IS BED-WETTING A PROBLEM IN YOUNG ADULTS?

About two out of every 100 young adults wet the bed at night (also called nocturnal enuresis). It can be a problem for both young men and women, with most young adults who wet the bed having done so since they were a child. While some may have had help as a child, many young people may never have had help with this problem. They may think bed-wetting will get better with time, or that it can’t be helped.

Some young people with night-time wetting may also have day-time bladder problems, such as passing urine more often and more urgently than normal, and urine leaks as they hurry to the toilet (also called overactive bladder).

Bed-wetting can make everyday life more difficult. Young adults may be embarrassed by this problem, and they may fear that people will find out. They can also have the expense and workload of extra washing. It can be tricky to stay away from home overnight or to share a bed or room with someone else. A big worry is what bed-wetting can mean for close personal relationships.

IS HELP AVAILABLE FOR BED-WETTING?

The good news is that you CAN get help. With careful review and treatment, bed-wetting can often be cured, even if past treatment did not help.

Even when it can’t be cured, you can reduce symptoms and keep bedding dry.

WHAT CAUSES BED-WETTING IN YOUNG ADULTS?

Wetting the bed is caused by a mix of three things:
- the body making a large amount of urine through the night;
- a bladder that can only store a small amount of urine at night; and
- not being able to fully wake up from sleep.

In some young adults there is likely to also be some change in bladder function that stops normal filling and emptying of urine through the day.

Worldwide research means that we now know more about the causes of bed-wetting, such as:
- bed-wetting can run in some families;
- some bladders can’t hold very much urine through the day and this can cause problems at night;
- some bladders do not fully empty on the toilet, which means urine stays in the bladder;
- some kidneys make larger amounts of urine than normal through the night; and
- taking in a lot of salt or calcium from foods and drink can change kidney function.

CAN THERE BE OTHER REASONS FOR BED-WETTING?

Some other things can make it hard to control bed-wetting, such as:
- constipation;
- infection in the kidney or bladder;
- not drinking enough water;
- drinking too many drinks with caffeine and/or alcohol;
- the use of some medications and illegal drugs; and
- allergies or enlarged adenoids and tonsils which block the nose or upper airways at night.
HOW CAN BED-WETTING BE HELPED?

Research has led to new types of treatment. Since bed-wetting in young adults can be more complex than in children, you must talk to a health professional with special training in bladder problems, such as a doctor, physiotherapist or continence nurse advisor. When you see this health professional, the problem will be reviewed and a physical check and some tests will be done. One test may check your urine flow (by passing urine in private into a toilet). Another test can check if your bladder empties right out. You may also be asked to do a bladder diary at home.

Treatment will depend on what was found in the check, but could be:
- treatment of constipation and bladder infection;
- drugs or sprays to boost how much your bladder can hold, or to cut down how much urine is made through the night;
- training to control how well the bladder stores and empties urine;
- use of an alarm that goes off when the bed becomes wet. This can be useful for young adults as well as children but may not be the first thing tried;
- a mix of some of the above treatments; and
- use of continence products to protect bedding and skin, reduce odour and increase comfort while treatment is underway.

Treatment can take a few months to work. If you only take the drugs or use the alarm now and then, it may not work at all. Some of the things that can increase the chance of becoming dry are:
- wanting to improve;
- having your treatment supervised; and
- putting in a big effort to make changes where you have been asked to.

When bed-wetting does not get better, it isn’t your fault in this case, you should see a specialist doctor who will do a more thorough review.

SEEK HELP

Qualified nurses are available if you call the National Continence Helpline on 1800 33 00 66* (Monday to Friday, between 8.00am to 8.00pm Australian Eastern Standard Time) for free:
- Information;
- Advice; and
- Leaflets.

If you have difficulty speaking or understanding English you can access the Helpline through the free Telephone Interpreter Service on 13 14 50. The phone will be answered in English, so please name the language you speak and wait on the phone. You will be connected to an interpreter who speaks your language. Tell the interpreter you wish to call the National Continence Helpline on 1800 33 00 66. Wait on the phone to be connected and the interpreter will assist you to speak with a continence nurse advisor. All calls are confidential.

Visit bladderbowel.gov.au or continence.org.au/other-languages

* Calls from mobile telephones are charged at applicable rates.