

The Battle of Jutland and the Royal Naval Medical Service:

a brief article 100 years later

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Introduction

Before Jutland and since the declaration of war, the Royal Navy (RN) had already fought four sea battles: Heligoland Bight (28 Aug 1914); Coronel (1 Nov 1914); the Falkland Islands (8 Dec 1914) and Dogger Bank (24 Jan 1915) and in addition had been heavily involved in amphibious operations at Gallipoli (Feb 1915 - Jan 1916). The Battle of Jutland (31 May - 1 Jun 1916), however, has remained in public consciousness as *the* naval battle of the First World War, due both to the number of ships involved and to the devastating casualty level. More than 6000 men were killed, over 500 wounded and more than 150 were made prisoners of war on the British side alone.

Germany had embarked on a major ship-building programme in response to Britain's development of the Dreadnought class in 1906, and in provoking the Battle of Jutland the Kriegsmarine commanders hoped to tempt the numerically-superior British Fleet into action piecemeal. However, thanks to British intelligence intercepts, which

reported that the German fleet was putting to sea, Admiral Jellicoe was able to order the whole North Sea fleet, approximately 120-130 ships, to sail.¹

Here is not the place to discuss at any length controversies concerning tactics, gunnery or indeed whether the battle was won, and if so by whom. The facts are that the RN lost more men and more ships, and in the papers of the day the battle was recorded as a German victory; yet, since the German fleet offered no further challenge to the RN for the remainder of the war, Jutland has been described as a British victory on strategic grounds.

Among the dead of the British fleet were 45 men of the RN Medical Service: 21 surgeons² and 24 Sick Berth (SB) staff. Among the surgeons were men from Malta, Scotland, Ireland, South Africa, Tobago and Australia. This article is offered to honour them all, although since the author's recent research has focussed on identifying participants from the officers photographed for the Haslar class intake album, the SB staff are regrettably neglected. There are, however, further details available online.³

Jutland experiences

The Naval Medical Officer, Deputy Surgeon General Robert Hill, wrote a general report in December 1916 which discussed medical arrangements for, experiences of and conclusions arising from the Battle of Jutland.⁴ The remainder of the present article will attempt to show, by selected examples, a more personal view of the RN Medical Service during the battle.

The experience of Fleet Surgeon Alexander Maclean (b. 1889) and Surgeon Horace Elliott Rose Stephens (1883-1959) aboard HMS LION⁵ has already been studied in the Journal⁶. Most of LION's casualties were sustained from an early burst of shellfire which disabled the ship's Q turret and inflicted 44% casualties on her medical staff. Maclean and Elliott state that "Water gave considerable trouble in some places". This is a restrained description; Maclean's later DSO citation records that: "The wounded and dying had to be dressed under very difficult conditions on the mess deck, which was flooded with a foot of water from damaged fire mains." With the help of two executive branch officers who assisted with anaesthetics, Maclean, Stephens and their colleagues nonetheless dealt with 51 cases.

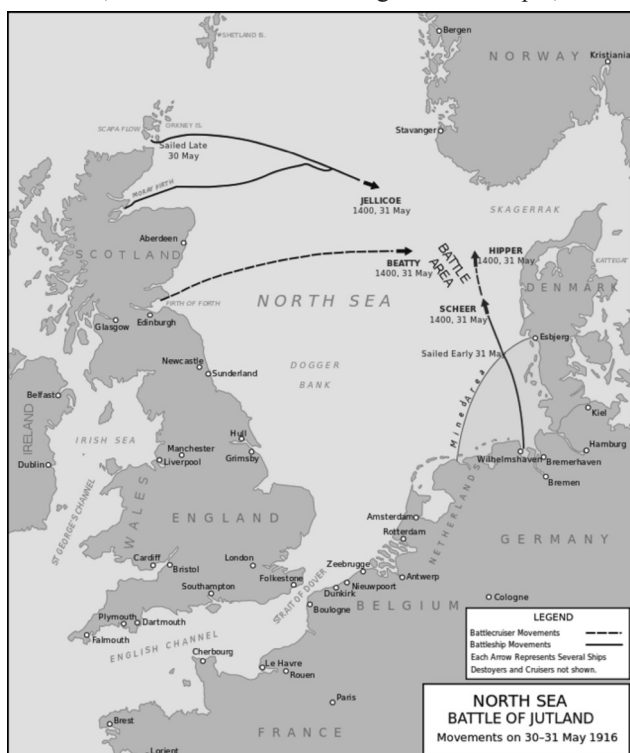


Figure 1: Map of the fleet movements prior to the Battle of Jutland.

Similar conditions were recorded aboard HMS SPITFIRE, which had been rammed port bow to port bow by the German battleship NASSAU. The NASSAU was too close in to bring her guns to bear accurately, and most of the shells which she fired found no target. Two, however, went through SPITFIRE's bridge and killed all but three men there. Once the two ships disengaged SPITFIRE made a westerly course at 6 knots, which brought her into the Tyne on 2 June. Aboard was 19-year-old Surgeon Probationer Douglas GP Bell RNVR. An eye-witness recorded: "The doctor, a young surgeon-probationer, did some fine work during this time ... His chief success was amputating, single-handed and without any anaesthetic, an able-seaman's leg, who with the coxswain was found lying amongst the wreckage on the bridge. While he was performing this operation the fire-party was busy all round him with their fire hose. It was marvellous the way this young doctor moved about, eventually getting all the wounded into the wardroom and cabins, and he never left them or took any rest himself until we arrived in harbour 36 hours later."⁷

Surgeon Probationer Bell was awarded the DSC after Jutland. He had been called out of medical studies (in his case from Newcastle University Medical School) and had not yet completed his formal training, as was the case for all surgeon probationers; indeed, the memorabilia of a surgeon probationer who was called up even before he had begun his studies have just been donated to the Historic Collections. Five surgeon probationers were killed at Jutland: John E MacIntyre, age 22 (ARDENT); Robert Walker, age 23 (SHARK); David H Ferris, age 22 (BROKE); Hugh J Dingle, age 23 (PETARD); and John Hislop, age 20 (NESSUS), who had been a classmate of John MacIntyre at Glasgow University. Two more, Alexander Joe, age 17 (NESTOR) and David JT Oswald, age 21 (NOMAD) were taken prisoner of war; the British Medical Journal reported them both dead².

Some of the RN ships at Jutland came through the action undamaged, or without firing a shot. HMS BENBOW, leading the 4th Division of the Fleet into battle, fired around 100 shells but remarkably, despite being within enemy range for much of the time, sustained no damage. Her Fleet Surgeon was Joseph Agnew Moon (1864-1947), probably the oldest of the RN's Haslar-trained surgeons at Jutland; the photograph in which he appears in the Haslar class entry album is dated 1887. This was not Moon's first lucky escape: he was surgeon aboard HMS VICTORIA in 1893 on the infamous occasion when she was rammed by HMS CAMPERDOWN, and only saved himself by clambering up the ship's keel as she turned turtle. He did not, however, escape scot-free from Jutland: his nephew, Temporary Surgeon George Bassett Moon, was among the medical staff casualties sustained by HMS LION.^{8,9}



Figure 2: Joseph Agnew Moon, photographed at Haslar in 1887.

HMS BARHAM was another ship whose gunners did sterling work during the battle, but unlike BENBOW she did not escape untouched, taking hits from six shells. The first of these struck early in the battle, piercing the deckhead near the ship's fore medical distribution station, where Fleet Surgeon Ernest Alfred Penfold (1866-1956) was at work. He was knocked down, bruised and shaken, but continued about his duties despite the fact that the lights had failed, the distribution station was full of smoke, and water was rushing in from burst pipes. The Medical Store and an adjacent compartment were completely destroyed. "On May 31 the time for preparation was very short," Penfold wrote a year later,¹⁰ commenting that although according to custom the sick bay had been cleared for action, a group of boys and junior rates had been in the compartment recovering from tetanus vaccinations given the previous day; all, except for one of the boys, were killed or seriously wounded. Penfold, who was later awarded the DSO for his services at Jutland, continued working with the assistance of his colleague, Surgeon Margetts, both men being "practically uninjured", and with the help of a sick berth attendant who was later found to have a shell splinter in his leg (two other sick berth staff were seriously wounded and later died).



Figure 3: Ernest Alfred Penfold, photographed at Haslar in March 1891.

Penfold also records that “Application was made by the captain for the wounded to return to the ship, if possible, when again fit for active service, as they had all made special requests to be allowed to do so. Twenty of the thirty-three

patients sent to hospital did return, and of these, five have since been discharged as cases of neurasthenia, apparently resulting from the effects of the action”.¹⁰ This is a tribute to the close-knit nature of the ship’s crew, but it also reveals that the consequences of the Battle of Jutland were not limited to the immediate aftermath, neurasthenia being the equivalent to what became known as shell-shock and is now referred to as Post-Traumatic Stress Disorder (PTSD). Later that year an Ordinary Seaman aged 16, aboard HMS CHINA, was diagnosed “Neurasthenia (Traumatic)” and discharged to HMHS PLASSY. He was finally sent ashore to what was then still called the lunatic asylum at Haslar. As a Boy Seaman he had been one of the group recovering from tetanus vaccination aboard BARHAM, and had been profoundly affected by the killing or wounding of all his shipmates in the same compartment. Although he himself had escaped physically unharmed, his experience of Jutland had, nonetheless, an effect at first undetectable; Medical Officers’ Journals subsequent to the battle record other examples.

Finally, it is worth recording one particular naval medical connection among the casualties at Jutland who was not himself a member of the RN Medical Service. In the early stages of the battle, HMS QUEEN MARY was engaged by two German battle cruisers and hit: A and B magazines exploded and the ship blew up soon after. Of the 1286 crew, only twenty survived. Among the dead was Commander Sir Charles Rodney Blane, age 36, fourth holder of the Blane baronetcy. He was the great-grandson of Sir Gilbert Blane (1749-1834) who was a naval physician, Commissioner for sick and wounded seamen, and had instigated not only the system of Medical Officers’ Journals, but also the Gilbert Blane Medal, still awarded today.

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