Talk about bedwetting

Bladder & Bowel UK

Information for children

What is bedwetting?

Bedwetting happens when your bladder empties while you are asleep. It happens to lots of children and young people. However, because no one likes to talk about it, you might not realize that it can happen to other children as well.

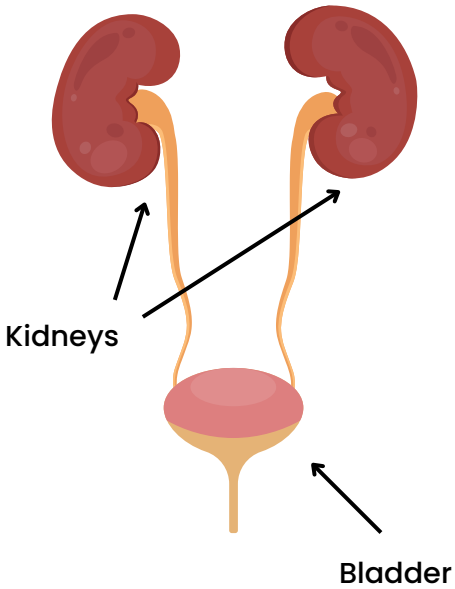
Why do people wee?

Making urine, which is the medical name for wee, is one of the ways that the body gets rid of rubbish. The other way is poo.

Urine (wee) is made in the kidneys and stored in the bladder. The bladder is a bit like a stretchy balloon. When it is nearly full it sends a message to your brain, telling you that you need a wee.

Lots of children sleep all night without needing a wee. If they do need a wee, they wake up and go to the toilet.

Children who wet the bed do not get the messages from the bladder loudly or clearly enough to wake them up when they are asleep. If they don't wake up, their bladder will just empty anyway, and the bed gets wet.



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Why does bedwetting happen?

Bed wetting can happen for lots of reasons. Children who wet the bed are not able to wake up when their bladder wants to empty. Your bladder might want to empty during the night because:

- Your bladder is not big enough to hold on to your wee all night.
- Your kidneys are making more wee at night than they should be, so your bladder cannot hold it all.
- Your bladder wants to empty before it is full. If this is happening in the day as well, you might have to run to the toilet, or you might get damp pants on the way to the toilet.

What else can cause bedwetting?

Constipation

If you are not doing a poo often enough, or if you are not managing to get all the poo out, then poo will collect in your bottom and squash against your bladder. This will make it difficult for your bladder to hold on to your wee.

Family history

If either your mum or dad, or another close relative, had a problem with bedwetting then there is a chance that they have passed that problem on to you.

Drinks

Drinking just before you go to sleep can make you more likely to wet the bed. If you do not drink as much as you should during the day, then your bladder may get used to holding small amounts of wee and be less able to hold onto all your wee at night.



Fizzy drinks and drinks with caffeine in can make you more likely to wet the bed as well. Tea, coffee, hot chocolate, energy drinks and coke all have caffeine in them. Try to avoid having them, especially in the evenings.

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Food

Food with lots of salt (such as crisps or bacon) and food with lots of protein in it (such as meat, milk, cheese) can encourage your kidneys to make more wee. If you make more wee than your bladder can hold, then you are likely to wet the bed.

Not waking up

If your full bladder doesn't tell your brain you need to wake up to wee, then it will empty while you are asleep and your bed will get wet.

What can i do to help?

- Make sure you are drinking 6 – 8 water-based drinks each day (including 3 at school). Ask if you can have your drink on your desk, to remind you to have it. Remember that water is the healthiest drink.
- Try to avoid fizzy drinks and drinks with caffeine in them. Tea, coffee, hot chocolate, cola and energy drinks have caffeine in them.
- Try not to drink or eat in the hour before you go to bed.
- Try not to get constipated by eating lots of fruit and vegetables. Tell someone if you are doing less than 3 poos per week, or if it hurts when you poo, or if you feel as if the poos are getting stuck on the way out.

Bedwetting is not your fault, but it is important that you do try to do the things suggested here and anything your nurse or doctor suggests for you.





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What if these don't work?

Your school nurse, health visitor or doctor can help work out what makes you wet the bed. They will then help decide what the best treatment will be for you.

What will the nurse or doctor do?

The nurse or doctor will ask lots of questions to try and understand how often your bed gets wet and what might be causing the problem. They might ask you to measure your drinks and wees for two or three days and write this down on a chart. They might ask about your poos. They will then talk to you about what might help.



Bladder training

If it is thought that your bedwetting is caused by a problem with your bladder, then you will be asked to do things that will help your bladder get bigger and stronger. This is sometimes called 'bladder training'.

You may be asked to:

- Try different types of drinks to see whether any of them make the bedwetting better or worse.
- Measure how much wee you are doing to see if your bladder is getting better at holding your wee.
- Have a drink every two hours until an hour before bedtime.
- Go for a wee after you have a drink.
- Make sure you sit on the toilet properly (for girls) with your feet on a step. Boys might be asked to sit to wee at least some of the time.
- Be careful not rush when having a wee; take you time to make sure you empty your bladder completely.

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Your nurse or doctor may suggest that you take some medicine to help your bladder work well. If they think this is a good idea for you, they will talk to you and your mum, dad or carer about this. They will explain how the medicine works and how and when you should take it.

The enuresis alarm



The enuresis alarm helps your brain to recognize the signals coming from your bladder when you are asleep. It does this by making a noise as soon as you start to wee which helps you wake up.

Once you have been woken by the alarm you have to switch it off. Then you need to go to the toilet to try and wee. You need to do this, even if you think that you have finished weeing. If you don't wake up straight away, then your mum, dad or carer will need to help you wake up. When you have been to the toilet you need to change any wet bedding. You may be asked to reset the alarm, in case you wet again that night. Your nurse will tell you if this is needed.

It can take some time before you learn to wake to the alarm noise by yourself. It can take several weeks before you become completely dry. Once you have been dry every night for about two weeks, you can have a try without the alarm to see how you get on.

Medication - Desmopressin

The doctor or nurse may suggest that you try a medicine to help with the bedwetting.

Desmopressin is the name of the medicine that helps your kidneys to make less wee at night. This may help you if you are wetting the bed because your kidneys are making too much wee while you are asleep. It comes as a melt (a special tablet that dissolves in your mouth) or a tablet.

Desmopressin starts to work straight away and can be taken until you are able to stay dry without it. You should have one week without it every twelve weeks to check if you still need to take them. If you are dry in the week without them, you do not need to take them anymore.

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Desmopressin does not always work the same way for everyone. Some children get dry with only one melt or tablet; other children may need to take two. Your nurse or doctor will tell you the right dose to take. Do not take more than they tell you to take.



If you take desmopressin you must not drink for one hour before you have it and for eight hours after it (you will usually be asleep then). You must not take it if you are ill. Always follow the instructions that come in the box with it and ask your doctor or nurse if you are not sure.

Some children need more than one thing to help them stay dry at night: some may need desmopressin and an enuresis alarm. Sometimes the doctor or nurse may suggest a different medicine to help your bladder hold more wee. If one thing does not work, do not give up. Talk to your nurse or doctor at your next appointment to see if there is anything else you can try. Remember it can take some time for bedwetting to get better.

Information for parents and carers:

It is important to remember that bedwetting is not your child's fault and is not caused by anything you or your child has, or has not done, now or in the past.

This problem can be helped. Treatment should be available for children from five years old, but often takes a while to work and sometimes the bedwetting starts again after treatment. Some changes, (making sure your child is drinking enough during the day and is going for a wee just before sleep) can be done before they are five years old. Restricting your child's drinks and waking them to go to the toilet during the night should be avoided. Encouraging a bath or shower each morning will remove the smell of urine and avoid the risk of teasing.

Talk about bedwetting

Constant bedwetting can make people angry, but this can sometimes make the wetting worse. Try and praise your child for any efforts they make as often as you can. Always seek further help from their nurse or doctor. This is particularly important if you are finding it hard to cope.

For more advice and support speak to your child's health visitor, school nurse or GP.



Further information is available at: Bladder & Bowel UK
Website: www.bbuk.co.uk

There is more information for families in the Bladder & Bowel UK leaflet Understanding Bedwetting
There is also information on the website at www.stopbedwetting.org

There is a confidential helpline at:
Email: bbuk@disabledliving.co.uk
Tel: 0161 607 8219

Bladder & Bowel UK, working as part of Disabled Living, Manchester, provides impartial advice and information about services and resources that are available for both children and adults with bowel and/or bladder problems.