

Tips to Help When Kids Wet the Bed

Wetting the bed or other bladder control accidents are fairly common in both children and teenagers. The medical term for this is enuresis. For most children, enuresis resolves as they grow and mature. For other children, however, nighttime wetting can continue throughout their elementary, middle, or even high school years. This tip sheet will provide a basic overview of enuresis, some causes, and ways to help the children in your care who may have enuresis.

Overview

There are two types of enuresis: primary (with two subtypes) and secondary.

- *Primary enuresis* is when children cannot control their bladder and are mostly wet at night when they're asleep. For most people, our nerves send a message to our brains telling us to go to the bathroom, but that doesn't happen for some kids. Two types of daytime wetting fall into the primary category:
 - Kids who have difficulty controlling the urge to go.
 - Kids who put off going to the bathroom to relieve themselves until it's (oops!) too late.
- *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
- 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 may be helpful to receive feedback from a physician for either primary or secondary enuresis to ensure no significant underlying medical issue occurs.

Causes

According to American Family Physician, bedwetting may occur more frequently in boys

than girls. Possible causes include:

- 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

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- Psychological problems, such as stress and trauma
- Slow development in the central nervous system—this reduces that child's ability to stop the bladder from emptying at night
- Urinary tract infections
- Anatomical abnormalities
- Abnormalities in the spinal cord

If the child in your care has experienced 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 a child in her care had a wetting problem, but it had stopped for over a year. When the family found a mouse in their house, the wetting returned. After talking with the 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 frightened him, and the wetting stopped again.

We recommend talking to your doctor before starting any other treatment option. They may have some ideas that consider the implications of trauma.

Ways to Deal with Enuresis

It can be frustrating to deal with a wetting problem. Remember that it is often equally frustrating and humiliating for the child. Becoming angry, punishing the child when they wet the bed, or assigning intent (such as thinking the child did this on purpose or that they are just lazy) will do little to improve the situation.

Following are some tips that other families have tried to help their children manage enuresis:

- Decrease or limit fluid intake before bedtime
- Use an alarm system to wake the child if they start to wet
- Have the child go to the bathroom at the start of their bedtime routine and again right before bed
- Wake the child up at night to use the bathroom
- Bladder training (have the child practice holding the urine during the day for longer and longer periods to help stretch the bladder)
- During the school day, request that the child is allowed to leave at any time to use the bathroom, whether they have time to ask or not. (If there is no safety concern.) Also, ensure they know the signal for using the bathroom if there is one. Ask that they be told to try every two hours and taken to the bathroom at all breaks, even if they claim they don't have to go.
- Pack extra clothes and underwear for any daytime accidents, including keeping an extra set at school. Put an outfit in a large Ziploc bag; the child can change if needed and put the wet clothes in the sealed bag to take home.
- At home, layer mattress covers and sheets as a great way to quickly get a child back to sleep. Use a waterproof mattress cover and sheet, then another cover and sheet. You can strip the top sheet off while they change, and they can get right back to bed.
- Use pull-up underwear

Some Recommendations

The following are some recommendations to help you and the child in your care deal with enuresis positively.

Do

- Talk to your doctor.
- Stay calm.
- Let the children know if you had a bedwetting problem.
- Reassure them that there are things that

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can be done to help.

- Keep children warm at night.
- Help remind them to use the bathroom before bed.
- Help children wake up when the alarm goes off.
- Help the child with transitions and stressful events.
- Get information on treatment options.
- Work together with the child as a team.

Don't

- Shame, blame, or punish the children.
- Give them caffeinated beverages three to four hours before bedtime.
- Become discouraged.
- Use vinyl covers to protect mattresses.

Alternative Therapies

Alternative therapies that have had some success include acupuncture and hypnosis. Psychotherapy is often helpful for secondary enuresis in helping children deal with any emotional stress they might be experiencing.

Because children may be dealing with this during childhood, adolescence, and into their teenage years, it can become stressful for both the child and the caregiver. Because we know the child is not doing this on purpose, the caregiver needs to take precautions to avoid showing stress to the child in their care. However, we encourage caregivers to find time to process their stress. It is okay to acknowledge the stress on the caregivers when they wash sheets daily and follow strict bedtime routines. Not to mention the financial toll of purchasing new mattresses regularly, purchasing pull-ups, and sometimes even purchasing new washers and dryers. When caregivers can find a proper way to acknowledge and process their stress, they can better show consistent empathy and understanding for the child.

There are no known ways to prevent

enuresis, and it can be a very embarrassing and shaming experience for a child. They 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 the kids in your care—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 okay to get up to use the bathroom at night.

Working with the child and your doctor to find the right solution for your family can help empower the child and reduce any shame they may be feeling. Working together may help get to a resolution faster, and when the child starts getting through the nights without accidents, everyone will begin to feel better.

Feel free to contact us at 1-800-762-8063 or info@wifamilyconnectionscenter.org for additional support or resources.



Resources

Additional Resources

- *Getting Dry: How to Help Your Child Overcome Bedwetting*, by Max Maizels, M.D., Diane Rosenbaum, Ph.D., and Barbara Keating, R.N., M.S.
- *Enuresis and Encopresis: Ten Years of Progress*, by Edwin J. Mikkelsen, M.D.
- *Facts for Families Pamphlet #18, Bedwetting*, by the American Academy of Child & Adolescent Psychiatry (AACAP)
- [Help is Available for Foster Children Who Wet Their Beds](#)
- [Foster Children and Bedwetting: A Practical Guide to Dry Nights](#)
- [Bedwetting & Adopted Children](#)