Treatment for daytime wetting

Most parents first seek help from their health visitor, school nurse or GP. It can be useful to take a record along to the appointment of wetting accidents, daily drinks and how often your child has managed to use the toilet. You will probably be asked about night-time wetting, bowel and general health including any developmental, coordination and attention difficulties. A routine urine test will rule out a urinary tract infection and a toilet training programme to improve toilet routine may be suggested. Medication may be prescribed if an overactive bladder is suspected.

On occasion, a child will be referred for specialist assessment and further investigation. The most common tests are bladder scans and ultrasound scans of the kidneys; much less regularly, urodynamic and cystometric tests to assess the pressure and amount of urine in the bladder and whether it is filling and emptying properly may be required.

*Occasionally some children with daytime wetting problems experience bullying when peers fail to understand the condition. If bullying is suspected support and intervention should be sought.
Daytime wetting

Daytime wetting is very common. Affecting about 1 in 75 children over the age of five, it can vary from having damp underwear to a sudden emptying of the whole bladder. It is not unusual for younger children to occasionally wet, but as children get older daytime wetting can become more difficult to deal with at school and socially*. Some children will start to wet during the day after being reliably dry for some time, others will never have been dry at all. Girls and younger children are more likely to suffer daytime wetting but most children do not have a serious underlying disorder and for some, there are easily identifiable clues as to why it might be happening.

What can cause daytime wetting?

- Not yet reliably dry in the day. Children differ enormously in how long they take to become fully toilet trained and if one child takes longer than another it is not a reflection on parenting skills.
- A big change in routine, such as moving house or a new baby, may be unsettling for some children. Things normally settle down when a new routine is established.
- Younger children can often become engrossed in an activity and forget to listen to the signal which tells them they need to use the toilet.
- Constipation can cause pressure on the bladder and the sensation of needing to use the toilet is much more frequent.
- Some drinks can have an adverse effect on the bladder eg fizzy drinks, tea and coffee. If you think your child has an urge to use the toilet soon after a particular drink, simply experiment by withdrawing the drink for a few days to see if it makes any difference.
- Urinary tract infections (UTI) are often accompanied by a regular urge to wee and a stinging sensation. A routine urine test at your GP surgery will rule out a UTI.
- Sometimes the bladder holds less urine than it should (small bladder capacity). Encouraging your child to drink regularly through the day can help to ensure that the bladder is able to hold as much urine as it should.
- An ‘overactive bladder’ causes a sudden and frequent urge to empty the bladder and there will often be a need to use the toilet with little warning.
- Some children use the toilet in a hurry and don’t always completely empty the bladder, leaving a little urine behind which can leak out. Encourage your child to sit on the toilet a few moments longer to ensure the bladder has been completely emptied.
- Anxiety or emotional upset can cause the urge to go to the toilet much more frequently than is usual. This is usually resolved when the upset has settled down.

How can parents help?

- Encourage your child to drink regularly through the day. 6-8 water-based drinks each day (for more information on recommended fluid intake for children visit www.wateriscoolinschool.org.uk and www.water.org.uk).
- Continue to give youngsters children prompts, encouragement and simple rewards until your child is using the toilet or potty independently.
- Constipation can be avoided with a balanced diet which includes cereals, fruit and vegetables.
- A vibrating watch is ideal for children who need a prompt or regular timed cues to use the toilet. Available from ERIC www.ericshop.org.uk.
- Check that your child’s school allows easy access to drinking water and to the toilets (for more information on school toilets visit www.bog-standard.org).
- Stay calm and relaxed and respond in a matter of fact way if accidents occur.
- Encourage your child to wait before getting off the toilet to make sure that the bladder is completely empty.
- Absorbent pants can help minimise urine leakage. ERIC has a range of attractive pants suitable for daytime wetting www.ericshop.org.uk.
- Seek professional help if problems persist after the age of four or if there is a change in your child’s toileting pattern.
Daytime wetting

Daytime wetting is very common. Affecting about 1 in 75 children over the age of five, it can vary from having damp underwear to a sudden emptying of the whole bladder.

It is not unusual for younger children to occasionally wet, but as children get older daytime wetting can become more difficult to deal with at school and socially*. Some children will start to wet during the day after being reliably dry for some time, others will never have been dry at all. Girls and younger children are more likely to suffer daytime wetting but most children do not have a serious underlying disorder and for some, there are easily identifiable clues as to why it might be happening.

What can cause daytime wetting?

• Not yet reliably dry in the day. Children differ enormously in how long they take to become fully toilet trained and if one child takes longer than another it is not a reflection on parenting skills.
• A big change in routine, such as moving house or a new baby, may be unsettling for some children. Things normally settle down when a new routine is established.
• Younger children can often become engrossed in an activity and forget to listen to the signal which tells them they need to use the toilet.
• Constipation can cause pressure on the bladder and the sensation of needing to use the toilet is much more frequent.
• Some drinks can have an adverse effect on the bladder eg fizzy drinks, tea and coffee. If you think your child has an urge to use the toilet soon after a particular drink, simply experiment by withdrawing the drink for a few days to see if it makes any difference.
• Urinary tract infections (UTI) are often accompanied by a regular urge to wee and a stinging sensation. A routine urine test at your GP surgery will rule out a UTI.
• Sometimes the bladder holds less urine than it should (small bladder capacity). Encouraging your child to drink regularly through the day can help to ensure that the bladder is able to hold as much urine as it should.
• An ‘overactive bladder’ causes a sudden and frequent urge to empty the bladder and there will often be a need to use the toilet with little warning.
• Some children use the toilet in a hurry and don’t always completely empty the bladder, leaving a little urine behind which can leak out. Encourage your child to sit on the toilet a few moments longer to ensure the bladder has been completely emptied.
• Anxiety or emotional upset can cause the urge to go to the toilet much more frequently than is usual. This is usually resolved when the upset has settled down.

How can parents help?

• Encourage your child to drink regularly through the day: 6-8 water-based drinks each day (for more information on recommended fluid intake for children visit www.waterscoolinschool.org.uk and www.water.org.uk).
• Continue to give younger children prompts, encouragement and simple rewards until your child is using the toilet or potty independently.
• Constipation can be avoided with a balanced diet which includes cereals, fruit and vegetables.
• A vibrating watch is ideal for children who need a prompt or regular timed cues to use the toilet. Available from ERIC www.ericshop.org.uk.
• Check that your child’s school allows easy access to drinking water and to the toilets (for more information on school toilets visit www.bog-standard.org).
• Stay calm and relaxed and respond in a matter of fact way if accidents occur.
• Encourage your child to wait before getting off the toilet to make sure that the bladder is completely empty.
• Absorbent pants can help minimise urine leakage. ERIC has a range of attractive pants suitable for daytime wetting www.ericshop.org.uk.
• Seek professional help if problems persist after the age of four or if there is a change in your child’s toileting pattern.
Daytime wetting

Daytime wetting is very common. Affecting about 1 in 75 children over the age of five, it can vary from having damp underwear to a sudden emptying of the whole bladder. It is not unusual for younger children to occasionally wet, but as children get older daytime wetting can become more difficult to deal with at school and socially*. Some children will start to wet during the day after being reliably dry for some time, others will never have been dry at all. Girls and younger children are more likely to suffer daytime wetting but most children do not have a serious underlying disorder and for some, there are easily identifiable clues as to why it might be happening.

What can cause daytime wetting?

- Not yet reliably dry in the day. Children differ enormously in how long they take to become fully toilet trained and if one child takes longer than another it is not a reflection on parenting skills.
- A big change in routine, such as moving house or a new baby, may be unsettling for some children. Things normally settle down when a new routine is established.
- Younger children can often become engrossed in an activity and forget to listen to the signal which tells them they need to use the toilet.
- Constipation can cause pressure on the bladder and the sensation of needing to use the toilet is much more frequent.
- Some drinks can have an adverse effect on the bladder eg fizzy drinks, tea and coffee. If you think your child has an urge to use the toilet soon after a particular drink, simply experiment by withdrawing the drink for a few days to see if it makes any difference.
- Urinary tract infections (UTI) are often accompanied by a regular urge to wee and a stinging sensation. A routine urine test at your GP surgery will rule out a UTI.
- Sometimes the bladder holds less urine than it should (small bladder capacity). Encouraging your child to drink regularly through the day can help to ensure that the bladder is able to hold as much urine as it should.
- An ‘overactive bladder’ causes a sudden and frequent urge to empty the bladder and there will often be a need to use the toilet with little warning.
- Some children use the toilet in a hurry and don’t always completely empty the bladder, leaving a little urine behind which can leak out. Encourage your child to sit on the toilet a few moments longer to ensure the bladder has been completely emptied.
- Anxiety or emotional upset can cause the urge to go to the toilet much more frequently than is usual. This is usually resolved when the upset has settled down.

How can parents help?

- Encourage your child to drink regularly through the day. 6-8 water-based drinks each day (for more information on recommended fluid intake for children visit www.wateriscoolinschool.org.uk and www.water.org.uk).
- Continue to give younger children prompts, encouragement and simple rewards until your child is using the toilet or potty independently.
- Constipation can be avoided with a balanced diet which includes cereals, fruit and vegetables.
- A vibrating watch is ideal for children who need a prompt or regular timed cues to use the toilet. Available from ERIC www.ericshop.org.uk.
- Check that your child’s school allows easy access to drinking water and to the toilets (for more information on school toilets visit www.bog-standard.org).
- Stay calm and relaxed and respond in a matter of fact way if accidents occur.
- Encourage your child to wait before getting off the toilet to make sure that the bladder is completely empty.
- Absorbent pants can help minimise urine leakage. ERIC has a range of attractive pants suitable for daytime wetting www.ericshop.org.uk.
- Seek professional help if problems persist after the age of four or if there is a change in your child’s toileting pattern.
Treatment for daytime wetting

Most parents first seek help from their health visitor, school nurse or GP. It can be useful to take a record along to the appointment of wetting accidents, daily drinks and how often your child has managed to use the toilet. You will probably be asked about night-time wetting, bowels and general health including any developmental, coordination and attention difficulties. A routine urine test will rule out a urinary tract infection and a toilet training programme to improve toilet routine may be suggested. Medication may be prescribed if an overactive bladder is suspected.

On occasion, a child will be referred for specialist assessment and further investigation. The most common tests are bladder scans and ultrasound scans of the kidneys; much less regularly, urodynamic and cystometric tests to assess the pressure and amount of urine in the bladder and whether it is filling and emptying properly may be required.

*Occasionally some children with daytime wetting problems experience bullying when peers fail to understand the condition. If bullying is suspected support and intervention should be sought.*
Treatment for daytime wetting

Most parents first seek help from their health visitor, school nurse or GP. It can be useful to take a record along to the appointment of wetting accidents, daily drinks and how often your child has managed to use the toilet. You will probably be asked about night-time wetting, bowels and general health including any developmental, coordination and attention difficulties. A routine urine test will rule out a urinary tract infection and a toilet training programme to improve toilet routine may be suggested. Medication may be prescribed if an overactive bladder is suspected.

On occasion, a child will be referred for specialist assessment and further investigation. The most common tests are bladder scans and ultrasound scans of the kidneys; much less regularly, urodynamic and cystometric tests to assess the pressure and amount of urine in the bladder and whether it is filling and emptying properly may be required.

*Occasionally some children with daytime wetting problems experience bullying when peers fail to understand the condition. If bullying is suspected support and intervention should be sought.

---

ERIC’s GUIDE to Childhood Daytime Wetting