

Bedwetting



A Guide for Parents

Introduction

Bedwetting (nocturnal enuresis) is a common childhood problem which can create enormous stress and embarrassment for children and their families. However, something can be done. This booklet describes ways in which parents and professionals can help children improve bladder control and become free of bedwetting.

The extent of the problem

It has been estimated that in the United Kingdom over half a million children between the ages of 5 and 16 years regularly wet the bed. Up to the age of 12 years more of these are boys than girls, but for the older group (12-16 years), there are proportionally more girls. It is very easy for children to feel that they are the only ones with the problem, as it is not something that is easy to reveal and share with friends. It may be of some comfort to an affected child to know that in a class of 30 school children, aged 7-9 years, there is likely to be at least one other who also wets the bed.

'Tuning in' to the bladder

Children gradually learn to recognise the sensation of a full bladder and begin to hold on until a toilet or potty is found (see next page: "How the System Works"). Most children have gained daytime control by the age of 3 years; night-time control takes a little longer - girls often achieve this earlier than boys. It is quite normal for children as old as 4 years to be still wetting the bed - and accidents may occur from time to time for a number of years.

What might cause bedwetting?

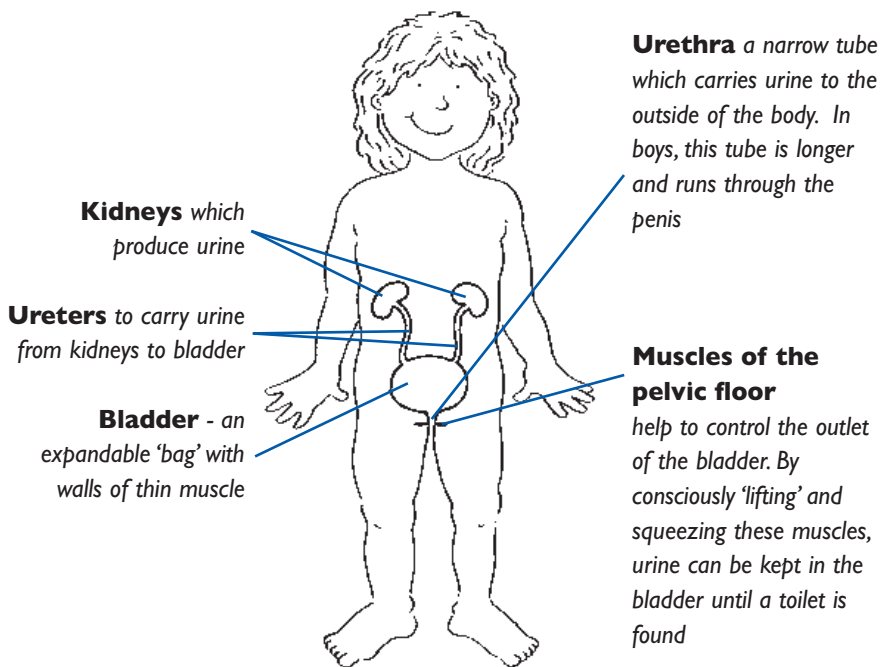
It is not always easy to pinpoint the reason why some children acquire night-time control later than others, but it is not due to laziness or lack of willpower. We now believe that bedwetting may be the result of one or more of the following factors:

- ★ *The body's system to slow down urine production at night is not yet working (this is controlled by a hormone, or chemical messenger called vasopressin - which acts on the kidneys). This causes children to have to cope with daytime levels of urine at night.*
- ★ *The bladder holds lower than average amounts of urine before giving a signal that it is full (most of these children also pass small amounts frequently during the day). The bladder may also be 'overactive', giving an urgent signal to empty before it is full. This is usually, but not always, evident during the day.*

- ★ *The signal from bladder to brain to wake up and hold on at night isn't getting through; something that is not under conscious control.*
- ★ *Anxieties in the child's life, such as the birth of a new baby, the death of a close friend or relative or starting a new school, can also delay the process of becoming dry, or trigger bedwetting incidents in children who were once dry at night. It is also known that children with one or more parents who themselves wet the bed after the age of 5 years, do take longer to be dry at night.*

How the system works

Diagram of the urinary system and explanation



The bladder is like a stretchy bag. Its muscle walls relax, to allow it to gradually fill with urine from the kidneys (and therefore become larger), and to contract and squeeze out its contents. Everyone's bladder has a usual maximum level of filling before contractions start - and this varies in volume from person to person. When the maximum level is reached, the bladder sends messages to the brain via the nervous system, resulting in feelings of discomfort or fullness. It is this that tells children that they need to go to the toilet. When the toilet is reached (or wetting occurs!), the contractions squeeze the urine out, emptying the bladder.

Potty training

If you as parents are relaxed about potty training, your child is more likely to achieve bladder control. Sitting your child on the potty can provide a peaceful moment to play or read a story. It has been found that praise for using the potty can help your child learn, whilst punishment can have the opposite effect, often making your child tense or anxious.



There is no evidence that attempts at potty training earlier than 18 months of age has any effect on the age at which a child obtains bladder control.

The general message is that your child will learn at his or her own pace - and that parents can help through giving guidance and encouragement.

The first steps

Becoming dry at night

If your children are between 3 and 4 years of age and have been dry during the day for a few months, you could find out whether they would like to come out of nappies at night. If they are interested (and many children provide a clue by commenting on wet beds or nappies), put them in ordinary pants, leave a

night light on and a potty beside the bed. You might consider extra bedding protection, such as disposable absorbent bed mats and washable duvet and mattress protectors (available from ERIC: www.ericshop.org.uk). **Give plenty of encouragement**, even if the number of dry nights are few. The speed at which children achieve night-time dryness does vary, often starting with one or two dry nights a week and building up slowly over a number of months. However, if your child is wet every night for 3 weeks (or any period that causes laundry problems or other difficulties), try not to show your disappointment. Your child is perhaps not yet ready to become dry. You might at this stage wish to consider using absorbent night-time padded pants rather than reverting to nappies - and try again in 3-4 months' time.

Five years old

Still not dry? What parents can do

The vast majority of children who are not dry at night by the age of 5 years have nothing physically wrong with their urinary system. A small number may have a physical problem, such as an overactive bladder (see page 1: "What might cause bedwetting?") or a urine infection. If your child's urine has a 'fishy' smell, if he or she has difficulty or pain in passing water, is constantly thirsty, or is frequently wet during the day as well as the night, it is best to consult your GP.

The following suggestions are for younger children (5-7 years) who have not yet learnt either to hold on at night - or to wake up to the sensation of a full bladder and use the potty or toilet.

Can your child get to the toilet easily?

- ★ *If the toilet is downstairs or some distance away, a potty near the bed is helpful*
- ★ *Use a bottom rather than a top bunk bed*
- ★ *If your child is afraid of the dark, keep a soft light on or position the bed near to the light switch.*

Food and drink

Encourage your child to drink regularly through the whole day (about 6-8 glasses, with 2-3 during the school day is recommended). Cutting back on drinks does not help - the bladder tends to adjust to less fluid and therefore holds less before feelings of fullness occur (see page 2: "How The System Works"). However, be careful



about fizzy drinks and tea or coffee, particularly last thing at night, as these can stimulate the kidneys to produce more than average amounts of urine. Your child could experiment to see if cutting out particular drinks makes a difference. Make sure that your child uses the toilet before going to bed.

Try to prevent your child becoming constipated, as this may irritate the bladder and result in more frequent urination. A diet with plenty of roughage may help e.g. wholemeal bread, bran, cereal, baked beans and fresh fruit and vegetables.

Praise and rewards

Most children respond positively to praise, but more formal reward systems can also be set up to help motivate and to encourage the achievement of desired goals and behaviours. It is important that rewards are used only for goals that a child can reasonably achieve - such as drinking good levels through the day, or going to the toilet before going to sleep - rather than for dry nights.

Always praise your child for dry nights, or if they wake by themselves to use the toilet during the night. Try not to show anger or frustration at wet beds, even though you may be feeling this way.

Common reward systems are sticker and star charts as they are positive ways to encourage children; they often enjoy watching the number of stickers and stars accumulate as they achieve desired goals and behaviours. But they do require patience as children must watch their 'points' build up before they can receive a reward. A week is a good amount of time to run sticker and star charts, and deciding together on the reward at the start of the week is a good idea. Older children may choose to wait longer for a bigger reward, such as a month, with perhaps the promise of a day out if they accrue enough stickers or stars, but that can be decided between you. Rewards don't have to be expensive, and in fact treats that have little monetary value can often be the most memorable, for example special time with a parent or a trip to the park.

Waking up (or 'lifting')

You may be lucky and reduce the number and extent of wet patches in the bed but this method does not help your child to recognise the sensation that the bladder is full – and wake up or hold on. If you decide to lift, it is important, to remember the following:

- ★ *Make sure that your child is fully awake*
- ★ *Wake at a different time each night*
- ★ *Even if already wet, it is helpful for your child to go to the toilet*

Seven years and older

Still not dry? What parents can do

Talking to your child calmly about the problem can sometimes uncover fears or anxieties. It may also be reassuring for your child to know that all children find their bodies are good at some things and poor at others e.g. some are good swimmers or footballers, while others are less good at these things. It is also important to reassure your child that there will probably be others with this difficulty in the school class.

You could find out whether your child really wants to become dry at night. Gently asking your child what they think are the good things about being dry can give some idea of the extent of your child's wish to be free of bedwetting. Wanting to be dry helps your child make sense of the methods you might be trying. If your child appears to be disinterested or not bothered, although it is understandably very frustrating for you as a parent, it is perhaps best not to pressurise them at this stage, but to encourage them to think about what the good things about being dry might be for the future.

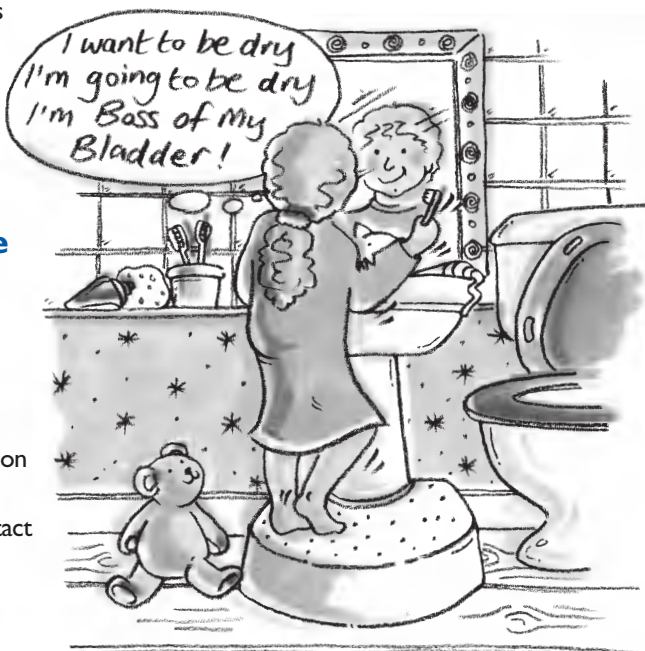
'Boss of my Bladder' exercises

Helping your child to feel in charge of the plan to become dry is very important. Asking your child to repeat the following statements before bed can help:

**"I want to be dry
and I'm going to be
dry"**

**"I'm boss of my
bladder"**

Telephone the ERIC Helpline on 0845 370 8008 to find your nearest continence clinic contact details. Alternatively, you can speak to your child's school nurse, health visitor or GP.



How professionals can help

It is very common for parents and children to reach a state of deadlock, with feelings of frustration and anger reaching boiling point. Talking it over with a professional can be reassuring and can provide a fresh start in tackling the problem. This will enable the most suitable treatment method - or combination of methods - to be chosen to help your child to move towards becoming dry at night.

Alarms

These can be used successfully for children from the age of 5 years, providing your child is motivated and is able to manage using the alarm at night with your support. You will therefore need to be prepared for disrupted nights' sleep until the routine is established and the alarm begins to result in dry nights. Treatment usually takes 3-4 months.

There are two types of enuresis alarms or buzzers:

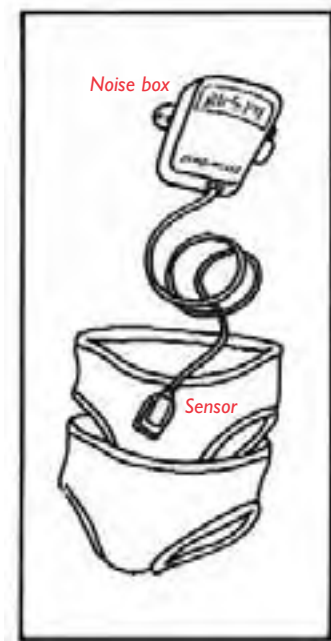
'Mini' or Body Alarm - The noise box and sensor are smaller and closer to the child (see diagram opposite). The sensor is ideally placed between two pairs of pants or used with a small panty liner pad.

Bedside Type - This has a noise box placed next to the bed and a detector mat placed underneath the bedsheet.

In both types the noise box sounds when urination begins, causing the child to wake up and hold on. Gradually, the child learns to wake up and hold on to the sensation of a full bladder without the alarm.

A small panty-liner type pad could also be added to the child's pants, available at some chemists.

Alarms are likely to be more successful if used with professional help. They can sometimes be obtained free on loan from the NHS. Both the mini and bedside alarms can also be bought from ERIC. Ring 0117 3012101 if you would like to discuss this further and to receive your copy of ERIC's Products' Catalogue. You can also order direct from the ERIC Website Shop www.ericshop.org.uk



Medicines

Desmopressin

This is the most widely prescribed medicine for bedwetting from the age of 5 (available in tablet or Melt form). Desmopressin works on the kidneys in a similar way to the naturally occurring vasopressin - by reducing and concentrating the amount of urine produced overnight (see page 1: 'What might cause bedwetting?'). Taken just before bedtime, about 7 out of 10 children show rapid improvement while using the medication.

Desmopressin may be prescribed in the short term when a child goes away on holiday, visits friends or goes on camp, but depending upon the individual assessment, it can be used for six months or more. It is usual to stop the medicine for a week after three months of treatment to see whether the bedwetting has naturally resolved. If not, a further three months' course may be prescribed by your doctor.

Depending on your child's individual problem, after about 6 months on treatment your doctor or nurse may advise you about helping your child to become dry without the medication.

Most people taking desmopressin encounter no problems. Occasionally some people suffer from headaches, nausea or stomach pain. It is important to drink only small sips of fluid for an hour and a half prior to bedtime, and until the next morning, while using this medicine.

Oxybutynin

Oxybutynin is a tablet that can be prescribed for young people who have symptoms of urgency during the day and/or night, sometimes in conjunction with desmopressin. It works by relaxing the bladder muscle. Possible side effects include dry mouth, facial flushing, nausea, constipation and abdominal discomfort.

Daytime accidents

If your child also has accidents during the day, it may be best to seek professional advice. It is vital that children have easy access to good quality drinking and toilet facilities at all times during the day, at home and at school. ERIC's leaflet 'Daytime Wetting in Childhood – a helpful guide for Parents and Carers' can be downloaded from www.eric.org.uk or send a 36p A5 sae to receive a copy. See ERIC's school Campaign websites: Water is Cool in School - www.wateriscoolinschool.org.uk and Bog Standard - www.bog-standard.org.

Holidays

Nights away from home, although understandably a source of anxiety, do not have to be avoided. Most school trip organisers are familiar with this problem and can deal with it discreetly. Also, ERIC's leaflet 'Nights Away, No Worries' can be downloaded from www.eric.org.uk or send a 36p A5 sae to receive a copy. To help with holiday management, ERIC sells waterproof, washable, sleeping bag liners.

Parents sometimes discover that their child stays dry when away from home. Why this is so is not really known. It may be that in an unfamiliar environment the body is in a greater state of alertness, thus making it easier for children to be aware of the sensation of a full bladder and respond by waking up and holding on.

Available from ERIC

Sharing and supporting - the ERIC websites

Visit the ERIC website www.eric.org.uk for information, resources, and moderated message boards. Similar resources for teenagers can be found on the dedicated ERIC website www.trusteric.org. Practical resources

can be purchased from the ERIC webshop www.ericshop.org.uk using a secure ordering facility; as well as purchasing useful products, the online shop also enables you to subscribe and donate to ERIC. Contact 0117 301 2101 to receive a free ERIC Resources Catalogue.

Subscribe to ERIC

Subscribe to ERIC and receive our quarterly newsletter “ERIC Says...” This provides an opportunity to hear from other parents, keep up to date with new advances in the field of childhood continence and support the work of the charity.

Useful resources - for parents

Your Child’s Alarm, Jennifer Adams, 1993 re-published 2005 by ERIC.

Daytime Wetting: A Guide for Parents, Penny Dobson, 1996 re-published 2006 by ERIC.

Childhood Soiling - A Guide for Parents, Penny Dobson, 1998 re-published 2004 by ERIC.

Daytime Wetting in Childhood - A helpful guide for Parents and Carers, Leaflet published 2006 by ERIC. Available to download from www.eric.org.uk or send a 36p A5 sae to receive a copy.

Useful books – for children

You and Your Alarm, Jennifer Adams, 1993 re-published 2004 by ERIC.

Bedding protection

ERIC has its own recommended range of water-resistant, washable but ‘breathable’ bedding protection. This includes duvet, pillow and mattress covers, sleeping bag liners and absorbent bed mats.

Enuresis alarms

A range of body and bedside alarms are available from ERIC.

Further details of the above resources are available via the ERIC webshop www.ericshop.org.uk or from ERIC’s Products’ Catalogue. Telephone ERIC on 0117 301 2101 or email info@eric.org.uk for your copy.

This booklet was written by Penny Dobson, Director of ERIC (Education and Resources for Improving Childhood Continence), a national charity which gives information and support to children, young people, parents and professionals on bedwetting, daytime wetting and soiling.

ERIC's telephone Helpline service is available on 0845 370 8008, 10.00am-4.00pm, Monday to Friday. If you would like further information or support, or details on where to obtain professional help, please contact the Helpline on 0845 370 8008 or email: info@eric.org.uk.

First published by the Enuresis Resource and Information Centre, 1988. Republished 2001, 2002, 2004, 2006.

ERIC is grateful to the professionals and parents who contributed to these updates.

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Contrary to popular belief, bedwetting is a common problem in the UK, affecting 1 in 6 five year olds and 1 in 15 ten year olds. Pampers BedMats has a partnership with ERIC to provide support on bedwetting for families and professionals.

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ISBN 1-903444-00-4