

Description of a novel adolescent enuresis clinic within a tertiary outpatient setting

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Background:

Adolescence is a complex developmental period characterized by rapid physical and psychological changes. Enuresis and urinary incontinence can affect quality of life and psychosocial wellbeing with far reaching consequences, often leading to poor self-image, low self-esteem, negative perceptions of school, more difficulty socially and with peer relations when compared with their peers. Current evidence suggests a strong association between enuresis and comorbid psychological disorders. We describe an enuresis service specifically designed for adolescents, which aims to reduce waiting times, improve service provision and health outcomes of young people.

Methods:

Limited transition pathways exist for adolescents with enuresis. We have developed a service that reflects a developmentally appropriate environment for adolescents, providing a holistic, multidisciplinary team approach, considering the presenting complaint of enuresis and the profound effect of the condition on the developing adolescent. Our approach to the management of enuresis of adolescents is unique, seeks to build self-management capacity and resilience, so that the young person achieves independence and management of their condition which are important for transition to adulthood.

Results:

13 patients aged 12 – 17 years, referred with Primary or secondary, mono or non mono symptomatic enuresis were seen in the Adolescent Bladder Clinic. Within the one-year of clinic operation 6 patients have become dry, 6 improved, and 1 remains unchanged. Of the treatment resistant sub-group (n=5) 3 are now dry (60%), and 2 have improved (40%). Of the new patient sub-group (n=8) 3 are now dry (37.5%), 4 have improved (50%), and 1 remains unchanged (12.5%).

Conclusions:

This study demonstrates that a novel adolescent enuresis clinic has the potential to improve health outcomes by providing developmentally informed and appropriate care to adolescents referred with enuresis. Preliminary evaluation shows that this approach provides improved outcomes compared to those experienced by a standard paediatric enuresis clinic particularly for those deemed as treatment resistant.

Disclosure of Interest Statement: