



# Bedwetting

Bedwetting is common in children. It is very important for the family caregivers to be encouraging and patient with the problem. Given enough time, your child will usually outgrow wetting the bed.

## What do we know about bedwetting?

- Bedwetting or nighttime bedwetting (called **nocturnal enuresis**) is a common problem in children.
- Wetting the bed is thought to be normal up to age 5.
- Fewer than 20% of five-year-olds (about one in six) still wet the bed.
- At age five, bedwetting does not need testing or treatment.
- In almost all cases your child will outgrow bedwetting in time without treatment.
- Bedwetting may run in families.

## What causes bedwetting?

- Experts have several ideas about the reasons for bedwetting.
  - Most often it seems that nighttime bladder control is not developing the way you might expect at your child's age
- Bedwetting usually comes from problems with the bladder or bowels and not from other problems in the body.

## How do you test for bedwetting?

- You will be asked about your child's:
  - Experience with toilet training
  - Usual routine for urinating
  - Bowel and bladder habits using a "voiding" or "stool calendar"
- Your doctor will go through:
  - How long the bedwetting has been going on
  - How often bedwetting happens
  - How serious the bedwetting problem is for your child and family
  - What therapies have been tried
- An exam of your child's abdomen, lower back and genitals will show anything that can be easily seen and unusual.
- A simple urine test will help to rule out a urinary infection and other physical features that are not normal.

- In most cases other tests are not necessary except if there is:
  - A serious wetting problem during the day
  - Staining in your child's underwear
  - A urinary infection
  - Physical features that are unusual

## How is bedwetting treated?

- Most children who wet the bed sooner or later will get total and reliable control over their bladders without any treatment.
- If family caregivers are patient and gently encouraging about overcoming bedwetting, their children may feel less anxious about it.
- In some cases, treatment may be able to help your child gain bladder control.
- Treatment may include any of the following (for explanations see following sections):
  1. behaviour modification
  2. a bedwetting alarm
  3. treating bowel and bladder problems
  4. medication.

### Behaviour modification

- Behaviour modification is a way of using rewards to encourage a change in your child's behaviour.
- In order to help with bedwetting, your child could try to:
  - Drink less fluid during the evening
  - Urinate regularly throughout the day
  - Go to the bathroom right before going to bed.
- It may be a sensible idea for family caregivers to wake up their child a few hours after going to bed to urinate again.
- It is important to keep track of "dry nights."
  - Your child might pick out stickers and put them on a calendar to celebrate.
  - Your child might feel more successful if there is a reward or treat when there are several "dry nights" in a row.

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- It is important not to punish or scold your child for wetting the bed because:
  - It may make your child even more anxious about the problem.
  - It often increases the number of nighttime bedwetting accidents.

### Bedwetting alarm

#### How can a bedwetting alarm help?

- Bedwetting alarms can be useful for training children to get control over nighttime bedwetting.
- A bedwetting alarm has a special sensor that clips onto a child's pajamas near the groin.
  - The sensor is attached to an alarm that makes a noise or vibrates.
  - The alarm goes off when your child starts urinating.
  - The alarm is meant to wake up your child.
  - Once warned, your child can then get to the toilet and finish urinating.
- At first, your child may not wake up with the alarm.
- For the first few nights then, it may be a good idea for you to sleep in your child's room to help with waking up.
- After three to six months, your child may no longer need the alarm.
- If children become frustrated, they may:
  - Feel they are not making any progress after using the alarm for a few weeks
  - Need to take a break for a few months
  - Need to try again later
- A bedwetting alarm:
  - May be rented or bought through a medical supply store
  - May also be bought online

### Medication

#### Is there medication that will help with bedwetting?

- Several drug treatments have been useful for helping your child with bedwetting.

### Bowel Management

- Your doctor will want to treat any bowel problems or constipation first.
- This can be done with a drug called PEG 3350.

### Bladder Management

- If your child has a daytime wetting problem (called **diurnal enuresis**), medications such as propiverine-MICTORYL® (or antimucarinic medications prescribed by your pediatric urologist) are available.
- Other medications that deal with bladder problems may be used as well.

### Desmopressin (DDAVP™)

- When taken at bedtime, desmopressin:
  - Helps the body to make less nighttime urine
  - Helps prevent the bladder from filling up so much that urine leaks out
  - Works well when the amount of fluid that your child drinks in the evening is limited
- Many children use DDAVP™ only when they need it so that they can stay dry at night (such as for sleepovers or camping trips).
- DDAVP™ is not a cure but can help with the problem until your child can outgrow bedwetting.

### What kinds of treatment work best?

- Your doctor will go over various kinds of treatment for your child's bedwetting.
- You and your doctor will then decide whether or not treatment is needed.
- In the end, nearly all children will outgrow their bedwetting problem with or without treatment.
- It is important to understand that bedwetting is not a disease or illness.
- Bedwetting is simply nighttime bladder control that your child has not yet mastered, regardless of age.
- Patience and encouragement go a long way toward helping children learn to control their bladders at night.

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