ERIC’S GUIDE to Teenage Bedwetting
Bedwetting

Bedwetting (also called nocturnal enuresis) happens when the bladder empties during sleep, it can happen once or more every night or just now and then. Some teenagers have never been dry at night and others start wetting after a period of being dry (secondary nocturnal enuresis). Bedwetting can be stressful, not only for teenagers but for their families as well. The good news is there is help available and for most teenagers something can be done to resolve or manage bedwetting.

The World Wide Wet

By the time you’ve reached your teens you’ll probably have tried everything to stop bedwetting and nothing has worked. Most teenagers who wet the bed will have missed out on trips or staying at friends’ houses overnight and may have stopped talking to their parents about finding ways of resolving it.

Bedwetting is very common; it affects about 1 in 75 teenagers in the UK and there are thousands of teenagers worldwide who wet the bed, but it doesn’t mean it’s easy to cope with or it can be resolved just like that. Many entirely normal, healthy, intelligent, mature teenagers wet the bed through no fault of their own.

Bladders behaving badly

At night this is what should happen:
As you settle down to sleep your brain releases a hormone (vasopressin) to tell the kidneys to slow down wee production overnight. This means your bladder usually doesn’t need to empty until morning. If your bladder does fill and need emptying during the night, it sends a signal to your brain to wake you up to go to the toilet.

But it doesn’t always happen like that:
Sometimes the kidneys don’t receive the message to slow down wee production and the signal to wake up doesn’t get through. Your bladder empties while you are asleep and you wet the bed.

Sometimes bladders simply don’t behave very well and the bladder muscles squeeze before the bladder is full. When this happens at night you may wake feeling the need to go to the toilet very urgently and won’t have time to get out of bed. Teens with this problem, known as an overactive bladder, will also usually need to go to the toilet urgently and very often in the day.
It’s known there’s a genetic link for bedwetting, so you may have inherited the tendency to wet at night just as you may have inherited your hair or eye colour. You may wish to check with your mum or dad if someone else in the family also wet at night.

Stress, tiredness and anxiety can trigger bedwetting.

**A different perspective**

Some teenagers only wet the bed occasionally whilst others never have a dry night. However you’re affected by bedwetting there are lots of things you can do to help yourself:

- Begin by looking at bedwetting from a different perspective, there’s always something you can do to make things better. You can help yourself by feeling positive and motivated to put the effort needed into making sure the treatment you choose works.

- If you think you’re going to be WET AGAIN tonight you’re telling yourself you will be wet. If you think you can NEVER be dry, you’re telling yourself you can never be dry. It makes much more sense to tell yourself you’re going to wake if you need the toilet and you can and will be dry tonight.

- Every night go to the toilet before you go to bed and if you read or watch TV before sleeping always get up and go again even if you really don’t want to get out of bed. This ensures your bladder is completely empty before you sleep.

- If you know you wet the bed at the same sort of time each night, you could try setting your phone or an alarm to wake you 15 minutes earlier. Getting up to use the toilet in the night may help you manage to stay dry.

- Drink throughout the day – water based drinks are best. If you don’t drink enough in the day you may not be filling your bladder properly and this can mean it isn’t big enough to hold all the wee you make overnight. But don’t suddenly increase how much you drink too much at once or you’ll find you need to go to the toilet all the time.

<table>
<thead>
<tr>
<th></th>
<th><strong>FEMALE</strong></th>
<th><strong>MALE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>9 – 13 years</td>
<td>1200 – 2100 ml</td>
<td>1400 – 2300 ml</td>
</tr>
<tr>
<td>14 – 18 years</td>
<td>1400 – 2500 ml</td>
<td>2100 – 3200 ml</td>
</tr>
</tbody>
</table>

NICE clinical guideline 111 www.nice.org.uk
Sometimes bedwetting happens only after drinking alcohol, this is because alcohol has two effects - it makes you less aware and it makes you need to wee more.

Try not to drink alcohol or drinks containing caffeine –including tea, coffee, hot chocolate and fizzy drinks including coke, especially later in the day. All of these are diuretics which mean they cause your kidneys to produce more wee and can sometimes make your bladder overactive. If you suspect a drink is making things worse, try cutting it out for a couple of weeks and see if it makes a difference at night.

Constipation can cause bedwetting. Drinking through the day, exercise and eating a good variety of food are good things to do anyway, but can often help with constipation. If you are constipated seek advice from your doctor who may prescribe medication to clear your bowel and keep things moving.

**Treatments**

**Alarms**

Even if you tried an alarm when you were younger and it didn’t work, it doesn’t mean it won’t work this time. An alarm trains your brain to respond to the full bladder signal, helping you learn to wake up and hold on. It can take a while (sometimes months) before you become completely dry at night, but you should see signs quite soon. These include waking more quickly to the alarm, a slightly smaller puddle in the bed and keeping some wee in the bladder after the alarm has gone off.

When the alarm goes off you must wake, switch it off and dry the sensor. But before you can go back to sleep you need to go to the toilet to empty anything left in your bladder and then change your wet clothes and bedding.

It’s not going to be easy, you’ll have to work hard but the reward will be dry nights. When you’ve been dry for 14 nights in a row, you can stop using the alarm. If you start wetting again, use the alarm the next night and continue using it until you have another 14 dry nights in a row (some people need to go back to the alarm 2 or 3 times).

The most common reason why the alarm doesn’t work is because it isn’t used consistently. It needs to be switched on even when you feel really tired and don’t want to be woken up. You need to decide you want to be dry at night and be prepared to do what needs to be done.

**Take responsibility, stay focused and keep at it. You can do it!**
Medicines

Desmopressin is the most commonly prescribed medication to help stop bedwetting. It doesn’t work for everyone but if you’re making a lot of wee at night because you’re lacking the hormone vasopressin, then desmopressin may help you become dry. You can’t drink at night after you have taken the desmopressin tablet.

If you have an overactive bladder a medicine can sometimes be prescribed to stop your bladder muscles from contracting strongly. This can also help with bedwetting.

Help at hand

It’s always worthwhile seeking help to overcome bedwetting. Your doctor, school nurse or bedwetting clinic work with the problem everyday and will have lots of experience in dealing with it. When you make an appointment to see the doctor or nurse they may check your wee to make sure you don’t have a urinary tract infection (UTI), they’ll ask about your bedwetting pattern, how much you drink in the day, how often you go to the toilet, whether you have any wetting accidents in the day and whether you are constipated.

You may be asked to complete some charts over 2 or 3 weeks of how often you wet at night, how much you drink and to measure how much you wee each time you go. This is important, as combined with the questions asked at your first appointment, it will give the information needed to make an assessment of the best way to treat you and resolve your bedwetting.

Do you want to know more?
Do you want to speak to someone in confidence?
Contact ERIC - we’re here to help YOU.
For information and support on bedwetting, daytime wetting, constipation and soiling call the ERIC Helpline (10am-4pm weekdays)

0845 370 8008

Email
info@eric.org.uk

SMS (Text)
447 624 811 636

Website
www.eric.org.uk

© ERIC April 2011