

Holding on exercises

If your child's bladder only holds small amounts but empties well their doctor may suggest that you encourage them to try holding-on exercises.

Some people find this very difficult and can only hold on for a few seconds once they feel the urge to wee. Do not see this as a failure but as a starting point.

Distraction is often a good technique to help your child to hold on.

Measuring bladder capacity can encourage your child to carry out this exercise and provide useful information on their progress.

For example, measuring how much your child can wee and seeing if they can hold on and do a bigger wee next time. Most children will respond well to lots of praise in this exercise, but it is important that the praise is linked to their attempt to hold on. Remember some children find this exercise very difficult and should not be punished if they only pass a small amount even if they have passed larger amounts previously.

Oxybutynin/Tolterodine

If simple measures alone do not improve your child's condition their doctor may prescribe a drug called Oxybutynin/Tolterodine. These medications relax the muscle that surrounds the bladder relieving symptoms of urgency and frequency and should be used in conjunction with the simple measures already discussed.

Sitting on the toilet correctly

To encourage complete emptying of the bladder your child needs to sit comfortably on the toilet and feel well supported.

Ask your child to sit with their bottom firmly on the toilet seat. Feet should be firmly on the floor, if your child cannot reach the floor comfortably, provide them with an appropriate sized step.

Feedback

We appreciate and encourage feedback. If you need advice or are concerned about any aspect of care or treatment please speak to a member of staff or contact the Patient Advice and Liaison Service (PALS):

Freephone (City Hospital campus):

0800 052 1195

Freephone (QMC campus):

0800 183 0204

From a mobile or abroad:

0115 924 9924 ext 65412 or 62301



Minicom: 0800 183 0204

E-mail: pals@nuh.nhs.uk

Letter: NUH NHS Trust, c/o PALS,
Freepost NEA 14614,
Nottingham NG7 1BR

www.nuh.nhs.uk

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Day time wetting in children

Information for parents and carers

This document can be provided in different languages and formats. For more information please contact the Paediatric Urology Nursing Team on

Tel: 0115 924 9924 ext. 61408

Direct line: 0115 970 9408

Daytime wetting is a common problem with over 125,000 children over the age of five years in the UK alone (Hodges, 1997). For most children becoming dry is something that happens without much thought or effort, but others need a little help to learn the skills required. Often simple measures are all that is required to greatly improve the situation.

Drinking

It is recommended that all school age children should have six to eight, 250ml drinks every day, spread evenly throughout the day. **Drinks can be given at breakfast, school breaks and lunchtime, after school and in the evenings.**

- Good drinks to encourage are water, **diluted** juice and milk.
- Drinks to try and avoid are fizzy drinks **and drinks that contain caffeine** like tea, coffee and hot chocolate.

Toileting

Regular and complete bladder emptying is important to stay dry and to avoid urinary tract infections.

If your child has wetting accidents try to establish how long they can stay dry for. For example, if you notice your child is always wet two hours **after using the toilet**, check them regularly and record when they become wet.

Once you have established how long they can remain dry for, encourage **them to go to the** toilet before this time.

For example **if your child is** dry after 90 minutes but always wet after two hours try toileting every 90 minutes. Try to ensure your child takes time when toileting and does not rush off before completely emptying their bladder.

Some children like to use an alarm clock or vibrating wristwatch to remind them when to **use the toilet** (if you would like details on **this** please ask a member of staff).

Frequency

Your child may have frequency if they need to wee eight or more times each day (Mattiasson et al 2003) and only pass small amounts of urine.

Your child does not have frequency if they wee eight or more times each day but pass good/large volumes.

Urgency

Your child has urgency if as soon as they feel they need a wee they have to rush to the toilet and may get wet if they do not have direct access to a toilet.

Your child does not have urgency if they hold on for long periods and then get wet rushing to the toilet.

Constipation

Because the bladder and bowel are so closely situated inside the body constipation can have a major effect on bladder behaviour leading to poor emptying, urinary tract infection, frequency and wetting.

To avoid constipation try to ensure that your child:

- **has an adequate fluid intake of six to eight 250ml drinks every day**
- **is as active as possible**
- **eats five pieces of fruit or vegetables every day**

Ask your doctor or nurse for more advice on dietary fibre for children.

Double voiding (double wees)

Your doctor or nurse may have asked your child to try and double void. This means to go to the toilet and wee out as much as possible then either wash their hands, walk to their bedroom and back or walk to another toilet in the house and try to have a second wee. If they cannot have a second wee ask them to go away and try again after five minutes. If they cannot carry out a second wee after five minutes end the exercise and try again next time they need to use the toilet.

Encourage your child to try the exercise five times, if your child never manages to have a second wee you can assume that your child empties his/her bladder well. If your child can do a second wee (double void) try to get them to do this three times each day, breakfast time, after school and before bed. This will help your child stay dry and start to teach them how to empty their bladder completely.

Talk to your child about toileting in school. Many children refuse to use school toilets as they can be cold, **smelly** or a place where bullying takes place. However it is important that we all empty our bladders regularly. If this is a problem **please** discuss it with your school nurse. Further advice can be found on the ERIC web site. www.eric.org.uk.