



# NOCTURIA—GOING TO THE TOILET AT NIGHT

## LAAC WĒËR—JÖN YE RAAN ROT WĒËR YIC BĒ LA LAAC

### WHAT IS NOCTURIA?

Nocturia is when a person has to wake up at night to pass urine. If this happens more than twice a night, it can be a problem.

Nocturia is common in older people. It can cause problems in day-to-day life. It can upset your sleep and put you at risk of falls, if you get up in the dark to pass urine. Also, when you have to wake up, you may not be able to get back to sleep and then you might not function as well through the day. You may sleep in the day and then not be able to sleep well at night. Changes like this to your sleep patterns may even make the problem worse: you may be more aware of your filling bladder and so feel like you need to pass urine more often.

Having to wake up once or more each night to pass urine increases as you age. It has been found that one in two women, and two out of three men, aged 50 to 59 years have a problem with Nocturia. It is even more common as you get older—seven out of ten women, and nine out of ten men, over the age of 80 years have Nocturia.

### WHAT ARE THE COMMON CAUSES OF NOCTURIA?

- common heart and kidney problems;
- swollen ankles;
- taking fluid tablets in the night-time;
- drinking large amounts of fluids, alcohol and caffeine drinks (tea, coffee and cola) before going to bed at night;
- poorly controlled diabetes (Type 1 or Type 2);
- Diabetes Insipidus (a rare hormone problem that causes severe thirst and urine loss);
- changes in position (going from upright in the day to lying flat at night means more blood can flow over the kidneys, so more night-time urine is made);
- upset or over-sensitive bladder (such as a bladder infection);
- overactive bladder (such as after a stroke);
- pregnancy;

### YENÖ CÖL LAAC WĒËRIC?

Laac wĒËr ee jön ye raan rot jot wĒËr yic bĒ la laac. Na ye rot jot arak wan rou thook wĒËr yic ba la laac, ka yin a tuany.

Laac wĒËr a dīt tĕn kōc cĕ dhiop. A lĕu bĕ kōc cĕ dhiop diĕt piĕr den yic. A lĕ bĕ kōc cĕ dhiop pĕn nĭn ku a lĕu bĕ keek cōl a wiĕĕk wĒËr yic, tĕ ye kek rōt jot bĭk la laac muōōth yic. Aya, na cĕ raan rot jot, ka nĭn a cĕ ben la ye nyin ku na ye nhiāk bĕĕk piny ka cĭn kĕ piĕth looi rin cĭ yen guāp ye yōk yic. A lĕu ba nin akōl ku ruōu yĭn. Na cĕ niĕn du ye yic waar kālā ka laac wĒËr a bĕ ye yic jal juak: a lĕu ba ya yōk tĕ alĕĕc thiĕĕŋ thĭn ku ye nhiaar diĕt yĭ jot rot ba laac emĕn ku mĕn.

Arak ye raan rot bĕ laac wĒËr yic aa rōt juak tĕ le raan ka dhiop. A cĕ yōk lōnadā ka tiĕŋ tōk diāār ka rou yiic, ku rōōr ka rou rōōr ka diāk yiic, ke ye kōc cĕ run ka 50 yet 59 dōōt aa dĭit laac wĒËr tĕn keek. Ku ee ye yic jal juak apei tĕ le raan ka dhiop – Dhorou ĕ thiāāric alōŋ diāār, ku dhoŋuan ĕ thiāāric alōŋ rōōr, cĕ run ka 80 waan aa leŋ laac wĒËr.

### YENÖ YĒN LAAC WĒËR YIC LAC BĒI?

- tueny-tuĕeny ĕ puōu ku rok;
- but kuiĕc thook;
- tĕ ye raan dek wal cĕ buut thĕĕi;
- tĕ ye raan dek pĭu juāāc, mōu ku kuat kĕ ye de leŋ yic wal wiĕt (cĭt cāi, bun ku thoda) ku jōl la nin;
- tĕ cĭ tueny aliĕm kuōc muk nhom (Aliĕm 1 wālā Aliĕm 2);
- Tueny aliĕm (tueny aliĕm wĕn ye raan rĕĕr ka nĕk rou ku a lac);
- tĕ wĕĕr raan rĕĕr yic (cĕmĕn tĕ rĕĕr yĭn yĭ cōk yĭ kōu akōl na lā kōu ka yĭ tōu ka riĕm dĭt tet a jal tĕĕk rok yiic, ku loikā lec juāāc wĒËr yic);
- alĕny cĕ cak (cĕmĕn alĕny cĕ wuōōk);
- alĕny tuc guōp (cĕmĕn tĕ cĭ rāl nhom abĕk riau);
- liĕc;





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- broken sleep, such as going to the toilet just because you are awake; and/or
- constipation or an enlarged prostate can press on the bladder neck and not let the bladder empty right out. This can cause urine to dribble or overflow.

**Note:** Some people think if they cut down how much water they drink through the day they may cut down on night-time problems. This is not right. Not having enough to drink can cause lack of fluids and constipation. It can also make the urine more concentrated. This can upset the bladder and make you need to go to the toilet more often. Not drinking enough water can also shrink the bladder muscle so the bladder does not hold as much urine, which can make the need to pass urine through the night even worse.

### HOW DO YOU KNOW IF YOU HAVE NOCTURIA?

You should talk to your doctor if you think you have Nocturia. It may not be a simple health problem.

To find out more about your Nocturia, your doctor may ask you about:

- your past health;
- bladder problems;
- the drugs you take (such as, what time you take your fluid tablets); and
- broken sleep.

- tē cī nīn riääk, cēmēn tē ye yīn la laac rin cīn pāac; ku/wälä
- Kuil wälä tē cī adheŋ ē nhiaan dīt ka lēu bē alēēc ya dec ku ye lec pēen bīk cī thök. Kēn a lēu bē lec cōl ye thiu wälä a lēu bē alēēc cōl ye nhom pol wei.

**Det:** Kōc kōk a yekā tak lä na dēk pīu lik akōl ka lec aa bē līk makōu ku cīk rōt jōt arak juääc wēēr yic bīk la laac. Kēn a ce tē de. Na cī dēk pīu juääc akōl ka guäp du a lēu bē yic thök pīu ku kuiεεlē. Aya, a lēu bē lec cōl ke ye lec la dut-dut. Lec la dutdut aa lēu bīk alēēc cōl a wuoc ku cōl yīn ye la laac emēn ku mēn. Na cī ye dek pīu juēc ka alēēc a lēu bē joot ku cī lec juääc ye muk, keya ka bē gua ya thiāŋ ku ye laac emēn ku mēn akōl ku wēēr.

### YE DJIC KADÄ LON LEJ YİN TUENY Ę LAAC WĒĒR?

Apath ba dhiel jam kek akiēm du tē yīn ye yök ciēt yī leŋ tueny ē laac wēēr. Tekdä ka ce tuany thiin puol yic.

Rin bē kā juääc ŋic biäk tueny duun laac wēēr, tekdä ka akīm a bī thiēc kākä:

- pial duun e guöp theer;
- tueny ē alāny du;
- wal ye dek (cēmēn, ye kaam nen yīn wal wēn ya pīu dek); ku
- Tē ye yīn nīn tēm kōu.





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### YOUR DOCTOR MIGHT ALSO:

- check if you have any of the causes of Nocturia, such as those noted above;
- test your urine for a bladder infection;
- ask you to keep a chart to check:
  1. what, when and how much you drink;
  2. when and how much urine you pass;
  3. when you go to bed and get up; and
  4. arrange for tests such as bladder, kidneys, urine, and blood tests.

### HOW CAN NOCTURIA BE TREATED?

It is important that any causes of Nocturia get treated or that you are referred to the right specialist.

Some suggested treatments could be:

- cutting back on how much caffeine and alcohol you drink, mainly before going to bed at night;
- checking the times you take fluid tablets;
- wearing support stockings for swollen ankles;
- resting with your legs up, in the afternoon, for a few hours;
- lighting your path to the toilet (such as a night light); and/or
- placing a commode or bright coloured bucket for use at the bedside.

Your doctor may also refer you to a specialist who will discuss other treatments with you. These may be drugs that treat the Nocturia or treat the cause of the problem.

Some of the health professionals you may be referred to can include a continence physiotherapist, continence nurse advisor, urologist or renal physician.

### AYA, TEKDÄ KA AKIËMDU ABĪ:

- koŋ caath bë tĩŋ lon leŋ yen kãŋ yĩ cöl a lac wĕĕr yic, kã cĩt kã wĕn cĕ lueel nhial;
- lac ku caath bë tĩŋ lon cĩ alĕĕc wuɔɔk;
- yĩ lĕk laac la muk nhom baai, rin ba:
  1. ŋic yeŋö, ku ye nen ku ye kĕ yĩndã ye dek;
  2. ŋic ye nen ku ye lĕc yĩndã ye laac;
  3. ŋic ye nen yĩn nin ku ye jöt rot nen; ku
  4. rot guiri bë alĕĕc, rok, lĕc, ku riem du la caath yiic panakim.

### LAAC WĒĒRIC YE WIĒC DÖC KADÄ?

Apath bë kuat kĕn tueny ĕ laac wĕĕr bëi lac ya dɔɔc wälã apath bë yĩ lac ya tuɔɔc tĕn raan wĕn cĕ kĩim kueen bĩ la kony.

Döc-döc cĕ tãk yĩin aa leŋ yiic:

- tek kuat kĕ ye dek yic, kuat kĕ ye dek thĕĕi ku jol la töc;
- tĩŋ kaam yĩn wal wĕn ya piü dek;
- ye kuic kuun cĕ but duut kĕ la pil;
- ye löŋ yĩ cĕ yĩ cök jat nhial, täãŋ, thããt lik;
- ye dhĕl la yön laac mer yic maköu (cĕmĕn mermer ĕ wĕĕr); ku/wälã
- Wĩc jardhal ba tőöu yĩ lööm ba ya lãc maköu.

Akĩm a lĕu bĩ tuɔɔc tĕn raan aya rin bë raan cĕ wĕl alĕĕc deet apĕy yĩin ben la kony dhöl kök. Dhöl kã aa lĕu bĩk ya wal nyĕĕy laac wĕĕr wälã nyĕĕi kã kĕn laac wĕĕr bëy.

Kɔɔc ĕ kĩim lĕu bĩ tuɔɔc thĩn aa leŋ yiic raan kɔc duããny rin thiu thar, akuɔnyakĩm ĕ thiu thar, akĩm ĕ lĕc, wälã akĩm la roor.





**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](http://bladderbowel.gov.au) or [continence.org.au/other-languages](http://continence.org.au/other-languages)

\* Calls from mobile telephones are charged at applicable rates.

**WĪC KUƆƆNY**

Mathaat akīm cī piöc aabī tō na yī ayup telepun KuƆƆny Baai kāk thiu thar ee nīmra kēnēic tōk, bēt, gueu, diäk, diäk, gueu, dhetem, dhetem\*/ 1800 33 00 66\* (aköl Tök agut aköl Dhiēc ee Läätic (Monday- Friday) kaam thaa bēt nhiäk-duur (8am) ku thaa bēt thēēi (8pm) ee thaa kōc Australia ciēŋ Ciēēn) aye gām kōc abec:

- Läk/Wël;
- Wēēt; ku
- Athör thiin ë läk.

Na yīn acie njēc jam thoŋ English apieth ka yīn alēu ba telpun luoi ye kōc Kuony wēr thokic yuöp. Cōl nīmra kēnē tōk diäk, tōk, ŋuan, dhiēc/13 14 50. Tuenjic, abī raan koŋ dhuk nhom ee thoŋ English, luel thoŋduön ee yīn jam ku tiēēt ee telepunic. Yīn abī tuööm thok kek raan kōc waar thook/duwēr jam thuoŋdu, ku jal kek läk wētduön wīc ee yīn kōc Baai KuƆƆny Kāk thiu thar yuöp ee nīmra kēnēic tōk, bēt, gueu, diäk, diäk, gueu, dhetem, dhetem/ 1800 33 00 66. Tiēēt ee telepunic ku bī yī gam ku duwēr abī kony ba jam kek mathaat akīm kōc läk. Telepun duwēr aye kōc yup thīn abec/majan ee rin cīn en wēu ye wīc tēnē yīn. Kek wël ëbēn aye thiaan yiic.

Nem thioInyin eet [bladderbowel.gov.au](http://bladderbowel.gov.au) wulē [continence.org.au/other-languages](http://continence.org.au/other-languages) (thok-thok kōk yiic)

\* Yup mobaalic ee wēu cam tēcīt cōt baai ētēn.

