

FACTSHEET

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Bedwetting

Wetting the bed at night (nocturnal enuresis) is very common in young children. In fact, it is normal up to the age of five years.

Facts to remember

- About half of all three-year-olds and about 10% of five-year-olds wet their beds.
- It is a little more common in boys than girls.
- Some children also wet their pants during the day.
- There is often a family history of bedwetting.
- Most children who wet the bed have no physical or emotional problems.
- Bedwetting can become a social problem for many children and their families if it is still continuing by the age of six to seven years.

Types of bedwetting

There are two types of bedwetting:

- The child who has never been dry for more than a few months at a time (primary nocturnal enuresis).
- The child who has been completely dry for more than 6 months and then starts to wet the bed again (secondary nocturnal enuresis). An emotional event or social changes or constipation may trigger this kind of bedwetting.

What causes bedwetting?

Bedwetting usually happens during the stage of sleep in which other things like sleep walking and sleep talking occur, particularly in younger children. The precise cause is unknown but we do know that:

- The waking to a full bladder response is not fully developed in all children that wet the bed.

- 60% of children who wet the bed produce more urine during sleep than other children.
- The amount of urine the bladder holds may be less than children who don't wet the bed.
- Fluid restriction in the evening doesn't prevent the episode from occurring.

Because it happens during sleep the child has no conscious control over it.

Bedwetting can also be associated with constipation, urge incontinence (being unable to hold on when the child feels the urge to pass urine) or incomplete emptying of the bladder.

What can you do to help?

- Do reassure your child, especially if your child is upset. You need to be patient and understanding, even though you may feel angry.
- Do try a night-light. It may be useful for children who often wake up during the night, either to go to the toilet or to change their pyjamas.
- Do encourage a good night's sleep. A restful sleep without interruptions is best for your child. Waking your child to go to the toilet during the night will not help solve the problem.
- Do try absorbent pads. The pads go under the bottom sheet to keep the bed drier and more comfortable.
- Do shower or bathe your child before you let them go to pre-school or school. The smell of urine is very strong and can hang around. This may make your child feel embarrassed and lead to other problems, such as teasing and name-calling at school.

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- Do encourage your child to have plenty to drink, particularly during the day.
 - Do discourage your child from drinking caffeinated drinks in the evenings (eg chocolate or cola drinks).
 - If bedwetting is becoming a problem contact your local doctor who may provide treatment or refer you to an appropriate service. Your doctor will also examine your child for any other reasons for the bedwetting.

Remember:

- Bedwetting happens during sleep.
- Children can't decide not to do it. Be patient!
- Most children grow out of it.

When should I get some professional help?

- If your child is still wetting the bed after the age of about six or seven, and the child is unhappy or uncomfortable about it.
- If your child has persistent daytime wetting.
- If it is causing problems in the family.
- If your child has been dry at night for over a year and suddenly starts to wet the bed again.

What treatment may help?

Try these ideas:

- Your child health nurse, doctor or hospital can recommend suitable bedwetting alarms to purchase or hire - these work best with professional help.
- Alarms may be used in conjunction with a suitable bladder training program.
- Certain medications may help, especially in older children, however the problem may occur again when the medications finish.
- Counselling may help if the problem is emotional.
- Bladder-training programs may help if the child is happy to take them and are most useful in children with daytime wetting problems.
- New research is being done all the time, so don't give up hope if the problem doesn't correct itself straight away.