

- **Use of enuresis alarm**

- when placed inside the pyjama bottoms, the device is triggered by urine contacting the sensor
- the child is waken up to complete voiding in the toilet
- the purpose is to develop a reflex so that the child gets up to void when the bladder is full
- the method requires cooperation of both the child and the parents
- may take a few months to have effects
- the result varies from person to person

- **Bladder training**

- set a time table for drinking fluid and voiding for the child to follow according to the doctor's advice in order to train the bladder to pass urine only when it has reached a certain degree of distension

- **Medications**

- some medications decrease the volume of urine produced during night time
- should be taken according to the doctor's advice
- may have side effects
- the condition may relapse upon discontinuation of the medications



- **Psychological counselling**

- this is required when the child's self-confidence, self-esteem, school performance or interpersonal relationship is deteriorating



Conclusion

Parents should seek medical advice as soon as possible for both primary and secondary nocturnal enuresis in order to have a proper diagnosis and treatment so that their child can grow up healthily, both physically and psychologically



Nocturnal Enuresis (Bed-wetting)



Nocturnal enuresis (Bed-wetting) is common in young children. A child suffers from nocturnal enuresis if he/she, at or above the age of 5, has urinary continence in the daytime but involuntarily passes urine during sleep at night at a frequency of more than twice per month. According to reports of overseas studies, bed-wetting occurs in about 20% of children at the age of 5, 5% at the age of 10 and 1-2% at the age of 18.

Type of nocturnal enuresis

- Primary – the child has never attained dryness at night
- Secondary – the child has attained continence for a period of time but begins to have episodes of incontinence

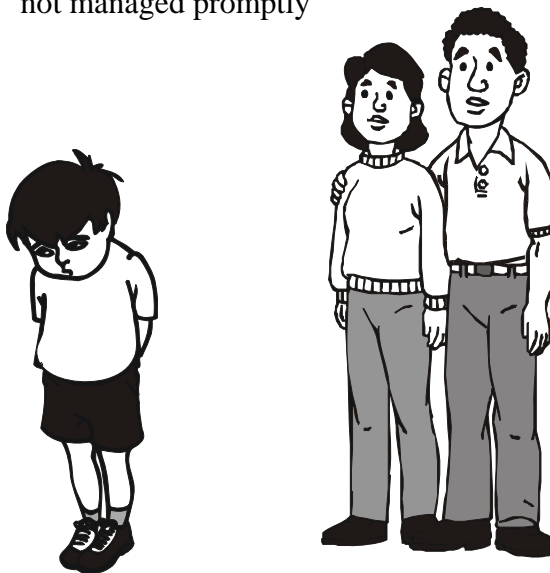
Causes

- For primary nocturnal enuresis, a definite cause cannot be found in the majority of cases. The following are possible causes which are generally beyond the control of the child :
 - *Hereditary*
If both parents had the condition, their child has a 75% chance of having the condition. The chance is 50% if only one parent got the condition
 - *Bladder problems*
A small bladder capacity may result in an inability to store a large volume of urine. Increase bladder irritability may lead to bladder contraction and urine voiding when the bladder is stimulated e.g. by fluid intake
 - *Inadequate antidiuretic hormone secretion*
This results in the formation of large volume of urine and subsequent bed-wetting

- *Delayed development*
In some children, the mechanism for voluntary bladder control is immature and achievement of bladder control is delayed
- *Individual factors*
Children in deep sleep may not sense fullness of the bladder and therefore do not get up to void
- Secondary nocturnal enuresis can be caused by diseases such as urinary tract infection, diabetes and impaired kidney function. It may also be related to family problems, emotional or psychological disturbances

Effects of nocturnal enuresis on children

- Majority of children recover spontaneously
- Can sometimes affect the psychological development of children
 - they may be ashamed, have a low self-esteem or lack self-confidence
 - school performance, social life and behaviour may be affected
- Existing diseases that cause secondary enuresis can affect the health of the child if not managed promptly



How to tackle the problem

- **Change of habits**
 - avoid taking too much fluid after dinner. Have soup in the afternoon or before dinner and limit intake to one glass of water after dinner
 - finish the whole glass of water at one go and not in small volumes to avoid irritating the bladder repeatedly
 - empty the bladder before going to bed
- **Behaviour training**
 - parents should understand that nocturnal enuresis is not due to the child's laziness, nor a deliberate act to cause trouble
 - parents should not blame the child for bed-wetting but praise the child for a dry night to strengthen the child's self-confidence
 - put stickers on a chart or calendar as a form of encouragement for dry nights and as a record of the condition

April 2010						
Mon	Tue	Wed	Thur	Fri	Sat	Sun
			1★	2★	3★	4
5	6	7	8	9	10	11
12	13	14★	15	16	17	18
19	20★	21	22★	23	24	25
26	27	28	29	30		