# NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE

# SCOPE

### 1 Guideline title

Nocturnal enuresis: the management of bedwetting and nocturnal enuresis in children and young people

#### 1.1 Short title

Nocturnal enuresis

## 2 Background

- a) The National Institute for Health and Clinical Excellence ('NICE' or 'the Institute') has commissioned the National Collaborating Centre for Primary Care to develop a clinical guideline on nocturnal enuresis in children and young people for use in the NHS in England and Wales. This follows referral of the topic by the Department of Health (see appendix). The guideline will provide recommendations for good practice that are based on the best available evidence of clinical and cost effectiveness.
- b) NICE clinical guidelines support the implementation of National Service Frameworks (NSFs) in those aspects of care where a Framework has been published. The statements in each NSF reflect the evidence that was used at the time the Framework was prepared. The clinical guidelines and technology appraisals published by NICE after an NSF has been issued have the effect of updating the Framework.
- c) NICE clinical guidelines support the role of healthcare professionals in providing care in partnership with patients, taking account of their individual needs and preferences, and ensuring that patients (and

their carers and families, if appropriate) can make informed decisions about their care and treatment.

# 3 Clinical need for the guideline

- Bedwetting is the involuntary discharge of urine at night by a a) person with no physical disease at an age when they could be expected to be dry (generally considered to be a developmental age of 5 or over). The prevalence of bedwetting decreases with age. The Avon Longitudinal Study found that infrequent bedwetting (defined as bedwetting less than 2 nights per week) has a prevalence of 21% at 54 months and 8% at 115 months of age. Nocturnal enuresis (defined as bedwetting more than 2 nights per week) has a prevalence of 8% at 54 months and 1.5% at 115 months of age. Bedwetting should be carefully evaluated because it may have a large impact on the child or young person and their family. There is evidence that treatment can be effective, and a variety of interventions, from simple behavioural techniques to complex multi-faceted management plans, can be used. It is important that treatment is adapted to the needs and circumstances of the child or young person and their family.
- b) The impact of this guideline on resources will centre primarily upon treatment type and setting, and the length of treatment.

# 4 The guideline

a) The guideline development process is described in detail in two publications that are available from the NICE website (see 'Further information'). 'The guideline development process: an overview for stakeholders, the public and the NHS' describes how organisations can become involved in the development of a guideline. 'The guidelines manual' provides advice on the technical aspects of guideline development.

- b) This scope defines what this guideline will (and will not) examine, and what the guideline developers will consider. The scope is based on a referral from the Department of Health (see appendix).
- c) The areas that will be addressed by the guideline are described in the following sections.

## 4.1 Population

### 4.1.1 Groups that will be covered

- a) Children and young people aged under 19 years who continue to have episodes of night-time bedwetting, with or without daytime urinary symptoms.
- b) Children and young people aged under 19 years with special needs who continue to have night-time bedwetting with or without daytime urinary symptoms.

### 4.1.2 Groups that will not be covered

- a) Adults aged 19 years or over with any form of incontinence.
- b) Children and young people who have daytime urinary incontinence only.

# 4.2 Healthcare setting

a) All healthcare settings in which children and young people with bedwetting or nocturnal enuresis are managed.

# 4.3 Clinical management

- a) Assessment of the child or young person, including:
  - history-taking and examination
  - · assessment tools such as diaries
  - laboratory tests
  - radiological examinations

- psychological assessment to investigate possible causes and the effects of bedwetting on the child or young person and their family.
- b) Support, advice, information and follow-up for children and young people, parents and carers.
- Lifestyle and behavioural interventions (for example, fluid restriction, lifting, wakening and reward systems, bladder training, dry bed training).
- d) Treatments based on enuresis alarms.
- e) Pharmacological interventions. Note that guideline recommendations will normally fall within licensed indications; exceptionally, and only if clearly supported by evidence, use outside a licensed indication may be recommended. The guideline will assume that prescribers will use a drug's summary of product characteristics to inform their decisions for individual patients.
- f) Other interventions, including:
  - educational interventions (for example, providing information)
  - counselling
  - psychotherapy
  - cognitive therapy.
- g) Interventions for prevention of relapse.
- h) Management advice for children and young people who do not respond to treatment.
- i) The Guideline Development Group will consider making recommendations on the principal complementary and alternative interventions or approaches to care relevant to bedwetting and nocturnal enuresis (for example, chiropractics, hypnotherapy, acupuncture and homeopathy).

j) The Guideline Development Group will take reasonable steps to identify ineffective interventions and approaches to care. If robust and credible recommendations for re-positioning the intervention for optimal use, or changing the approach to care to make more efficient use of resources, can be made, they will be clearly stated. If the resources released are substantial, consideration will be given to listing such recommendations in the 'Key priorities for implementation' section of the guideline.

#### 4.4 Status

#### 4.4.1 Scope

This is the final scope.

#### 4.4.2 Guideline

The development of the guideline recommendations will begin in October 2008.

# 5 Related NICE guidance

#### **Under development**

NICE is developing the following guidance (details available from www.nice.org.uk):

- When to suspect child maltreatment. NICE clinical guideline (publication expected May 2009).
- Constipation: the diagnosis and management of idiopathic childhood constipation in primary and secondary care. NICE clinical guideline (publication expected May 2010).

#### 6 Further information

The guideline development process is described in:

- 'The guideline development process: an overview for stakeholders, the public and the NHS'
- 'The guidelines manual'.

These are available from the NICE website (www.nice.org.uk/guidelinesmanual). Information on the progress of the guideline will also be available from the website.

# **Appendix: Referral from the Department of Health**

The Department of Health asked NICE:

'To develop a clinical guideline for the management of bedwetting in children.'