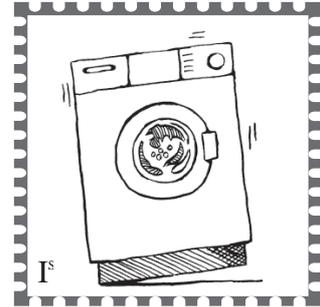


Children who soil or wet themselves

Factsheet for parents and teachers

About this factsheet

This is one in a series of factsheets for parents, teachers and young people entitled *Mental Health and Growing Up*. The aims of these factsheets are to provide practical, up-to-date information about mental health problems (emotional, behavioural and psychiatric disorders) that can affect children and young people. This factsheet looks at the reasons behind why children may soil or wet themselves, and offers some practical advice about how to cope with this problem.



Introduction

Most children under the age of 2 will wet themselves at night. This is normal. Between the ages of 2 and 5, most children will learn to be dry at night. You should think about getting advice if you have a 6-year-old who still wets the bed at least once a week; or if your child starts to wet their bed again after being dry for a while.

What causes bedwetting?

Some children who still wet their bed after the age of 5 may just be slow developers. You may find that your child is more likely to wet the bed if they are very tired and sleeping deeply. Some children who are usually dry may wet themselves when they are overtired or unwell. It is more likely to happen if you let your child drink a lot before they go to bed.

Wetting can often be a sign that your child is anxious or unsettled, especially if they have previously been dry for 6 months. You may find that your child starts to wet again if they are upset or coping with big changes in their life, such as when a new baby arrives in the family or when they start school.

Is it ever deliberate or due to laziness?

No. You should never blame your child. Making your child feel bad, ashamed or anxious will only make the problem harder to deal with.

What can help?

There are some simple things to try:

- Make sure your child does not drink close to bedtime.
- Before you go to bed yourself, make a point of taking your child to the toilet.
- Make sure that you tell them 'well done' for any dry nights – this often helps.

If your child carries on wetting and doesn't seem to be getting better, go and see your general practitioner. They will be able to refer your child to a specialist if they feel this is appropriate. If bedwetting has begun again after a child has been dry at night for a period of time, and physical problems have been ruled out, your general practitioner might suggest that you see someone from your local child and adolescent mental health service. They will try and find the reasons behind why the bedwetting has started again.

Bell and pad

A very effective method of treatment is the 'bell and pad' or 'enuresis alarm'. It involves putting a pad underneath your child's sheet. This pad is connected to an electrical buzzer. You can get one from your local specialist clinic. When your child starts to wet the bed, the buzzer goes off. Your child should then get up and use the toilet. Gradually, your child will learn to wake and use the toilet by themselves. It may take your child weeks or months to become completely dry at night. It is important to praise your child for their dry nights.

Further help may be required if your child carries on wetting the bed or starts again after a period of being dry.

Sources of further information

- Lask, B. (1991) *Children's Problems: A Parent's Guide to Tackling Them*. London: Optima.
- ERIC (Enuresis Resource and Information Centre) offers information and advice about day and night wetting to parents, young people and professionals. 34 Old School House, Britannia Road, Kingswood, Bristol BS15 8DB; tel: 0117 960 3060; www.eric.org.uk.
- The *Mental Health and Growing Up* series contains 36 factsheets on a range of common mental health problems. To order the pack, contact Book Sales at the Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG; tel: 020 7235 2351, ext. 146; fax: 020 7245 1231; e-mail: booksales@rcpsych.ac.uk, or you can download them from www.rcpsych.ac.uk.

Daytime wetting

About one in three children who wet their bed will also wet themselves in the daytime. It can also happen on its own, without bedwetting at night. The problem is particularly troublesome when children start to go to school. They may be teased for being smelly and find it hard to make friends.

What causes it?

When a child starts school they may not get to the toilet when they need to. This may be because they are embarrassed to tell the teacher that they have to go. They may be so busy with their work or with playing that they just leave it too late. Some children will try to hold it in for as long as possible because they just don't like the school toilets. About half of older girls who regularly wet themselves in the daytime have a urinary infection needing medical treatment. It can also happen if your child is very anxious, or has behavioural problems.

What can help?

You may need to sort out practical problems about using the toilet at school. Have a chat with their teacher to make sure that they remind your child to go regularly. Many children like a 'star chart'. Small rewards for dry pants at the end of the day can be helpful. If reminding your child to go to the toilet doesn't seem to be working, you can try using a timer which will give a signal every hour or so to remind your child that it is time to go. If the problem continues, ask your general

practitioner to check out any physical problems. They can refer you to a specialist if necessary.

Soiling

Soiling (encopresis) occurs when a child does not reliably use the toilet for a bowel motion. They may dirty their pants, or go to the toilet in inappropriate places.

Obviously, this is normal in toddlers and younger children. However, you should be concerned if it carries on after the age of 4. By then, your child should be able to use the toilet regularly.

What causes it?

There are two main causes for soiling. A child can suffer from both of them.

1. Severe constipation causes the bowel to be blocked with hard faeces. The child finds it painful to pass these, and so becomes more constipated. Liquid faeces then leak around the blockage, staining clothes.
2. Not learning a regular toilet routine is a common cause. The child may be reluctant to use the toilet. This may sometimes be part of a general pattern of behaviour, where a child refuses to do what you want them to.

You can help by encouraging your child to establish a regular routine for using the toilet, and praise for their effort and any successes.

If your child is constipated, make sure that they eat a lot of fruit, vegetables and foods high in fibre. If going to the toilet is painful, your general practitioner will be able to advise you and, if necessary, can refer you to a specialist.

If your child is not constipated, the cause may be psychological. If they start to soil or to smear faeces after no previous difficulties, they may be emotionally upset. If you can find out what is upsetting them and sort it out, the soiling may then improve. If it carries on, your general practitioner may suggest specialist help from the local child and adolescent mental health service.

References

- Carr, A. (ed.) (2000) *What Works with Children and Adolescents? A Critical Review of Psychological Interventions with Children, Adolescents and their Families*. London: Brunner-Routledge.
- Rutter, M. & Taylor, E. (eds) (2002) *Child and Adolescent Psychiatry* (4th edn). London: Blackwell.
- Scott, A., Shaw, M. & Joughin, C. (2001) *Finding the Evidence: A Gateway to the Literature in Child and Adolescent Mental Health* (2nd edn). London: Gaskell.