

Using alarms as treatment for bedwetting



Information for families

What is an enuresis alarm?

An enuresis alarm consists of a sound box, and a sensor. When the sensor detects moisture the sound box will make a noise. The idea is that the noise is intrusive enough to wake your child. Some alarms are also able to vibrate, some have a light that flashes, and some allow you to make your own recording. These, if present can help wake your child. There are lots of different enuresis alarms available. Some families chose to buy one, others are leant one by the clinic that is supporting their child with the bedwetting.

How does the enuresis alarm work?

The mechanism by which the alarm works is still not fully understood. It is thought that the alarm will teach the child or young person's brain that the bladder signals are important, helping them learn to wake up when the bladder needs to empty. However, many children and young people who become dry with the alarm, find that they can sleep through the night without needing to wake to go to the toilet.

How should an enuresis alarm be used?

Your child should do as much with the alarm as they are able to. Younger children and those with disabilities may need more support than older children and young people, but can still use alarms successfully.

- Before your child goes to bed, check that the alarm is set up correctly, according to the manufacturer's instructions and that it is working.
- You may find it helpful to have some clean nightwear and bedding ready, in case it is needed during the night
- When the alarm sounds check that your child has woken up and wake them if they are still asleep.
- Ensure that your child turns off the alarm when they are awake. If they are not able to turn off the alarm themselves, for any reason, then only turn it off once they are fully awake and out of bed.

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- Encourage them to go to the toilet and try to pass urine, even if they feel that their bladder is already empty
- Help them to get washed, changed into dry night clothes and to change the bed, if they cannot manage to do this themselves
- Go back to bed. You do not need to reset the alarm unless your healthcare professional has asked you to, even if the bed is getting wet again before morning.
- In the morning, make a note of what time the alarm sounded, how big the wet patch was (small, medium or large) and wash the sensor, following the manufacturer's instructions. Do not get the alarm box wet

How will we know if the alarm is working?

It usually takes several weeks before there is an increase in dry nights, but most children will be dry, if the alarm is going to work for them, within 12 -16 weeks.

Early signs that the alarm is likely to be effective include your child learning to wake to the alarm, being able to pass some or more urine in the toilet after waking, smaller wet patches and the alarm sounding later into the night. If you see any of these signs in the first three weeks of using the alarm it is likely to be successful. If none of these are present, then the alarm may not be the right treatment at this time. You should discuss this and the different treatment options with your child's healthcare professional.

When can we stop using the alarm?

Your child should continue to use the alarm until they have had at least 14 consecutive dry nights.

It is sometimes suggested that, to increase the chances of your child staying dry, they start to have a few sips of water, or water-based drink, at bedtime, after 14 consecutive dry nights. If they stay dry with this, then the volume they drink before bed should slowly be increased until they are managing to have a small glass of water before bed. If your child starts to wet with the increase in water, reduce the volume they have back down to the level at which they were last dry for a few nights, before trying to increase again. When they can manage a small glass of water before bed and stay dry, they can stop using the alarm and stop drinking before bed, unless they are thirsty.

Encouraging your child to have a drink before bed, while still using the alarm can increase the chances of them staying dry permanently.

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What are the advantages of an alarm?

Alarms can be an effective treatment with many children who become dry, staying dry. If your child has starts to experience wet nights again, having become dry using alarm, a further time using the alarm is often all that is needed for them to stay dry.

The alarm does not require your child to take any medication, which some families prefer. They are also able to drink until bedtime, although they may be advised to avoid drinks in the hour before bed, at least to start with.

Is an alarm suitable for everyone?

If your child has other problems causing the wetting an alarm may not work for them. If there is any constipation or there are daytime bladder problems (such as daytime wetting, having to get to the toilet quickly or having to go frequently) then these should be treated first.

Having an alarm has been likened to having a new baby in the house – they are designed to make a loud, intrusive noise so that they will wake your child when they start to pass urine, which can happen at any time in the night. Most children need their parent or carer to help them to learn to wake up, to go to the toilet and to change the bed, which can be hard work for you and your child.

The alarms usually take about 12 -16 weeks to be fully effective. If you are not able to support your child with its use during the night for this length of time, then it might not be the best option for you and your child.

If your child has difficulty settling to sleep or getting back to sleep after they have been woken up at night, then an alarm may not be right for them.

Children who are not upset by the bedwetting and younger children may find it difficult to accept being woken by the alarm and having to go to the toilet and get changed in the night, when they would rather be sleeping. For this reason, alarms may not be suitable for all younger children (those under seven years old), but many children aged five or more, who are motivated to become dry, do well with alarms. Children with learning disabilities can also use an alarm successfully with support.

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What are the options if the alarm is not working?

If the alarm does not appear to be working, ask your child's healthcare professional for advice. Many children do well with alarms, but they are not the answer for everyone. Some children need a combination of using the alarm and taking medication and some do well with medication alone. If the alarm is not successful the first time it is used, it may help when your child is a bit older.

Further information

Find more information about child bladder and bowel health in our information library at www.bbuk.org.uk. You can also contact the [Bladder & Bowel UK confidential helpline](tel:01612144591) (0161 214 4591).

For further advice on bladder and bowel problems speak to your GP or other healthcare professional.

There is also information about bedwetting at www.stopbedwetting.org.
