Dry Night Solutions is a joint program between HDIS and NAFC. This program is designed to provide useful, relevant answers to the most common questions about bedwetting. For more information and to order your kit today, call 855-266-1112. When ordering, use promo code: 018000.
Most of us believe that we can recognize medical conditions that require a doctor’s help. Broken bones, high fevers, lingering coughs – all of these get us out to the doctor’s office, even if we don’t always like having to go.

The same isn’t always the case when it comes to adult bedwetting. For too many people suffering with the condition or caring for those who have it, adult bedwetting is something to try managing on their own, often with very disappointing results.

It doesn’t have to be that way. The fact is, adult bedwetting is a recognized medical condition called nocturnal enuresis, and it can be treated – and often cured – when under a qualified doctor’s care. There is no reason why anyone should have to wake up with a wet bed, and there is certainly no reason why anyone should have their lives limited by the disorder.

The first step is to see a physician.

**WHO, ME?**

Nocturnal enuresis is a condition that affects far more adults than you might imagine. It’s common enough that many people see it – incorrectly – as an inevitable result of the aging process. That’s a misconception, and there are treatment and management options available for people of any age, regardless of how severe the condition is or how long they’ve had it.

What may be more surprising is that enuresis affects adults at literally every stage in life. In fact, a recent survey conducted by the National Association for Continence found that about 37% of all adults dealing with bedwetting issues were between 18 and 34 years old. That’s more than one out of every three people.

There are many reasons for this. In particular, younger sufferers often find that their condition is a side effect of some other underlying health concern – spinal injuries, bladder stones, anatomical issues, physical or emotional trauma – the list goes on.

In fact, you don’t have to be young for bedwetting to be caused by another medical factor – conditions that effect people of all ages – certain cancers, diabetes, a number of surgeries and more can all produce bedwetting as a symptom.

That’s all the more reason to see a doctor when a bedwetting issue arises – a thorough examination may be helpful in identifying other, possibly more serious conditions that can then be treated properly.
MAKING THE COMMITMENT
For many, the hardest part about visiting the doctor to discuss bedwetting is getting up the nerve. As a society, we’re conditioned to treat bathroom issues as private matters, and it can be embarrassing to talk about something so personal.

That’s compounded by a stigma that is frequently associated with bedwetting. Whether in adults or in children, bedwetting is often – and unfairly – seen not as a medical issue but as a personal failure, a sign of laziness or a weak will. Those emotions can be especially powerful in adults, who may find themselves feeling depressed, diminished and helpless.

As unwarranted as those reactions are, they still happen. We can’t always control the feelings that come upon us, but what we can control is how we react to them.

That’s why it’s so important to make a commitment to visit the doctor. Physicians who treat bedwetting see patients with the condition all day, every day. They spend their careers working to help those who have it. They understand just how hard it can be to talk about it. And they can help.

WHO SHOULD I SEE?
There are a number of medical specialties that can address bedwetting and other incontinence issues. Doctors in any of the following areas of practice will have expertise treating enuresis:

**Urologists** – If you think of urologists as focusing only on men’s issues, think again. While they do specialize in the male reproductive system, they also work with both the male and female urinary tract.

**Gynecologists** – In addition to expertise on the female reproductive system specifically, gynecologists are trained to treat incontinence and related issues.

**Urogynecologists** – A more focused specialty than gynecology which emphasizes dysfunction of the pelvic floor and bladder.

**Geriatricians** – With care for the elderly as their emphasis, geriatricians are well trained in the diagnosis and treatment of bedwetting and other continence disorders.

**Neurologists** – Because so many incontinence-related problems stem from nerve damage or injury, neurologists are often the provider of choice for many people dealing with bedwetting.
As you seek care, there may be occasions when you are also referred to other specialists, including gastroenterologists, physical therapists and others.

The NAFC has prepared an easy-to-use online directory of qualified doctors. To find one near you, visit www.NAFC.org/find-a-doctor.

**PREPARING FOR YOUR APPOINTMENT**
Before you go, there are a few things you can do to help make your first appointment as productive as possible.

**Keep a bedwetting diary** – By keeping track of the frequency of bedwetting episodes, fluid intake and other factors, you’ll be providing your physician a great deal of information that can help in the diagnosis and treatment of your condition. A free diary is available for download at www.NAFC.org/bedwetting-diary.

**Educate Yourself About Possible Treatments** – The NAFC’s brochure *Good Nights and Great Mornings* offers an introduction to the range of treatments patients usually encounter. Absorbent products, behavior modification, medication and surgery are among the therapies that physicians commonly recommend, and having a sense of what they are before you visit your doctor can help prepare you to talk more confidently about your own course of action.

**Prepare a list of questions** – Don’t wait until you’re in the examination room to come up with questions – it’s too easy to forget them in the middle of an appointment. Here are some suggestions for what you may want to ask:

**Causes**
- What is causing my bedwetting?
- Will it get worse if left untreated?
- Is it related to another illness or medical condition?

**Treatments**
- What treatments are available?
- What do you recommend?
- Are there any side effects?
- Are there other, alternate treatments that I should consider?

**Products**
- What should I be looking for in an absorbent product?
- Are there any particular absorbent products your recommend?
- Are there any brands I should look for?

“I have been wetting about 15 years due to diabetic and prostate problems... I now use briefs and also a mattress cover as back-up. I’ve gotten over the stigma, in favor of being dry.”
Behaviors
- Should I be limiting my fluid intake?
- Should I stop drinking after a certain time?
- Should I be altering my diet?
- What about kegels or other exercises?

General Information
- Do you have any brochures or literature I can look at?
- Do you recommend any websites where I can learn more?

WHAT TO EXPECT AT YOUR APPOINTMENT
Almost any doctor’s appointment can be a stressful experience, so it makes sense to understand ahead of time what you’re likely to experience.

Questions – You can count on your doctor to ask a lot of questions, and some of them may feel personal. That’s to be expected when you’re talking about a condition like enuresis, but this is not the time to be shy. Answer honestly and completely – after all, they’re there to help you get better, and they wouldn’t be asking if it wasn’t going to assist with your diagnosis. Some of the questions may include:

The Nature of Your Condition
- How long have you had this problem?
- How frequent are the episodes?
- Has that frequency changed over time?
- How much urine is being passed at night?
- Do you have any pain while urinating?
- Are you dry during the day?
- Are you experiencing any fecal incontinence, or is it only urine?

Medical History
- What other medical conditions do you have?
- What medications are you taking?
- What is your surgical history?

Behavioral and Emotional Background
- Do you drink coffee or alcohol?
- How much and how often?
- Describe your typical diet?
- Are you currently experiencing any major life stress?
- Have you had any emotionally traumatic experiences?

Tests – Like any other medical evaluation, an evaluation for enuresis is almost certainly going to include some form of testing.

“Every morning I would wake up wet and messy.... My doctor believes that congenital narrowing of the spine is actually the problem. I’m glad there is disposable overnight underwear to keep me dry.”
Urinalysis – Doctors will generally perform a urine test to see if there are any infections, signs of diabetes or other chemical issues that might be causing or contributing to your problem.

Cytoscopy – A thin tube with a camera can be inserted through the urethra to visualize the bladder from the inside.

Q-Tip Test – In this test, a Q-Tip will be lubricated with anesthetic and inserted into the urethra and bladder. The doctor will evaluate the Q-Tip’s angle to determine if there are structural issues that are contributing to incontinence.

Urodynamics – This form of testing is performed to assess how well the bladder and urethra are storing and releasing urine. There are a variety of specific tests that may be performed, but they typically involve having a catheter inserted into the bladder, which is then filled with fluid. Physicians will measure how the bladder holds and releases the fluid. There are a number of related tests that use a similar process to measure specific attributes of the bladder, including the Bladder Stress Test and the Valslava Leak Point Pressure Test.

Imaging – They may order MRIs or other imaging tests to see if there are any anatomical reasons behind the condition. And if they believe that there may be another disorder that is the root cause of the enuresis, they may order tests for those disorders, as well.

Treatments – The good news is that there are effective treatments for virtually every bedwetting patient. Depending on your particular condition, your physician may recommend one or more of the following general treatment strategies:

Absorbent Products – Today’s absorbent pads and protective underwear are remarkably good at wicking away moisture and locking it in, so wetness is kept from the skin as well as the bedding. You’ll want to choose a product that’s made to handle the right fluid volume, and make sure to find the right size for your body shape and size – an incorrect fit won’t protect nearly as well as a proper one.

Dietary and Behavioral Changes – By addressing things like your fluid intake, the medicines you’ve been prescribed and whether you consume bladder irritants like coffee or alcohol, you’ll be going a long way to reducing the likelihood and severity of episodes. Pelvic floor exercises can also make a big difference, and they’re easy to do – your doctor can help you get started.

Medications – There are a number of medicines that have been proven effective at helping control the amount of urine the body produces, relaxing the bladder and minimizing bladder contractions.

“I had a urinary sphincterotomy in 1999, and as a result, I leak frequently... I now wear either very absorbent briefs or a pad-and-pant system that looks like traditional boxers and rarely experience a problem.”
**Surgery** – Because many of the other treatment options are so effective, surgery is often considered a secondary option. However, for those who haven’t found relief with other methods, surgical treatments may be available. Options will be limited by the nature of each person’s condition – some forms of enuresis are not surgically treatable.

No matter what your doctor recommends, don’t be afraid to ask about additional treatment options if the one recommended to you doesn’t sound appealing – there are often multiple approaches, and there’s a good chance there’s something to fit your unique needs and lifestyle.

**WE’RE HERE TO HELP**

For more information about the treatment of bedwetting or other continence concerns, visit the National Association for Continence online at [www.NAFC.org](http://www.NAFC.org).

For information about products to help manage bedwetting while you’re seeking professional help, visit HDIS Healthcare at [www.HDIS.com](http://www.HDIS.com). You’ll find a wide selection of absorbent pads, protective underwear, mattress padding and more.

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**Finding a Physician**

To find a healthcare provider near you, visit the National Association For Continence’s online physician finder at [nafc.org](http://nafc.org).

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**BLADDER DIARY**

(Bladder diary image)

To download your Bladder Diary visit [www.NAFC.org](http://www.NAFC.org).
IT’S TIME TO TALK...

Visiting Your Doctor to Talk about Adult Bedwetting

Brought to you in partnership with HDIS

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