

## **Managing Primary Nocturnal Enuresis - Parent Handout**

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### **What is “normal”? What can I expect going forward?**

1. Happens in more than 10% five year olds, 8% eight year olds. Down to 1% by 15 years.
2. Highly genetic condition ... a lot is out of the child's control!

### **Do the easy things first:**

1. Avoid caffeine & excessive fluids in evening
2. Empty bladder before bedtime
3. Take the child out of diapers
4. Include child in morning cleanup in a non-punishing way: goal is to preserve self-esteem

### **Alarms are recommended for motivated kids, from motivated families, if simple measures haven't worked**

- Likely the most effective treatment ... when child is motivated ... and you're willing to wake up overnight
- Many devices available online (I have no particular preference)
- A 'good' trial is 3-4 months, and you may not see benefit for 1-2 months
- Continue until 14 consecutive nights dry ... then 'overtrain' by intentionally drinking more each night to overcondition the bladder for at least 7 additional nights.
- Cure rate: 50%

### **Desmopressin acetate (ie. DDAVP) is best for short-term treatment, like camp/sleepovers**

- Potential side effects (headache, abdominal pain, stuffiness/nosebleeds from nasal preparation) are usually mild.
- Avoid medication if diagnosed with cystic fibrosis or diabetes insipidus
- Main risk is water retention (which can be dangerous) - avoid drinking fluids one hour before taking, and 8 hours afterwards
- Take 1-3 sublingual (under the tongue) melting wafers at night before bed before sleepovers

### **Behavioural therapy doesn't have a whole lot of evidence**

- “Lifting” is waking a child to void, but my worry is that it can contribute to frustration and poor sleep
- This is the only time positive reinforcement may not be helpful: this isn't in their control