



### 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.

### SARIIR-QOYNTU MA DHIBAY KU TAHAY DADKA WAAWEYN EE DHALINYARADA AH?

Qiyaastii laba qof 100 kii qof dadka waaweyn ee dhalinyarada ah ayaa habeenkii sariirta qooya (oo sidoo kale layiraahdo **nocturnal enuresis**). Waxay ku noqon kartaa dhib labadaba dadka waa weyn ee dhalinyarada ah ee sariirta qooya iyadoo sidaa sameynayey ilaa iyo carruurnimadoodii. Iyadoo qaar laga yaabo inay heleen caawimaad, dad waaweyn oo dhalinyaro ah baa laga yaabaa inaysan weligood caawimaad helin dhibkaan. Waxaana laga yaabaa inay u maleeyaan in sariir qoyntu ay keligeed baaba'eyso ama inaan waxba laga qaban karin.

Qaar ka mid ah dadkan dhalinyarada ah ee habeenkii isqooya waxaa laga yaabaa inay sidoo kale leeyihiin dhibaataada kaadiheysta ee maalintii, sida kaadinta marmar badan iyo si ka degdeg badan sida caadiga ah iyo in kaadidu ka daadato isla markay ku degdegayaan musqusha (oo sidoo kale layiraahdo **kaadiheys firfircooni saa'id ah leh**).

Sariir-qoynta waxay kadhigi kartaa nolol maalmeedka mid dhib badan. Dadka dhalinyarada ah waxaa laga yaabaa inuu dhibkani yaxyax geliyo. Waxaana laga yaabaa inay ka baqaan inay dadku ogaadaan. Waxaana sidoo kale laga yaabaa inay qabaan kharashka dheeraadka ah ee dhaqitaanka. Waxay noqon kartaa wax xeelad badan inaad habeen guriga ka maqnaato ama sariir la wadaagto qof kale ama qol. Welwel weyn wuxuu yahay waxay u tahay sariir-qoyntu xiriirka shakhsiyeed ee kuu dhow.

### CAAWIMAAD MA LOO HELI KARAA SARIIR- QOYNTA?

Caawimaada wanaagsani waxay tahay inaad HELI KARTID caawimaad. Dib u eegid taxadar badan iyo daaweyn, sariir-qoynta badanaa waa la daaweyn karaa, xitaa haddii daaweyn hore aysan dhicin.

Xitaa markaan la daaweyn karin, waxaad yareyn kartaa astaamaha oo aad ka dhigi kartaa sariirta mid qalalan.

### MAXA KU SABAB A SARIIR-QOYNTA DADKA DHALINYARADA WAAWEYN?

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
- aadan awoodin inay si buuxda uga toosaan hurdada.

Qaar ka mid ah dhalinyarada waaweyn waxaa laga yaabaa sidoo kale inay jiraan waxoogaa isbedelka shaqada kaadiheysta ah oo joojiya buuxinta iyo faaruqinta caadiga ah ee kaadida maalintii.





# BEDWETTING IN TEENAGERS AND YOUNG ADULTS

## ISKU-KAADINTA KURAYADA IYO QAANGAARKA

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.

### 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;
- 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;

Daraasada cilmi barista ee aduunka oo dhan micnaheedu waxaa weeye inaan hadda ognahay wax badan oo ku saabsan waxyaalaha sababa sariir-qoynta, sida:

- sariir-qoynta waxay la socon kartaa qoysaska qaarkood;
- kaadiheysaha qaarkood ma heyn karaan kaadi fara badan maalintii tanina waxay waxay sababi kartaa dhibaatooyinka habeenkii;
- kaadiheysaha qaarkood si buuxda uma faaruqaan marka musqusha la aado, taas micnaheedu wuxuu yahay kaadidu ku jireysaa kaadiheysta;
- kelyaha qaarkood waxay sameeyaan caddad badan oo kaadi ah kana badan ah tan caadiga ah eexhabeenkii.

### MA JIRI KARAAN SABABO KALE OO SARIIR QOYNEED?

Waxyaalo kale ayaa ka dhigi kara wax adag kontoroolida sariir-qoynta, sida:

- caloosha oo ku fadhida;
- infekshinka kelyaha ama;
- cabbida cabitaan fara badan oo leh kafeyn iyo/ama aalkolo;
- isticmaalka daawooyinka qaarkood iyo daawooyinka sharci darada ah; iyo
- Xasaasiyada ama adenoids balaadhay iyo qumanka xira sanko ama hawa mareenada sare habeenkii.

### SIDEE BAA LOO CAAWIN KARRA SARIIR- QOYNTA?

Daraasad ayaa horseeday noocyo cusub oo daaweyn ah. Maadaama sariir-qoynta dhalinyarada waaweyn ay noqon karto mid ka dhib badan tan carruurta, waa inaad la hadashaa aqoon yahan caafimaad oo leh tababar khaas ah dhibaatooyinka kaadiheysta. Sida dhakhtarka, fiisiyoteri yaqaanka ama kalkaalisada la taliyaha ceshadka kaadida iyo saxarada. markaad aragto aqoon yahankan caafimaadka, dhibka dib ayaa loo eegayaa waxaana la sameyn doona jeegareynta jireed iyo waxoogaa baaritaano kale ah. Hal baaritaan waxaa laga yaabaa inuu jeegareeyo socodka kaadidaada (adoo si gaar ah ugu kaadshaya musqul). Baaritaan kale wuxuu jeegareynayaa inay kaadiheystaadu si sax ah u faaruqdo. Waxaa sidoo kale laga yaabaa in lagu weydiyo inaad ku sameyso xusuus qorka kaadiheysta guriga.

Daaweyntu waxay ku xirnaan doontaa waxa lagu helay jeegareyntaas, laakiinse waxay noqon kartaa:

- daaweynta calool fadhiga iyo infekshinka kaadiheysta;
- daawooyinka ama ta laysku buufiyo si loogu xoojiyo ilaa intay heyn karto kaadiheystaadu, ama in lagu yareeyo ilaa inta kaadi ah ee habeenka la sameeyo;





- 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](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.

- tababarka lagu kontroolayo sida ugu fiican ee kaadiheystu u keydiso ee ay u faaruqiso kaadida;
- isticmaalka alaarmiga ee dhawaaqa marka sariirtu qoydo. Tani waxay noqon kartaa mid faa'iido u leh dhaliinyarada waaweyn iyo sidoo kale carruurta laakiinse waxaa laga yaabaa inaysan noqon waxa ugu horeeya ee laysku dayo;
- iskudar qaar ka mid ah daawooyinka kore; iyo
- Istickmaalka alaabta ceshadka kaadida iyo saxarada si loo ilaaliyo sariirta iyo maqaarka, in la yareeyo urta iyo in la kordhiyo raaxada inta daaweyntu ay socoto.

Daaweyntu waxay qaadan kartaa dhawr bilood inay ku shaqeyso. Haddii aad qaadato daawada oo kaliya ama isticmaalka alaarmiga hadda iyo ka dib, waxaa laga yaabaa inaysan dhammaan shaqeyn. Qaar ka mid ah waxyaalaha kordhi kara fursada ah inaad mar kale qalalnaato:

- rabitaanka inaad hagaagto;
- in la kormeero daaweyntaada; iyo
- Dadaal badan siinta si aad u sameyso isbedelo meesha lagugu weydiyey.

Marka sarriirqoyntu aanay soo fiicnaan, ma aha qaladkaaga. xaalladaan, waa in aad aragtaa dhakhtar sameeyaa dib u eegid wanaagsan.

### 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 Kalkaalisaada caafimaadka. Dhamaan wicidu waa qarsoodi.

Booqo websaytka [bladderbowel.gov.au](http://bladderbowel.gov.au) ama [continence.org.au/other-languages](http://continence.org.au/other-languages)

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

