

Making a start



0-19 Public Health Integrated Nursing Service

This booklet must be completed and
brought to your appointment

Child's name





Dear parent / carer

We are sending you this booklet because you and your child have expressed an interest in overcoming nocturnal enuresis (bed wetting). To enable the nurse to perform a thorough assessment and reduce the number of times you need to come into the clinic we have compiled this booklet for you.

Over the next two weeks it is important you work through this booklet and collect the relevant information with your child. This is so that the nurse can plan the right treatment with you to help your child to progress towards becoming dry at night, and is in accordance to the NICE guidance.

You can find further information and advice from:

- www.eric.org.uk search 'bedwetting'
- www.bbuk.org.uk/children-young-people/children-resources/talkaboutbedwetting
- www.stopbedwetting.org

Let's make a start

To help your child become dry at night we suggest you stop using pull-ups or nappies for the two weeks before your appointment. Although pull-ups / nappies may help to keep the bed dry, their use does not aid dryness in the long term.

Bed protection, duvet and mattress protectors are available from:

[www.eric.org.uk/online shop](http://www.eric.org.uk/online-shop)

[www.bbuk.org.uk/online shop](http://www.bbuk.org.uk/online-shop)

Alternatively you could use a plastic sheet.



It will help your child to achieve larger bladder volumes if they are drinking the recommended amounts (see table below).

Age	Sex	Total drinks per day
4–8 years	Female	1000–1400 ml
	Male	1000–1400 ml
9–13 years	Female	1200–2100 ml
	Male	1400–2300 ml
14–18 years	Female	1400–2500 ml
	Male	2100–3200 ml

Steps to developing bladder control

Sometimes following these simple steps greatly improves your child's chances of having dry nights.

Day time

- Increase fluid intake (see charts on pages 3 and 8)
 - Use of the toilet for a wee regularly (about every two hours, or after a drink)
- It may be useful to discuss this with your child's school.



90 minutes before going to bed

- Stop all drinks

Just before sleep

- Make sure your child's bladder is empty (have one wee before getting into bed, and another just before going to sleep)
- Switch off any lights or TV
- Make sure your child is warm enough in bed
- Ask your child to think 'I'll be dry tonight' or 'I'll wake up for a wee if I need one'



At night time

NO LIFTING! If you wish to take your child to the toilet, please make sure they are fully awake.

How much does your bladder hold?

It is important to find out how much your child's bladder holds. To do this we need your child to wee into a measuring jug only when their bladder feels really full. This will help us to decide what is the best treatment for them.

Please make sure that you only take one measurement a day. It should NOT be the first wee in the morning. Record the measurements on the chart below.

Date	Voume (mls)

To measure these you could buy a cheap plastic measuring jug and discard it after use.

Making a start chart

Over the next two weeks please record the following information on the chart opposite:

1. What type of drink your child had in the two hours before going to sleep and what time they had it?
2. Whether your child was dry or not at your bedtime.
3. The time you checked on your child when you went to bed.
4. Whether your child woke in the night to use the toilet.
5. Whether your child achieved a completely dry night.
6. If your child was wet, what size was the wet patch:

Small = size of dinner plate (about 30cm)














Medium = size of a child's 'hoola-hoop' (about 70cm)

Large = down to their knees and up to pillow

[illegible]

The importance of fluid intake

Drinking 7-8 drinks throughout the day will train your child's bladder to hold a greater volume of urine (wee). Ask your child to colour in a glass for each drink they have during the day (each cup represents 200mls).

Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								

Food diary

What your child eats and how often they have a poo can have an effect on their bladder. Please pick any day before your appointment and tell us everything that your child ate on that day.

Breakfast	
Lunch	
Dinner	
Snacks	

Please record the number of poos your child has each day. We also need to know the 'type' of poo; look online for the 'Bristol Stool Chart' to see what type of poo your child is passing.



Mon	Tues	Weds	Thurs	Fri	Sat	Sun

Mon	Tues	Weds	Thurs	Fri	Sat	Sun

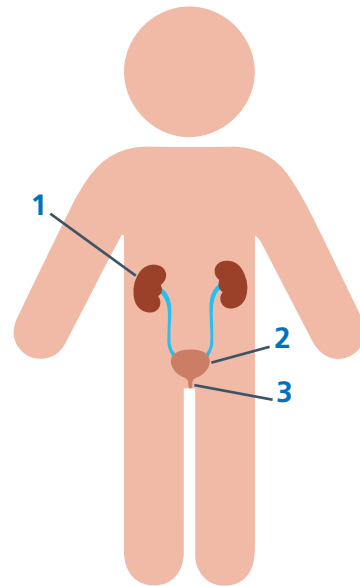
Useful information about bed wetting

The body parts involved in bedwetting are the brain, kidneys and bladder.

Message sent from brain to kidneys:

1. **Kidneys**
2. **Bladder**
3. **Urethra** (where wee comes out)

When your body is working as it is supposed to, the kidneys make urine (wee) which is collected in the bladder. The bladder is like a balloon that can stretch. As it stretches it sends a message to the brain to say that it is full. The brain then tells us we need to go to the toilet. Some people sleep through this message so when the bladder gets too full it empties in the bed.



Also, at night the brain produces a chemical called 'Vasopressin'. This tells the kidneys to make a smaller amount of urine so that we can sleep longer without having to wake up to wee. Some people do not produce enough Vasopressin so the kidneys produce large quantities of urine and they wet the bed. Another reason why some people wet the bed is because the muscle of the bladder contracts before the bladder is full.

How children feel about wetting the bed

- Different from their friends or lonely. However, in a class of 30 there will be one or two children who wet the bed. Roughly 750,000 children in Britain wet the bed.
- They may worry about trips or sleepovers.
- Sad or guilty - they want to stop wetting the bed.
- Angry or frightened, because they do not understand why this is happening to them.
- Embarrassed, they do not want their friends to know.

Important points for parents

- Your child is not doing it on purpose or being naughty -they cannot help it.
- It takes time and effort for some children to be dry at night which may include extra washing and having to bath / shower in the morning before school.
- Punishing your child for wetting the bed is not helpful as they cannot control it.
- Praising and rewarding your child's efforts is very helpful - praising them for trying (e.g. going to try for a wee before bed, increasing drinks), not necessarily achieving the dry night.

At your child's appointment you will need to:

1. Bring this booklet, fully completed.
2. Bring your child.
3. Ensure you have measured and recorded your child's bladder volumes in this booklet.
4. Ensure you attend at the correct clinic on the time and date shown on the letter.

Please call your 0-19 Public Health Integrated Nursing Service on 0113 843 5683 if you have any questions or if you cannot attend your appointment

Help us get it right

If you have a complaint, concern, comment or compliment please let us know by speaking to a member of our staff. We learn from your feedback and use the information to improve and develop our services.

If you would like to talk to someone outside the service contact the **Patient Experience Team** on **0113 220 8585**, Monday to Friday 9.30am to 4.30pm or email lch.pet@nhs.net

We can make this information available in Braille, large print, audio or other languages on request.

www.leedscommunityhealthcare.nhs.uk