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## Managing Bedwetting in Children:

Bedwetting is a **common** and distressing problem for the child and the parents. Mostly parents come and see the doctor for advice when the bedwetting affects a child's social life – for example, if they don't want to do sleepovers or go on holiday in case they wet the bed. However it is a good idea to see the GP early on if:

- Your child has any other symptoms along with bedwetting, such as pain when weeing, fever or constipation
- Your child has suddenly started wetting the bed after they've been dry at night for a while

Bedwetting is usually not considered a problem until it bothers either the child or the parents. Under the age of 5 bedwetting is so common that usually no medical intervention is needed and the child grows out of it.

The causes of bedwetting can be as simple as drinking too much before bedtime or not getting up when the brain signals to pass urine. Sometimes bedwetting can be caused by **constipation, Type 1 diabetes or a urinary tract infection**. Occasionally if your child has started wetting the bed after being dry at night for a while, there may be an **emotional issue** behind it such as bullying at school or the arrival of a new baby.

The most important thing to remember is that every child from time to time can wet the bed and to **reassure** your child that it is not their fault. Don't tell them off or punish them for wetting the bed as this won't help and could make the problem worse. If the problem is ongoing before going to see the GP there are things that you can do at home such as:

- Encourage fluid intake in the daytime. Around **1-2 litres** is a good amount for most children between 4-18 years old.
- Drinks containing **caffeine** (such as cola, tea and coffee) should be avoided.
- Encourage your child to take **regular toilet breaks** in the day. Around four to seven times a day, including just before bed.
- Using sticker or star charts (depend on the age of the child or young person) can help with bedwetting. Rewards should be given for agreed behaviour **rather** than dry nights, for example, they may be given for drinking the correct amount during the day, using the toilet before sleep, helping to change wet sheets and, if appropriate, taking tablets or using an alarm correctly. These should be agreed with the child or young person beforehand. Systems that punish or take away rewards should not be used.
- Waking the child or young person during the night to take them to the toilet should only be used as a **short-term** practical measure (for example, if you are on holiday or away from home).
- If your child wakes during the night you should take him or her to the toilet.
- If your child is afraid of the dark and that prevents them getting out of the bed to go to the toilet consider getting a **night light**.
- If your child is toilet trained but below the age of 4 years old then it may be appropriate to use **pull ups** for a short while. Then once you and your child is ready, to try at least 2 nights in a row without nappies, and even longer if your child is closer to 5 years, or if wetness is reduced or it is acceptable to your family to continue.

If the tips above do not help, a **bedwetting alarm** can be used. This is a moisture-sensitive pad your child wears on their night clothes. An alarm sounds if they start to wee and wakes the child up. You can also get vibrating alarms for children who have impaired hearing. The bedwetting alarms can be bought online for £40-£140. The alarm should be used for 4 weeks and if there is no change in the bedwetting behaviour then it is important to get **advice** from the GP.



Picture ref: pixabay.com

**So pop in and see us at DOCTORnow if you are still worried about your child. For any further advice, on managing bedwetting parents can look at the UK-based charity ERIC, The Children's Bowel and Bladder Charity.**