Have you had a child in your home who wets the bed or urinates even during the day despite being able to manage bladder functioning at other times?

Enuresis is the medical term for bedwetting or other “accidents.” This is a common disorder in children that involves the release, either involuntary or voluntary, of urine. If you have a child in your home who is exhibiting signs of enuresis, a good place to start is with a pediatrician who can help you and the child understand what’s happening.

Enuresis is very common in young children and is even found in one or two out of every 100 teenagers. The good news is that enuresis often resolves as a child grows and matures. Most often, enuresis occurs at nighttime when kids are asleep, but it can happen during waking hours, too.

Most kids are able to control their bladders by the age of six. However, night wetting for some children can continue through a good part of their elementary school years. An occasional accident either at night or during the day is not related to enuresis.

Types of Enuresis
There are two types of enuresis, primary (with two subtypes) and secondary.

Primary enuresis is when children lack the ability to control their bladder since infancy and mostly wet at night when they’re asleep. For most people, our nerves send a message to our brain telling us to go to the bathroom, but for some kids that doesn’t happen.

Secondary enuresis is when a child has stayed dry for at least six months—even up to several years—and then begins wetting again, usually at nighttime.

This type is thought to be linked to the child experiencing some kind of medical condition or stressful life event such as moving, a new sibling, death or divorce—to name a few.

For children in foster care, this may include:
• Being removed from their families.
• Adjusting to a new placement.

The good news is that most kids outgrow this problem. For those who do receive treatment, the success rate is high.

• Kids who put off going to the bathroom to relieve themselves until it’s (oops!) too late.

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WISCONSIN DEPARTMENT OF CHILDREN AND FAMILIES
Changing or having problems in school.

Secondary enuresis is less common, and can be associated with some psychological disorders like Attention Deficit Hyperactivity Disorder (ADHD) and Oppositional Defiant Disorder (ODD). It’s helpful to receive feedback from a physician for either primary or secondary to ensure there is not some significant underlying medical issue occurring.

**Causes**

Unfortunately, the causes of enuresis are not very clear, and boys are twice as likely to wet as girls. Some of the more common theories of causes are:

- Hormonal problems—not enough anti-diuretic hormone (ADH) that slows urine production at night.
- Bladder problems—small bladder or muscle spasms.
- Genetics—it runs in families.
- Medical conditions, such as diabetes and constipation.
- Sleep problems—difficulty waking from sleep.
- Psychological problems, such as stress and trauma.

These are just a few of the possible causes. If your child has experienced a trauma such as physical abuse or sexual abuse, this adds another component to enuresis.

A child may be wetting as a defense mechanism, or because of anger, or fear. One foster parent shared that her child had a

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**Some Recommendations**

Following are some recommendations to help you and your child deal with enuresis in a positive way.

**Do**

- Talk to your doctor.
- Stay calm.
- Let your children know if you had a bedwetting problem.
- Reassure them that there are things that can be done to help.
- Keep your children warm at night.
- Gently praise their efforts and successful dry nights. (Although if the bed wetting is related to Oppositional Defiant Disorder, praise can sometimes backfire and it can become a power and control issue.)
- Help remind them to use the bathroom before bed.
- Help your children wake up when the alarm goes off.
- Help your child with transitions and stressful events.
- Get information on treatment options.
- Work together with your child as a team.

**Don’t**

- Shame, blame, or punish your children.
- Give them caffeinated beverages three to four hours before bedtime.
- Become discouraged.
wetting problem, but had stopped for over a
year. When the family found a mouse in
their house, the wetting returned.

After talking with her child, the foster mom
found out that there was a mouse problem in
the birth home that scared him. She
reassured him that they would take care of
the mouse and that she was sorry it scared
him, and the wetting stopped again.

Again, talking to your doctor before starting
any other treatment option is
recommended. Your doctor may also have
some ideas about recommended treatment
options for trauma.

Ways to Deal with Enuresis
The most important way to deal with
enuresis is to first monitor your own feelings
and emotions. It’s frustrating to deal with a
wetting problem. Most often it is equally
frustrating and humiliating to the child.

As parents we want to help protect a child
from this embarrassment but often in our
quest to try things we can make the situation
more challenging.

Here are a couple of things families have
tried to manage enuresis:

- Decreasing/limiting fluid intake
  before bedtime
- Using an alarm system to wake your
  children if they start to wet
- Having your child go to the bathroom at
  the start of their bedtime routine and
  again right before bed
- Waking your child up at night to use
  the bathroom
- Using vinyl covers to protect mattresses
- Having a reward system for dry nights
- Bladder training, where your child
  practices holding the urine during the
day for longer and longer periods of time
to help stretch the bladder
- Talking with your child’s teacher to help
  your child with discretion
- Packing extra clothes and underwear for
  any daytime accidents, including keeping
  an extra set at school
- Finally, using pull-ups is often a great
  solution, especially when it’s just a
  matter-of-fact part of the solution.

Alternative Therapies
Alternative therapies that have had some
success include acupuncture and hypnosis.

Psychotherapy is often helpful for secondary
enuresis in helping your child deal with any
emotional stress they might be experiencing.

There are no known ways to prevent
enuresis, and it can be a very embarrassing
and shaming experience for your child. He or
she might even avoid sleepovers or overnight
camps for fear of having an accident. The
good news is that most kids outgrow this
problem, and for those who do receive
treatment, the success rate is high.

It might help your children—even those in
the home who might not have a problem
with it—to know that no one knows the exact
cause of bed wetting and remind them that it’s ok to use the bathroom at night.

Working together with your child and doctor to find the right solution for your family can help empower your child and also reduce feelings of shame he or she may be feeling. There are lots of ways to deal with enuresis, and working with your child might be the key to getting a handle on it for both of you.

Feel free to contact us at 800-762-8063 or info@coalitionforcyf.org.

Resources

- **Getting Dry: How to Help Your Child Overcome Bedwetting**, by Maizels, Rosenbaum and Keating
- **Diagnostic and Statistical Manual of Mental Disorders**, by American Psychiatric Association
- **Enuresis and Encopresis: Ten Years of Progress**, by Edwin J. Mikkelsen
- **American Academy of Child and Adolescent Psychiatry**
  (800) 333-7636 [http://aacap.org](http://aacap.org)
- **Facts for Families Pamphlet #18, Bed-wetting**. By the American Academy of Child & Adolescent Psychiatry (AACAP)
- **Bed-wetting**, by the National Kidney Foundation
  [www.kidney.org/patients/bw/](http://www.kidney.org/patients/bw/)
- **DryBuddy**, [www.drybuddy.com/](http://www.drybuddy.com/)
- **GoodNites**, [goodnites.com/na/](http://goodnites.com/na/)
- **Health Communities**
- **Kids Health**
  [kidshealth.org/teen/diseases_conditions/urinary/enuresis.html](http://kidshealth.org/teen/diseases_conditions/urinary/enuresis.html)
- **Mind Disorders**
  [www.minddisorders.com/Del-Fi/Enuresis.html](http://www.minddisorders.com/Del-Fi/Enuresis.html)
- **WebMD**
  [www.webmd.com/mental-health/enuresis](http://www.webmd.com/mental-health/enuresis)
- **Fostering Perspectives**
  [http://fosteringperspectives.org/fp_vol1no2/articles/help_is_available_for_foster_children_wet_beds.htm](http://fosteringperspectives.org/fp_vol1no2/articles/help_is_available_for_foster_children_wet_beds.htm)
- **All About Parenting**
  [http://allaboutparenting.org/bed-wetting.htm](http://allaboutparenting.org/bed-wetting.htm)
- **Hub Pages**