

# Your Family's Guide for Managing Enuresis

Visit our Enuresis Website at:

[www.childrensmercy.org/enuresis](http://www.childrensmercy.org/enuresis)



**Children's Mercy**  
KANSAS CITY



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Month: \_\_\_\_\_

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

# How do we grow out of Enuresis?

1. The bladder gets big enough to hold all the urine all night long.
2. The brain becomes aware of the bladder being full and wakes us up during the night to use the bathroom.

## To help grow out of enuresis, we focus on 3 things...

1. Make sure poop (stool) is soft.
2. Have good daytime bathroom habits.
3. Consider nighttime options.





Month: \_\_\_\_\_

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# How to know when we are constipated

- Changes in normal bathroom pattern
- Smear of poop (stool) in underwear
- Straining while sitting on the toilet
- Bleeding with bowel movements
- Stomach cramps or bloating
- Painful and/or hard stools
- Stool that clogs the toilet
- Changes in appetite



# Why do we get constipated?

- Do not eat enough fiber
- Do not drink enough fluids (water)
- Wait too long to use the bathroom
- Eat and drink too many milk products
- A change in daily schedule, especially with stress



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# How much fiber do we need?

Preschool (3-5 years) = 15 grams per day

School age (6-12 years) = 20 grams per day

Adolescence (13-19 years) = 25 grams per day

## Foods rich in fiber



### Whole Grains

brown rice, whole wheat pasta, whole grain bread, cereal or cereal bars with 3-5 grams or more of dietary fiber per serving



### Fruits

Apples, berries, grapes, melons, peaches, pears, plums, prunes, raisins



### Vegetables

Fresh: carrots, celery, cucumbers, tomatoes

Other: broccoli, brussels sprouts, corn, green beans, green peas, beans, potatoes with the skin, spinach, sweet potatoes

# Remember to drink plenty of fluids!

## Water helps us

- control body temperature
- keep muscle tone
- get rid of body wastes
- digest our food
- lubricates the joints and intestine (keeping stools soft)
- moves oxygen and nutrients throughout the body



## Water is everywhere in the body!

- 90% of the lungs
- 83% of the blood
- 73% of muscle tissue
- 25% of body fat
- 22% of bones

Notes:

# Please call the clinic if your child:

- was prescribed a medication (Please call us within 2-4 weeks to tell us how the treatment is working)
- experiences medication side effects
- is using a moisture alarm and it alarms more than two times a night
- develops constipation or has irregular bowel movements








OR

- you have any other questions or concerns and symptoms are getting worse.





# Bristol Scale

Type	Description	Image
<b>Type 1</b>	Separate hard lumps, like nuts or hard balls	
<b>Type 2</b>	Sausage-shaped but lumpy	
<b>Type 3</b>	Like a sausage or snake but with cracks on its surface	
<b>Type 4</b>	Like a sausage or snake, smooth and soft	
<b>Type 5</b>	Soft blobs with clear-cut edges	
<b>Type 6</b>	Fluffy pieces with ragged edges, a mushy stool	
<b>Type 7</b>	Watery, no solid pieces	

# How much fluid do we need each day?

## Hydration Guide

Weight (pounds)	Ounces per Day	Cups (8 ounce) per Day
40—100 pounds	50	7—8
101—120 pounds	50—60	7—8
121—140 pound	60—70	7—9
141—160 pounds	70—80	9—10
161—180 pounds	80—90	10—11
181—200 pounds	90—100	11—12
Over 200 pounds	100	12—13

If you drink enough fluids, your urine is clear to pale yellow in color.

# Good Daytime Bathroom Habits



Have your child pee often, at least every two hours when he/she is awake. Watches can help remind your child when to pee.



Encourage him/her to relax so he/she can completely empty their bladder. A trick to encourage relaxation is to blow five times after peeing (like blowing out candles on a birthday cake).



Provide child with a lot of fluids. Encourage him/her to drink often during the day.



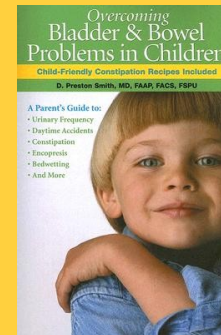
For girls, remind her to wipe from front to back.

Notes:



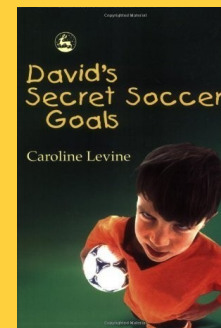
## The Complete Bedwetting Book by Preston Smith, MD (2005)

Dr. Smith has written this book and many others to aid parents and children in all aspects of bedwetting. This book explains the causes and solutions in easy to understand terms and gives the reader the tools needed to make the best decisions on how to correct their child's bedwetting problems.



## Overcoming Bladder and Bowel Problems in Children by Preston Smith, MD (2005)

The book addresses problems related to frequency, urgency, accidents, infections, holding, constipation, encopresis, bedwetting and more. The "Tinkle Timer" is an approximately 4 minute timer intended to be fun, and avoid bathroom "pit stops." The timer helps with holding and promotes better emptying.



## David's Secret Soccer Goals by Caroline Levine (2004)

David loves playing soccer, but when the chance comes up to go to soccer camp, David has to face up to his biggest embarrassment—wetting the bed. It delicately highlights the fears and worries that a child in his position can go through, while offering practical advice on how to deal positively with the situation. Intended for children ages five and older.

## Recommended Websites

### National Kidney Foundation

<http://www.kidney.org/patients/bw/index.cfm>

### Kids health Organization

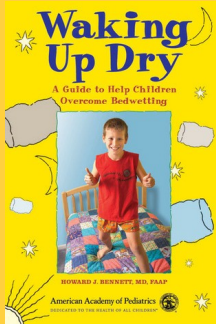
[http://kidshealth.org/kid/health\\_problems/bladder/enuresis.html](http://kidshealth.org/kid/health_problems/bladder/enuresis.html)

### National Institute of Health—Urinary Incontinence in Children

[www.kidney.niddk.nih.gov](http://www.kidney.niddk.nih.gov)

# Other Enuresis Resources

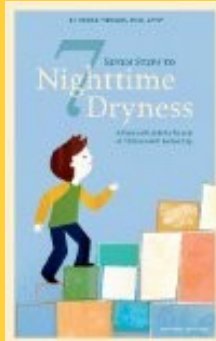
Many books and resources can be found at your local library. Books can also be ordered and purchased from local bookstores or through the internet.



**Waking Up Dry: A Guide to Help Children Overcome Bedwetting by Howard J. Bennett, MD FAAP (2005)**

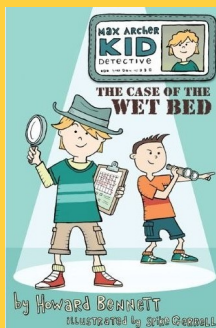
Intended for parents and children. With the use of action characters, the book offers humorous, practical advice for families to win the battle of becoming dry at night. Intended for school age children and their parents.

<http://www.wakingupdry.com>



**Seven Steps to Nighttime Dryness: A Practical Guide for Parents of Children with Bedwetting by Renee Mercer CPNP (2011)**

This book is packed with practical tips that are extremely valuable in helping your child achieve nighttime dryness. Full of information regarding bed alarms. This book answers hundreds of commonly asked questions that parents and children have about bedwetting, and the steps to achieve dryness.



**Max Archer: Kid Detective. The Case of the Wet Bed by Howard Bennett, MD FAAP (2011)**

Max is a detective who takes on bedwetting. He relates to Billy's issues of waking up in a wet bed. It is an easy-to-read book about how to stay dry at night and provides explanations both parents and kids will appreciate. The book also has extra information about pooping and its impact on bedwetting, as well as "Q&A About Bedwetting (Just for Parents!)"

# Drinks that irritate the bladder



## Carbonated Drinks

Soda, flavored waters, diet drinks

## Caffeinated Drinks

Tea, coffee, chocolate, soda



## Citrus Juices

Orange, lemon, grapefruit, tomato



## Drinks with red dye

Gatorade ® , Kool-Aid ® , other red colored drinks



# Options for nighttime control

15 percent of children after the age of 6 will stop wetting the bed each year without any treatment.

Focus on daytime routine and bladder emptying .



Moisture alarms are the most successful treatment for enuresis and have no side effects. When used correctly, the moisture alarms have a 70—80 percent success rate.

For some patients, medicine may be an option. Medicine does not cure bedwetting; medicine can only help control bedwetting. Please talk with your provider if medicine is an appropriate choice.



Notes:

# Moisture Alarms

The purpose of an alarm is to help the child get up during the night and use the toilet when they first feel a full bladder. The alarm does NOT stop a child from wetting the bed.



Moisture sensor needs to be attached to underwear. Pull-ups can still be worn over the underwear.

Alarms work best when used every night. On average, it takes 10—12 weeks to become consistently dry. Some children take longer.

EVERY time the alarm goes off, make sure the child goes to the bathroom and fully empties their bladder.



In the beginning, it is rare for a child to hear the alarm and walk to the bathroom alone.

The alarm requires parent participation.