



Nocturnal Enuresis: The Bedwetting Demon

For many parents, it is a source of frustration. For children, it can be a devastatingly humiliating experience - something far worse than any monsters hiding under their beds or in their closets. I am talking about [Nocturnal Enuresis](#), or bedwetting. Some children continue to suffer from this condition when they should be enjoying sleepovers and slumber parties. Yet, for the child who suffers from Involuntary Bedwetting, the thought of sleeping over someone's house is riddled with fear that his or her "secret" will be exposed.

The cause of Nocturnal Enuresis isn't exactly known, however studies have shown that the number of children who suffer with this condition is between 5-7 million. Nocturnal refers to nighttime, so Nocturnal Enuresis is bedwetting that occurs during the night. It is also classified as children who involuntarily wet the bed when they are well passed the years of potty training. The occurrence of Nocturnal Enuresis is more prevalent in boys than in girls.

Conditions that Point to the Existence of Nocturnal Enuresis

If your child wets the bed one time that doesn't necessarily indicate Nocturnal Enuresis. Here are some factors that doctors look at when diagnosing Nocturnal Enuresis.

First, the doctor will need to determine if the Nocturnal Enuresis or involuntary bedwetting is frequent and repetitive. If a child is having episodes of at least 2 times a week, for at least three weeks, then that points to Nocturnal Enuresis.

Doctors will also take down the medical history of the child. In diagnosing Nocturnal Enuresis, the process is conducted on the basis of "ruling out" other medical conditions to determine what may be the underlying cause. The medical history part of the diagnosis will be concerned with answers to questions regarding medications the child may be taking, urinary tract infections, bladder and spinal cord abnormalities, Diabetes, and certain Seizure related disorders. Another factor that the doctor will look at is if there is a family history of Nocturnal Enuresis.

Nocturnal Enuresis: Causes

These questions help determine the existence of Nocturnal Enuresis. Though the cause is more like a puzzle than a simple laboratory test, there are some definite signs that contribute to the cause of Nocturnal Enuresis. For example, childhood stress such as a death, divorce, or significant change can trigger Nocturnal Enuresis. Delayed or slowed growth and development may also cause Nocturnal Enuresis. If the bladder is too small, that will also contribute. Some children are just heavy sleepers and won't wake up. While some medications may cause a

child to wet the bed, this however does not constitute Nocturnal Enuresis. Once the course of prescribed medications is finished, the bedwetting problem stops.

What can be done about Nocturnal Enuresis?

Over the centuries the number one step that parents took to prevent Nocturnal Enuresis was to punish the child. This has led to a great misconception over what Nocturnal Enuresis is and has left society with the view that it was "bad behavior" on the child's part. Parental education is absolutely necessary to the treatment of this condition and imperative to the child's emotional well-being. The child is not purposely wetting the bed to anger the parents, and parents need to be informed of positive and helpful steps they can take to encourage their children with gentle guidance and kindness.

If the Nocturnal Enuresis is the result of a medical condition, then treatment may be started according to the remedy appropriate for the condition.

For sound sleepers, the use of a bedwetting alarm may be the solution. The alarm will go off, and the child is essentially being "trained" to wake up and use the restroom. Your doctor will instruct you on the proper use of the bedwetting alarm. If the condition is caused by slow growth usually no specific treatment is necessary, once the child grows, the Nocturnal Enuresis should stop.

No matter what you think may be the cause of Nocturnal Enuresis; you should take your child to the family doctor to have the proper diagnosis and treatment.