

Enuresis in Children.

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ENURESIS is, I dare say, the disorder in the urinary tract regarding which every physician is most frequently consulted. The incomplete development of the sphincters in the infant permit the involuntary discharge of urine and feces during the first year or two, unattended by subjective sensations. The sphincter ani first gains sufficient strength to retain and control the contents of the bowels, generally during the first year of life; the sphincter vesicæ coming under the control of the will, as a rule, about the end of the second year. When, however, the infantile condition continues beyond this time, even though the urinary organs may be in practically a normal condition, with perfect control when awake, a weakness may remain during sleep, with involuntary escape of urine or enuresis nocturna. If only troublesome during the day, we know it is enuresis diurna, or when present day and night, enuresis continua.

In whatever form it appears or persists beyond the usual time for spontaneous cure, it must be looked upon as a symptom, the causes of which may be many. As intimated above, it may result from persistent infantile weakness of the sphincter vesicæ. This muscular debility is often but part of a general muscular incompetency found in these children. Sometimes they are also dull and slow of comprehension; others are anæmic and generally feeble. Some seem to expend all their vitality in rapid intellectual development, being bright, keen, spirited, excitable; mentally vigorous though easily exhausted, the whole muscular system being poor and flabby, the sphincters partaking of this relaxed condition, resulting in incontinence.

A very common cause for enuresis in children is found in some organ more or less remote from the bladder, and the trouble is then said to be reflex. Rectal irritation, as fissures, piles, or pin worms, is very frequently the cause. Some

unnatural condition of the sexual organs, as adherent or enlarged foreskin, adherent hood of the clitoris, or pin worms in the vagina, may cause it, and masturbation, by increasing the sensitiveness of the urethra and neck of the bladder, may result in enuresis.

The urine may be changed in character and should be carefully examined. In all obscure cases make careful chemical test and microscopic examination for evidence of cystitis, pyelitis, nephritis, diabetes, uræmia, or an excess of calcic oxalate, triple phosphate or simple earthy phosphate.

It should also be remembered that psychical causes may be responsible for enuresis. Children suffering from nocturnal enuresis only, who have complete control of the urinary functions during the day, are, in a majority of cases, victims of the psychical form of this disorder. It is clear in such cases that the bladder is in a healthy state, and will retain a normal amount of urine, but as it fills and produces the usual pressure, instead of waking the child, it induces a dream which is influenced by the dominating fear that an accident will happen. He will dream of rain, or of running water, or that he is in some suitable place for passing urine, and will only waken to find himself saturated. This form of the trouble can often be corrected by suitable remedies, but it is sure to disappear at puberty, the sexual development changing the psychological condition.

In the treatment of enuresis it is of first importance to determine the cause. When weakness of the sphincter muscle is the trouble, accompanied by more or less physical debility, look carefully after the general health. See to the diet, that it is wholesome and nutritious. These children are generally poor feeders; they are apt to crave sweets, and are often allowed cookies, cakes, candy, nuts, richly-preserved fruits, highly-spiced pickles, pies and coffee, too much meat; lurching and munching something all the day long, and not one fair meal eaten during the day.

Insist upon regular hours for eating, and only permit

the use of proper food. Breakfast is an important meal, after fasting all night. The child should rise an hour before the time for breakfast, and, when old enough and the weather suitable, some out-of-door exercise taken to encourage an appetite. The meal should consist of oat meal, cracked wheat, or some such item, with cream or milk, and a reasonable quantity of sugar, if desired; milk in such quantities as it can be enjoyed, food, light bread or toast, waffles and syrup, eggs and fresh fruit. The heartiest food should come at the mid-day meal. At this time meat in reasonable quantity may be taken with vegetables and farinaceous foods. The evening meal should be a matter of much careful thought, that it may be tempting, nutritious, and yet light. Milk, eggs in some form, fresh or wholesome fruit, but never richly-preserved or stale, dried fruit for a child, and farinaceous foods of all sorts to suit the taste but meats and vegetables pickles, nuts, confections, etc., should be wholly avoided.

The habit of eating irregularly should be corrected at once and regularity rigidly observed. Even in very young children if the practice of partaking of food between the regular meals is never permitted there will be found no inconvenience from waiting the usual interval, and the child will then come to the table with a good wholesome appetite. No habit of childhood do I oftener find working harm to the child than this.

Next to diet in importance to these children is the question of exercise. This may be even more difficult to regulate to our fancy, but we can be of service if we lay down our laws wisely and emphatically. The child should take at least a half-hour's good, vigorous exercise before breakfast. He should rise at such an hour that this can be done without haste or confusion. Out-of-doors in all suitable weather, but out of bed always. To do this he should be in bed early. Children differ somewhat in their requirements of sleep, but all need more than adults. Ten to twelve hours may be set down as a fair average after infancy, and the

best rest is obtained in the early part of the night. When children are growing rapidly their exercise should be so chosen as to encourage constant change, and the rest of one set of muscles while others are employed.

Then the bath, which should be daily, only a quick sponge in just tepid water, the chief time and attention being given to the rubbing which follows. Make a point that this is not slighted, especially in the axilla, groins and crevices between the toes. Leave the body aglow. See that much of the rubbing is from the extremity toward the body, to encourage the venous circulation. I believe the prolonged plunge bath with great quantities of hot water and soap is a serious evil for these feeble children, and should never be employed.

The remedy that is indicated for the child's general condition will cure the enuresis, and will often be found among the following: Alumina, Belladonna, Calcarea carb., Calcarea phos., Ferrum, Gelsemium, Iodine, Kali carb., Kali phos., Lycopodium, Natrum mur., Sepia, Silicia or Sulphur.

When reflex troubles are causing enuresis the primary cause must receive first attention, but when no abnormality is discoverable in the pelvic organs that can be causing this condition, and when the general nutrition and muscular condition seem about normal, and still this troublesome disorder continues, our hope must be in a close study of our patient and a careful selection of the remedy most perfectly indicated. The following, with a few of the most characteristic symptoms, have been of help to me:

Aconite.—In cases of neurotic origin: wakes in a state of terror; excitable; frightened easily; restless and nervous, with some fever.

Argentum Nit.—Incontinence of urine during the day; also at night.

Urine passed unconsciously and uninterruptedly.

The urine contains red crystals of uric acid.

Great craving for sweet: flatulent indigestion.

Belladonna.—Nervous children : starting and jumping in the sleep ; screaming out during sleep ; weak, relaxed condition, with insufficiency of the sphincter.

Glandular enlargements.

Benzoic Acid.—Enuresis with strong-smelling urine ; strong, pungent urinous odor ; urine staining dark brown.

Calcarea Carb.—Children who take cold easily ; sweat much about the head ; fair complexion ; wet the bed at short intervals all night long.

Cantharis.—Child controls the urine generally during the day, but goes to the closet very often ; at night urine passes unconsciously, little at a time. Some discomfort when passing in day time, and restless moving at every escape during sleep.

Causticum.—Enuresis during first sleep ; chronic periodic swelling of tonsils ; sweat on genitals ; herpetic eruption on eyelids. Scrofulous.

Chamomilla.—Very cross ; must be carried, when becomes quiet.

Cina.—Urine profuse, with strong ammoniacal odor ; voracious appetite, or none at all ; changeable ; cross ; symptoms of worms.

Gelsemium.—Is useful when there is a muscular insufficiency with a general condition of relaxation ; urine escapes unconsciously day and night.

Ferrum Met.—Child pale and anæmic, but flushes when excited or in pain ; frequent wetting of clothing during the day.

Lithium carb. and *Lycopodium* are often useful when the urine is excessively acid ; uric acid crystals in the form of brick-dust may be seen in chamber after cooling.

Sepia resembles *Causticum* in the symptoms, and follows it well ; wets the bed profusely during first sleep ; urine high colored ; red sand in urine, or red slimy deposit.

Silicia.—Sweats profusely when asleep ; offensive foot sweat with scalded appearance, especially between the toes.

Spigelia.—Worm symptoms.

Sulphur.—Dirty, ill-nourished children, who dread a bath,
Pale, thin, stoop-shouldered children with large abdomens;
great craving for sugar and highly-seasoned food.

Enlarged glands and generally scrofulous appearance.

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Doctor's prayer.

To live to learn,
And find each close of day,
Myself a little nearer truth,
A little further on my way.

A little life,
But give me, God, the pow'r
To conquer self and all the doubts
That rise from hour to hour.

And give me strength,
When problems try my soul,
To know the right and do the right
With honesty reach my goal.

May I not fail
To do the best I can,
And to overcome earth's greatest curse,
The base ingratitude of man.

Dr. I. G. Chatterjee.