

HOW DOES DESMOPRESSINE WORK

It's easy to explain how Desmopressine works. Normally, a substance in the body ensures that during the night our body retains more moisture than during the day. Research has shown that many bedwetters do not produce enough of this substance at night. They produce more urine than the bladder can hold and the result is a wet bed. Desmopressine makes up for the deficiency of this substance so less urine is formed and the bedwetter remains dry at night.

Tablets and Nasal Spray

Desmopressine for bedwetting comes in two forms: tablets and a nose spray. Both forms are available only on prescription. The doctor decides in advance whether any other problems are concerned and makes sure there are no objections to the use of this medicine. The doctor or pharmacist will explain how Desmopressine can best be used.

Tablets

The most practical way to take Desmopressine is in tablet form. One or two tablets before bed will often produce the desired result immediately. Tablets are moreover easy to store and take with you. Desmopressine tablets should be kept in its original package.

Nasal Spray

The nasal spray is just as effective as the tablets. It is important to follow the directions carefully. Colds and allergies can reduce effectiveness.

Read Directions before Using Medicines

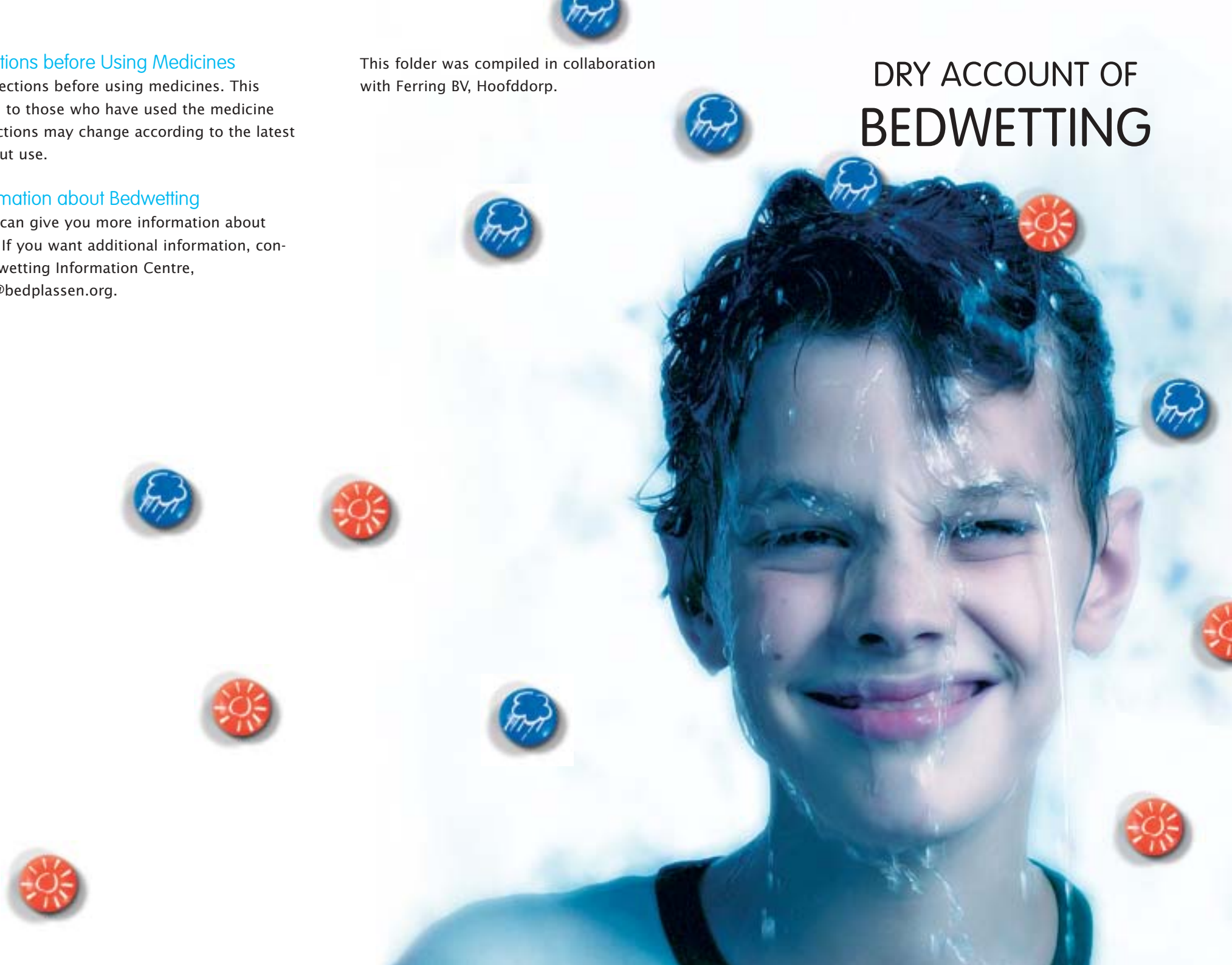
Read the directions before using medicines. This applies even to those who have used the medicine before. Directions may change according to the latest insights about use.

More Information about Bedwetting

Your doctor can give you more information about bedwetting. If you want additional information, contact the Bedwetting Information Centre, e-mail: info@bedplassen.org.

This folder was compiled in collaboration with Ferring BV, Hoofddorp.

DRY ACCOUNT OF BEDWETTING



BEDWETTING IS MORE COMMON THAN YOU THINK

It may sound strange to you but in the Netherlands alone over 100,000 children over the age of six have regular problems with bedwetting. Among five and six year-olds one in seven is a bedwetter. For children aged nine the figure is one in fifteen, and for those aged twelve, one in thirty. Among adults, one person in a hundred is a bedwetter.

Bedwetting can be a great problem - in the first place of course for the bedwetter himself. He may become extremely insecure and form a negative self-image. This is certainly true when the family reacts negatively to the problem. In addition, bedwetting can adversely affect social life. This aspect increases in severity as the bedwetter gets older.

WHY DOES SOMEONE WET HIS BED?

It's difficult to say why someone wets his bed. There is seldom a serious physical cause. Only in the odd case is the problem the result of illness: an infection of the urinary canal, kidney or urinary disorders or diabetes. Recent research indicates that many bedwetters produce more urine at night than non-bedwetters.

The body contains a substance that regulates the formation of urine. Studies show that some people have a deficiency of this substance at night. As a result, the body produces more urine than normal. This overproduction can lead to bedwetting. There is also a hereditary factor. If one or both parents was a bedwetter for a long time, their children may also have this problem. It has never been demonstrated conclusively that bedwetting is caused by emotional problems. Bedwetters have also been thought to sleep too

deeply and are therefore unable to wake in time to get to the lavatory. But research indicates that bedwetters sleep no more soundly than other people and that the problem moreover occurs during light sleep as well. It is difficult to nail down a single cause of bedwetting. Sometimes it is a combination of factors, sometimes the 'why' simply cannot be determined.

WHAT CAN BE DONE ABOUT BEDWETTING?

Generally speaking, no one over the age of six should have this problem. A person over the age of six who regularly wets his bed is considered a bedwetter. Since bedwetting can sometimes lead to other problems, it's a good idea to see a doctor about it. A doctor can do two things. First, he can determine whether the problem is caused by a physical disorder, which occurs in only two percent of cases. If no such cause is found, a doctor can suggest a number of treatment options. We have listed them here.

Wait and See

Every year for one child in seven the problem disappears by itself. A disadvantage of waiting too long is that a child may lose his self-confidence. In this situation the problem only exacerbates. If the child is aged six or older and bedwetting is clearly a problem, it's time to do something about it.

Taking Child to Lavatory

Before going to bed themselves, parents can take their child to the lavatory. This is only possible for children who fall asleep again after being brought back to bed, since the child must be made wide awake. If the child urinates half asleep, he will only be stimulating bedwetting.

Calendar

With this method the child can scratch a sun on the calendar for every dry night. When the child has scratched a certain number of suns on the calendar, he receives a reward.

Alarm

The alarm is a device that goes off like an alarm clock as soon as pyjama trousers or bed mat becomes wet. The child can then go to the lavatory and eventually get used to staying (almost) dry during the night. The trouble with this approach is that the alarm sometimes wakes everybody except the child who needs it.

Medicines

Medicines can play an important role in permanently eliminating bedwetting. They are sometimes used to relieve the child of the problem for several months, as an initial step towards the permanent elimination of bedwetting. If after three months the child still wets his bed without the use of the medicine, the treatment may be repeated. A treatment aimed at changing behaviour, such as 'dry bed training' is then possible. Ask your doctor for information.

Medicine can also be used to relieve a child of his bedwetting temporarily (during holidays, stays away from home, etc.).

The advantage of medicine is that the effect is achieved quickly. You can see results on the very first night. If after several days the effect proves insufficient, it may be necessary to increase the dose. This should be done in consultation with your doctor. One medicine that works well and has few side-effects is Desmopressine. The use of medicine can also be combined with other methods of treatment.

