



THE SOLINGER METHOD

by Root Health L.L.C.

Pediatric Bedwetting Support

FUNCTIONAL WELLNESS SUPPORT PLAN

Pediatric Bedwetting Support

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What Is Pediatric Bedwetting

Pediatric bedwetting, also known as nocturnal enuresis, occurs when a child involuntarily urinates during sleep beyond the age when bladder control is typically established. Bedwetting is extremely common and almost always reflects **developmental physiology**, not misbehavior or laziness. Many children simply reach bladder and nervous system maturity at different rates.

Several interconnected factors influence nighttime bladder function:

Delayed Arousal Response

Some children sleep deeply and do not wake in response to bladder signals. Their brains register the need to void, but the “wake up” signal doesn’t fully mature until later childhood.

Bladder Capacity

A smaller functional bladder capacity or overactive bladder can cause nighttime overflow.

Hormonal Regulation

Children who make lower nighttime levels of vasopressin (ADH) produce more urine while sleeping, increasing the chance of a wet night.

Gut Bladder Axis

Constipation is one of the most common underlying contributors. A full rectum places pressure on the bladder, reducing capacity and confusing nerve signals.

Food Sensitivities

Dairy, citrus, chocolate, and dyes sometimes increase nighttime urgency or bladder irritation in sensitive children.

Stress and Emotional Load

Transitions, school pressure, social changes, fatigue, or family stress can increase sympathetic activation and disrupt nighttime signaling.

Genetics

Bedwetting often runs in families, and children with a family history typically outgrow it at similar ages.

Bedwetting is not a reflection of willpower, character, or parenting. It is a developmental and physiological process that improves with support, rhythm, and gentle nervous system regulation.

Signs and Patterns to Watch

- Bedwetting several nights per week
- Deep sleeping with difficulty waking
- Urinating right before bed but still wetting
- Constipation or irregular bowel movements
- Daytime urgency or occasional dribbling
- Increased wetting during transitions or stressful periods
- Snoring, restless sleep, or mouth breathing

Common Contributors

Constipation



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Presses against the bladder and disrupts nerve communication. This is often the *primary cause*.

Sleep Depth

Children who sleep very deeply may not wake in response to bladder messages.

Bladder Irritants

Caffeine, carbonated beverages, artificial dyes, chocolate, and acidic foods.

Evening Fluid Timing

Heavy fluid intake just before bed increases urine volume.

Nutrient Deficiencies

Magnesium, B vitamins, and omega 3s affect nervous system signaling and smooth muscle relaxation.

Stress or Emotional Overload

Children lack the vocabulary to express internal pressure and may somaticize stress during sleep.

When to Seek Medical Care

- Pain with urination
 - Frequent daytime accidents
 - Blood in urine
 - Snoring with breathing pauses
 - Recurrent urinary tract infections
 - Sudden onset after long dryness
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Functional Wellness Support

Lifestyle and Behavioral Strategies

Scheduled Bathroom Trips

Have the child void twice before bed, 15 minutes apart.



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Earlier Evening Hydration

Encourage drinking throughout the day, slow fluids after dinner.

Constipation Correction

Daily soft stools are essential.

Increase fiber, hydration, magnesium, and evaluate dietary triggers.

Sleep Hygiene

Consistent bedtime routines calm the nervous system and support arousal signaling.

Nightlight and Easy Bathroom Path

Reduces fear of getting up to void.

Emotional Check ins

Address school concerns, social stress, and transitions. Anxious children often retain tension in the pelvic floor.

Nutrition for Bladder and Nervous System

- Increase magnesium rich foods
- Add omega 3s for neural signaling
- Reduce bladder irritants (citrus, carbonation, dyes, chocolate)
- Warm, grounding foods help regulate nighttime nervous system activity

Herbal Support

Chamomile

Calms nervous system tension and soothes digestive discomfort.

Lemon Balm

Reduces nighttime anxiety and improves sleep quality.

Catnip

Traditionally used for restlessness, irritability, and abdominal tension.

Corn Silk

Supports urinary tract comfort and reduces nighttime irritation.

Marshmallow Root

Soothes bladder lining in sensitive children.



Pediatric Supplement Blends

Redd Remedies Children's Peace

Helpful when stress or nervous system overactivation contributes to nighttime accidents.

Kidney or Urinary Support Blends (depending on brand)

Gentle blends that soothe urinary irritation and support bladder comfort.

Pediatric Dosing Guidelines

Magnesium (glycinate or citrate)

- Ages 2 to 5: 50 to 100 mg
- Ages 6 to 12: 100 to 200 mg
- Ages 13 to 17: 200 to 300 mg

Omega 3s (EPA DHA)

- Ages 2 to 5: 300 to 500 mg
- Ages 6 to 12: 500 to 800 mg
- Ages 13 to 17: 800 to 1200 mg

Vitamin B6

- Ages 4 to 8: 2 to 3 mg
- Ages 9 to 13: 4 to 6 mg
- Ages 14 to 17: 6 to 8 mg

Herbal Glycerites

General guideline: **1 to 2 drops per 10 pounds**, up to three times daily.

Supplement Access

A complete supplement protocol for Pediatric Bedwetting Support is available in Fullscript under "Protocols," listed by the matching condition name. Parents can create a free account to access it. Inside the protocol, you will find a fully organized list of recommended supplements and clear dosing guidance, using only clinical, pharmaceutical grade products. Everything is laid out in one simple, easy to follow location.



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Parent Friendly Summary

Bedwetting in Children

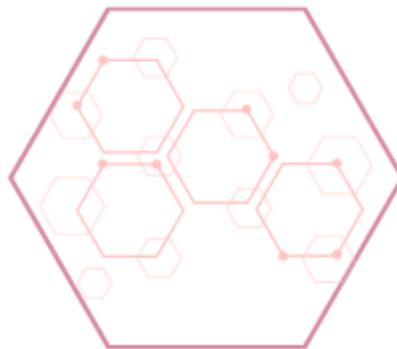
Bedwetting is common and almost always developmental. Children often sleep deeply, have small bladder capacity, or have constipation affecting nighttime signaling.

Simple Home Support

- Double void before bed
- Earlier hydration, lighter fluids after dinner
- Correct constipation fully
- Reduce bladder irritants (dyes, citrus, carbonation, chocolate)
- Gentle calming herbs like chamomile, lemon balm, and catnip
- Magnesium and omega 3s to support nervous system balance

When to Recheck

If bedwetting persists into adolescence, worsens suddenly, or occurs with daytime symptoms, further evaluation is helpful.



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