Seven Steps to Nighttime Dryness

A Practical Guide for Parents of Children with Bedwetting

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posterior urethral valves in boys or ectopic ureter in girls. Only three in 100 bedwetting children have a physical abnormality that causes the bedwetting. The rest have normal urinary systems. If your child has had urinary tract infections or has problems with daytime wetting, the likelihood that there is a physical problem increases.

Ten common myths and facts about bedwetting

1. YOU HAVE TO WAIT FOR YOUR CHILD TO OUTGROW BEDWETTING.

Although 15 percent of bedwetting children stop wetting on their own each year, that means 85 percent will still be wetting this time next year.[13] Because we now have safe, effective techniques to help your child eliminate bedwetting, there is no reason that you have to wait for years for bedwetting to stop spontaneously. When your family has become frustrated with laundry and begins making excuses for sleepovers, it is time for intervention. Your child should be around 6 before you start.

2. MOST CHILDREN WITH BEDWETTING HAVE MENTAL OR PHYSICAL PROBLEMS.

Only three in 100 children with primary nocturnal enuresis have a physical or urologic cause for it. Psychological problems as a cause of primary bedwetting are not common. Even children with emotional challenges can respond to treatment for bedwetting.

3. IF A CHILD IS A SOUND SLEEPER, A BEDWETTING ALARM WON'T WORK FOR HER.

It is true that children with bedwetting may have a higher threshold for loud noise than other children. Initially the alarm is for the parents—so they can help wake the child and accompany her to the bathroom. Over time, the child begins to associate the noise with stopping the flow of urine and going to the toilet. Gradually, she will learn to control her muscles in response to a full bladder instead of relaxing them as she has done in the past.

4. IF THE CHILD DOESN'T TELL HER PARENTS SHE IS BOTHERED BY HER BEDWETTING, SHE PROBABLY DOESN'T CARE IF SHE IS WET.

No child wants to wake up in a wet bed. As children reach school age and realize their peers don't wear disposable pants or worry about waking to a wet bed, their self-esteem and social independence are affected. By middle school, their age-appropriate activities are sharply curtailed.

All children would rather be dry, and if given ways to control this, are very cooperative with treatments and the use of bedwetting alarms.

5. BEDWETTING IS NOTHING MORE THAN A PESKY PROBLEM THAT WILL EVENTUALLY GO AWAY.

Perhaps, but with effective treatment available, why wait until your child outgrows it? Financially, enuresis impacts families. One or two extra loads of laundry each day can cost as much as $700 each year. Disposable pants can easily add up to $400 a year. Medications for bedwetting can cost $4 per tablet, and even $25 prescription drug copays add up over time.

Emotionally, enuresis impacts families. Overnight arrangements are cumbersome—taking along waterproof sheets, disposable pants, extra clothing, etc. Hiding enuresis from other family members and friends is painful. Peers and siblings can be cruel, teasing or humiliating the affected child. Parents must make every effort to prevent teasing from siblings. Remind siblings that they may have challenges in certain aspects of their lives, too. Bedwetting is not done on purpose. Your family works together to overcome challenges.

6. MY CHILD IS ALONE IN HAVING THIS PROBLEM.

If a parent, grandparent, aunt or uncle with a history of bedwetting can share their memories with your child, it will help her see that she is not so different. Learning that an adult she respects and admires was similarly affected may help. Also remind your child that, in a class of 25 8-year-olds, at least one or two other children wet the bed.

7. BEDWETTING OCCURRED BECAUSE I LEFT HIM IN DISPOSABLE PANTS TOO LONG.

Most children are day toilet trained between ages 2 and 4. There are generally three types of children where it comes to nighttime dryness:

- Those who become spontaneously dry at night.
- Those who begin with an occasional dry night, progress to more dry nights than wet ones and achieve complete dryness without intervention, usually by 6. Parents of these children should assist them in removing their disposable pants immediately after wakening in the morning and urinating in the toilet. Disposable pants can be discontinued as dry nights prevail.
- Those who have had very few, if any, dry nights in their lives. These children may wet no matter where they are, how much their fluids are restricted or even if their parents take them to the toilet during the night. Using disposable pants in this group can decrease parent frustration until a treatment program is in place.

8. PARENTS SHOULD RESTRICT PRIVILEGES OR PUNISH THEIR CHILDREN SO THEY WILL BECOME DRY QUICKER.

Remember, your child does not consciously control her bedwetting. Punishing your child for an activity that she has no control over is counterproductive. Dealing with the wetting in a supportive manner, such as having your child help make her bed or carry her bedding to and from the washer should be viewed as sharing in household tasks, not as punishment.

9. PUBERTY WILL END BEDWETTING.

It's true that the number of children with bedwetting decreases with age, but even 1 percent of 18-year-olds continue to have bedwetting. Puberty does not cure bedwetting, and there is no reason that you should wait until your child approaches this age before you attempt treatment.

10. MEDICATION IS A SURE CURE FOR BEDWETTING.

Although medications such as desmopressin (DDAVP) or oxybutynin (Ditropan) work well as an adjunct to therapy and in instances where a child has to be dry (camps or overnight visits), use of medication alone rarely helps a child permanently overcome bedwetting. When the medication is stopped, the wetting returns in 80 to 90 percent of those treated. Medication can help to buy time in some families who are not ready to use a bedwetting alarm. Children who use alarms are nine times more likely to become dry and stay dry than those who use medication alone.[14]

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