Understanding Desmopressin as treatment for bedwetting

Bladder & Bowel UK

A guide for parents and carers

What is desmopressin?
Desmopressin is a medication used to help treat bedwetting. Bedwetting is a medical condition in children over five. It is where the bladder empties during sleep, so the bed gets wet. It can affect anyone of any age.

How does desmopressin work?
Vasopressin is a hormone that tells the kidneys to make less urine (wee). The body usually makes more vasopressin at night than it does during the day. So, the kidneys make less urine during the night. That is why many children can go all night without needing the toilet.

Some children do not produce enough vasopressin while they are asleep. These children make almost as much urine during the night as they do during the day. Their bladders fill before the morning. To stay dry the child needs to be able to wake up and go to the toilet. If their brain cannot wake them up their full bladders let go and their bed gets wet. They stay asleep when this happens. Making a large amount of urine at night is sometimes called nocturnal polyuria.

Desmopressin behaves like vasopressin. It tells the kidneys to make less urine during the night. Desmopressin is available as a tablet, or a melt (Desmomelt®), or a liquid (Demovo®).

What is the difference between the tablet, melt and liquid forms of Desmopressin?
The desmopressin tablet should taken with water. DesmoMelt® looks like a tablet, but it dissolves quickly when put under the tongue. It does not need to be swallowed. Demovo® is a concentrated liquid, so only a small amount is needed. Many children find a liquid or melt easier to take than a tablet. Both the melt and the liquid are flavourless.

Are there any special instructions for taking desmopressin?
Children and teenagers must not drink for one hour before having desmopressin. They also must not drink for eight hours after taking it. Do not give your child or teenager desmopressin on nights if they have been drinking before going to bed. This includes during swimming. Teenagers should not take it if they have been drinking alcohol in the evening.

Do not give your child or teenager Desmopressin if they are unwell with any illness. This includes if they have diarrhoea and /or vomiting, or a raised temperature.

Do not use desmopressin tablets if your child or teenager needs lots of water to swallow a tablet. Speak to their doctor or nurse about them trying the liquid or melt instead.

Does Desmopressin have any side-effects?
Desmopressin helps the kidneys make less urine, so more water stays in your child or teenager's body overnight.

Do not let your child or teenager drink anything for 1 hour before bedtime or for 8 hours after taking desmopressin. This helps prevent too much water building up in the body, which can cause a condition called hyponatraemia.

Symptoms of hyponatremia include headache, feeling sick and vomiting. Hyponatremia can be a mild or a serious medical condition.

Other possible side effects of desmopressin include headache, stomach pain and feeling sick. Reports of allergic reactions and emotional disorders including aggression are rare.

If you think your child may have any side effects, stop giving the desmopressin. Talk to their doctor, pharmacist or nurse. This includes for any possible side effects not listed on the package leaflet.

What dose of desmopressin should my child have?

The doctor or nurse will talk to you about the types of desmopressin (tablet, melt or liquid). They will discuss with you which option may be best for your child or teenager. They will also tell you how much desmopressin your child should have. Always follow their advice and ask them if you are not sure.

Desmopressin tablets come in 200mcg strength. The usual starting dose is 200mcg (one tablet).

Desmopressin melts (DesmoMelt®) come in a 120mcg and 240mcg strength. The usual starting dose for DesmoMelt®, is 120mcg. This is an equal dose to the 200mcg tablet. Your child or teenager should put the melt under their tongue, and it will dissolve quickly.

Desmopressin liquid (Demovo®) comes in 360mcg /ml strength. The usual starting dose for Demovo® is 180mcg (0.5ml).

If there are wet nights after a week with desmopressin, the doctor or nurse may double the dose. For tablets that would be 400mcg (two tablets). For DesmoMelt®, that would be 240mcg (two 120mcg melts or one 240mcg melt). For Demovo® that would be 360mcg (1ml). These are the largest doses. Do not increase the dose unless your child or teenagers doctor or nurse tells you to.

When should my child take desmopressin?

Desmopressin should be given at bedtime or, if possible, up to an hour before your child goes to bed.

Your child or teenager must not drink for an hour before they take desmopressin and for 8 hours afterwards.

If you forget to give your child the desmopressin, do not give a double dose and do not give it during the day.

The tablet and liquid form of desmopressin may work less well if given with or shortly after food. If possible, children should stop eating an hour before they take it.

How long can my child take desmopressin for?

After 12 weeks of taking desmopressin, your child or teenager should have a week without it. This is to see if they still need it or can stay dry without it.

If your child or teenager is wet for two or more nights in the week without desmopressin they can restart it. They may take it for a further 12 weeks. These 12 weekly cycles can continue for as long as necessary. If your child or teenager is dry in the week without the desmopressin, do not restart it. Their body has learned to keep them dry without it.

If desmopressin does not work, talk to your child or teenager's doctor or nurse. They will discuss the options with you. They may need other treatment or a different type of desmopressin.

Is desmopressin suitable for everyone?

Desmopressin is suitable for children over 5 years of age.

Desmopressin should not be used for children who:

- have cardiovascular (heart) disease
- take diuretics (medications that help the kidneys produce more urine)
- have high blood pressure
- low levels of sodium in their blood
- syndrome of inappropriate antidiuretic hormone secretion
- von Willebrand's disease type IIB.

Speak to your child or teenagers doctor (GP or consultant) if they have:

- cystic fibrosis
- epilepsy
- kidney problems

Desmopressin may not be suitable for them.

Can my child or teenager take desmopressin with other medicines?

Tell your child or teenager's doctor or nurse if they are taking other medicines. Do this before they have desmopressin. The following medicines may increase the effect that desmopressin has:

- Tricyclic antidepressants
- Chlorpromazine
- Carbamazepine
- Loperimide (Imodium) and other medicines that slow bowel (gut) transit
- Non-steroidal anti-inflammatory drugs such as ibuprofen

These medicines may reduce urine production more than with desmopressin on its own. They increase the risk of water retention and/or hyponatremia.

Where can I get more information about desmopressin?

Always follow advice given to you by your child or teenager's doctor or nurse.

There will be an information sheet in the box with the desmopressin. It is important that you always read the information sheet.

Contact your child or teenager's doctor or nurse if you have any questions or concerns. The pharmacist will also be able to give you more information and advice.

Further information

Find more information about child bladder and bowel health in our information library at www.bbuk.org.uk. You can also contact the Bladder & Bowel UK confidential helpline (0161 214 4591). For further advice on bladder and bowel problems speak to your GP or other healthcare professional.

Last reviewed: August 2026
Review due: August 2029
Version 3