



Tips to Help When Kids Wet the Bed

Wetting the bed or other bladder control accidents are fairly common in children. 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 through a good part of their elementary school years. This tip sheet will provide a basic overview of enuresis, some causes, and ways that you can 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 lack the ability to control their bladder 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. There are two types of daytime wetting that 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 there is not some significant underlying medical issue occurring.

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

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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
- 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 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 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 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.

We recommend talking to your doctor before starting any other treatment option. He or she may have some ideas that take trauma into consideration.

Ways to Deal with Enuresis

It can be frustrating to deal with a wetting problem. Remember that, very often, it is equally frustrating and humiliating for the child. Becoming angry, punishing the child when he wets the bed, or assigning intent (such as thinking the child did this on purpose or that she is just lazy) will do little to improve the situation. Most of the time, prevention is the best bet and positive

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.

reinforcement is always the trauma-informed approach.

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

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- 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
- Use vinyl covers to protect mattresses
- Have a reward system for dry nights
- Bladder training (have the child practice holding the urine during the day for longer and longer periods of time to help stretch the bladder)
- Talk with the child's teacher to help your child with discretion
- During the school day, request that the child is allowed to leave at anytime 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-ups underwear

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 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 together with the child and your doctor to find the right solution for your family can help empower the child and also reduce any feelings of shame he or she 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 start to feel better.

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

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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, Bed-wetting*, by the American Academy of Child & Adolescent Psychiatry (AACAP)
- [Bed-wetting](#)
- [DryBuddy](#)
- [GoodNites](#)
- [Bedwetting \(Nocturnal Enuresis\)](#)
- [Enuresis in Children](#)
- [Help is Available for Foster Children Who Wet Their Beds](#)
- [Bed Wetting](#)
- [Encopresis and Enuresis in Stress Disordered Children](#)



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