



WHAT IS BED-WETTING?

Bed-wetting (also called nocturnal enuresis) is when the bladder empties while a child is asleep. This can happen every so often, or every night.

Bed-wetting is common. About one in every five children in Australia wets the bed. Bed-wetting can run in families and is more common in boys than girls before the age of nine years. It can be upsetting for the child and stressful for the whole family. The good news is that you can get help.

WHAT CAUSES BED-WETTING?

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.

Children who wet the bed are not lazy or being naughty. Some illnesses are linked with bed-wetting, but most children who wet the bed do not have major health problems.

Day-time control of the bladder comes before night-time dryness. Most children are dry through the day by the age of three years and at night by school age. However, this can vary, and children may have accidents every so often, both day and night, up until they are seven or eight years of age.

WHEN SHOULD YOU SEEK HELP FOR BED-WETTING?

It is best to seek help from a health professional with special training in children's bladder problems, such as a doctor, physiotherapist or continence nurse advisor. They can help children with their bed-wetting from when the child is about six years of age. Before this time it can sometimes be hard to get the child to be helpful. However, in some cases it might be wise to seek help sooner, such as when:

- the child who has been dry suddenly starts wetting at night;
- the wetting is frequent after school age;
- the wetting bothers the child or makes them upset or angry; or
- the child wants to become dry.

WAA MAXAY SARIIR-QOYNTU?

Sariir-qoyntu (oo sidoo kale loogu yeero nocturnal enuresis) waa marka kaadiheystu ay faaruqdo iyadoo ilmuhu hurdo. Tani waxay dhici kartaa badanaa, ama habeen kasta.

Sariir-qoynta waa wax caam ah. Qiyaasstii hal shantii carruur ah Australiya ayaa qooya sariirtooda. Sariir qoynta waxay ka jiri kartaa qoysaska dhexdooda waxayna caam ku tahay wiilasha marka loo eego gabdhaha inta ka horeysa da'da sagaalka sanno. Waxay ku noqon kartaa wax ka xanaajiya ilmaha oo welwel ku abuura qoyska oo dhan. Warka fiicani waa waxaad heli kartaa caawimaad.

MAXAA SABABA SARIIR-QOYNTA?

Qoynta sariirta waxaa sababa isku darka saddex waxyaalood:

- jirka oo sameeyaa cadad fara badan oo kaadi ah habeenkii;
- kaadiheysta oo keydin karta oo kaliya caddad yar oo kaadi ah habeenkii; iyo
- In aanay awoodin inay si buuxda uga toosaan hurdada.

Carruurta sariirta qooyaa ma aha kuwo caajislowyaal ah ama edebdaran. Jirooyinka qaarkood ayaa xiriir la leh sariir qoynta, laakiinse carruurta badidooda sariirta qooyaa ma gabaan dhib weyn oo caafimaad.

Kontoroolka kaadiheysta ee wakhtiga maalintii ayaa ka horeeya qaleyka wakhtiga habeenkii. Carruurta badidooda waa qalalan yihiin habeenkii oo dhan laga bilaabo da'da saddexda sanno iyo habeenkii laga bilaabo da'da dugsiga. Si kastaba ha ahaatee, tani way isbedbedeli kartaa carruurtana waxaa laga yaabaa inay ku dhacaan shilal badanaa, labada maalintii iyo habeenkii, ilaa ay gaadhaan toddoba ama sided sanno.

GOORMAAD RAADSANEYSAA CAAWIMAAD KU SAABSAN SARIIR QOYNTA?

Waxaa ugu wanaagsan inaad ka raadiso aqoonyahan caafimaad oo leh tababar khaas ah dhibaatooyinka kaadiheysta carruurta, sida dhakhtar, fiisiyoterabi ama kalkaalisada kala talinta ceshadka kaadida iyo saxarada. Waxay ka caawin karaan carruurta sariir qoynta laga bilaabo marka ilmuhu uu jiro qiyaastii lix sanno. Wixii ka horeeya wakhtigan marmarka qaarkood waxay noqon kartaa wax adag inay ilmaha u noqoto wax caawimaad badan. Si kastaba ha ahaatee, xaaladaha qaarkood waxaa waxbarasho fiican ah inaad caawimaada raadsato sida ugu dhakhsaha badan sida marka:

- ilmihii qalalnaa wuxuu si lama filaan ah u bilaabaa inuu habeenkii isqooyo;
- isqoyntu waxay badataa da'da dugsiga ka dib;
- isqoyntu way dhibtaa ilmaha ama waxay ka dhigtaa mid xanaagsan ama murugeysan; ama
- Ilmuhu wuxuu rabaa inuu qalalnaado.





CAN BLADDER CONTROL THROUGH THE DAY BE A PROBLEM?

Some children who wet the bed at night also have problems with how their bladder works through the day. They may go to the toilet too few or too many times, need to rush to the toilet in a hurry, have trouble emptying out all the urine or have bowel problems. Unless the child has wet underwear, families often do not know about these other bladder and bowel control problems. New day-time wetting by a child who is toilet trained should be discussed with a doctor.

WHAT CAN BE DONE ABOUT BED-WETTING?

Many children do stop wetting in their own time with no help. Most often, if wetting is still very frequent after the age of eight or nine years, the problem does not get better by itself. There are many ways to treat bed-wetting. A health professional will begin by checking the child to make sure there are no physical causes and to find out how their bladder works through the day. Then, there are a few ways to treat bed-wetting that are most often used:

- **Night alarms** that go off when the child wets the bed. These work by teaching the child to wake up to the feeling of a full bladder. The alarm is used either on the bed or in the child's underpants. The results are best when the child wants to be dry, wets very often, has help from a parent through the night, and uses the alarm every night for several months. Some children become dry using an alarm but later start to wet again. Alarms can work again after this relapse.
- **Drugs** that change how active the bladder is or cut down how much urine is made through the night can be prescribed by a doctor. These drugs can be used to help the bladder work better at night. Drugs alone don't often cure bed-wetting. Bladder function must be improved or bed-wetting may come back when the drug is stopped.

KONTOROOKLA KAADIHEYSTU MA NOQON KARAA DHIB MAALINTII?

Carruurta qaarkood ee habeenkii sariirta qooya sidoo kale waxay leeyihiin dhibaatooyinka ah siday u shaqeysa kaadiheystoodu maalintii. Waxaa laga yaabaa inay musqusha aadaan wakhti yar ama marar badan, waxay u baahdaan inay musqusha ku carraraan iyagoo degdegsan, waxaa dhib kala kulantaa faaruqinta dhammaan kaddiheysta ama qabitaanka dhibaataada caloosha. Inuu ilmuhu leeyahay nigis qoyan mooyee, qoysasku badanaa ma oga waxyaalaha ku saabsan dhibaatooyinkan kale ee kontoroolka caloosha iyo kaadiheysta. Maalin isqoynta cusub ee ilmaha musqusha yaqaan sida loo galo waa in lagala hadlaa dhakhtar.

MAXAA LAGA QABAN KARAA SARIIR-QOYNTA?

Carruurta badidooda waxay joojiyaan isqoynta iskood iyagoon wax caawimaad ah helin. Badanaa, haddii isqoyntu ay weli tahay badanaa wax dhaca ka dib da'da sideed sanno ama sagaal, dhibaataadu iskood uma xalismeyso. Waxaa jira siyaalo badan oo loo daaweeyo sariir qoynta. Aqoonyahan caafimaad ayaa bilaabi doona inuu jeegareeyo ilmaha si uu u hubiyo inaysan ahayn wax jir ahaan ah oo sababaya iyagoo ogaanaya siday u shaqeysa kaadiheystoodu maalintii. Kadibna waxaa jira dhawr siyaalood oo loo daaweeyo sariir-qoynta oo badanaa la isticmaalo:

- **Alaarmiga habeenkii** ee yeedha marka ilmuhu qooyo sariirta. Tani waxay ka shaqeysaa inay barto ilmaha u toosida dareenka kaadiheysta buuxda. Alaarmiga waxaa la dhigaa sariirta ama nigiska ilmaha. Natiijada way ugu fiican yihiin marka ilmuhu uu doonayo inuu qalalnaado, ee uu in badan isqooyo, uu caawimaad ka helayo waalid habeenkii oo uu isticmaalo alaarmiga habeen kasta dhawr bilood. Carruurta qaarkood waxay noqdaan kuwo qalalan markay isticmaalaan alaarmiga laakiinse dib ayey ka bilaabaan inay mar labaad isqooyaan. Alaarmigu mar labaad ayuu shaqeyn karaa soo noqoshadaan kadib.
- **Daawooyin** buufiyo oo bedelaya siday u firfircoon tahay kaadiheystu ama yareynaya inta kaadi ah ee ay sameeyso habeenkii ayaa dhakhtar kuu qori karaa. Daawooyinkan waxaa loo isticmaali karaa si ay kaadiheystu ugu shaqeysa si ka fiican habeenkii. Daawooyinka oo kaliya badanaa ma daaweeyaan sariir-qoynta. Shaqada kaadiheysta waa in la hagaajiyaa ama sariir qoynta waxaa laga yaabaa inay soo noqoto marka daawada la joojiyo.





WHAT CAN PARENTS DO?

- Seek help from a health professional with special training in children’s bladder problems, such as a doctor, physiotherapist or continence nurse advisor.
- Watch for constipation as this can make the bladder problem worse. Seek medical help if it is an ongoing problem.
- If your child is using a bed-wetting alarm, get up when it goes off and help to wake them up and change their clothes or sheet. Make sure there is enough light at night so it is easy to get to the toilet.

There are some things which do NOT help:

- DO NOT punish for wet beds.
- DO NOT shame the child in front of friends or family.
- DO NOT lift the child at night to toilet them. This may cut down on some wet beds, but it does not help the child learn to be dry.
- DO NOT try to fix bed-wetting when other family members are going through a stressful time.

MAXAY SAMEYN KARAAN WAALIDIINTU?

- Ka doono caawimaad aqoon yahan caafimaad oo u leh tababar khaas ah dhibaatooyinka kaadiheysta carruurta, sida dhakhtarka, fiisoyoteri yaqaan ama kalkaalisada lataliyaha ceshadka kaadida iyo saxarada.
- Eeg calloosha oo ku fadhiisata maadaama ay tani ka dhigi karto inay dhibka kaadiheystu sii xumaato. Raadso caawimaad caafimaad haddii ay tahay dhib sii soconaya.
- Haddii ilmahaagu uu isticmaalayo alaarmiga sariir-qoynta, toos markay qayliso kana caawi inay toosaan oo ay bedelaan dharkooda ama go’a. Waa inaad hubisaa inuu jiro iftiin ku filan habeenkii si ay ugu sahlanaato inay musqusha tagaan.

Waxaa jira waxyaalo aan caawiney NIN:

- HA U ciqaabin sariir-qoynta.
- HA KU ceebayn ilmaha saaxiibadiis ama qoyska hortiisa.
- HA U qaad in ilmaha musqusha habeenkii si ay u soo kaajaan. Tan waxaa laga yaabaa inay yareyso qaar ka mid ah sariir qoynta, laakiinse kama caawineyso inuu ilmuhu barto sidii uu u qalalnaan lahaa.
- HA iskudeyin inaad xaliso sariir qoynta marka xubnaha kale ee qoysku ay ku jiraan wakhti welwel iyo caddaadis leh.





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.

RAADI CAAWIMO

Waxaa la helli karaa kalkaaliso caafimaad oo aqoon leh haddii aad wacdo Khadka Caawimada Celinta Saxarada Qaranka tel: 1800 33 00 66* (Isniinta ilaa Jimcaha, inta u dhexaysa 8.00 subaxii ilaa 8.00 fiidkii Waqtiga Bariga Australia) lacag la'aan.

- Macluumaad;
- Talo; iyo
- Xaashiyaha.

Haddii aad dhibaato ku qabto ku hadalka afka Ingiriiska ama fahamka waxaad raadsan kartaa Khadka Caawimada ee Adeega Afcelinta Telefoonka oo ah 13 14 50. Telefoonka waxaa lagaga jawaabi doonaa Ingiriis, sidaas darteed magacaw afka aad ku hadasho kuna sug telefoonka. Waxaa lagugu xiri doona mutarjum ku hadla afkaaga. U sheeg mutarjumka inaad doonayso inaad Khadka Caawimada Celinta Saxarada Qaranka oo ah 1800 33 00 66. Ku sug telefoonka in lagugu xiri waxaana ku caawimi doona mutarjum si aad ula hadasho Lataliyaha Kalkaalisada caafimaadka. Dhamaan wicidu waa qarsoodi.

Booqo websaytka bladderbowel.gov.au ama continence.org.au/other-languages

* Telefoonada laga soo diro telefoonka waxaa la iska qaada qiima aad sarreeya.