

Bedtime

Bedwetting, night terrors, and sleep



Bedwetting

This is a problem for many school age children and their families. The good news is that for many, the problem can be fixed through fairly simple treatment. Your child is not the only one with this problem, and it is important that he or she does not feel alone with it. There will be many other bedwetters in the same school, even though they do not usually tell their classmates! It is very common for children to become dry at night for a while and then to start wetting again.

Here are a few facts about bedwetting:

- Bedwetting is a common childhood problem which most children grow out of by the time they start school (although many primary school-age children still wet the bed).
- Children who wet the bed appear to be heavy sleepers and fail to wake when they have a full bladder.
- Reliable bladder control, during day and night, generally occurs between the ages of 3 and 7 years. Reassure your child that bedwetting is normal and that it is not their fault, or anything to be ashamed of.
- Remember to praise your child for dry nights and avoid drawing negative attention to wet nights. Punishing or teasing your child (even by brothers and sisters) can cause shame and may make the situation worse.
- Help your child's self-esteem by helping them wash, or shower in the morning after bed-wetting, to avoid them feeling 'smelly' and being teased. Bedwetting often runs in families and knowing that 'Grandad used to do it when he was a child' can help them normalise the experience.

- Ensure your child drinks plenty of fluids throughout the day, but keep evening fluids to the minimum. Soft drinks containing caffeine increase urine production and are not recommended.
- Leave an evening light on that encourages your child to feel safe about getting up to go to the toilet in the night.
- The use of mattress protectors, 'pull-ups' or bedwetting alarms (usually for children over 7) may take some stress out of the situation for you as the parent.
- Occasionally bedwetting can be due to a medical problem, so check with your doctor if you are concerned.

Ask your Child and Family Health nurse at Community health for information about alarms or use the internet to search for more details.

There are a number of causes of bedwetting. We don't know all of them. Some children wet the bed due to being in deep sleep. They do not wake up to go to the toilet in time. Other children have smaller bladders that cannot hold on to a lot of urine overnight.



Night Terrors

A night terror is a sleep disruption that seems similar to a nightmare, but with a far more dramatic presentation. Though night terrors can be alarming for parents who witness them, they're not usually cause for concern or a sign of a deeper medical issue.

- Night terrors usually occur in children between the ages of 3 and 7 years, and happen in the first third of a night's sleep (much like sleep-walking, sleep-talking and bed-wetting).
- Some researchers believe that night terrors are due to immaturities in the nervous system, whereas others believe that they are a physiological reaction to stress.
- Night terrors are not technically dreams, but a common and mild form of sleep disorder. With traditional nightmares, children wake up scared, fully conscious, and in need of, and responsive to, reassurance.
- Night terrors differ from nightmares in that the child appears to wake in a state of fear and growing panic, yet they are unresponsive and seem almost trance-like. Screaming, crying and open eyes are often other key features of night terrors.
- Fortunately, night terrors are usually occasional happenings and last no longer than about ten minutes.
- It is normal to feel anxious when night terrors occur, as your child appears unable to be comforted and this is naturally distressing. Staying close to your child however and continuing to act in a soothing and reassuring manner is the best thing to do.
- Recognising what a night terror is and when your child is having one can help you to worry less. Remind yourself that they are a natural (and infrequent) part of childhood. If they appear to persist however, talk to your GP or Child and Family Health nurse at Community Health.

Encouraging independent sleeping

Research into babies sleep has identified some simple strategies which promote independent sleep habits.

For example, teach your baby to distinguish the difference between night and day. Reserve night time for feeding, changing and sleeping only, and don't engage in play at this time. Keep the lights in baby's room soft and dim when feeding or attending to your baby at night. Use auditory cues, such as soft whispers and certain words. Respond to your baby's cries for attention at night as promptly as possible so that he does not wake himself up too much and therefore settles back to sleep more easily.

It can also be helpful to put your baby to sleep when he is drowsy but still awake, rather than rocking him or assisting him to sleep in some way. It can be comforting to rock your child and help settle him to sleep, and there is nothing wrong with doing this. You can encourage more independence and self-soothing however, if you help baby learn to put himself to sleep by way of consistent and predictable routines.

Finally, some more handy tips to encourage sleep:

- **TRY AN AQUARIUM**

Placing a small aquarium in your child's room helps promote a deep sleep inducing calm and doubles up as a night light as well. They can be bought cheaply at shops like Big W for around \$30.

- **WARM THE BED**

If it's cold weather, avoid the jarring effect of a cold bed by gently heating the area with a hot water bottle before placing baby in bed. Remove the hot water bottle before putting the baby into the cot.

- **REASSURING RETURNS**

With older babies and toddlers, leave the room saying you'll come back and check on them in ten minutes. Each time you come back, say the same words and leave. Eventually, they'll feel reassured and will fall asleep while waiting for your return.

- **DON'T CREEP AROUND**

Babies tend to sleep best with the sound of normal household sounds in the background. They seem to settle better when they sense other family members around them.



Want more information?

Parentline NSW

Phone 1300 1300 52

For advice on child health and parenting

www.parentline.org.au

Healthdirect

Phone 1800 022 222

24 hours To speak to a registered nurse

www.healthdirect.gov.au

Families NSW

Various resources to help parents at any stage in life.

www.families.nsw.gov.au

Raising Children

The Australian Parenting Website

<http://raisingchildren.net.au/>

Beyond Blue

Phone 1300 22 4636

Phone and online support if you are feeling low

www.beyondblue.org.au

PANDA (Post and Antenatal Depression Association)

Phone 1300 726 306

For information, support and counselling for new parents, family and friends

www.panda.org.au

Sleep Health Foundation

<http://www.sleephealthfoundation.org.au/fact-sheets-a-z/420-bedwetting.html>

Royal Children's Hospital

http://www.rch.org.au/kidsinfo/fact_sheets/bedwetting/

Kids Health - night terrors

<http://kidshealth.org/en/parents/terrors.html>

The Baby Centre

<http://www.babycenter.com.au/a1022133/night-terrors-why-they-happen-and-what-to-do-about-them>

Local Services

Goonellabah Child & Family Health Service

Phone 02 6625 0111

9am – 4:30pm, Monday to Friday to make an appointment.

Lismore Community Health - Child and Family

Phone 02 6620 7687

8am – 5:00pm, Monday to Friday to make an appointment.

Family Support Network

Family Workers can offer you practical and emotional support to enhance & strengthen your parenting & family relationships.

Phone 02 6621 2489

www.fsn.org.au

Brighter Futures

Support services for improving emotional, social, health and education development outcomes for families and their children.

Phone 02 6682 4334



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