DAYTIME INCONTINENCE

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Daytime Incontinence

It's quite common for children over five to have trouble staying dry during the day. It's nothing to worry about and doesn't necessarily mean something is wrong. Usually, it can be managed with good advice and routines until the child gets older. Among healthy five-year-olds, 20% have this issue, and among school children (6-15 years), 10% still have problems staying dry during the day and/or night. This can affect the child's self-esteem and social life, so it's good to start investigating and treating the problem from around six years of age.

Causes

There are many causes of daytime incontinence, but it's usually functional, meaning it doesn't stem from any disease or malformation. It might be because the nervous system controlling the bladder hasn't matured enough. Other factors can include overly effective diapers, lack of potty training, poor toilet facilities at school, or children holding it in for too long.

Investigation

When investigating the problem, it's important to describe when and how much the child urinates, and when leakage occurs. This can be done by keeping a pee diary. Bowel habits are usually recorded in a bowel diary. A urine sample should be taken to rule out a urinary tract infection. In many places, urine flow measurements are also done, where the child urinates in a special toilet and information about the urine flow is obtained. Afterwards, it's checked if the bladder is empty using ultrasound. Since the child is often a bit tense about urinating in a different toilet the first time, the procedure may need to be repeated if the curve is abnormal.

Questions

The investigation helps answer several questions: Does the child have difficulty emptying the bladder? Is it hard to start urinating? Does the child have to press on the abdomen to urinate? Does the child urinate in intervals or all at once? Is the stream weak? Does it take a long time to urinate? Is the child constipated? If the child constantly dribbles urine or leaks urine when exerting, kidney function should be examined. The most common reason healthy children accidentally wet themselves is that they have a sensitive bladder that wants to empty even when there's only a little urine in it. Additionally, it can be difficult for the child to feel the bladder signals in time. It's also necessary to check that bowel movements are functioning properly and to rule out if bowel movement problems cause or contribute to the urination issues.

Treatment

The first step in treatment is bladder training. The goal is for the child to consciously control their bladder. This means encouraging the child to take responsibility, with support from those around them and healthcare providers. By providing child-friendly information about how the bladder works and what causes urine leakage, and by tightening up urination routines (urinating at set times) together with the child, most children become dry. Often, medication that softens the stool is tried. Sometimes it can be good to add medication that calms the bladder and allows it to hold a bit more urine.

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