

Bedwetting Basics



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(1) Bedwetting is no-ones fault!

- Children are not being lazy; often they just can't wake to a full bladder feeling.
- It is not bad parenting - just waiting & hoping they will grow out of it.
- Most children should be & are dry by the time they start school. However, for one reason or another, the problem persists.
- Worldwide studies show more boys tend to wet the bed more often and including into the teenage years, than girls. However, girls tend to have more trouble with daytime wetting.
- With growth & development - 4 year olds can feel bladder fullness & can pee voluntarily on command. At aged 5-6 years children can withhold the need to pee & achieve bladder filling & stretching. Day-time bladder control is usually achieved about 1-1.5yrs before night-time control. This can be very individual.



(2) Ok, so why do some kids still wet the bed?

- Yes, there are genetics involved. If one parent wet - 40% chance it will occur for the child too; If both parents wet - about 75% chance. Even if neither parent wet - still a 15% chance.
- Natural body hormones - there are not enough to help slow down the production of urine overnight. The kidneys are working overtime. Usually have big wets & dilute wee. Normally the 'anti-diuretic' hormone should kick in, concentrating the wee and making it darker & less of it.
- The bladder is a bit hyperactive - often it doesn't want to hold on to too much wee. Often in the day-time the child needs to go to the toilet quite quickly, and maybe wets a bit into their pants. Often, the amount of wee done is below the average expected for age.
- Can't wake up - The bladder-brain connection is not quite happening. The bladder is trying to tell the brain to 'wake up, I need to pee', but the brain is tuned out. The bladder is too full & wetting then occurs. Sometimes children can be sleep-talking & perhaps sleep-walking as their bodies are 'half awake' in an effort to toilet.

(3) What can I do to help as a parent?

- **Don't wake your child & try to toilet them.** This is counterproductive. It doesn't help them realise when their bladder is full (it might be full at 4am, not 10.30pm when you go to bed; they are often in their deepest sleep at this time anyway). Children will often not even remember you taking them (this means they are still weeing while they are asleep).



- **Tell them it's not their fault.**
- **Reward them for good behaviour that they can control** - like taking off the wet sheets, making their beds. Just small rewards that can bank up to something - for example - it's like getting a stamp each time you buy a coffee & you get your 10th one free.
- Encourage them to **stick to good habits**, including hanging on for a wee for a bit longer or not going for a wee 'just in case'.
- **Don't rush doing a wee** - encourage them to sit / stand & allow the bladder to fully empty. Especially the last wee at bedtime. May need to wee again, if sleep is delayed.
- Avoid having too many soft-drinks anyway and particularly in the evening! Sugared drinks encourage the body to make more wee. **Water is the best fluid** for your body to keep hydrated. Adults included!
- Avoid your child becoming **constipated** with their poo. By constipated we mean - less than 3 bowel actions a week; doing hard, lumpy poos and straining to do poo. Make sure their feet are not dangling when sitting on a regular size toilet, support feet with a **footstool**. Dangling feet changes the inside anatomy - the angle of the poo approach.

(4) Sleep Tips for School-aged Children

- Teach school-aged children about healthy sleep habits.
- Continue to emphasize need for regular and consistent sleep schedule and bedtime routine.
- Make child's bedroom conducive to sleep – dark, cool and quiet.
- Keep TV and computers out of the bedroom.
- Avoid caffeine - milo, choc drinks, energy drinks.
- **6 years** night time: 10 hours, 45 minutes
- **7 years** night time: 10 hours, 30 minutes
- **8 years** night time: 10 hours, 15 minutes
- **9 years** night time: 10 hours
- **10 years** night time: 9 hours, 45 minutes
- **11 years** night time: 9 hours, 30 minutes
- **12 years** night time: 9 hours, 15 minutes
- Australia's Physical Activity Recommendations recommend that 5-18 y.o accumulate no more than 2 hours of screen time a day for entertainment (excluding educational purposes)



At what time should your child go to bed?

	Wake-up time						
	6:00 AM	6:15 AM	6:30 AM	6:45 AM	7:00 AM	7:15 AM	7:30 AM
	Sleeping time						
Age							
5	6:45 PM	7:00 PM	7:15 PM	7:30 PM	7:30 PM	8:00 PM	8:15 PM
6	7:00 PM	7:15 PM	7:30 PM	7:30 PM	8:00 PM	8:15 PM	8:30 PM
7	7:15 PM	7:15 PM	7:30 PM	8:00 PM	8:15 PM	8:30 PM	8:45 PM
8	19:30	7:30 PM	8:00 PM	8:15 PM	8:30 PM	8:45 PM	9:00 PM
9	7:30 PM	8:00 PM	8:15 PM	8:30 PM	8:45 PM	9:00 PM	9:15 PM
10	8:00 PM	8:15 PM	8:30 PM	8:45 PM	9:00 PM	9:15 PM	9:30 PM
11	8:15 PM	8:30 PM	8:45 PM	9:00 PM	9:15 PM	9:30 PM	9:45 PM
12	8:15 PM	8:30 PM	8:45 PM	9:00 PM	9:15 PM	9:30 PM	9:45 PM

(5) To further help your child -

Purchase the complete Bedwetting guide 😊

- We consider all these bedwetting factors and work out the best plan of attack. We look at the underlying reasons for the wetting, to get the best outcome.
- We use a combination of tips, best practice information, using alarm equipment and importantly - professional advice to tie it all together!
- Our e-book includes awesome templates that you can use to keep track of your progress.
- **Some children are not ready to use the alarm** - they need to be ready, willing and involved - it is their job. It's not the Parent that says the child is ready. Parents are there as a coach - to say & do the right things and bring the oranges! It is the child's job to kick the goals, if you catch my drift. If they are not ready, give it more time until the wetting problem does start to concern them.
- Most children become dry within 6-10 weeks of this program - Some are quicker and some take a little more time. That's ok, everyone is individual!
- If the bedwetting does not resolve, we suggest you make contact with your child's Doctor so that the medical team can consider Medication or Paediatrician review. Very few cases of bedwetting are linked to a medical issue.
- Sometimes a few children will use a bedwetting alarm, become dry for a period of time, then start wetting again. This is called a 'relapse'. When this happens it is best to re-use the alarm, as the bladder-brain connection needs to be 'plugged in' again.

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