## ESSENTIAL ENURESIS.

A THESIS SUBMITTED FOR THE DEGREE OF

DOCTOR OF MEDICINE IN THE

UNIVERSITY OF ADELAIDE.



bу

NEIL D. CROSBY M.B.B.S., ADELAIDE, 1935.

<sup>1.</sup> THIS WORK WAS ASSISTED BY A GRANT FROM THE NATIONAL HEALTH AND MEDICAL RESEARCH COUNCIL.

## PROLOGUE.

Enuresis is an affliction which occurs in all races and in all sections of communities.

There have been, and still are, many and widely varying opinions on the aetiology of the condition. Consequently there has been equally as great a variety of measures practiced in therapeutic regimes, none of which are satisfactory.

This work therefore is an original contribution to the subject and claims to have advanced medical knowledge and practice in the following ways:-

- interest in, and observation of, the natural history of enuresis as part of the experience of ten years of rural general practice. Such a study is necessary in order to assess the value of the multitudinous factors listed in the literature on enuresis. The phenomena of the natural history suggested a concept of the condition and a plan for further research and treatment.
- (2) A new concept of the condition termed

- (2) (Contd.) "Essential Enuresis" is described. This is based on an original description and discussion of the attainment of urinary continence. The view presented is that essential enuresis is primarily a physiological state or entity in contrast to the widely held opinions that it is a symptom or a disease.
- (3) On this basis the apparently paradoxical clinical findings can be coordinated, and the essential types of enuresis are defined and explained.
- (4) A statistical analysis of the data obtained during the research discredits familial and hereditary factors in the aetiology of enuresis in an approximation to a random sample of the enuretic population.
- (5) The natural history and concept of essential enuresis enabled a therapeutic regime to be planned and initiated. This required the design and development of an

- (5) (Contd.) instrument which made the treatment both practicable and domiciliary.
- (6) The successful results of this treatment suggest that it is specific and lend cogent support to the validity of the thesis.

CONTENTS.		
PART	I. Enuresis: a problem in all	
	races.	
1)	Preamble.	1
2)	An historical survey of the	3
	antiquity of enuresis, of the	
	incidence, of the views on	
	aetiology and of the past	
	methods of treatment.	
3)	An introductory definition of	11
	essential enuresis.	•
4)	A descriptive classification of	11
	enuresis.	
5)	The incidence of enuresis in the	12
	populace.	
PART	II. The nature of the author's	
	concepts of essential enuresis	
	and the scope of the research.	
1)	Introduction.	16
2)	A summary of clinical observations	18
	made during ten years of general	-
	medical practice.	42 <del>-</del>
	(1) General observations on the	20
	natural history.	
	(2) The effects of enuresis on the	24
	sufferer and the family.	

PART I	I. (Contd.)	Page.
3)	A discussion on the attainment	32
	of urinary continence: the	
	author's concept of the basic	
;	nature of essential enuresis,	
	and the explanation of the types	
	of enuresis which occur.	
<b>4)</b>	The methods of investigation and	49
	assessment of individual patients.	
	The value of the "urinary pattern".	
5)	An analysis of the familial	55
	history of seventy-three (73)	,
	patients presenting themselves	
	hecause of enuresis.	
6)	The principles, and the applicat-	65
	ion, of the author's method of	
	treatment.	4
יד יחסואכו	II. Results of treatment and	
TULL	discussion.	
1)	The results of treatment in the	74
• /	first fifty-eight (58) cases.	14
2)	The reason for relapses before and	441)
د. ا	after treatment.	1 7 feb
3)		118
,,	ment.	110

			Page
PART	III	(Contd.)	. *
	4)	Discussion.	1 20
	5)	Addendum.	133
	6)	General Summary.	
	:	1. The Conclusions and Results which introduce the Thesis.	1 34
		2. The Thesis and the Application to Treat-ment.	1 39
	7)	Acknowledgements	144
	8)	Appendix I: Photograph of the research instrument and the attachments.	145
	9)	Appendix IA: Plan of the electrical circuit.	146
	10)	Appendix II: The detailed instructions for the use of the instrument.	147
	11)	References.	1 52