Introduction for Parents

It’s been known for a long time that bedwetting resolves on its own in most cases. Every year, 15% of children who wet the bed become dry without any intervention. This fact has led many doctors to simply reassure patients that the condition is not serious and will go away on its own. The problem with this approach is that bedwetting can affect a child’s self-esteem. Therefore, it’s shortsighted to ask a child to wait years to become dry if treatment can expedite the process. On the other hand, given the rate of spontaneous improvement, you should always consider the following things before starting any treatment: Is your child motivated to become dry? Is the treatment safe?

Some doctors prescribe medication to stop bedwetting. Although medication may be helpful, it doesn’t cure the problem, and one of the drugs used to treat bedwetting (imipramine) has potentially serious side effects. Many doctors appropriately inform parents about behavior management techniques (including a special device called the bedwetting alarm), which are the most effective treatments for bedwetting. Unfortunately, exploring the many facets of treatment is difficult to accomplish during routine checkups, and doctors often don’t have the time needed to do this. For example, although bedwetting alarms come with instructions, a child’s chances of becoming dry increase dramatically if an experienced practitioner helps her avoid the pitfalls associated with treatment. The information in this book is designed to provide that guidance. There are a few things you should know right away.

- While much of the book is directed toward children, you are an essential part of the program. (Even highly motivated children need their parents’ assistance to make the program work.)
• Bedwetting is not your fault. You will learn more about the causes of bedwetting in Chapter 3, but for now, let go of any guilt you’ve been carrying around for the past few years.
• Bedwetting is not your child’s fault either. No one wets the bed on purpose. However, because bedwetting can be draining both physically and emotionally, parents may feel a sense of frustration, helplessness, and anger when they have to deal with wet beds day after day.
• It’s important that you present a positive attitude to your child throughout the program because negative emotions undermine what we’re trying to accomplish. (Even subtle signs of disapproval can result in more wetting.) Think of yourself as a soccer coach who always says something uplifting, even when a player stumbles and misses the ball: “Great effort, Alex. I know you’ll stop the ball next time!”
• It’s equally important that you and your child are prepared and motivated to do the program. Teaching children to be dry means extra laundry, having to coax and support them when they’re frustrated, and negotiating with your spouse over who’s helping with which part of the program. For the child, it means using the bedwetting alarm and having to deal with fatigue because the alarm wakes you up at night. But by working together, you can overcome these obstacles and end up with a child who is dry at night.
• Despite these challenges, helping your child become dry can be one of the most gratifying experiences you will have as a parent!

In Chapter 6, I give children an assignment to find out how motivated they are to become dry at night. Right now, I’d like to be more philosophical about the issue of readiness. Consciously or otherwise, society puts pressure on parents for their children to achieve developmental goals at specific times. Most of us have worried about our children because they were a little late with one skill or another. Because evaluating a
child’s development is a big part of general pediatrics, I spend a lot of time reassuring parents that their children are normal and recommending that we give them time to develop at their own pace.

T. Berry Brazelton, MD, FAAP, was one of the first pediatricians to call for a child-oriented approach to toilet training and bladder control, and those same principles should be applied to the Waking Up Dry Program. Dr. Brazelton told parents 50 years ago to hold off on potty training until the child showed signs that she was ready. If parents waited for these cues, toileting usually proceeded smoothly. If they didn’t, the process was prolonged or they ran into difficulty.

Although there is no magic age when children are ready to work on their wetting, most children show some awareness of the problem by the time they are 5 to 6 years old. (This is the age when children realize their friends are no longer wearing Pull-Ups to bed.) Whether or not children say anything about this depends on their personalities and how they approach learning new skills. Some children communicate their worries directly. Others keep things to themselves or, surprisingly, overcompensate by acting out. If your child has said something to you about wanting to be dry, it’s appropriate to use the book. If your child is oblivious about her wetting, you can read the book yourself so you’re prepared to deal with the situation once she becomes ready. (There is a lot of practical advice in the book, which will make living with bedwetting easier.) If you sense that your child wants to be dry, but she hasn’t said anything about it, you can explore this area to see if your hunch is correct. The best time to talk with your child is when she is well rested, well fed, and free of distractions. If your child responds positively to these queries, you can use the book. If she doesn’t, put it away for a while, but keep your radar turned on for signs that she has changed her mind. Here are some ways to find out if your child is interested in becoming dry.
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• Ask your child if there is anything about being wet (or wearing Pull-Ups) that she doesn’t like.
• Ask your child if she would like to stop wearing Pull-Ups.
• Ask your child if she would like to be dry at night.
• If you or a relative wet the bed as kids, share this information with your child so she knows someone else in the family had the same problem she does. You can help children talk about their feelings if you go first: “When I was your age, I hated waking up in a wet bed.”
• Tell your child you bought a book that teaches kids how to be dry at night. Let her know the book is fun to read and will show her how to be the boss of her body.

Finally, please note that the book is not meant to treat children with complicated forms of bedwetting. While most children with nighttime wetting do not have a medical condition that underlies the problem, it’s important to exclude such possibilities before you start the program (see Chapter 4).

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