

## **“Somatopsychic Effects Of Nocturnal Enuresis In Paediatric Age Group And Its Corresponding Materia Medica Images”**

**Dr.Ruta Katyare (PG Scholar)**

### **Abstract**

Enuresis also known as bedwetting is involuntary urination while asleep after the age at which bedwetting can become a cause of embarrassment for both children and their parents. The symptoms and diagnosis of the disease have been clearly defined in medical research. Further the understanding of the somatopsychic effects could lead to better treatments and help to reduce prevalence through preventive measures. The prevalence of nocturnal enuresis for females is 10.6%, for males it is 16.9% and the overall prevalence is 13.7%,

In preparing the dissertation on “SOMATOPSYCHIC EFFECTS OF NOCTURNAL ENURESIS IN PAEDIATRIC AGE GROUP AND ITS CORRESPONDING MATERIA MEDICA IMAGES”, I have observed and studied various causes and psychological impact for selection of homoeopathic similimum. Materia Medica images of various drugs are formed with the help of conceptual image format. Bed wetting can possibly tarnish the self-confidence of the child developing a strong fear of being ridiculed by peers.

### **Key Words:**

Nocturnal enuresis, somatopsychic effects, DSM- 5 criteria.

### **Introduction:**

#### **Background and Justification of Study**

Enuresis also known as bedwetting is involuntary urination while asleep after the age at which bedwetting can become a cause of embarrassment for both children and their parents. Bed wetting can sometimes occur during a stressful event in a young person’s life. Conflict at home or school may cause your child to have nightly accidents. The birth of a sibling, moving to a new home or another change in routine can be stressful to children and may trigger bed wetting incidents. Punishing your child for wetting the bed will not solve the problem. Bedwetting children face problems ranging from being teased by siblings, being punished by parents, and being afraid that friends will find out. A growing number of parents today are concerned about the side-effects of conventional drugs, especially in the treatment of young children. Bed wetting is a distressing disorder that carries a significant burden. This disorder has psychological, social and financial implications for child and family. By identifying and treating bed wetting at an early age, it is hoped that its impact can be minimized..

Most children outgrow bed wetting by about 7 years. By this age, bladder control is stronger and more fully developed. lifestyle changes, medical treatment , and support from family and friends can help children overcome bedwetting.

### **Aim And Objectives:**

#### **AIM:**

To study the psychological changes in cases of Nocturnal Enuresis in paediatric age group. (ie. 5 to 10 years.)y- and – paediatrics-by dr.D.M.fsoublistesr.

**OBJECTIVES:**

To evaluate psychological changes in children of Nocturnal Enuresis.

To evolve different MateriaMedica images in treatment of Nocturnal Enuresis in paediatric age group.

**Material and methods**

**Study setting:** Cases taken from MHMC OPD at institute, Camps and peripheral OPD’s

**Selection of samples:** 30 cases

**Inclusion criteria:**

- Cases of Nocturnal enuresis diagnosed as per DSM- V Criteria
- Children of both sexes and age between 5 to 10years of age.

**Exclusion criteria:**

Cases with fatal diseases and congenital disorders like mental retardation, cerebral palsy.

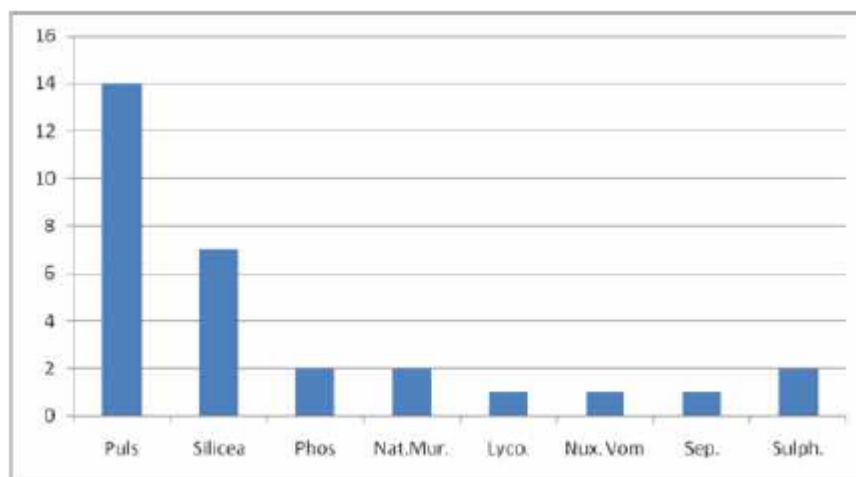
**Study design:** Case series.

**Intervention:** Cases will be seen as per homoeopathic management.

**Selection of tools:** The DSM-5 criteria for nocturnal enuresi

**Brief of procedure:** A case will be taken with CRF and conceptual image will be formed and accordingly psychological cause will be evaluated. Medicine will be given. Follow up will be taken accordingly.

**OBSERVATION AND RESULT**

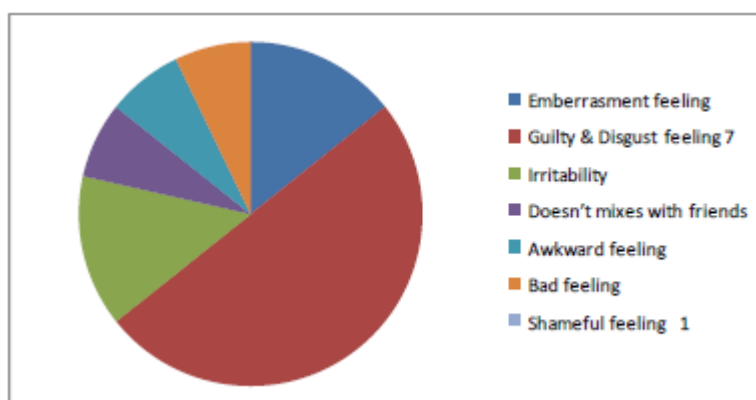


**Table showing frequency of medicines and corresponding materia medica images formed.**

Name of medicines	Number of times used
Pulsatilla	14
Silicea	07
Phosphorus	02
Natrummur	02
Lycopodium	01
Nux Vomica	01
Sepia	01
Sulphur	02

Materia medica image of each drug is formed with the help of conceptual image format.

**Diagram 1: Pie chart showing frequency of psychological changes seen in cases**



**Table showing frequency of psychological changes in patients**

Sr. no.	Psychological changes	Frequency(no. of cases)
1	Disgust and guilty feeling	7 ( 46.6 % )
2	Embarrassment	2(13.33 %)
3	Irritability	2 (13.33 %)
4	Doesn't mixes with friends	1 (6.6%)
5	Awkward feeling	1 (6.6%)
6	Bad feeling	1 (6.6%)
7	Shameful feeling	1 (6.6%)

**Result**

Out of 30 cases selected, maximum prevalence was noticed in females. The study of 30 cases includes female 21 i.e. Approx 70% and male 9 i.e. approx 30%. Maximum patients were from age group 5 to 10 years. Psychological impact i.e. (somatopsychic effect) of each case have been studied properly. 15 cases out of 30 cases had shown psychological impact on mind.ie 50% show effect on mind. Improved cases- 23 and not improved

**Conclusion**

After end of study it is concluded that all children who are having c/o nocturnal enuresis not show somatopsychic effect, only few patients show the symptoms. Study concludes that NOCTURNAL ENURESIS DOESN'T HAVE SOMATOPSYCHIC EFFECT ON ALL CHILDREN. Maximum prevalence is seen in females than in males.

**References/Bibliography:**

- 1) (GHAI.O.P.) *Essentials Pediatrics* ,2005, CBS publishers and distributors, 6th edition, 2nd chapter, PAGE- 61
- 2) ( Sapi MC, Vasconcelos JS, Silva FG, Damião R, Silva EA.) [Article in English, Portuguese] “Assessment of domestic violence against children and adolescents with enuresis.” Vol.85, no.5 Porto Alegre Sept/ oct.2009. [www.scielo.br](http://www.scielo.br)
- 3) (Collier J, Butler RJ, Redsell SA, Evans JH) , Article on “ An investigation of the impact of nocturnal enuresis on children's self-concept “.2002, vol 36, no.3, page 204-208 , <http://www.informahealthcare.com>
- 4) (Theunis M, Van Hoecke E, Paesbrugge S, Hoebeke P, VandeWalle J,) Article on “Self-image and performance in children with nocturnal enuresis”. *European Urology*, vol.41, Issue 6, 2002, pages 660-667 <http://www.bedwetting.elsevierresource.com>
- 5) The DSM-5 criteria for nocturnal enuresis . <http://www.theravive.com>
- 6) (HAHNEMANN SAMUEL), “Organon of Medicine.” reprint ed: 2004, books & periodic 6<sup>th</sup> additional publishers New Delhi-page no- 19.
- 7) ( C.Crolyn Thiedke) Article on “*Nocturnal Enuresis*” Medical university of south Carolina, Charleston, South Carolina *Am Fam Physician*.2003 Apr 1;67(7):1499-1506
- 8) (B Gurnus, N Vurgun, M Lekili , A Iscan , T Muezzinoglu, C Buyuksu ) Article on “ *Prevalance of nocturnal enuresis and accompanying factors in children age 7- 11*” *Acta paediatrica*, 2 January 2007, <http://onlinelibrary.wiley.com>