Supporting Children with Autism with Bedwetting Difficulties
(Primary Nocturnal Enuresis)

Bedwetting is described as involuntary wetting during sleep, and is a common occurrence in childhood. Ten per cent of 7 year olds are affected by bedwetting. Boys are affected more than girls, and there is often a family history. Bedwetting often improves with age. There is a higher incidence of bedwetting in children with Autism Spectrum Disorders (ASD).

Bedwetting can occur as a result of one or more of the following reasons:
1. Bladder control has not yet matured
2. Sleeping deeply and not waking in response to a full bladder
3. Producing a lot of urine at night due to hormonal reasons
4. Overactive bladder (by day and by night)

Recommendations
- Avoid any punishment for bedwetting.
- Anxiety or significant socialisation difficulties can affect bedwetting. Focus on these first before addressing bedwetting.
- Children with ASD often have sleep difficulties. Any approaches to help bedwetting should not affect sleep.

Strategies
- Use social stories and visual schedules to support your child. Examples include: a schedule of their bedtime routine that may include two trips to the toilet (see below), and social stories about what to do if their bed is wet when they wake during the night or in the morning.
- Set realistic and appropriate targets, and reward your child for achieving them. Rewarding a dry night may be unachievable initially and may result in disappointment for your child. An example of an achievable target may be; putting a used pull up in the bin, or helping to change the sheets.
- Empty bladder at night-time as part of bedtime routine. Some children will require emptying their bladder again just before getting into bed (e.g. after reading a story).
- Invest in good bed protection items: waterproof mattresses, quilt covers, pillow cases, and absorbent bed pads. Contact your public health nurse for information on supports that may be available to you, e.g. larger pull ups.
- Fluids: Reducing fluids in the evening has not been found to be very effective in helping children to become dry at night. Of course, large amounts of fluids should not be drunk at bedtime. Caffeine or sugary drinks should also be avoided. Encourage daytime fluid intake so that children will need fewer drinks in the evening.
- Lifting: Many families lift children to the toilet at some time during the night. This has not been found to help children become dry at night. Lifting to the toilet may help with short term confidence but it is not recommended as a long term strategy. Specifically, it can impact upon children’s sleep which is not advised.
- Pull Ups. It can be confusing for your child if they continue to use a pull up and you are encouraging them to be dry at night. General indications that your child may be ready to trial without pull ups are; being toilet trained by day for six months; a dry pull up in the morning. If you decide to trial a period without pull ups, pick a time where there are no other stressors or transitions for your child and family.
- Positive Thinking: ERIC, The Children’s Bowel and Bladder Charity recommend positive thinking before going to sleep: I can be dry, I will be dry.

When to seek help from your GP:
- For information and advice about bedwetting.
- If your child is getting older and continues to experience bedwetting.
- If your child’s bedwetting difficulties are impacting upon their participation in social activities with extended family and friends.
- If your child is experiencing bedwetting and daytime toileting difficulties.
- When required, your GP will guide you with further treatment options.
List of resources

1. **ERIC the children's bowel and bladder charity** helpline, information, message boards and products. Website also includes a kid's zone for explaining about continence. [https://www.eric.org.uk/](https://www.eric.org.uk/). It also has some links to nice cartoons explaining constipation.

2. NICE Guidelines: *Bedwetting in children and young people, Constipation in children and young people*.


The focus of this tip sheet is intended to empower parents to both understand and intervene in supporting their children with any toileting difficulties. However, please consult your GP or multidisciplinary team if problems persist.

Try not to see toileting difficulties as a personal failure as a parent. It might just take a little longer and more patience. Your child will get there.