

# Bedwetting is very common.

At the age of 5, **1 in 7**  
children wet the bed regularly.  
By 10, **1 in 20** are still affected.

Colchester and Tendring have Nurse-led clinics for bedwetting, available to children. Your child must be referred to the clinic via your GP, to ensure your child is screened and treated for medical conditions beforehand.

This referral to the Enuresis (bedwetting) clinic may take up to a month from your first visit to the GP to allow time for screening results and any medical treatment required.

[www.eric.org.uk](http://www.eric.org.uk)  
Mon – Fri 8am to 4pm  
0845 370 8008

[www.stopbedwetting.org](http://www.stopbedwetting.org)

<http://www.nhs.uk/conditions/bedwetting/Pages/Introduction.aspx>

[www.childrenfirst.nhs.uk](http://www.childrenfirst.nhs.uk)

Find your local GP  
[www.nhs.uk/servicedirectories](http://www.nhs.uk/servicedirectories)

NHS Direct 0845 4647  
[www.nhs.direct](http://www.nhs.direct)

Portions of text reproduced with the kind permission of Great Ormond Street Hospital's Children First for Health website:  
[www.childrenfirst.nhs.uk](http://www.childrenfirst.nhs.uk)

## Common Child Conditions Bedwetting



**North East Essex**

The printing of this leaflet has been sponsored by Ferring Pharmaceuticals Ltd. Ferring Pharmaceuticals had no input into the content.

# Bedwetting...

Bedwetting can be upsetting for children and frustrating for parents regularly faced with wet beds. A child can feel a sense of shame and that they are different from their friends and often parents feel uncomfortable talking to others about their child's problem.

*Bedwetting is very common. At the age of 5, 1 in 7 children wet the bed regularly. By 10, 1 in 20 are still affected.*



Studies show that children who receive professional help and advice are more likely to achieve dryness at night than those who don't. Given that **1 or 2 in every 100 children will continue bedwetting into adulthood**, getting help at the right time is really important.

Occasionally there can be a physical cause such as a urinary tract infection which is easily treated with a course of antibiotics. It's also a good idea to exclude constipation, which can affect bladder capacity.

Diabetes and kidney disease, both rare in childhood, are linked with bedwetting but there would be other symptoms too. If you suspect any of these conditions take your child directly to the GP.

Other factors linked to bedwetting include **stress** or a **change** such as **moving house, starting school** or the **arrival of a new sibling**.

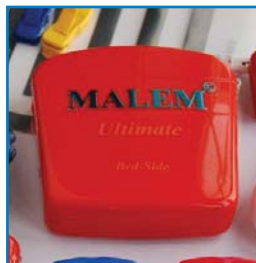
There isn't any evidence to suggest that children who wet the bed sleep more deeply than others, but they may have difficulty in waking from sleep.

Some parents find that waking their child to go to the toilet when they themselves go to bed at night helps prevent wet beds. There are however problems with this strategy. Young children are still learning to respond to signals from their bladder and night time is the longest period when the bladder isn't emptied. This allows the bladder to increase its storage capacity. It stretches to a certain point, then sends a signal to the brain that it's full and a child wakes up realising it's time to go to the toilet. Lifting at night means a child won't get used to these signals and the bladder won't have the opportunity to stretch and develop.

*It's best to see your GP if by the age of 6 or 7 your child still regularly wets the bed at night.*

It's also a good idea to see your doctor if your child starts wetting the bed after months, or even years, of being dry at night.

The two main forms of treatment are bed alarm systems and medication. The most popular alarm is a sensor mat under a child's bed sheet which is connected to a sound box. As soon as the bed becomes wet, the alarm sounds. The idea is the child wakes and goes to the toilet. Most children will need help from a family member to start with.



Medication involves a synthetic preparation which simulates the effects of the hormone that concentrates the urine at night, therefore helping to prevent the need to go to the toilet so frequently.

In addition when a child feels anxious, bedwetting can be the result. Your child isn't being 'naughty' by wetting the bed but may simply be feeling worried and unable to control this. Talk gently to your child, asking if anything's the matter. It would also be worth having a word with your child's teacher to find out how things are going at school.

In terms of dealing with the situation, the best approach is to **be as calm and matter-of-fact** as you can. Buy a protective mattress cover (available from major high street chemists) and when the bed is wet in the morning, involve your child in taking off the sheet ready for washing. **Don't get cross** – if your child picks up on you feeling angry, this could make the problem worse.

*Try to keep the atmosphere at home as calm and relaxed as possible, and give your child lots of extra cuddles.*



Reducing fluid intake just before bedtime might be effective, but make sure your child is drinking enough through the day as this will help the bladder get used to holding more urine.