



Bladder & Bowel UK

Supporting people with bladder and bowel problems

part of Disabled Living

Talk about Day-Time Bladder Problems



This information has been produced to help children and their parents/carers understand about daytime wetting and other bladder problems such as 'frequency' and 'urgency'. It explains why these happen and what can be done to help things get better.

Most children become reliably dry in the day by the time they are 2-4 years old. However some continue to have wetting accidents in the day. Often the cause is unknown, but some underlying problems, such as constipation, can make the problem worse. It is therefore any child who has bladder problems once they are aged 5 years or more should be seen by either their doctor or nurse for appropriate assessment and treatment or advice.

It is important to remember that daytime wetting is not the child's fault. It is not caused by anything you or your child has done, or has not done in the past. The problem can be helped, although treatments often take some time to work and relapses can happen.

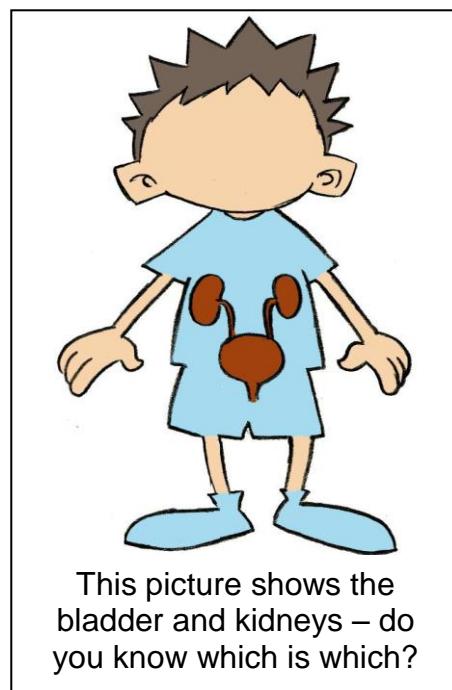
Try to always praise your child for any efforts they make to become dry. Do seek further help from your child's nurse or doctor

Why do we wee?

Urine (wee) is one of the ways in which the body gets rid of things it does not need.

Wee is made in the kidneys and stored in the bladder. The bladder is a bit like a soft, stretchy balloon. When it is starting to get full the bladder sends a message to the brain, to tell you that you need a wee. It is a bit like a telephone message: your bladder gives your brain a call to say you need to go to the toilet.

Your brain should start to get messages from your bladder before it is full. This then gives you time to finish what you are doing and get to the toilet, before you are desperate.



This picture shows the bladder and kidneys – do you know which is which?

Why does day time wetting happen?

Day time wetting can happen for lots of reasons. This might be because:

- Your bladder is not big enough to hold on to your wee, so it leaks.
- Your bladder is big enough, but it becomes 'twitchy' and empties before it is full. A bit like it having the hiccups. It just lets go of some wee because it is twitching.
- Sometimes your bladder tells you that it wants to empty when it is twitching. This means that you suddenly have a desperate need for the toilet. If you can't get there quickly enough you get damp or wet clothes.

- Some children ‘dance about’, hold themselves, or crouch. They don’t always realize that they need a wee when they start doing this. When this happens they may not be able to hold onto the wee when they do realize they need the toilet and some dribbles out.
- Sometimes children are very busy and forget to listen to their bladder telling them it needs a wee. The bladder gets too full and cannot hold on, so they get wet.



What causes daytime wetting?

Overactive Bladder

‘Overactive bladder’ is also sometimes called ‘detrusor instability’ or ‘unstable bladder’. This is one of the commonest causes of daytime bladder problems, including wetting.

When the bladder is overactive it sends a sudden signal to the brain saying that it wants to empty (you get the feeling you need the toilet urgently). This often happens before the bladder is full. Usually the bladder stays soft and stretchy while it is filling and until you get to the toilet. Overactive bladder is usually caused by the bladder getting twitchy part way through filling and before you get to the toilet.

People with an overactive bladder may have a problem with '**frequency**', which means they get the feeling that they need to wee more often than most people do. They may also have '**urgency**', which means they get very little warning that they need to wee and have to run to get to the toilet in time.

Overactive bladder is a very common problem. Often grown-ups think that children with this problem are being lazy and putting off going to the toilet until it is too late. They do not always believe that children have not noticed they need a wee, especially if the child is ‘dancing’ or holding themselves. However, children often dance or hold themselves as an automatic response to the messages from the bladder, without realising this is what is happening.

Constipation

If you are not pooing often enough, the poo will collect in your bottom. It will squash against your bladder, giving your bladder less space and making it less able to hold on to the wee. If you are constipated you may get frequency, urgency or day or night time wetting.

Drinks



If you are not drinking enough your wee will be dark yellow in colour and very strong. Strong wee can irritate the lining of the bladder and make the twitching worse. Fizzy drinks and drinks with caffeine in them also irritate the lining of the bladder. Tea, coffee, cola, hot chocolate and energy drinks all contain caffeine.

If the bladder lining is irritated then the bladder twitching will get worse. This means that you will need to go to the toilet more often and you may get more wetting.

Not getting to the toilet in time

If you 'hold on' for too long, instead of going to the toilet when you feel you need to wee you are more likely to wet.

Infections

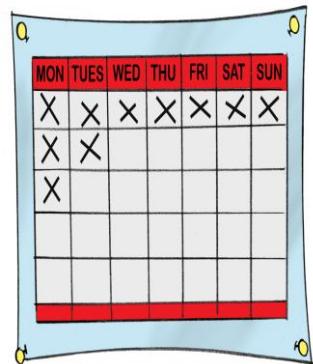
Urinary tract infection (UTI) can cause frequency and urgency. This means you might want to go to the toilet more often than usual and have to get there quickly. Urinary tract infections also make you more likely to have wetting accidents. Infections can make you feel sore when you wee, so it is important to tell someone if it hurts when you go to the toilet. Not changing if your pants are wet could make your skin sore, or make you more likely to get a urinary tract infection.

My doctor or nurse has asked me to fill in some charts – why?

Keeping a record of your drinks and wees for two or three days can help you and your doctor or nurse find out how well your bladder is working.

You may be asked to:

- Record on a chart whenever you have a drink. This will help you and your doctor or nurse know if you are drinking the right amount for your age and if you are drinking things that might irritate your bladder.
- You may be asked to measure your wee, every time you go to the toilet. You may be asked to do this for two or three days at a time and write it down on a chart. Your nurse or doctor can then work out if your bladder is holding the right amount of wee for your age. You can also work this out with the equation: your age in years + 1 x 30. This will give you the average bladder capacity for your age in mls.
- You may be asked to write down when you get damp or wet.
- You may be asked to keep a record of all your poos for a few days to make sure you are not constipated.



Getting your bladder to work better

There are some things you can do that will help your bladder get bigger and stronger. This is sometimes called 'bladder training'. Your doctor or nurse may also suggest you take some medicine which helps the bladder relax.

What is bladder training?

Bladder training is a way of helping you get better. You may be asked to:

- Make sure you have a water-based drink every two hours or so. Water is the healthiest drink. If you don't like water you could try drinking diluted fruit squash instead



- Go for a wee after every drink
- Make sure you sit on the toilet properly (for girls) with your feet supported on a step. Boys might be asked to sit down to wee once or twice a day, to help make sure you empty your bladder properly
- Do not rush having when you are having a wee. Take time to make sure you empty your bladder completely. You can try counting while you have a wee. Make sure you sit there for 10-20 seconds.
- You might be asked to 'double void'. This means that when you have finished doing a wee you wait for 20-30 seconds and then try to wee again. You might be asked to stand up (girls), or move a bit before you try to wee again.



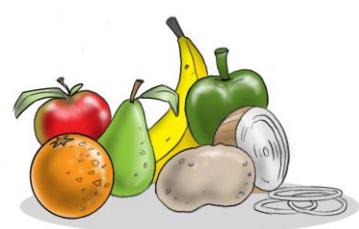
What else can I do to help?

- Make sure you are drinking 6-8 water based drinks every day, including three at school. Ask your mum, dad or carer to explain to your teacher that you need to drink at school. Most school-aged children need about 1.5 litres of drinks a day with half of these drunk while they are at school. Older children and those who are very active may need more.



- Think of the rhyme "1, 2, 3 do I need a wee?" to remind you to go to the toilet after your drinks.
- Ask your mum, dad or carer to explain to your teacher that you need to be allowed to use the toilet at school whenever you need a wee.
- If you have a wetting accident, change your wet pants straight away. Make sure you take some spare clothes, wipes to clean yourself and plastic bags for wet clothes, to school with you. Do not flush the wipes down the toilet – they might block the toilet. Put them in the bin, or in the plastic bag with your wet clothes if there is no bin. Remember to take any wet clothes home for washing.
- Girls should remember to wipe their bottoms from front to back. This helps to stop 'germs' from the bottom getting into the bladder and causing infections.

- Try to make sure you don't get constipated by eating lots of fruit and vegetables. Tell someone if you are doing less than three poos per week, or if your poos hurt when they come out, or if they are difficult to push out.
- It is not your fault that you are getting wet, but it is important that you try to follow any advice you have been given to help you get better.



Medication

Anticholinergics

Sometimes medication is needed to help make the bladder problem better. It is often needed if there is a lot of frequency (going to the toilet often), urgency (having to get to the toilet quickly), or wetting. These are all symptoms of an 'over active' bladder.



The medicines (called anticholinergics) help your bladder to stay soft and stretchy while it is filling. It helps stop the bladder twitching and helps it to relax. Although medicines can be very helpful, sometimes they can affect other parts of the body and cause things you may not want to happen. These are called 'side effects'.

If an anticholinergic medicine is suggested for you and it causes any problems then talk to your doctor or nurse about these. Most people start a low dose of medicine to help the bladder get better without the medicine causing problems. Some people need to increase the dose after a time. Your doctor or nurse will explain this to you. Most people do not need to stay on the medicine for a long time. The medicine often works better if you are doing bladder training as well.

Antibiotics

If you have had an infection in your bladder you may have to take medicine called antibiotics. Antibiotics will make the infection go away. Some people need to stay on antibiotics after the infection is better to help stop the infection coming back. Your doctor or nurse will explain this to you, if antibiotics are needed.

If you have concerns

It can sometimes take time for treatments to work. If you are worried then talk to your doctor or nurse who will be able to explain what they think is causing the problem for you and what the options are.

Further information is available from:

Bladder and Bowel UK
Disabled Living
Website: www.bbuk.org.uk



Bladder and Bowel UK, working under the umbrella of Disabled Living, provides impartial advice and information regarding resources, products and services for children and adults with bladder and bowel problems.

There is a free confidential helpline available at 0161 607 8219 or at email bladderandboweluk@disabledliving.co.uk