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The Disease of Masturbation: Values and the concept of Disease by Engelhardt  
Engelhardt's article The Disease Of Masturbation is an example of the ways in which values impact society's definition of disease. I agree that it is possible that science is being, or has been, limited by the values within society. For science to conclude that masturbation causes such ailments as blindness and epilepsy it appears evident that science is being misguided by values of the time. I believe that science also realizes that values play a part in research conducted, otherwise there would be no need for blind and double blind studies.

Blind studies are used to help eliminate bias brought on by the experimenter or the test subject. In the eighteenth and nineteenth century masturbation was thought to produce the signs and symptoms of a dangerous disease: "Disease is neither an objective entity nor a concept of a single definition, there is not, nor need be, one concept of disease (UWO, p. 241).

" The problem with Engelhardt's article is our health system is that of the biomedical model. The biomedical model does not recognize masturbation as a disease. It states that " disease is a biological deviation from the norm that can be explained scientifically" (Charland). Masturbation has not been proven to fit into either category. Masturbation may have been a deviation from the norm at one point in time, but I do not believe that it can be explained scientifically. Engelhardt's article says that masturbation was the cause of such illnesses as blindness and vertigo. But how were these conclusions drawn? Were these conclusions scientific in nature or gathered according to the views and values of the times? Masturbation was turned into a disease, not with just somatic, but psychological dimensions. Tissot

states that masturbating is even more debilitating than sex because of a loss of seminal fluid (1oz equals 40oz of blood).

When seminal loss takes place in a position other than the recumbent position the effects are multiplied. Tissot successfully establishes that masturbation is associated with physical and mental maladies. Englehardt should stipulate how Tissot reaches this conclusion. There are also disagreements as to whether frequent sex is any different than masturbation. It is argued that the difference between masturbation and sex is the expenditure of nerve force that is compensated by the magnetism of the partner. Masturbation is worse because it is unnatural and therefore less satisfying.

I think masturbation is natural, and has very likely been around as long as sex maybe longer. At first masturbating was thought to cause dyspepsia, constriction of the urethra, epilepsy, blindness, vertigo, loss of hearing, headaches, impantency, and loss of memory. As well as, irregular action of the heart, general loss of health and strength, rickets, leucorrhoea in women, chronic catarrhal conjunctivis, nymphomania (more common in blondes and brunettes), and changes in external genitalia. Enlargement of superficial veins of hands and feet, moist clammy hands, stooped shoulders, pale sallow face with dark circles around eyes, draggy gait and acne, insanity, progressive loss of vigour, and causes heredity of insanity are also included on the list of health problems caused by masturbation. How a causal relationship was found between these illnesses and masturbation is unclear in Englehardt's paper. Englehardt suggests that masturbation should be

considered a syndrome rather than a disease, because syndromes have the running together of signs and symptoms into a recognizable pattern.

Since masturbation is associated with disease it should also be associated with deaths (which have happened). Since people have also died from having sex, should sex be banned because of these dangers? Between the sexually transmitted diseases and the rare cases of people having heart attacks while having sex the possibility of death through sex is probably greater than it is from masturbation. There was a struggle to develop a workable nosology it was placed under various categories and numerous nomenclatures called onanism and, onanismus. Initially masturbation was under the heading of male disease of generative organs, then it had many other headings until 1906 when it changed to genito-urinary system diseases.

The name changes probably indicate hesitation on the part of recorders as to nature of disease, recorders who were drawn in by the obviously psychological parts of the phenomenon to classify it as a functional disturbance. Through an examination of the parallels between what is good for one's soul and what is good for one's health, one would expect to find that disease correlates with immoral sexual behaviour. Also, people's inclinations to translate a moral issue into medical terms and relieve them. Jonathon Hutchinson described the etiological mechanism of the habit in question as one that may be injurious to the nerve-tone and likely originates and sustains illness which without it might have been avoided or cured.

Effects were magnified during youth when such “ shocks” threaten normal development. Freud wrote that sexual exhaustion could provoke neurasthenia. If sexual exhaustion fails to be achieved by it self it has an effect in the disposition of the nervous system, causing physical illness and depressive effects to be overworked and can no longer be tolerated without leading to neurasthenia in males it is acquired at puberty.

Other models were based mainly on the signs and symptoms and the effects of the guilt associated with the act of masturbation. It was guilt, not excitation, that led to masturbation. Often religion and mental conditions caused men to become alarmed with the activity. ‘ Masturbation is not a sin but a vice (UWO, p. 243).’ It’s bad signs and symptoms became viewed as the result of guilt and anxiety felt because of particular cultural norms.

There is nothing particularly wrong with masturbation. Masturbation is inevitable under restraints of life and while avoiding any attitude of indifference. I agree that the signs and symptoms connected with masturbation must have in fact come from the guilt and anxiety brought on by the act since masturbation was thought of as a heinous thing to do. Different restraining devices were made: infibulation, circumcision, acid burns, clitoridectomy, vasectomy, castration, use of electrodes, and acupuncture. Some more tolerant approaches include hard work and simple diet changes, suggestion of the use of frequenting prostitutes. Imagine if our society thought that frequenting prostitutes was a cure for what ails you. HIV and AIDS would be even more prevalent. Active tonics such as cold baths at bedtime were suggested, and ‘ Brownian’ proposed use of opium, and morphine sulphate.

Englehardt's use of masturbation is an example of the role of evolution in explanation. Englehardt uses many examples of how the values of society have influenced our picture of disease in many time periods. The Disease of Masturbation shows how much the many emotions and values of the time add stress and eventually bring on the symptoms that people reported to be associated with masturbation. Masturbation is the best possible example of the role of society's values on health and disease. It, however, is not a realistic example because masturbation does not fit into the biomedical model's definition of a disease.

I do not feel that masturbation has been scientifically proven to cause all of the ailments listed in Englehardt's article. Masturbation may have been a deviation from the norm but does this create the need to label it a disease?