

‘The Breath of Destruction’

Yellow Fever Epidemics and the Abolition Campaign in West Africa, 1828–1830

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Abstract

In the years 1823, 1829–1830, and 1837, West and West Central Africa had to contend with three devastating yellow fever epidemics that affected both slave dealers who had settled along the coast and anti-slave trade officials tasked with bringing the slave trade to an end. In this paper I argue that these epidemics had a profound impact on the actions of both sets of actors, and eventually on the expansion and demise of the slave trade in the region. By focusing on the actions of a myriad of Atlantic actors, I explore the ways in which cyclical epidemics of yellow fever were dealt with, emphasizing how prophylactic measures, treatments, and more generally, medical knowledge, were challenged, affected, and changed by the arrival of each of them.

Keywords

West Africa – yellow fever – epidemics – slave trade – abolition – Sierra Leone – Fernando Po

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The gale, which you fondly court to cool your burning brow, is the
breath of destruction.

It has passed over the valley of death, and comes heavy with the cold
damp of the channel house, to woo you to his court!

PETER LEONARD, *The Western Coast of Africa*, 66

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On the first day of July 1830, British Navy surgeon Thomas Butter wrote a letter to his father James, describing the harrowing events he had been forced to live through over the preceding months.¹ He told him how he had been apprehensive of being detained in West Africa, just as he was due to return to England, after concluding his work as a surgeon for the West African Squadron. Butter had reasons to be concerned, as it was well known that many of the vessels belonging to the West African Station had become infected with a new epidemic "malignant fever" that was decimating the crews of some of these ships. Butter's strategy of remaining at Ascension Island, in the hope of finding a quick passage to England proved useless, as a few weeks after taking this decision Commodore Francis Collier arrived on HMS *Sybil*, where at least 24 officers had perished in the previous weeks. Being in need to replace the Assistant Surgeon, who had died too, Butter was ordered to join the *Sybil*'s crew.

What came after is one of the best documented stories of epidemic yellow fever in the nineteenth century wrecking havoc on board of any vessel. Over the next few months more men were lost to the effects of yellow fever. As the vessel made its way along the coast of Africa, seizing new slave ships, new outbreaks of fever occurred. Every time Commodore Collier thought the epidemic was over, a new outbreak occurred, to his dismay and that of Butter and the rest of the crew, who were found in such a pessimistic state that the main surgeon on board, Dr McKinnal—who also left his account of the events—went as far as to drink a pint of vomit from a recently deceased sailor, in order to demonstrate that the disease was not transmitted by close contact with those who were sick.²

The story of the *Sybil* constitutes a central piece for anyone trying to put together the puzzle that was the yellow fever epidemic of 1828–1830 in the eastern Atlantic. During these two years, outbreaks of yellow fever occurred in well-known ports such as Gibraltar, Freetown, Fernando Po, and Bonny, while anti-slave trade patrol and slave trading ships carried the disease from one place to another, hindering both abolitionist policies and human trafficking activities. To be sure, the 1828–1830 outbreak was neither the first nor the last to affect these Atlantic spots and vessels. Another epidemic had caused devastation in 1823, and more would do so again in 1837 and 1845, upsetting both slave trading activities and efforts to bringing his odious commerce to an end.

1 Thomas Butter to James Butter. HMS *Sybil*, [Portsmouth], 1 July 1830. National Maritime Museum, Greenwich, London: AGC/B/24.

2 Alexander Bryson, *Report on the Climate and Principal Diseases of the African Station; Compiled from Documents in the Office of the Director-General of the Medical Department, and from other Sources, in compliance with the Directions of the Right Honorable The Lords Commissioners of the Admiralty* (London: William Clowes and Sons, 1847), 54–56.

This article makes two important points. Firstly, it argues that whenever yellow fever epidemics broke out during this period, they disturbed the implementation of abolitionist policies throughout the Atlantic. They did so in several ways, including putting off people from joining the anti-slave trade squadron and from going to West Africa, and by limiting the effectiveness of governors and slave vessels engaged in anti-slave trade patrolling. Secondly, and using the 1828–1830 outbreak as a case-study, it contends that yellow fever epidemics had a profound effect upon the overall course of British abolitionism in the Atlantic basin, also wrecking British Imperial dreams in parts of West Africa, notably in Fernando Po.

The ways in which yellow fever epidemics disturbed the implementation of abolition policies in the Atlantic, have hardly been discussed until today. The cyclical outbreaks that affected the eastern Atlantic between 1823 and 1845, transformed behaviors, altered agreed policies, and at times threatened the financial commitment to the abolition of human traffic in the Atlantic, by nations such as Great Britain, France and the United States. By 1831, the British had had several ships split into two squadrons, patrolling the western coast of Africa from Sierra Leone down to the Cape of Good Hope.³ Many of the Africans seized on these ships were resettled in and around Sierra Leone, while others were sent to other British colonies on both sides of the Atlantic, as laborers or soldiers.⁴

During this period, various settlements were attempted and abandoned and specific strategies to deal with slave traders were forsaken due, to a substantial extent, to the outbreaks of yellow fever and other epidemic diseases such as cholera, smallpox, and dysentery. On European and American cities, abolition activists and government officers saw promising policies and strategies collapse, and their own envoys and officials die in large numbers while trying to put in practice ideas that seemed perfectly appropriate at the time they had been discussed far away from the tropics. Perhaps no other case was most illustrative of these failures than their abortive attempt to resettle the Courts of Mixed Commission that had been established in Sierra Leone in the late 1810s, to the island of Fernando Po in the Bight of Biafra, just a few years later.

3 See, for example, Richard Anderson and Henry B. Lovejoy, eds., *Liberated Africans and the Abolition of the Slave Trade, 1807–1896* (Rochester: University of Rochester Press, 2020); and Maeve Ryan, *Humanitarian Governance and the British Antislavery World System* (New Haven: Yale University Press, 2022).

4 Tim Lockley, *Military Medicine and the Making of Race: Life and Death in the West India Regiments, 1795–1874* (Cambridge: Cambridge University Press, 2020).

1 Epidemics as Policy-Wreckers

As abolitionist policies were put into practice in the early decades of the nineteenth century, a host of problems began plaguing their predicted and desired developments. Maritime raiding, new shipbuilding technologies, and corrupt operations by officials belonging to governments that had committed to bringing the traffic to an end, were some of them.⁵ Nevertheless, it would not be farfetched to argue that the single main obstacle for the implementation of abolition in the Atlantic basin between the late 1810s and the late 1850s was the demoralizing effect that tropical endemic and epidemic diseases had upon those charged with enforcing abolition.

To medical practitioners, government officials and the general public, understanding the origin of these epidemics became a subject of paramount importance. By 1820, yellow fever had already become one of the diseases usually at the center of the debates between the contagionist and anti-contagionist camps.⁶ Frequent epidemic outbreaks on both sides of the Atlantic had driven practitioners like French doctor Nicholas Chervin to go as far as to carrying out international surveys to demonstrate that yellow fever was not a contagious disease.⁷

The epidemic outbreaks of 1823, 1828–1830, 1837–1838 and 1845 fed new qualitative and quantitative information to these debates, which continued unabated until the latter part of the nineteenth century, when Cuban doctor Carlos J. Finlay was able to establish that yellow fever was in fact transmitted by the mosquito *Aedes Aegypti*.⁸

5 Manuel Barcia and Effie Kesidou, "Innovation and Entrepreneurship as Strategies for Success among Cuban-based Firms in the Late Years of the Transatlantic Slave Trade," *Business History* 60, no. 4 (2018): 542–561.

6 See, among others: Erwin H. Ackernecht, "Anticontagionism Between 1821 and 1867," *Bulletin of the History of Medicine* 22, no. 5 (1948): 562–593; Terence Renger and Paul Slack, eds., *Epidemics and Ideas: Essays on the Historical Perception of Pestilence* (Cambridge and New York: Cambridge University Press, 1992); Alison Bashford and Claire Hooker, eds., *Contagion: Historical and Cultural Studies* (London: Routledge, 2002); Mark Harrison, *Contagion: How Commerce Has Spread Disease* (New Haven: Yale University Press, 2013); Margaret DeLacy, *Contagionism Catches On: Medical Ideology in Britain, 1730–1800* (London: Palgrave MacMillan, 2017).

7 See, for example, Bartolomé Segura to Chervin. [Santiago de Cuba], n/d [1819]; José Joaquín Navarro to Chervin. Santiago de Cuba, 28 February 1819; and Antonio María Pineda to Chervin. Santo Domingo, 6 August 1818. National Library of Medicine, Bethesda, Maryland. Nicholas Chervin Papers. Series 2. MS.C.20. Box 1, folder 7. "Letters from Haiti and Santo Domingo."

8 Mariola Espinosa, *Epidemic Invasions: Yellow Fever and the Limits of Cuban Independence, 1878–1930* (Chicago: University of Chicago Press, 2009), 56–63.

Discussions about the origins of yellow fever epidemics in particular became central for the medical practitioners of the time—regardless of their interest in the debates around the issue of contagion—as they provided them with arguably the only viable way into understanding the characteristics of the disease. Not surprisingly, every time an outbreak took place anywhere in the Atlantic, medical practitioners rushed to provide theories about its origins; reasons that varied from blaming the unhygienic conditions found in the hulks of slave ships to accusing people of sensual excesses and lack of temperance.⁹

The origins of outbreaks along the coast of West Africa were also widely discussed. The 1823 outbreak in Sierra Leone, for example, was reported to have begun in December 1822, when the harbor master of Sierra Leone came down with it. In the next few weeks and months, a single case turned into a devastating epidemic, confounding local medical practitioners who were not able to determine its origin with any degree of certainty. Various theories were presented at the time. Some believed that the disease had been brought from the Mediterranean by a merchant ship, while others suggested that it had originated at Timbo, an island on the Rokkel River.¹⁰ Ultimately, and as in every other instance, medical practitioners remained perplexed by the way the disease had suddenly invaded and disseminated throughout the British settlement and to some of its vessels, like HMS *Bann*.¹¹

9 Dudley, for example, suggested that "... insect vectors could remain active in the warmth between decks." Sheldon F. Dudley, "Yellow Fever, as seen by the Medical Officers of the Royal Navy in the Nineteenth Century," *Proceedings of the Royal Society of Medicine* 26, no. 4 (1933), 449; while both Audouard and McKinnal were firm believers on the role that rotten wood and other organic matter found on ships' bowels, had on the beginning of epidemics. Mathieu F.M. Audouard, "Mémoire sur l'origine et les causes de la fièvre jaune, considérée comme étant principalement le résultat de l'infection des bâtiments négriers, d'après les observations faites à Barcelone en 1821, et au Port-du-Passage, en 1823," *Revue Médicale Française et Étrangère* 3 (1824), 360–408; and Robert McKinnal, "On the Origin, Progress, and Termination of a malignant Yellow Fever, which lately affected the Crew of His Majesty's Ship Sybille on the Coast of Africa, &c.," *Medico-Chirurgical Review* (October 1830): 38–41.

10 Just a few months before Barcelona had been at the center of another yellow fever outbreak, a circumstance that could give some credibility to this theory. Juan Francisco Bahí, *Relación médico-política sobre la aparición de la fiebre amarilla, á últimos de julio y principios de agosto de 1821, en las tripulaciones de los buques del puerto de Barcelona, y sus progresos en la Barceloneta é introducción en la ciudad* (Mataró: Imprenta de Juan Abadal, 1821).

11 James Boyle, *A Practical Medico-Historical Account of the Western Coast of Africa: Embracing a Topographical Description of its Shores, Rivers, and Settlements, with their Seasons and Comparative Healthiness; Together with the Causes, Symptoms, and Treatment, of the Fevers of Western Africa; and a Similar Account Respecting the other Diseases which Prevail There* (London: S. Highley, 1831), 264–269.

The 1837–1838 outbreak was equally impenetrable for medical practitioners along the West African coast, although this time the epidemic occurred against a morbid transatlantic background that featured similar outbreaks in Havana, New Orleans and Guyana, among other places. In West Africa, the epidemic was blamed on the barque *Mary*, which was reported to have arrived in Freetown in December 1836, already infected.¹² The disease spread quickly among the populations of Sierra Leone and other parts of West Africa. In at least one case, it was well documented that the crew of HMS *Bonetta* carried the disease from Sierra Leone to Ascension, where at least four of them, including the vessel's surgeon, died.¹³ Until today their resting place on the island is known as the Bonetta Cemetery.

In what it was already considered to be a cyclical occurrence, yellow fever struck again in West Africa in 1845, first infecting the crew of HMS *Eclair*, and then the island of Boavista, where the *Eclair* took its casualties soon after becoming aware that they were, indeed, carrying yellow fever on board.¹⁴ The 1828–1830 epidemic, too, fitted the cyclical theory that propositioned that yellow fever epidemics struck the coast of Africa approximately every seven or eight years (1823, 1829–1830, 1837–1838 and 1845). Exactly as it happened with the other outbreaks, in spite of their best efforts, medical practitioners were unable to pinpoint its origins.

Remarkably, and in spite of what it was nothing short of a guessing game, some empirical observation and evidence-based examination of the reasons behind fevers in general, resulted in valuable advice for those who visited or lived in these regions. The clearing of swamps, for example, was advised as a necessity for each of the European settlements along the African coast. It was supposed that many of the tropical diseases that affected them there were the result of the poisonous and putrid miasmatic emanations that came out of corrupted organic matter found in swamps and along rivers and the sea.¹⁵ Unintendingly, though, the clearing of swamps eliminated mosquito breeding grounds, and therefore was likely to lead to a lowering of morbidity and mortality associated with mosquito-borne diseases such as yellow fever, malaria, dengue fever, etc.¹⁶

12 Robert Boyce, "The History of Yellow Fever in West Africa," *The British Medical Journal* 1, no. 2613 (January 28, 1911): 182.

13 Manuel Barcia, *The Yellow Demon of Fever: Fighting Disease in the Nineteenth-Century Transatlantic Slave Trade* (New Haven: Yale University Press, 2020), 148–149.

14 K.D. Patterson, "Yellow fever epidemics and mortality in the United States, 1693–1905," *Social Science & Medicine* 34, no. 8 (1992): 855–865.

15 Ajesh Kannadan, "History of the Miasma Theory of Disease," *ESSAI* 16, article 18 (2018). Available at: <https://dc.cod.edu/essai/vol16/iss1/18>

16 Barcia, *The Yellow Demon of Fever*, 37–40.

A degree of caution while undertaking boating activities up rivers was also recommended, and to an extent, one can speculate that by wearing more appropriate clothes and by lightning fires during the nights, once again mosquitoes could be kept in check. Other measures such as ventilation and fumigation also contributed to reduce the effects of some diseases associated with vector-carriers other than mosquitoes.¹⁷

While these prophylactic measures became second nature to most of those engaged on the transatlantic slave trade and its suppression, they were not always understood back in the centers of power in Europe and the Americas. The yellow fever epidemic of 1828–1830, provides a glimpse into the miscommunication that often plagued the implementation of abolitionist policies in the Atlantic basin. From mid-1829, Commodore Francis Collier, who was in charge of the West African squadron spent months tangled in discussions with the British Admiralty, from where he had received a number of orders that were so impracticable, that he decided not to implement them and, eventually, to contest them.

While Collier's bosses in London wanted the squadron to use the island of Ascension as their base, especially to get supplies and water, Collier had to fight back and insist, time and again, that Ascension was unsuitable for this purpose, as it did not have enough water to provide the entire squadron. Instead, Collier proposed to use St. Helena as their provision station in the region, where all the conditions required by the squadron's vessels, including carrying out frequent repairs, were met.¹⁸

Even more detached from reality was another order received by Collier in January 1830, during the height of the epidemic, to take his ship "into some river or other spot to clean her better, fit the caps and catheads and repair her other defects." To Collier this was just too much. He replied right away in a stern tone, stressing that there was no river within his station "where a ship could proceed with safety for that purpose, except Sierra Leone, where even prior to the malignant and destructive sickness which even yet prevails to an alarming extent, I should have thought it highly imprudent to venture, as scarcely a merchant ship has visited it without suffering most severely from sickness."¹⁹ Collier evidently believed that this order denoted a profound ignorance of what the real challenges of implementing abolition in an exceedingly morbid environment entailed. He concluded his letter by pointing out that "the whole of the rivers

17 Bryson, *Report*, 132; Barcia, *The Yellow Demon of Fever*, 43–45.

18 Francis Collier to J.W. Croker. HMS Sybille, West Bay, Prince's Island, 6 January 1830. The National Archives, Kew, London: Admiralty, 1/1.

19 Ibid.

on the coast are also considered at all times sickly and more particularly so this year," an opinion that was widely shared among officers and medical practitioners attached to the West African Squadron at the time.²⁰

Time and again, disease, and more specifically some epidemic outbreaks, determined the actions and policies conducted by those involved in abolishing human trafficking along the African coast. The yellow fever epidemic of 1828–1830 was perhaps the clearest example of how a pre-determined policy, thought out in London and devised under the influence of deceptive fragments of information, failed on virtually every single count once the Royal Navy attempted to put it in practice.

2 The Sierra Leone v. Fernando Po Debate

Already in the late 1810s it had become apparent to the British, that their recently established settlement at the mouth of the Sierra Leone River was fraught with all sorts of problems.²¹ Disease, in particular, proved a sturdy and durable foe that just a few years later almost derailed the very existence of the colony. It was, however, the yellow fever epidemic of 1823 the one event that led to an acceleration of discussions about the morbidity and mortality—especially among white people—on the settlement, and about the need to find an alternative site to relocate the recently established Courts of Mixed Commission, tasked with receiving slave vessels captured by anti-slave trade patrols and the recaptured Africans they carried, to some other healthier spot along the West African coast.

Initially, a number of places were contemplated. The Isles of Lôs, for example, was discussed by British government officials and by the British press. Both the Gambia and Cape Coast, the two other major British settlements in the region were also considered. All, however, were discarded as their respective epidemi-

20 Ibid. See among others Boyle, *A Practical Medico Historical Account*, 6; Herbert Gilliland, *Voyage to the Thousand Cares: Master's Mate Lawrence with the African Squadron, 1844–1846* (Annapolis, MD: Naval Institute Press, 2004), 32; Journal kept by Ernest de Cornulier. French Navy, 1822–1823. National Maritime Museum, Greenwich, London: LOG/F/4; and Augustus Arkwright to his Grandfather. HMS Prompt, becalmed off Sierra Leone, 7 November 1842. Derbyshire Records Office, Matlock: D5991/10/74.

21 See, for example, Bronwen Everill, *Abolition and Empire in Sierra Leone and Liberia* (New York: Palgrave MacMillan, 2013); Pedraic X. Scanlan, *Freedom's Debtors: British Antislavery in Sierra Leone in the Age of Revolution* (New Haven: Yale University Press, 2017); and Richard Anderson, *Abolition in Sierra Leone: Re-Building Lives and Identities in Nineteenth-Century West Africa* (Cambridge: Cambridge University Press, 2020).

ological histories indicated that they were likely to be just as morbid and lethal as Sierra Leone, or possibly even worse. As one place after another was rejected, the idea of moving the Courts to the island of Fernando Po, in the Bight of Biafra began to gain some traction, especially among those who had either opposed or been reluctant to support abolitionist efforts in the Atlantic. To this group of politicians and businessmen, the position of Fernando Po resulted in appealing from a financial point of view. Not only was the island within a few miles of the mouth of the Niger River, but it also belonged to Spain, and so by getting hold of it and colonizing it, they saw an opportunity to further their free trade interests while simultaneously indulging their imperial dreams in Africa.²²

Ibrahim K. Sundiata has contended that the Fernando Po experiment began as an “attempt to prevent African deaths on the high seas,” as the main argument of those in favor of the relocation was that Royal Navy ships made many of their captures in that region and then took weeks to get back to Sierra Leone, due to a combination of winds and unfavorable sea currents.²³ While this statement remains accurate, David Lambert has stressed how further expansionist interests and fears by the Imperial lobby in London, led by James MacQueen, led its members to argue that “... unless it colonized Fernando Po, Britain would find itself marginalized in West Africa by imperial rivals.”²⁴

The debate around the potential relocation of the Courts to Fernando Po raged for years and included a substantial amount of correspondence between London and Madrid, from at least 1822. That year, Sir George Collier visited Fernando Po and cautiously reported that while the native residents seemed to be healthy, such appearance “cannot determine what effects the climate might produce on Europeans.”²⁵ That the relocation to Fernando Po was much more than a simple humanitarian and necessary transfer became increasingly apparent when, in January 1825, a number of merchants of the city of London sub-

22 David Lambert, “Sierra Leone and other sites in the War of Representation over Slavery,” *History Workshop Journal* 64 (2007): 103–132.

23 Ibrahim K. Sundiata, *From Slaving to Neoslavery: The Bight of Biafra and Fernando Po in the Era of Abolition, 1827–1930* (Madison: University of Wisconsin Press, 1996), 34.

24 Lambert, “Sierra Leone,” 123.

25 “Sir George Collier’s report among the papers presented to Parliament by the Admiralty in 1822.” The National Archives, Kew, London: Colonial Office, 325/37. Discussions on the ways in which yellow fever seemed to affect less the African than the European were widespread at the time. See Rana Hogarth, *Medicalizing Blackness: Making Racial Difference in the Atlantic World, 1780–1840* (Chapel Hill: The University of North Carolina Press, 2017), 17–80.

mitted a prospectus for a joint stock company concerned with the colonization of the island, under the name of "Gold Coast Association," to Lord Bathurst.²⁶ The reports sent by Collier and his successor in charge of the West African squadron, Robert Mends, combined with the proposals made by London businessmen, and supported by newspaper articles that claimed that the island had undisputable advantages over Sierra Leone, led the conservative government of the Earl of Liverpool to take action.²⁷

In April 1826 the British Ambassador in Madrid, Frederick Lamb, brought the proposals for the relocation of the Courts to Fernando Po before the Spanish Foreign Minister, Mariano Téllez-Girón, Duque del Infantado. This first approach was arguably well received by the Spanish, who apparently did not raise any issues regarding their territorial rights over the island during the exchange.²⁸ As a result, the British saw an opening, subsequently sending Captain William Owen to carry out a survey of the island that same year, "for the purpose of forming the projected Establishment" there.²⁹

Between 1826 and 1828 the British continued to strengthen their hold of the island. In February 1827, the Courts of Mixed Commission in Sierra Leone were officially informed of their impending transfer to Fernando Po, and in June the representatives of Spain, Portugal and the Netherlands—Britain's partners within the Courts—in London, were told to prepare for the imminent relocation.³⁰ It was around this time that the Spanish eventually came to realize the situation they now found themselves in. So, in August, the Spanish Envoy Extraordinaire to London, Narciso Heredia, Conde de Ofalia, began messaging the British Government in an attempt of forcing a purchase of the island. Although the British initial response was to refuse any sort of discussion that would slow down the relocation process, eventually the Earl of Aberdeen was compelled to ask permission from the Spanish to start the relocation process in

26 "Prospectus from the merchants of the city of London submitted to Lord Bathurst, for a Joint Stock Company under the name of Gold Coast Association." January 1825. The National Archives, Kew, London: Colonial Office, 325/37.

27 In an article published in the *Morning Chronicle* on 5 October 1825, its author claimed, among other things, that the island was healthier than Jamaica, also raising the possibility that should the British fail to occupy and colonize the island, the Americans would probably take possession of it. Africanus, "Proposed Settlement off the African Coast." *Morning Chronicle*, Liverpool (5 October 1825): 3.

28 "Memoranda regarding the state of H.M. Colony at Fernando Po during the period since June 1829. 24 July 1831." The National Archives, Kew, London: Colonial Office, 325/37.

29 Ibid.

30 Ibid.

September 1828.³¹ The Spanish agreed only under the condition that the British would acknowledge in writing that they still had undisputed rights over the island.

The British government, predictably, refused to accept such a condition and continued the relocation scheme through 1829, in breach of international laws, but arguing that their cause was a humanitarian one first and foremost, that would not be stopped by technicalities. It is ironic, then, that this clear imperial grab carried out under the guise of humanitarianism, was to be thwarted by a combination of African mosquitoes and sandflies, and by the reckless behavior of one of their own.

3 “More Like Ghost Like Men.” The 1828–1830 Yellow Fever Epidemic

Just as the development of the new settlement in Fernando Po was getting underway, a yellow fever epidemic began raging across the Eastern Atlantic. The first epidemic outbreak was recorded in mid-1828 in Gibraltar. There, Governor George Don had to deal with the sudden development of a “malignant fever” which had almost certainly been brought by one of the many vessels that visited the British garrison.

The epidemic was devastating. Governor Don saw several officers under his command, including a number of medical practitioners, succumb to the disease within a few weeks. By October the situation was overwhelming. British surgeon William Pym, Superintendent General of Quarantines, who had been considered as the main authority on the disease since the publication in 1815 of his *Observations upon Bulam Fever*, arrived in the colony with the intention of supporting Governor Don implement quarantine measures, in the hope of stopping the disease from spreading.³² By December, Don had ordered the immediate construction of three new hospitals, one in Windmill Hill and two “in the southern point of Buena Vista.”³³

By the time Pym had left and the outbreak had been contained in 1830, British officers rejoiced at their effective management of the epidemic, and

³¹ Ibid.

³² William Pym, *Observations upon the Bulam Fever, which has of late years prevailed in the West Indies on the Coast of America, at Gibraltar, Cadiz, and other parts of Spain: with a collection of facts proving it to be a Highly Contagious Disease* (London: J. Callow, 1815). See also Gavil Milroy, “Operation and Results of Quarantine in British Ports since the Beginning of the Present Century (continued),” *Association Medical Journal* 1, no. 29 (1853): 635–639.

³³ George Don to George Murray. Gibraltar, 19 December 1828. Gibraltar National Archives, Gibraltar: Despatches from Gibraltar, 1828.

their success in stopping its spread beyond Gibraltar. Historical evidence, however, brings this success into question, as only a few months later yellow fever broke out again at Freetown, a port that had direct and frequent links with Gibraltar. More to the point, reports from Gibraltar's authorities confirm that the quarantine established there was porous at best, with at least one recorded case of a Spanish vessel bound for the African Atlantic coast leaving port, just as the epidemic was at its height.

The vessel in question was the *Despejado*, which had arrived in Gibraltar from Barcelona on October 18, with a view of "fitting for the slave trade."³⁴ Soon after its arrival, Governor Don was informed of the suspicious character of the ship, commanded by one Antonio Constantí, which was "receiving gunpowder in barrels"; a circumstance that led Don to order an investigation into what the ship was doing in Gibraltar and where it was headed afterwards.³⁵ William Sweetman, the captain of the port, carried out an inspection as thorough as it was possible at the time, as he lacked resources and people due to the raging effects of the epidemic outbreak. He consulted the Spanish Consul in Gibraltar and checked all the vessel's papers, concluding that they were legal, and that its patent was signed by the King of Spain himself.³⁶ The suspicions, however, did not go away, and the ship's captain, seeing an opportunity to flee the British investigation, thanks to the difficulties created by the yellow fever for the port authorities, sailed away as soon as he was able to.³⁷ From there, the *Despejado* went to West Africa, arriving in River Gallinas on November 23, and thereafter going to Little Bassa, where it arrived three days later, and finally reaching Whydah on December 6.³⁸

Only a few months later, in May, a new outbreak of yellow fever began in West Africa, the destination of the *Despejado* and likely other vessels that had visited Gibraltar in the previous months, just as the yellow fever outbreak at the

34 Don to Murray. Gibraltar, 8 April 1829. Gibraltar National Archives, Gibraltar: Despatches from Gibraltar, 1829.

35 Colonel L.R. Chapman to William Sweetman (captain of the port). Civil Secretary's Office. Gibraltar, 21 October 1828. Gibraltar National Archives, Gibraltar: Despatches from Gibraltar, 1829.

36 Sweetman to Chapman. Gibraltar, 25 October 1828. Gibraltar National Archives, Gibraltar: Despatches from Gibraltar, 1829.

37 J. Jones Stowell to Chapman. Gibraltar, 19 January 1829. Gibraltar National Archives, Gibraltar: Despatches from Gibraltar, 1829.

38 Antonio Constantí to José Martorell y Cía. Gallinas, 25 October 1828. The National Archives, Kew, London: Foreign Office, 315/75. Multiple letters written by Constantí's soon after arriving at Whydah can also be found in the same document. See also, Martin Rodrigo, "El pirata Antonio Constantí y su falucho *Despejado*." Unpublished.

British garrison was out of control. Although the origins of the outbreak of fever in Freetown and other parts of the Upper Guinea Coast are difficult to fathom, it is possible that the fever had been imported from Gibraltar. Medical practitioners and the wider public at the time certainly had various theories as to where it had begun. The inhabitants of Freetown were quick to blame the Kings' Yard for Liberated Africans, located in the center of the town. They were even more precise in allocating the blame, when they picked three recently arrived slave ships—the *Hirondelle*, the *Mensageira*, and the *Panchita*—as its probable origin. In truth, and according to medical reports, all three had arrived with high numbers of people suffering of dysentery, ophthalmia, and skin ulcers, but none had brought any sort of fevers into Sierra Leone.³⁹

To medical practitioners based at Sierra Leone, like Robert Boyle, the outbreak could have been caused by the arrival of HMS *Eden* from Calabar and Bonny, where it had been engaged in anti-slave trade patrolling operations, and whose crew was suffering from various ailments upon their arrival in Freetown.⁴⁰ Two years later, however, Boyle had concluded that this theory was highly unlikely, as he considered that nobody with any common sense could “seriously believe that bowel-complaints, craw-craw, or even Fernando Po ulcers (...) could possibly be productive of a fever” that came accompanied by “vomit, yellowness of skin, red tongue, and pain and irritation in the superior part of the chest.”⁴¹ Ultimately, Boyle and other colonial officers concluded that the epidemic had probably originated in Timbuktu, from where it had spread to Jenni, Futa Toro, Futa Jallon and from there to Freetown.⁴² Albeit this theory may have had some truth in it, the possibility that the epidemic was brought to Sierra Leone by a vessel coming from Gibraltar seem to be just as viable.

The yellow fever epidemic outbreak at Sierra Leone coincided with the early days of the relocation of the Courts of Mixed Commission to Fernando Po, where Captain Owen had already managed to promote a British settlement at Clarence Cove, where some enslaved Africans seized from slavers had already

39 James Badgley and W.M. Burn. Survey held at Fernando Po, on the state of the slaves on board the “Mensajeira,” 19 February 1829. House of Commons Parliamentary Papers: Corresp. 1829 (Class A), 59. See also Bryson, *Report on the Climate*, 86.

40 HMS *Eden* had been off the Calabar River in January, and cruising off Bonny, where its tender, the *Cornelia* had captured the *Mensageira*, one of the three slave ships blamed for the Freetown outbreak, in February 1829. Henry Ricketts and W.M. Smith to Lord Aberdeen. Sierra Leone, 16 June 1829. House of Commons Parliamentary Papers: Corresp. 1829 (Class A), 58.

41 Boyle, *A Practical Medico Historical Account*, 241–242.

42 Ibid., 258.

been relocated, thanks to Owen's perch for floundering British and international laws.⁴³ At the time, relocation plans had all the wind on their sails. The island still retained a reputation of being healthier than Sierra Leone, in spite of various reports of being a source for dangerous skin ulcers—almost certainly instances of leishmaniasis—that affected those who were bitten by “an insect on shore”—almost certainly sandflies.⁴⁴

Between 1828 and 1829, the relocation “short-lived and tragic experiment,” as it has been called by Robert T. Brown, was almost a success. Owen's unorthodox methods of pursuing and seizing slave ships, led to more than 20 captures.⁴⁵ In truth, these methods, that according to some accusations made by captured slave traders, also included torturing, seem to have had a significant impact on the withdrawing of slave traders from the region.⁴⁶ According to Ibrahim K. Sundiata, Owen activities and the establishment of Clarence Town drove slave traders away from the area, since “navigationally, it was impossible for traffickers to cruise the Bight without the very high possibility of capture.”⁴⁷

Just as the Fernando Po settlement seemed to be destined for success, HMS *Eden* and HMS *Champion* arrived from Sierra Leone, carrying yellow fever with them. The *Eden*, Owen's ship, had been there delivering a slave ship, while the *Champion* had stopped at Freetown for a few days, before continuing for Clarence Town. Both seem to have been infected by the time they arrived in the Bights. These two voyages would change the face of British abolition in the region for decades to come. Clarence Town, being still an incipient settlement was viciously affected by a new yellow fever outbreak, which also affected

43 Owen often acted in an illegal manner, relocated Africans without taking them first to the Courts of Mixed Commission in Sierra Leone, and often “removed the stores from captured ships before he sent them to Freetown.” More to the point, in some cases he did not bother to send the vessels to Freetown at all. Robert T. Brown, “Fernando Po and the Anti-Sierra Leonean Campaign: 1826–1834,” *The International Journal of African Historical Studies* 6, no. 2 (1973): 258.

44 “Naval,” *Western Times*, (10 May 1828): 4.

45 For a detailed examination of Owen's role and methods during the settlement of Fernando Po, see Jeff Pardue, “Antislavery and Imperialism: The British Suppression of the Slave Trade and the Opening of Fernando Po, 1827–1829,” *Itinerario* 44, no. 1 (2020): 178–195.

46 Brown, “Fernando Po,” 258.

47 Sundiata, *From Slaving to Neoslavery*, 31. Owen also attempted to attack some slave dealers who conducted their operations nearby. In 1830, just before Owen was asked to return to England, Governor Edward Nicholls had to dissuade him from bombarding King Ephraim of Calabar with rockets, after they had a disagreement over merchandise landed by the slave ship *Venus*. Collier to Croker. HMS Sybille, Ascension, 25 May 1830. The National Archives, Kew, London: Admiralty, 1/1.

a number of West African squadron vessels, including HMS *Hecla* and HMS *Sybil*, both of which arrived at Fernando Po only a few days after the *Eden* and the *Champion*.

The so-far prosperous colony was soon engulfed by disease and death, as most Europeans arriving in it, died within weeks or ended up looking “more like ghosts than men.”⁴⁸ The new governor, Colonel Edward Nicholls, who had replaced Captain Owen just a month before the epidemic broke out, soon found himself incapable of fighting the disease and the slave trade at the same time, while witnessing the rapid decay of the colony, where most white inhabitants perished within a few weeks.⁴⁹ As people died around him, and the prospect of moving forward with the relocation of the Courts of Mixed Commissions to Clarence Town receded, Governor Nicholls too found himself bed ridden.

Nicholls, who was so ill that for months he was not able to speak, seems to have refused to accept the demise of the settlement he had been entrusted with. In 1831, it was reported that during that time he “must have laboured under some delusion, for he used to threaten those who dared to tell him he was sick.” It was also pointed out that “whilst people were dying around him he would use the most violent language to anyone who complained that the place was unhealthy.” This report from 1831, was devastating for the imperial lobby, as it pointed out in sharp details, how Fernando Po had gone from being a promising proto-colonial station, to a place where, according to British Naval Surgeon Peter Leonard, “... the curse of Africa soon finds out the unthinking victim,” and where “Death, with its unsparing scythe, cuts the slight thread of its existence.”⁵⁰

The physical demise of Fernando Po did not take long to make it into the halls of power in London and onto the British press. The destructive epidemic of yellow fever that had killed virtually every white inhabitant of the colony, was soon seized by the abolitionist lobby to highlight again the advantages of Sierra Leone over Fernando Po. As a matter of fact, Fernando Po was thereon represented in the British press as a “new Bullam,” in reference to the island where a first, large yellow fever epidemic had frustrated a British humanitarian-inspired settlement along the West African coast decades before.⁵¹ Combined

48 “Memoranda regarding the state of H.M. Colony at Fernando Po.”

49 “Fernando Po,” *Morning Post* (9 March 1830): 4.

50 Leonard, *The Western Coast of Africa*, 67.

51 “Fernando Po,” *Morning Post* (11 December 1829): 4; and “Fernando Po,” *Morning Post* (9 December 1831): 4. See also Billy G. Smith, *Ship of Death: A Voyage that Changed the Atlantic World* (New Haven: Yale University Press, 2013).

with the legal issues surrounding the lawful possession claims of both Spain and Britain to the island, the 1829 outbreak wrecked imperial dreams of men like James MacQueen and others, and consolidated Sierra Leone as the seat of British abolitionist and colonial ambitions in West Africa.

But there is more to the story of this epidemic and the ways in which it transformed abolition efforts along the African coast. The manner in which the outbreak affected some of the ships of the West African Squadron did not go unnoticed among medical practitioners, politicians, and the press, as the fate of the crews of HMS *Sybil*, HMS *Eden* and HMS *Hecla*, in particular, were widely discussed in years to come.⁵² Deaths resulting from yellow fever on these three vessels were extremely high. Captain Owen's ship, the *Eden*, reported 99 deaths in only a few months. Years later, one of his officers, Lieutenant Samuel Mercer, wrote to the Earl of Minto recounting his eight years of service under Captain Owen on board HMS *Leven* and HMS *Eden*. Among the actions he recalled were his participation in the colonization of Fernando Po and on the survey of the African coast. In order to make his case for a promotion to the rank of Commander, Mercer keenly pointed out that he was the only left survivor, except Owen himself, who had undergone "both services in the *Leven* and *Eden*." Mercer also complained of how his constitution had been "materially injured" from the effect of the African climate and particularly from having suffered yellow fever.⁵³

The situation on the *Hecla* and the *Sybil* was similar. The former lost 39 men during that year's outbreak, including its commander, Captain Thomas Boteler, while the latter suffered 57 deaths before the end of 1829, and then 39 during the first few months of 1830. The story of the beginning and progress of the yellow fever epidemic on the *Sybil* can perhaps be traced with more depth than any other epidemic on any other ship during the first few decades of the nineteenth century, as multiple witnesses, including two surgeons and its commander, left accounts of the chaos created by the outbreak on board.

According to these multiple accounts, the *Sybil* had had a clean bill of health until its arrival in Fernando Po in June 1829. Since taking over as its commander in December 1826, Commodore Francis Collier had taken every possible measure to keep the ship in the best possible state of health. In May 1827, for example, he ordered the surgeon and assistant to inspect the vessel's

52 See: Philip D. Curtin, "Epidemiology and the Slave Trade," *Political Science Quarterly* 83, no. 2 (1968): 190–216; and Marcus Rediker, *The Slave Ship: A Human History* (London: Penguin, 2007).

53 Samuel Mercer to the Earl of Minto. [London], 24 February 1838. The National Archives, Kew, London: Admiralty, 1/3043.

coppers at least once per week, reporting any findings to him on their weekly meetings on Sunday. Also on Sundays, after dinner, the surgeon and his assistant were commanded to “examine every man in the ship making them bare their legs and arms, as seamen often have sores, which from not being attended in time, turn out bad ulcers.”⁵⁴ In fact, Collier’s attention to detail was underlined by Alexander Bryson years later in his *Report on the Climate and Principal Diseases of the African Station*.⁵⁵ In it, Bryson listed some of the measures taken by Collier from 1827 onwards to avoid the spreading of disease on board of the *Sybil*. They included punishing anyone found in a drunken state, frequently ventilating the ship using Brodie’s stoves, ordering men to never be exposed to the rain, and to use covers while on night watch. According to Bryson, a “better code of regulations (...) could hardly be produced for the service in the coast of Africa.”⁵⁶

Soon after its arrival in Fernando Po in June 1829, however, the crew of the *Sybil* came into close contact with those of the *Hecla*, *Eden* and *Champion*. Some sailors actually switched vessels, with some sailors from the *Eden* and one from the *Champion* joining the crew of the *Sybil*.⁵⁷ According to the *Sybil*’s surgeon, Robert McKinnal, barely two days after these exchanges one of those sailors came down with yellow fever and was immediately sent to shore, shortly before the ship left for Prince’s Island. During the voyage all the sailors who had joined the *Sybil* were given a few grams of cinchona and a gill of wine twice a day as a prophylactic, a treatment that may have worked for a malarial fever, but that was nothing but a placebo at best for yellow fever. Just days later, however, soon after arriving at their destination, the sailor that had come from the *Champion* was also taken ill with yellow fever. From that moment onwards, numerous members of the *Sybil*’s crew started to get sick with “a fever of the most malignant character,” leading to almost 60 deaths by the end of the year.⁵⁸

Over the next few months, Collier and McKinnal did everything in their power to stop the fever from spreading among the crew. In more than one opportunity, they also came across the *Hecla* and *Eden*, the two other severely affected ships, during their patrolling journeys along the African coast. On early September, the epidemic seemed to be finally over on most of the ships. After

54 Collier to the Officers. HMS *Sybil*, 14 May 1827. National Maritime Museum, Greenwich, London: LOG, N/41.

55 Bryson, *Report*.

56 *Ibid.*, 51.

57 McKinnal, “On the Origin,” 38.

58 *Ibid.*

visiting St. Helena, the *Eden* was finally healthy again, according to a missive sent by Captain Owen to Collier on the 12th of the month.⁵⁹ The *Sybil* too arrived at St. Helena a few days later with a clean bill of health and, after a period of quarantine, its crew was able to come to land and interact with the locals.⁶⁰ Collier and Thomas Butter, who, as we saw at the beginning of this article, had joined the ship as assistant surgeon during a quick stop of the *Sybil* at Ascension Island, reported how going south towards the least morbid climate of St. Helena had improved the health of the crew, stopping the occurrence of new cases of yellow fever for good, just as it had been the case with the *Eden* shortly before.⁶¹

After leaving St. Helena, however, the *Sybil* went back to pursuing slave ships along the continent's coast, visiting several spots such as Prince's Island, Whydah, and Ascension. On January 13, a new case of yellow fever was reported, just as they cruised off Cape Formosa, in the Brass River. By mid-February the fever was "producing the most dreadful havoc," with McKinnal reporting 87 new cases and 26 deaths.⁶² Once again, Collier resolved to go towards St. Helena, seeking a more temperate climate to arrest the advance of the epidemic. This time, however, the outbreak grew deadlier rather than abating as it had done in August 1829, with those who were healthier engaged in fumigating, whitewashing, and in taking all possible measures to stop its spreading without success.⁶³

Eventually, and realizing that staying at St. Helena was doing little to improve their desperate situation, Collier ordered to sail again southwards towards even colder climates. The *Sybil* went as far down as to the 36th parallel, beyond the Cape of Good Hope, where it remained for an entire month until the epidemic finally ceased.⁶⁴ To Collier and McKinnal it became apparent that in the absence of an effective treatment against yellow fever, the only way of arresting this "malignant fever" was to go towards an even colder weather, where the disease did not fail to dissipate.

59 Owen to Collier. HMS *Eden*. Ascension, 12 September 1829. The National Archives, Kew, London: Admiralty, 1/1.

60 McKinnal, "On the Origin," 40.

61 Collier; Thomas Butter to James Butter. HMS *Sybil*, [Portsmouth], 1 July 1830. National Maritime Museum, Greenwich, London: AGC/B/24.

62 McKinnal, "On the Origin," 40.

63 Ibid., 40; Thomas Butter to James Butter. HMS *Sybil*, [Portsmouth], 1 July 1830. National Maritime Museum, Greenwich, London: AGC/B/24; Collier to Croker. HMS *Sybil*, St. Helena, 28 March 1830. The National Archives, Kew, London: Admiralty, 1/1.

64 Collier to Croker. HMS *Sybil*, Ascension, 25 May 1830. The National Archives, Kew, London: Admiralty, 1/1.

Epidemic outbreaks such as those on the *Sybilie*, the *Eden*, and other Royal Navy ships had two main consequences for abolitionist efforts along the African coast. Firstly, they likely increased fears among potential crew members, who saw an assignment to the West African Squadron as nothing short of a death sentence. This was the case even for seasoned medical practitioners like Thomas Butter, who did everything he could to return to England before being drafted to join the *Sybilie*. Even decades later, British surgeon James Dick found himself attached to HMS *Flying Fish*, one of the squadron's ships. Just like Butter had done before, Dick tried "to get out of the appointment," but without any success, expressing in his journal the intense apprehension and anxiety that such orders had caused him.⁶⁵ Secondly, the actions taken by Collier, Owen, Boteler, and others, likely informed other Royal Navy commanders of the most effective methods to stop yellow fever epidemics, by sailing towards cold weather, as it was apparent to them that against yellow fever nothing else truly worked. This remained the case for the rest of the time that the West African Squadron continued to carry its slave-trade suppression activities, which were brought to an end in the mid-1860s.

4 Conclusions

In 1831 Robert Boyle reflected on his recently published study of the various diseases affecting abolitionist efforts in West Africa, that Fernando Po had "hitherto, proved no garden of Eden, no oasis of the desert."⁶⁶ To the despair of those who saw a need to relocating the Courts of Mixed Commission due to practical reasons related to the geographical location of Sierra Leone, and of those who saw their move to Fernando Po through an imperial and trading lens, the enterprise was a complete fiasco.

Various reasons weighted on the demise of Fernando Po as the most convenient British outpost to further both slave trade ship captures and imperial dreams. Spain's reluctance to cede its rights to the ownership of the island were undoubtedly a significant factor, as pointed years later by Fray Jerónimo Usera y Alarcón.⁶⁷ Captain William Owen's oftentimes rogue activities, which defied

65 Journals of James Nicholas Dick, British naval surgeon, and James Douglas Dick, naval officer, 1853–1898. British Art Center-Yale University, New Haven: Rare Books and Manuscripts, DA88.LD53.

66 Boyle, *A Practical Medico Historical Account*, 353.

67 Jerónimo de Usera y Alarcón, *Memoria de la isla de Fernando Poo* (Madrid: Imprenta de D. Tomás Aguado, 1848), 39.

international laws, and produced a number of lawsuits to which the British had to answer, was another crucial factor. Even though Owen's aggressive behavior did result in a temporary reduction of human trafficking in the Bight of Biafra, ultimately, it became a contributing factor when British authorities in London finally decided to pull out of Fernando Po in 1831–1832.⁶⁸

The main factor behind this wrecked policy was, unquestionably, the yellow fever epidemic of 1828–1830. The epidemic has often been studied as two separate outbreaks, namely a first outbreak in Gibraltar in mid- and late-1828, and a second, independent outbreak that began in Sierra Leone in May 1829. Historical evidence, however, points to a demonstrable connection between the port of Gibraltar and a number of West African ports, including Bathurst in the Gambia, Sierra Leone, Gallinas, Pongos, Little Bassa, and Whydah among a few others.

The epidemic outbreak that affected these regions between 1828 and 1830 revealed Fernando Po as a place that was just unhealthy for human beings as Sierra Leone had been, but where medical knowledge specifically associated with the settlement was practically inexistent. This argument, presented by various newspapers at the time, also played a key role in the final decision to abandon the relocation of the Courts of Mixed Commission and the British colony at Clarence Cove. As an anonymous writer put it in December 1830, "a struggle of forty years with the climate of Sierra Leone" had generated important medical knowledge about the peculiarities of the diseases affecting this colony. Such a "great and inestimable advantage" would be "in great measure thrown away" by moving the Courts to Fernando Po.⁶⁹

The 1828–1830 yellow fever epidemic had a demoralizing effect on those who planned to make the captures of slave vessels and the relocation of the Africans found on board them, a more streamlined and efficient business. It also stopped the imperial and free trade lobby on its tracks, as their aspiration of physically occupying a strategically important island not far from the mouth of the Niger River, also collapsed. For the abolitionist cause at large, long-term results were mixed. Although they secured Sierra Leone as the main base for any anti-slave trade activities in West Africa, the yellow fever epidemic was so lethal, especially for Royal Navy ships, that it almost certainly dissuaded many potential sailors from joining the West African Squadron and led to extensive Parliamentary debates about whether the human cost of the abolitionist project was truly worthy. All in all, there is little doubt that yellow fever epidemics, and in partic-

68 Pardue, "Antislavery and Imperialism."

69 "Sierra Leone and Fernando Po," *Morning Post* (29 December 1830): 4.

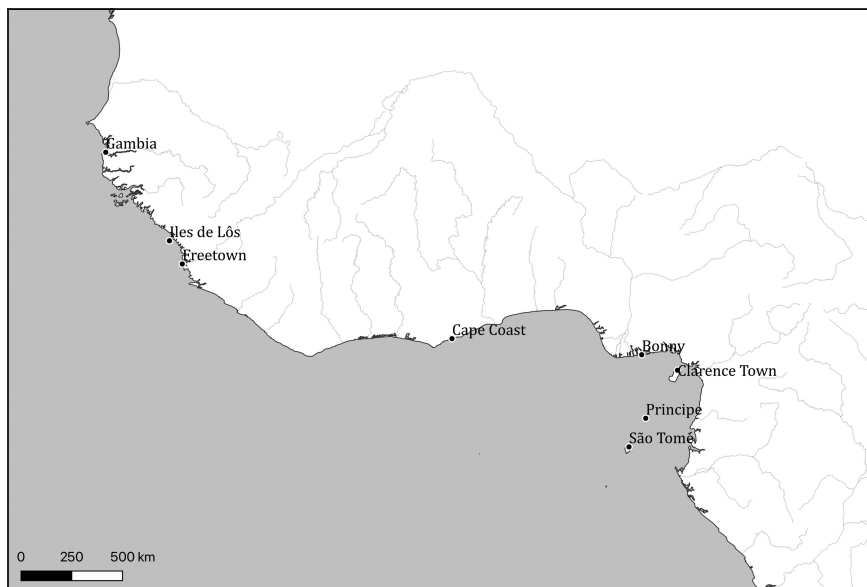


FIGURE 1 West Africa in 1828–1830

ular the 1828–1830 outbreak, challenged and changed the course of abolitionist policies and activities perhaps more than any other event in the first half of the nineteenth century.

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