-four children. Dysentery, dropsy, scurvy, and consumption accounted for some, but most succumbed to malignant and bilious fever. Medicine was in short supply as usual, and one consignment of hospital supplies sent from New York was lost in a shipwreck. Fortunately no new recruits arrived until October's cooler weather brought a general improvement in health. The newcomers introduced further complications, however, for they were badly infected with venereal disease.²²

To the harrassed medical staff of West Florida the closest approach to a solution of their problems seemed to lie in the acclimatization of troops destined to serve in the province. As early as February 28, 1767, Brigadier General Tayler ordered a meeting of the hospital staff to consider this matter. Dr. Lorimer, Surgeon Richard Dean of the 31st Regiment, and assistants George Brown and John Sommers advised the commandant that troopships should not sail from England for West Florida before mid-September, and that they should rendezvous at St. Christopher's in order to time their arrival for the first of December. As an alternative they suggested a January sailing and arrival no later than April 1. Tayler accepted the recommendations and urged the adjutant general's office to avoid sending troops to the colony between May and September.²³

When Haldimand took command in March, a month later, he promptly called the medics together, and they repeated their plea that troop arrivals in West Florida should be scheduled for "about the last of October, when that Climate is healthiest

22. Return of Deceased, July 10, 1767; Haldimand to Gage, June 16, July 4, 5, August 5, and September 1, 1767; Haldimand to Ross, August 6, 1767, Haldimand Papers.

23. Meeting of Surgeons, Pensacola, February 28, 1767; Tayler to Harvey, March 11, 1767, Haldimand Papers. This, rather than Lorimer's 1769 report, appear to be "the first written study of health conditions" in West Florida. See Harrell, "Colonial Medical Practice in British West Florida, 1763-1781," 545.

& the heat most supportable to an English Constitution. . . . By this means they may land at this place about the last of November or beginning of December, when this climate is much about the same temperature with England at the time they leave it. They will have a short agreeable winter before them, & be seasoned to the country next spring in the most gradual manner possible.”²⁴

At Haldimand's request, Lorimer submitted further detailed proposals for “preserving the health of the soldiers” under the headings of “Air and Aliment.” He urged the building of new two-story barracks with “piazzas” to protect the men from the sun and provide for ventilation. He called attention to drainage and “to cleanliness particularly what relates to the common necessaries.” As for “ailment,” Lorimer insisted that drinking water ought to be boiled, which would require the provision of firewood and “vessels of tin or iron, for copper will not do in this climate. He suggested the brewing of beer from spruce, pine tops, or sassafrass, and the distribution of small quantities of rum or grog to all working parties. A supply of fresh meat and vegetables was needed, and Lorimer suggested that the regulation issue of salt rations might be exchanged for wild fowl and venison brought in by the Indians. Fishermen might also be advantageously employed to supply the garrison. “But as the soldiers must live upon salt meat after all, mustard & veniger or sour-cROUT ought to be procured & serv'd to the messes” and soup provided for the sick and convalescent. For the hospital, Lorimer requested wine, brown sugar, lime or orange juice, barley, and oatmeal. The proper weekly allowance for a soldier's subsistence he put at seven pounds of bread, five pounds of beef, three pounds eight ounces of flour, two pounds of rice, and twelve ounces of butter, a generous diet which would have delighted any redcoat on the Gulf coast had it ever been available.”²⁵

Lorimer next set out the particular requirements of his hospital. Bedding, instruments, utensils, and “portable soup” should be provided from England; firewood, candles, or oil

24. Meeting of Surgeons, Pensacola, March 28, 1767; Haldimand to Gage, April 6, 1767, Haldimand Papers. The copy of the report forwarded to headquarters is dated March 31 in the Gage Papers.

25. Lorimer to Haldimand, c. April 1, 1767, Gage Papers.

“GRAVEYARD FOR BRITONS,” WEST FLORIDA, 1763-1781 355

should be furnished by the barrack-master; the surgeon should be free to purchase suitable fresh meat, oatmeal, and barley. One nurse should be on permanent duty, and others employed as necessary to assist the staff of one chief surgeon and six assistants. One clerk was to be in charge of hospital stores. Such an operation must be costly. Lorimer received 182.10.0 pounds p.a., and his hospital mates had annual salaries of 91.5.0 pounds. A further sum of \$2,152 was to be allowed for assistants and supplies, the largest item being \$1,600 for Madeira or port wine.²⁶

Ultimately, however, the health of the troops in West Florida depended upon the coming of cool weather, and in 1767-1768 it came with a vengeance. By late November, even General Haldimand was complaining that the cold in Pensacola was worse than it had been in Canada, and his subordinates were bewailing the 500 comrades they had buried during the past two years. Men living in huts without doors or windows suffered grievously and lacked even blankets for their beds. The brigadier's urgent plea for bedding elicited from the quartermaster general in New York the sour reply that troops fresh from Europe were often inclined to “grumble horribly” at the total lack of sheets in America. As for blankets, they were supposed to last for seven years, and only four years had passed since the last shipment to West Florida! In January 1768, the Pensacola temperature dropped to nineteen degrees, and then to seventeen degrees. Without beds or bedding, Haldimand wrote, “I don't know how a European constitution can stand it.” February's heavy rains sent forty men to the hospital, and recruits arriving in March, bringing their illness with them, were landed on Santa Rosa Island in order to achieve a practical quarantine system. All in all, Haldimand concluded, “the scorching heat of last summer and the severity of this winter [is] intollerable.”²⁷

The summer of 1768 was only less deadly than its prede-

26. Lorimer to Haldimand, April 27, 1767, Haldimand Papers; dated April 28 in the Gage Papers.

27. Haldimand to Quartermaster General Robertson, November 29, 1767; Robertson to Haldimand, October 5, 1767; Haldimand to Gage, January 16, 28, February 27, March 3, 1768; Haldimand to Thomas Willing, April 28, 1768, Haldimand Papers. Harrell errs in failing to observe the use of both Dauphin Island and Santa Rosa Island as quarantine bases during this period. Harrell, “Colonial Medical Practice in British West Florida, 1763-1781,” 557.

cessor. Surgeon James Gray, with the 21st Regiment at Mobile, reported his sick in a very sorry state. In spite of appeals to his superiors and to Dr. Lorimer, he was short of medicine; on August 8 he had but three days' supply on hand. The house being used as a hospital was filled with sick men but unprovided with bedding or utensils. Worse was to be feared - disaster - if the putrid fever should appear. In response to such pleas, Lorimer did his best to secure medical supplies, even to the extent of sequestering 14 pounds worth of medical instruments from Colonel Edward Maxwell's regiment on the grounds that his soldiers had stolen a kettle from the hospital at Pensacola!²⁸

From general to private, the decimated British regiments welcomed General Gage's decision to withdraw the bulk of British troops from West Florida in 1768, as part of a general reduction of forces in North America. The Mobile garrison - or hospital, as Haldimand described it - was transferred to Pensacola by September. Nine men died during the short trip, and the brigadier thought that never a regiment had more sick proportionate to its number. The 31st Regiment was in better shape by virtue of having a dozen or so men who were *not* sick.²⁹

The original plan called for three companies to remain in the colony, and Haldimand proposed that the medical staff should be reduced to one hospital mate at Pensacola and one at Mobile who would draw their supplies from the surgeon at St. Augustine. Lorimer was ordered to make these arrangements and to move the remaining men and supplies either to St. Augustine or England. It was soon evident that the brigadier was overly sanguine. It became necessary to appoint "a carrefull Woman," a nurse, to attend the sick at Pensacola and to assist Surgeon's Mate Brown,³⁰ and in February 1769, Haldimand ordered Lorimer to take up quarters in Mobile where he could "make proper observations on the disorders which have yearly attacked the troops of that garrison." The surgeon was instructed to keep a journal and to report "every observation and precaution which you think will tend to the preservation of the troops and new settlers." Immigrants were to be advised of the

28. James Gray to Chissolm, August 8, 1768; Maxwell to Haldimand, February 9, 1772, Haldimand Papers.

29. Haldimand to Gage, September 16 and 29, 1768, Haldimand Papers.

30. Haldimand to Gage, October 2, 1768; Hutcheson to Lorimer, November 8, 1768; Haldimand to P. Innes, January 1, 1769, Haldimand Papers.

"GRAVEYARD FOR BRITONS," WEST FLORIDA, 1763-1781 357

best health measures, and Haldimand hoped that Mobile would "in a short time be restored from the bad report it hath lately lain under."

Recognizing that Lorimer's private affairs might detain him briefly in Pensacola, the general gave him until April 20 to change his residence, but the doctor promptly appealed his case to Gage. As the medical corps had been reduced by four mates, and William Pemberton, who remained at Mobile, was most likely to fall ill at least once every autumn, Lorimer proposed sending Surgeon's Mate Brown to Mobile and remaining on duty at Pensacola himself. The thirty or so men at Mobile did not justify his presence there, he argued, and he could make the required observations from Pensacola and report in a very short time. Having "already suffered a great deal in this climate," Lorimer had no wish "to be confined for life to so disagreeable and so dangerous a situation." He pointed out that his commission directed him to Pensacola, the provincial capital, and, appealing to Gage's humanity and disinterest, he argued that his transfer to Mobile would have "no tendency to the good of the service."³¹

Haldimand was much put out by these dilatory tactics. He was willing to give Lorimer five months leave to go North for his health if he wished it, but he had orders from Gage to reduce the West Florida hospital staff to one surgeon and one mate. He needed Lorimer's services on the spot, and he wanted the junior hospital mate, Pemberton, separated at once.³²

Pemberton displayed a most commendable devotion to his duty, and with Lorimer's encouragement and support, he also appealed to General Gage for continuance at his post. He addressed himself to Dr. Lorimer in moving terms: "I have been full nine years in the service as Hospital Mate, and five years of that time in West Florida, where more or less every year I have had my share of the distempers of the country. I certainly judged that I came here to remain on pay till I could be better provided for. I am confident that it cannot be pretended I have ever failed the least in doing my duty; and now to be dismissed

31. Haldimand to Lorimer, February 14, 1769; Lorimer to Gage, February 22, 1769, Gage Papers.

32. Haldimand to Lorimer, March 4, 1769; Haldimand to Crofton, February 1769; Gage to Haldimand, March 14 and April 25, 1769, Haldimand Papers.

without so much as one day's pay or any allowance to defray my expences to England . . . seems very inexplicable indeed. . . . I hope therefore that it will not be construed as a breach of orders, if I should remain at Mobile till the pleasure of the Commander in Chief shall farther be known." Lorimer supported Pemberton's request, attesting to the fact that he had "always behaved as an attentive and humane man should, when intrusted with the lives of the King's Troops," and noted that he had been "almost as long a Mate as I have been a Surgeon."³³

Pending receipt of word from New York, Lorimer decided to obey Haldimand's orders, and he moved to Mobile in May, in time to feel the full effects of its sickly season. The utility of a second hospital mate at Fort Charlotte was obvious. At the beginning of the summer nearly a third of Captain Edward Crofton's little force was in the hospital, and Crofton felt it "indispensably necessary" to continue Pemberton at his post: the man was "indefatigable in the execution of his duty." Unwittingly, Crofton gave the game away when he added, "Doctor Lorimer, the properest judge of these matters, continually addresses me on this subject." Lorimer himself was not immune to illness, and Crofton reported that the doctor's "constitution is so much impaired that he will soon be obliged to retire to a plantation for the recovery of his health." The prediction came true in July when Lorimer fell victim to a violent attack of fever. He was removed to Elias Durnford's residence on the salubrious eastern shore of Mobile Bay, but suffering a relapse, he secured permission late in August to return to Pensacola, and Pemberton remained at Mobile to care for the resident detachment of the 31st Regiment. Lorimer reported that he was still quite weak in November, and as late of March 1770, he declared, "My state of health at this day is not so much confirmed as to be able to stand such an other shock."³⁴

Permanent relief from an onerous assignment was on the way. General Gage responded to Lorimer's appeal most cordially; he assured the surgeon that Haldimand's orders merely

33. William Pemberton to Lorimer, May 30, 1769; Pemberton to Gage, May 31, 1769; Lorimer to Haldimand, May 30, 1769, Gage Papers.

34. Crofton to Innes, July 8, 1769; Innes to Gage, August 19, 1769; Lorimer to Gage, March 15, 1770, Gage Papers. Lorimer to Haldimand, December 1769, Haldimand Papers. Hamilton, *Colonial Mobile*, 265, errs in stating that Lorimer spent six months in Mobile.

indicated the necessity of having a "skillfull Person" at Mobile. "I don't imagine the Brigadier meant or intended, that Mobile should be the constant place of Residence for the Chief Surgeon of the Province at all Times, especially when the Garrison of Mobile is reduced to a subaltern's command." Gage insisted, however, upon the reduction of the hospital staff in view of the general transfer of troops to East Florida.³⁵

General Haldimand had no choice but to acquiesce in the commander-in-chief's decision, but he insisted upon making the case clear to Gage, and he quite bluntly told him that Lorimer's desire to remain at Pensacola was politically motivated. Lorimer was a member of the Assembly, and according to Lieutenant Governor Montfort Brown, he was "uniquely occupied in forming a party there to oppose the Governor's measures." Brown had hoped that Haldimand would send Lorimer away, hence the surgeon's transfer to Mobile and Haldimand's offer of five months leave, but the brigadier felt that he could go no further without doing Lorimer an injustice. Neither could he replace his only surgeon, and so he asked Gage to leave Lorimer where he was. The general, finally enlightened and more than a little familiar with the ways of provincial politicians, replied, "If he is a Member of the Assembly I fear he will at times find means to repair to Pensacola whether we will or not."³⁶

By October the problem seemed on the way to a natural resolution as Gage decided to double the West Florida military complement and to add another surgeon's mate. Lorimer welcomed the news but regretted the loss of that "very deserving young man" Pemberton whom he now described as "the only one whose constitution seemed to agree with that unhealthy spot" Mobile. Pemberton withdrew to St. Augustine; Haldimand appointed another mate in his place, and Gage refused to approve his return to the colony unless more than one regiment was stationed there.³⁷

Dr. Lorimer's brief sojourn in Mobile sufficed to illuminate all of the local medical problems. Hospital space was short, so

35. Gage to Lorimer, May 26, 1769, Gage Papers.

36. Haldimand to Gage, July 6, 1769. The forms of this letter in the Gage and Haldimand Papers are significantly different. Gage to Haldimand, September 30, 1769, Gage Papers.

37. Gage to Haldimand, October 3, 1769, and July 7, 1770; Lorimer to Gage, March 15, 1770; Haldimand to Gage, April 18, 1770, Gage Papers.

the doctor gave up his own airy quarters for the care of the sick, but without medicine, or funds with which to purchase it, all was in vain. It was "upwards of two years" since West Florida had received any medical supplies from England, and what money was available went for bark which was issued to the sick to brew tea. If this medication was cinchona, in use among the Spaniards at this period, the malaria sufferers may have secured some relief, but British doctors were wary of the plant and sometimes refused to use it - apparently for no better reason than that it came from a Spanish source. Fortunately, Lorimer was able to dispatch a "very seasonable supply of medicines" to Mobile after he returned to Pensacola.³⁸

Lorimer's visit to Mobile also produced a lengthy "General Report," in accordance with Haldimand's orders, describing the physical and medical circumstances of the place.³⁹ Prefacing his remarks by a reiteration of the argument for acclimatization, Lorimer blamed military officialdom for the bad timing of the troop arrival and subsequent sickness of 1765, against which he had "publicly warned . . . at the War Office above two months before our embarkation." He then noted that under normal conditions few were ill at Mobile before June when bilious remitting (yellow?) and intermitting (malarial) fevers set in. These lasted through September when in 1769 two-thirds of the garrison was sick. With the coming of cold weather, fevers turned into fluxes (dysentery), dropsias, and cachexies (the result of dietary deficiencies). There was, he argued, no way to improve the health of the troops at Mobile with the human and medical resources at hand. The garrison was so small that anyone even slightly recovered from the ague must do guard duty and thus risk a relapse. Unable to consume a whole bullock before it spoiled, the little company was forced to go short on fresh meat, and whereas civilians could afford to purchase food to hasten the recovery of their strength when convalescent, the

38. Lorimer to Haldimand, May 30, 1769; Crofton to Haldimand, enclosing a note from Lorimer, October 13, 1769; Richard Nugent to Innes, September 1769, Haldimand Papers.

39. Lorimer to Haldimand, December 2, 1769, Haldimand Papers. Portions of this document are printed in Hamilton, *Colonial Mobile*, 266-68. Harrell notes that Hamilton edited his version of the report but not that she merely reprinted parts of Hamilton's version. Harrell, "Colonial Medical Practice in British West Florida, 1763-1781," 545.

"GRAVEYARD FOR BRITONS," WEST FLORIDA, 1763-1781 361

troops were too poor to do so. The surgeon observed that Fort Charlotte's location surrounded by swamp, pine woods, and the bay, was disastrous of itself. Something might be accomplished by clearing and draining the site and by raising costly two-storied barracks, but he despaired of any significant improvement ever being achieved. A military post on the east side of the bay would enjoy the obvious advantages of cool air and pure water, but the inconvenience involved seemed to outweigh these virtues. In sum, Lorimer looked upon Mobile as hopeless.

Neither considerations of imperial finance nor of regimental health finally determined the occupancy of Mobile. Scarcely had Haldimand settled his regiments on the Atlantic coast then they were ordered back to the Gulf coast to meet an Anglo-Spanish war scare. The return of the British army to West Florida in 1770, seems to have been accomplished with a minimal increase in sickness. Housing and sanitation reforms began to have a beneficial effect. Pensacola was relatively healthy, its population inured to the climate, its water supply improved, its barracks rebuilt according to Haldimand's plans, and during the four sickly months of summer troops were moved out to the rising ground called Red Cliffs. The civil authorities even displayed some interest in the maintenance of the hospital. Supplies were still a problem, however; the salt beef provided to the army was three years old, and rice frequently had to be substituted for flour. On one occasion Haldimand dipped into his own pocket to purchase flour for bread and was forced to guarantee the victualler's agent at Pensacola a penny a pound profit in order to secure his cooperation in selling the bread to the troops.⁴⁰

Mobile continued to suffer. Although the garrison, which was reduced to one officer, a sergeant, and twenty-four privates, lost only six men in the summer of 1770, many more women

40. Haldimand to Edward Codrington, June 11, 1770, Haldimand Papers. The suggestion by Harrell, based on Reverend Nathaniel Cotton's burial register, that the 1769-1770 period was "unusually healthy," ignores the removal of British troops who made up a major portion of the population of Pensacola. It would rather appear that mortality was proportionately as high as it had been in any normal year. Harrell, "Colonial Medical Practice in British West Florida, 1763-1781," 547-48, 557-58.

and children died. August was particularly bad. Captain Crofton reported twenty-one men and officers, including Hospital Mates Barry and Grant, ill. Lorimer visited Mobile, accompanied by his wife and a new hospital mate, Brown, and proposed sending the sick across the bay, but the commandant feared the spread of the disease. As the number of new sufferers rose to nine in one day, the surgeon insisted on moving at least a dozen men out of Fort Charlotte's pest-hole to Croftown. Brown was soon replaced by Hospital Mate John Sommers who remained in the colony until 1781, and Dr. Lorimer hastened back to Pensacola observing that even a brief sojourn at Mobile was sufficient to make him think of going North for his health.⁴¹

When Haldimand visited Mobile for an Indian congress in December 1771, he found that all of the officers and men stationed there had been ill during the preceding months, though none had died. A system of rotation with healthy troops at Pensacola offered an effective form of relief for the garrison at Mobile, and Croftown served as a recovery post for Mobile's sick, although the difficulties of transporting men and supplies across the bay severely reduced its usefulness. In 1772 the loss of six men in a canoeing accident in mid-bay made Haldimand think of abandoning the post altogether. Fort Charlotte was practically dismantled; troops were lodged in the officers' square, and the town was "almost entirely deserted" because of its unhealthy condition. Intermittent fever (malaria) continued to be the chief problem, and in 1772, Haldimand found it necessary to send a third medic to Mobile to care for the afflicted.⁴²

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41. Alexander McKenzie to Gage, c. April 1770; Haldimand to Gage, October 7, 1770, Gage Papers. Elias Durnford to Haldimand, March 9, 1770; Crofton to Haldimand, August 6 and 12, 1770; Lorimer's Return of Sick, August 10, 1770; Lorimer to Haldimand, November 5, 1770, Haldimand Papers; Great Britain, Historical Manuscripts Commission, *Report on American Manuscripts in the Royal Institute of Great Britain*, 4 vols. (London, 1904-1909), II, 324. Hereafter cited as HMC Report. Harrell cites with approval Elias Durnford's appeal for the establishment of a town at Red Cliffs and his epistolary puzzlement that nothing had been done toward that end by 1770. Harrell, "Colonial Medical Practice in British West Florida, 1763-1781," 546. Durnford was actually proposing that a town should be built on his own property - at government expense - and he was entirely cognizant of the reasons why this was not done.
42. Haldimand to Gage, December 28, 1771, and May 14, 1772, Gage Papers. Thomas Sowers' Report on Fort Charlotte, January 13, 1771; Return of Sick, Mobile, October 1, 1771; Haldimand to Gage, August 15, 1771, Haldimand Papers.

“GRAVEYARD FOR BRITONS,” WEST FLORIDA, 1763-1781 363

As a well-established West Floridian, Lorimer extended his interests from the practice of medicine and politics to the pursuit of natural science. Inspired by the ardor of John Ellis, the colony's royal agent and a botanist of international repute, Lorimer collected specimens of the local flora and noted such curiosities as “a beautiful kind of bean, which some of our sailors having eat of, were surprized with a vomiting and purging, just as another crew were by eating poke for sallad.” Although he admitted to being “no great botanist,” Lorimer frequently communicated with the American Philosophical Society in Philadelphia, and in 1769, he was elected to membership in that august body.⁴³ His connections with George Gauld, William DeBrahm, and Bernard Romans, who esteemed Lorimer's acquaintance as “a valuable jewel,” may have elevated the surgeon to the lower rank of colonial scientists, but any relationship with the peripatetic Romans was apt to be troublesome. In 1774, Lorimer was charged with having unwittingly assisted Romans in pilfering certain maps drawn by his friend Gauld. Romans' explanation of the affair was unsatisfactory, and when he joined the American rebels, West Florida Governor Peter Chester recommended that his salary of 50 pounds and his place as collector of “rare & useful productions in Physick and Botany” in the provincial establishment be given to Dr. Lorimer, a proposal which was duly approved by the colonial secretary.⁴⁴

So matters stood on the fever-ridden shores of West Florida when the American Revolution put a period to British domination of the Gulf coast. Peacetime problems were only aggravated by the influx of sickly troops from the northern colonies and the West Indies and by interruptions of supply due to hostile action.⁴⁵ Lorimer and his hospital mates became prisoners of Spain when Pensacola fell before Galvez' attack in 1781, and they

43. Robert R. Rea, “The King's Agent for British West Florida,” *Alabama Review*, XVI (1963), 141-53; American Philosophical Society, *Transactions of the American Philosophical Society*, I (1769), 250-54; *Proceedings of the American Philosophical Society*, XXII, Part 3 (1885), 20, 29, 35, 71.

44. Brooke Hindle, *The Pursuit of Science in Revolutionary America* (Chapel Hill, 1956), 177-78; P. L. Phillips, *Notes on the Life and Works of Bernard Romans* (DeLand, 1924), 27; *MPAED* Transcripts, VI, 485-88.

45. Harrell, “Colonial Medical Practice in British West Florida, 1763-1781,” 550-56.

were dispatched to New York with the survivors of the British garrison. Lorimer provided for a nurse aboard the hospital ship on which the wounded were evacuated, and Mate John Sommers' last service in Pensacola consisted of purchasing seven gallons of wine and four gallons of vinegar for the material consolation of the wounded men of the 60th Regiment. Dr. Lorimer secured a short-lived appointment as inspector of regimental hospitals in New York during the winter of 1782 - 1783, but with the coming of peace, he withdrew to England to join the throng of British subjects forcibly evicted from West Florida.⁴⁶

In the light of military records, it is difficult to agree with the view expressed by a recent writer that "Whitehall was sympathetic to the medical needs of the garrison of British West Florida," or that due to "the supervision of Dr. Lorimer, the military personnel in the province received the best medical care possible."⁴⁷ What relief from the natural disabilities of the place the suffering redcoat enjoyed was owing most directly to the efforts of a few hardy hospital attendants, men who could not escape from their onerous and dangerous duty, and to the practical directions of West Florida's only competent commanding officer, Brigadier General Haldimand, whose insistence upon ventilation, sanitation, and a balanced diet must have saved more lives than any eighteenth-century medical chest. Considering the penurious policy imposed by the government upon the American command, it is rather to be regretted that Haldimand's oft-expressed wish that West Florida might be entirely evacuated by the military was not fulfilled. In spite of the efforts of Farmar, Tayler, and Haldimand - not discounting the lengthy reports and interesting career of Dr. John Lorimer - the fever-ridden refugee camp that surrendered to Bernardo de Galvez was indeed a notable "graveyard for Britons."

46. HMC *Report*, II, 8, 187, 301, 324; IV, 124, 285, 314. Harrell failed to note Lorimer's subsequent activity but correctly guessed that he did not return to West Florida. Harrell, "Colonial Medical Practice in British West Florida, 1763-1781," 557. Lorimer died in London, July 20, 1795; he was then examining surgeon of the East India Company, Fellow of the Royal Society (London) and of the Royal College of Physicians (Edinburgh). *The Scots Magazine*, LVII (1795), 546.

47. Harrell, "Colonial Medical Practice in British West Florida, 1763-1781," 558.