



BED-WETTING



BASIC INFORMATION

DESCRIPTION

Wetting the bed during sleep that occurs more often than once a month in girls over 5 and in boys over 6 years of age. It is more common in boys than in girls. The occurrence of bed-wetting in children is 15% at age 5, 10% at age 6, 7% at age 8, 3% at age 12 and 1% at age 18.

FREQUENT SIGNS AND SYMPTOMS

Bed-wetting at night (occasionally during the day). This is not usually a concern until a child is older than 6.

CAUSES

- In most cases, the cause of bed-wetting is unknown. Most children who wet the bed are quite healthy. The following are other possible causes:

Illness, such as diabetes or a urinary-tract infection.

A small or weak bladder that cannot hold one night's urine production.

Emotional problems caused by stress or separation from the mother.

RISK INCREASES WITH

- Diabetes.
- Urinary-tract infection.
- Family history of bed-wetting (44% chance if one parent was bed-wetter, 77% chance if both parents were bed-wetters).
- First-born child.

PREVENTIVE MEASURES

- No effective preventive methods are known.
- Show your child love, support, and understanding for this problem.

EXPECTED OUTCOMES

Bed-wetting may continue for several years. If there are no medical or emotional problems, children normally outgrow the bed-wetting problem. Consider that your child's bed-wetting means a delay in maturing that will resolve with time.

POSSIBLE COMPLICATIONS

- Psychological and emotional scars that may affect the child's personality for years.
- Urinary-tract infection.



DIAGNOSIS & TREATMENT

GENERAL MEASURES

- Talk to your child's health care provider about the bed-wetting problem. A physical exam will be done and questions asked about the symptoms. Medical tests are sometimes done to rule out infections and diabetes as causes.
- Follow any medical advice. Basic ideas are listed here.
- Prepare the bed and the child:

Protect the mattress with a heavy plastic cover.

Stop using diapers or plastic pants by age 4. They may make it easy for the child to keep on wetting.

Have the child change the sheet on the bed and do the laundry, if he or she is old enough.

- Don't give any liquids to the child for 2 to 3 hours prior to bedtime.
- Have the child urinate at bedtime. You can also wake the child at night to urinate, but this is hard on parents.
- Reward the child for staying dry. Praise him, hug him, and tell of his success to people who are important to him, if appropriate. Use gold stars or happy faces to mark dry nights on a calendar.
- Respond gently to accidents. Don't blame, nag, restrict, or punish the child who has wet the bed. This can cause him to give up or lead to other problems.
- Try alarms that are triggered by wetting. These may be used in undergarments, pajamas, or mattresses. They have a high success rate.

MEDICATIONS

The drug vasopressin may be recommended if other methods fail, and the family favors medical treatment.

ACTIVITY

No restrictions.

DIET

No special diet. Encourage your child to drink as much fluid as possible during the day. Limit or discontinue any fluid intake during the 2 to 3 hours before bedtime.



NOTIFY OUR OFFICE IF

- You are concerned about your child's bed-wetting and your child is older than 6.
- The child dribbles urine, has a weak urinary stream, experiences pain when urinating, or must

strain to urinate.

- New, unexplained symptoms develop. Drugs used in treatment may produce side effects.

