Hi, we’re Wee & Poo

You can read all about us on the ERIC website
www.eric.org.uk

This leaflet is all about me and the mischief I can get up to at night!
Why does it have to happen to me?

It isn’t just you.....it happens to lots of people – about half a million children and young people in the UK suffer from bedwetting.

- 1 in 15 seven year olds
- 1 in 75 teenagers

It’s just that people don’t talk about it, so we never know how many of our friends are wet at night too.

It’s really important to remember it’s NOT YOUR FAULT!

Bedwetting does run in families; if you have one parent who wet the bed you have a 40% chance of doing the same, and if you have two parents who were both wet it’s a whopping 70%.

But it’s not your Mum and Dad’s fault either!

Constipation, in other words a bowel full of poo, can make your bladder misbehave. There just isn’t space in your tummy for lots of poo to be stored and lots of wee! A full bowel can press against your bladder – that makes you feel like you need a wee or stops you holding as much wee as usual. It can make you have wee accidents in the daytime AND it might be causing your night time wetting. If you’re passing hard poo, or you’re going less than 4 times a week, or if you have to push hard to get your poo out, or if you have problems with poo in your pants, check out ERIC’s Guide to Children’s Bowel Problems

Some children and young people with night time wetting have some daytime wee problems too. Are you often in a big hurry to get to the toilet when you need a wee? Do you go more often than your friends? Do your pants sometimes get wet?

If the answer to any of these questions is yes, check out ERIC’s Guide to Childhood Daytime Wetting

I’m sorry

It might be my fault

I might get up to mischief in the daytime too!
So why does it happen?

In order to explain how bladders misbehave at night, we need to know a bit more about how they work!

Most of us have got two kidneys. They filter our blood and take out the waste products....that’s wee! So they are like our wee factories.

Long thin tubes called ureters carry wee down to our...

...bladder where the wee is stored. So a bladder is a kind of wee warehouse. Bladders are like balloons – they stretch to hold all our wee. When we go to the toilet our bladder muscles squeeze, and they should keep squeezing until all the wee is gone.

There are actually two sets of muscles to keep our wee safe – holding on ones like a tap at the bottom to keep all the wee in, and stretchy-squeezy ones in the balloon which relax to hold wee, and squeeze when it’s time to empty.

Just like any other muscles in our bodies, bladder muscles need to be exercised to keep fit...especially the stretchy-squeezy ones. That means we need to fill and empty our bladders, and fill and empty lots of times throughout the day.....so we need to drink and wee and drink and wee...

So....not having enough to drink can lead to an unfit bladder! And drinking the wrong drinks can cause problems too.

We all need to have at least 6-8 cups of water based fluid every day. Watch out for things that can make wetting worse like anything with caffeine in it – such as tea, coffee, hot chocolate, cola and energy drinks. Fizzy drinks, orange or blackcurrant might cause problems too.

Read on to find out what can go wrong at night....
I’m going to tell you all about my 3 kinds of night time mischief!

Some children just don’t wake up when their bladder is trying to tell them it’s full and needs to empty, so I sneak out while they snooze.

If you think this is happening to you, you might like to use a bedwetting alarm – it goes off as soon as you start wetting. Tell your mother or father, and soon you’ll learn to wake up when your bladder is full and go to the toilet.

Some children find they get really wet – it might happen even not long after they’ve gone to sleep. This happens when they don’t make enough of a special messenger called Vasopressin. Vasopressin tells your kidneys to make less urine overnight, so if we don’t produce enough there will be far too much urine to fit inside your bladder and it will overflow, and I’ll have sneaked out again.

For some children and young people there is more than one reason for being wet at night, so they might need more than one kind of treatment. This might mean taking some medication AND using an alarm, or trying TWO kinds of medicine.

The good news is that you can have some special medication called Desmopressin to help stop your Vasopressin. You take it just before you go to bed each night and it helps your kidneys to make less urine for 8 hours, or so it should fill your bladder till morning.

Some children get a bladder infection from stretching too much during the night, either you set the alarm off or you get up and go to the toilet, or if you don’t wake up you’ll be sneaking out into your bed. I might even sneak out more than once a night!

Some children have a bladder that is too small to hold enough urine. “I might be making the bowel so full that it’s leaking and it’s making you wet in your tummy, so your bladder can’t stretch and fill properly.”

Maybe you don’t drink enough in the daytime. If you don’t stretch those bladder muscles in the day, how can they work properly at night?

Maybe your bladder is a bit overactive or twitchy. You might be able to help your bladder work best by working your bladder exercise – filling and emptying the bladder properly throughout the day. But if that doesn’t do the trick you might need some special medicine to relax your bladder muscles. This might be called Oxybutynin or Tolterodine.

IMPORTANT MESSAGES FOR PARENTS!

1. Some parents are worried about taking nappies/pull-ups off until the child has some dry nights. But some children will not be dry as long as they are wearing some protection – they go to sleep knowing it doesn’t matter if they wee in their sleep and that is just what happens. They are not being lazy, they don’t have any control over why they wee. So be brave! Try without nappies/pull-ups for at least a week, longer if you can manage it – before you decide your child is a bed wetter.

2. Try to resist the temptation to lift them out of bed to take them to the toilet. This may result in a dry bed, but it doesn’t cure bedwetting... it just allows the child to wee in their sleep into the toilet. It can be useful just for the first few days without nappies... but make sure the light is on and the child really wants to go. Some parents find it useful at particular times like an holiday when wet sheets are hard to manage, but remember to stop when you get home!

HOW TO GET HELP WITH YOUR BEDWETTING:

There are special clinics for children and young people with night time wetting problems. The clinics are usually run by School Health Nurses, but sometimes by Children’s Doctors called Paediatricians or nurses who specialise in kids’ wee and poo problems called Continence Advisors. Ask your GP or District Nurse about these clinics in your area. Children should be seen from the age of 5. Look in the How to get help – Night Time Wetting on the ERIC website www.eric.org.uk/How-to-get-help-Night-Time-Wetting for information about what will happen.

When you go, you’ll be asked lots of questions about your wee’s and poo’s to help work out the main reasons why you are wet. Then you can choose the most appropriate treatment together. You might like to take some information about the pattern of your wetting – you can fill in a Night Time Diary www.eric.org.uk/night-time-diary to take with you.

JOBS TO DO BEFORE YOU GO TO THE BEDWETTING CLINIC:

1. Check out your poo. If you are not passing soft poo at least 4 times a week you might be constipated. Read ERIC’s Guide to Childhood’s Bowel Problems to find out what to do.

2. Count up how many drinks you have every day. If you’re having less than 6 whole glasses then that could be the problem!

3. Do most of your drinking in the daytime and just have a small cup if you’re thirsty on hour before bed... no more after that till morning.

4. Try doing a wee when you go to clean your teeth and then another one just before you brush yourself into bed to go to sleep. Make sure your bladder is as empty as possible at bedtime.

5. Think about what happens in the daytime – do you sometimes have to run to the toilet in a big hurry? Do you have to go more often than usual? Is your bladder misbehaving in the daytime so you need to sort that first. Read ERIC’s Guide to Childhood’s Daytime Wetting to find out what to do.

OTHER WAYS TO HELP:

1. Wetting at night is not nearly as big a problem if your bed has a waterproof mattress cover – then it is just the sheets to wash. You can get waterproof duvet and pillow covers too, and things like special sheets to soak up wee, fleece blankets to wrap yourself up in and even waterproofing blobbing bag lines! Check out the ERIC Stop at the website www.eric.org.uk or call and ask for a copy of the Information and Product Guide.

2. Think about what may help you to get up and use the toilet in the night. If you sleep in a bunk bed, make sure it’s the bottom bunk! Keep a torch next to your bed so you can find your way to the bathroom easily.

3. Always help whoever does the washing in your house to change the sheets when you wet the bed.

4. Most importantly, think positive thoughts before you go to sleep at night... you can do it!

Getting dry at night may be hard and it may take quite a while before you find the best way.
Using Alarms

Some children don’t wake up when their bladder is trying to tell them it’s full… the message going from their bladder to their brain just isn’t strong enough. Alarms help you to recognise that message so that you learn to wake up and go to the toilet. After a while, your brain will learn to respond to the message without needing to use the alarm; you will either wake yourself up or you will learn to control your bladder muscles so you can hold on until morning.

Bedwetting alarms have a sensor which detects when wetting starts – that activates an alarm which wakes you up. Over time, the alarm going off will help you to begin to link the feeling of a full bladder with the need to get up and go to the toilet.

Contact ERIC Customer services on 0117 301 2100 for information on purchasing alarms.

IMPORTANT THINGS TO DO!

You have to really WANT to sort your bedwetting out to use alarm treatment. To start with, it will wake you up after you are already wet. You might get a bit cross about being woken up…but it will be worth it when you start to have dry nights!

> When the alarm goes off, you might not hear it straight away, so ask one of your parents to come and wake you as soon as they hear it. Waking up suddenly will make your bladder muscles tighten, so you stop weeing.

> As soon as you’re awake get out of bed, switch the alarm off and go to the toilet to finish your wee…even if you think your bladder is already empty.

> Then YOU need to help change wet bedding and night clothes…this is part of teaching yourself to stop wetting. Remember to dry the sensor too…then switch the alarm back on, jump back into bed and go back to sleep! (For the first few weeks you don’t have to reset the alarm – getting up once a night is enough until you get used to it).

TIPS

Clean the sensor with a damp cloth every morning – it will prolong its life.

If you sweat a lot you may get false alarms. Try wearing two pairs of pants with the sensor held in place between them.

You’ll find more detailed information about alarm use on the supplementary leaflet Bedwetting alarms - your questions answered.
Using Desmopressin

There are three different ways to take Desmopressin:

- as a little wafer that melts instantly under your tongue or
- in a tablet form that you swallow with water
- as a liquid

The melting wafer is ideal because you don’t need a drink to take it, and no-one will notice if you slip it into your mouth at a sleepover! It doesn’t taste nasty… it doesn’t really taste of anything. Your Doctor or Nurse will tell you how much to take – usually you start on one melt or tablet and see what effect it has – you can increase to two after a week if you need to.

IMPORTANT THINGS TO REMEMBER!

1. As your kidneys are going to get a message to make less wee, you’ve got to have less to drink! So, have lots in the daytime, but STOP an hour before you take your Desmopressin, and then only have sips if you need them till morning.

2. Desmopressin lasts eight hours, so take it just before you go to sleep and remember, no drink during the night! Lots of people find it works even better if you can take it an hour before bedtime.

3. Desmopressin can be used for sleepovers, holidays, etc. but we recommend that you take it for a minimum of 3 months without a break.

4. Each dose of Desmopressin only lasts for one night. It doesn’t matter if you miss a dose… but you might be wet that night. Desmopressin won’t necessarily work straight away – in fact, some evidence suggests that the longer it is taken for the better the effect. So be patient and don’t get discouraged if it doesn’t work immediately!

5. Most people find they make more Vasopressin as they get older. So after taking Desmopressin every night for 3 months, your doctor might tell you to have a week off. Otherwise you won’t know if it’s the Desmopressin keeping you dry or your own Vasopressin!

6. Don’t take Desmopressin if you are ill with vomiting/diarrhoea/raised temperature.
For information and support on bedwetting, daytime wetting, constipation and soiling and potty training call ERIC’s Helpline on 0845 370 8008

Email
helpline@eric.org.uk

Website
www.eric.org.uk

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NICE guidelines:
Nocturnal Enuresis: The management of bedwetting in children and young people
www.nice.org.uk/cg111

Also in this series of leaflets:

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