

How Serious is Bed Wetting in Children?

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Bedwetting (nocturnal enuresis) is common in children. It occurs in up to 20% of 5 years olds and 10% of 10 years olds, with a spontaneous remission rate of 14% per year. Weekly daytime wetting occurs in 5% of children, most of whom (80%) also wet the bed. The problem will still be present in about 0.5% of adults.

It is usually monosymptomatic, which happened during sleep only and the child does not have other symptoms like bladder irritability symptoms (frequency, urgency, hesitancy, abnormal stream with or without incontinence), or polyuria and no constipation.

It could be primary in 80% of patients, Primary nocturnal enuresis (never consistently dry at night) should be distinguished from secondary nocturnal enuresis (previously dry for at least 6 months).

Important risk factors for primary nocturnal enuresis include family history, nocturnal polyuria, impaired sleep arousal and bladder dysfunction. Secondary nocturnal enuresis is more likely to be caused by factors such as urinary tract infections, diabetes mellitus and emotional stress.

Studies in the general population have shown that more than half of parents of enuretic children do not seek professional medical advice. Lack of knowledge regarding the nature of enuresis and its negative effect on their children can cause parents to delay seeking medical advice.

The problem will have a significant impact on the child and his family and the older the age the more impact. Also, as the child grows in age, the enuresis tends to be more resistant to the treatment. Impact of enuresis can be divided into:

Impact on the child

- Psychological impact
- Sleep disorders
- Poor school performance and affection of short-term memory.
- Low self-esteem and behavioral problems. Enuresis negatively affects the self-esteem, interpersonal relationships, and social performance of affected children and their families; moreover, enuretic children with daytime symptoms have particularly diminished self-esteem. Self-esteem has been studied in psychological research, mainly due to the correlation between low self-esteem and later mental health problems.
- Child Abuse rate is higher in children with enuresis as it was found that there is association between bedwetting and punishment and domestic violence.
- Children are often teased by siblings and friends and are reluctant to participate in school trips requiring an overnight stay or to attend sleepovers.

Impact on the family

- Financial impact related to the use of special sheets, cloths for the enuresis and treatment cost. Sleep disorders
- Sleep disorders related to the problem and in case they need to use voiding alarm as a modality of treatment.
- The quality of life of enuretic children's mothers is negatively affected; they have low general health concepts and high anxiety and depression scores.

Being a male, with sever enuresis and older age will result in a more sever enuresis and more impact and it will be more resistant to treatment.

Children with nocturnal enuresis generally perceive themselves similar to children without nocturnal enuresis and are not "psychologically or emotionally disturbed.

It is important to educate the community about the problem and the importance to seek medical advice early to avoid the impact on the child and his family. Bed-wetting is not the child or young person's fault and that punitive measures should not be used in the management. Management should offer support, assessment and appropriate treatment tailored to the circumstances and needs of the child and young person and parents.

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