

excerpt from Suburban Life
Center Dries Up Bed-Wetting Woes

by Sue Mason

Barbara Moore has a file filled with letters. Others are taped to the wall and even more are in frames scattered around her office. The wording is different, but each and every one carries the same message . . . heartfelt thanks for her help. "Thank you for all your help", wrote Jonathan of Livonia. "There once was a time when I never thought I would be dry. I like doing the exercises because they help me stay dry. I don't like doing them because they take too much time."

Jonathan is among children and adults who have learned they can overcome enuresis, or nighttime bedwetting, and its emotional and physical side effects, with the help of Moore and her staff at the Enuresis Treatment Center, Inc.

"The thing I hear most is 'I wish I had known about you' ", Moore said. "I had a waitress follow me out of a restaurant and say, 'You mean it's not my fault?' I guess that's why it feels so good to help people and to know you've changed their life."

Moore has nearly 30 years helping people overcome their enuresis. It's a job that has its roots in raising her own family. Her daughter began wetting the bed at age 6. It took two years to overcome the problem and while her daughter was seeing a psychologist, Moore gathered every bit of information she could on enuresis.

She came up with her treatment program "by trial and error over a period of years and kept adding to it" until it became what it is today. The treatment involves a bio-feedback, physio behavioral method of changing the patients's deep sleep pattern into the more typical pattern of a non-bedwetter. It is drug-free and non-invasive and employs development and strengthening exercises to reinforce the urinary system.

Some 25 million children and adults wet the bed, many of the adults because of defective urinary organs, weakened muscles, descending bladders and other physical problems that make voluntary control around the clock difficult.

Enuresis, however, is caused by an abnormal deep sleep pattern. It is inherited and can start at birth and continue on (primary wetting) or lay dormant until triggered by things like stress or anxiety (secondary wetting). Among youngsters, enuresis affects 10-15 percent of 5-year-olds. The number drops to about 5 percent for children ages 10-15 and 1-2 percent for 16 to 18-year-olds. And almost three times as many boys as girls wet the bed, according to Moore.

The average person gradually drifts through the four stages of sleep to the deepest level. If sufficient bladder pressure develops, the person is able to awaken. The enuretic person, however, drops swiftly to the deepest level of sleep and stays there for longer periods of time. As a result, when the brain is notified of sufficient bladder pressure, he cannot awaken and returns to deep sleep after the involuntary urination. For some, the wets can be a dribble; for others, they can be full-blown wet.

The deep sleep pattern is the same pattern found in sleepwalkers or people who have night terrors, Moore said. But while "all bedwetters are deep sleepers, not all deep sleepers are bedwetters."

The sleep pattern can have a detrimental effect. When the child plunges into a deep sleep, he doesn't get a good sleep, so he awakens not rested and sluggish, according to Moore. As he gets to the fifth-sixth grades, the lack of rest can affect him academically, an appearance of a disciplinary problem, not paying attention or episodes of daydreaming.

"I have a college student who is a bedwetter who said he couldn't focus, that he felt like he was drifting," Moore said. "He said, 'I know I'm bright but I can't do it; I have to work on the bedwetting first.' "

Moore's clients come from all over. She rattles off a mixture of not only local Michigan and Ohio patients, and patients in all 50 states, but, because of the internet, she has now developed a sophisticated technique to treat patients, using telephone and fax, from as far away as Australia, Switzerland and Kazakhstan, along with all the Canadian provinces.

The treatment involves both the parents and children. While parents record everything that happens and learn how to interrupt the child's sleep pattern, the child has to drink more fluids to develop the bladder which almost always increases in size. Once the bladder has enlarged, the treatment turns to strengthening muscle control.

"The exercises depend on what the child needs," Moore said. "We have them drink more rather than less to help develop the bladder. If you restrict their fluids because they wet the bed, it implies they're doing something wrong, that they're different."

The whole program can take five months or more, with a couple of months testing, including a gradual reduction in the exercises to try and force bedwetting. Then the patient is weaned off the program completely.

Keeping in mind that it's difficult to talk to strangers about bedwetting, Moore has staffed the center with counselors who are nurses, psychologists, social workers and the like who are sensitive to the need of the clients. There also is a staff psychologist, Dr. Lyle Danuloff, to deal with the psychological problems.

Parents, children, and adults see an improvement fairly quickly, usually within the first two to three weeks, Moore said. And by the end of the program, strong friendships have developed between the counselors and clients.

Flowers, candy, cookies, and personal photos are ways the staff is thanked for their work and Cleo, a cockateel, who claims the reception desk as its domain and who loves to talk on the telephone, gladly greets each and every person who walks in the door.

There are adults who turn to her for help. Moore has worked with a 65-year-old man who wet the bed his entire life and a 30 year-old woman and her daughter who were both enuretics. Bedwetting was keeping the mother from having a relationship with her boyfriend; she couldn't spend a night with him.

She also helped a newlywed and former bedwetter who came in for training to enlarge her bladder. While she wasn't wetting the bed, she was getting up four to five times a night because her bladder was underdeveloped.

But a majority of her clients are children ages 6-16 and it is their cards and letters that provide a fitting close to their own stories.

In his letter, Daniel included drawings of a caped crusader, Enuresis Man, and his rival, The Evil Wet Face. He was thankful for the help and the new freedom the treatment gave him. He also wrote: "I'm gonna miss you . . . you've been a great buddy through all this stuff. . . Don't go thinking I'm going to forget you. I'll never forget you, Barbara . . . never."