



Desmopressin for bedwetting

This leaflet is about the use of desmopressin for bedwetting which is sometimes called nocturnal enuresis).



This leaflet has been written for parents and carers about how to use this medicine in children. Our information sometimes differs from that provided by the manufacturers, because their information is usually aimed at adult patients. Please read this leaflet carefully. Keep it somewhere safe so that you can read it again.

If your child has a seizure (fit) or a bad headache, becomes drowsy (sleepy) or is sick (vomits), take them to hospital as they may have a build up of fluid.

Name of drug

Desmopressin

Brand names: Desmomelt®, Desmotabs®, DDAVP®

Why is it important for my child to take this medicine?

This medicine reduces the amount of urine (wee) that your child's kidneys produce for about 8 hours after it is taken, so they are less likely to wet the bed.

What is desmopressin available as?

- **Tablets:** 100 and 200 micrograms; these contain lactose
- **Sublingual tablets ('Melts')** that dissolve under the tongue): 60, 120 and 240 micrograms; these contain gelatin from fish skin

When should I give desmopressin?

- ⚠ Desmopressin is given **once each day**, just before bedtime.
 - Your child should not have anything to drink for 1 hour before they take desmopressin, and then for 8 hours after they have taken it.
 - Give the medicine at the same time each day so that this becomes part of your child's daily routine, which will help you to remember.

How much should I give?

Your doctor will work out the amount of desmopressin (the dose) that is right for *your* child. The dose will be shown on the medicine label.

- ⚠ **It is important that you follow your doctor's instructions about how much to give.**

How should I give desmopressin?



Tablets should be swallowed with a small amount of water, milk or juice. It is best that the tablets are swallowed whole, but if necessary they can be broken or crushed and will still work if chewed.



Sublingual tablets ('Melts'): place the tablet under your child's tongue, where it will melt. They should swallow the melted tablet. If the tablet breaks when you take it out of the pack, throw it away and start with another one.

When should the medicine start working?

Once your doctor has worked out the right dose the bedwetting should improve within a few days.

What if my child is sick (vomits)?

- ⚠ If your child is sick after having a dose of desmopressin, do not give them any more until the next dose is due.
- ⚠ If there is any chance that your child has been sick because they have a build up of fluid in the body (fluid retention), **contact your doctor straight away.** Symptoms of fluid retention are vomiting, swelling of the face, hands or feet, unusually bad or prolonged headache, drowsiness (feeling sleepy) and unexplained weight gain.

What if I forget to give it?

If you remember before bedtime, give the missed dose. You do not need to wake up a sleeping child to give a missed dose. Just give the next dose as usual.

- ⚠ Never give a double dose of desmopressin.

What if I give too much?

- ⚠ **It can be dangerous to give too much desmopressin.**

If you think you may have given your child too much, contact your doctor or local NHS services (see details at end of leaflet) or take your child to hospital.

Take the medicine container or packet with you, even if it is empty. This will be useful to the doctor. Have the packet with you if you telephone for advice.

Are there any possible side-effects?

We use medicines to make our children better, but sometimes they have other effects that we don't want (side-effects).

Side-effects that you must do something about

- ⚠ Desmopressin can sometimes cause fluid retention. Early symptoms are swelling of the face, hands or feet, bad or prolonged headaches, drowsiness (feeling sleepy), unexplained weight gain, feeling sick (nausea) and being sick (vomiting). If your child has any of these symptoms, contact your doctor straight away. Do not give desmopressin again until your doctor says you can.
- ☎ If your child has a seizure (this is very unlikely) take them to hospital straight away or call for an ambulance, as this could be a symptom of serious fluid retention. Tell the doctor that your child has been taking desmopressin.



If your child gets a blotchy red rash or swelling to the lips, face or tongue, they may be allergic to desmopressin. Contact your doctor straight away or call for an ambulance.

Other side-effects you need to know about

- Your child may have mild headaches and stomach pain. These should get better after a few days. If they don't, contact your doctor.
- Very rarely, a child may become more aggressive when taking desmopressin. If this happens, contact your doctor.

There may, sometimes, be other side-effects that are not listed above. If you notice anything unusual and are concerned, contact your doctor. You can report any suspected side-effects to a UK safety scheme at <http://www.mhra.gov.uk/yellowcard>.

Can other medicines be given at the same time as desmopressin?

- You can give your child medicines that contain paracetamol, unless your doctor has told you not to.



Check with your doctor or pharmacist **before** giving any other medicines to your child. This includes herbal or complementary medicines.

Is there anything else I need to know about desmopressin?



It is important that your child does not have excessive amounts to drink while the desmopressin is acting, as this may cause fluid retention. However, it is important that your child has enough to drink during the day. Your child should be encouraged to drink water during the day, and they should not be restricted until 1 hour before having desmopressin, and for 8 hours afterwards. They should not have drinks that contain caffeine (tea, coffee, hot chocolate, cola drinks) or fizzy drinks in the afternoon/evening.



If your child has diarrhoea or is sick (vomits), stop giving desmopressin until they are better.

- Your child should avoid swallowing large amounts of water while swimming, as this could lead to fluid retention.
- After about 3 months your doctor will ask you to stop giving desmopressin for a week, to see if your child still needs it.

General information about medicines

- Try to give the medicine at about the same time each day, to help you remember.
- If you are not sure a medicine is working, contact your doctor but continue to give the medicine as usual in the meantime. Do not give extra doses, as you may do harm.
- Only give this medicine to your child. Never give it to anyone else, even if their condition appears to be the same, as this could do harm.
- If you think someone else may have taken the medicine by accident, contact your doctor straight away.
- Make sure that you always have enough medicine. Order a new prescription at least 2 weeks before you will run out.
- Make sure that the medicine you have at home has not reached the 'best before' or 'use by' date on the packaging. Give old medicines to your pharmacist to dispose of.

Where should I keep this medicine?

- Keep the medicine in a cupboard, away from heat and direct sunlight. It does not need to be kept in the fridge.
- Make sure that children cannot see or reach the medicine.
- Keep the medicine in the container it came in.

Who to contact for more information

Your child's doctor, pharmacist or nurse will be able to give you more information about desmopressin and other ways to treat bedwetting.

You can also get useful information from:

England: NHS 111 Tel 111
www.nhs.uk

Scotland: NHS 24 Tel 111
www.nhs24.scot

Wales: NHS Direct
Tel 0845 46 47 (2p per minute) or 111 (free)
www.nhsdirect.wales.nhs.uk

Northern Ireland: NI Direct
www.nidirect.gov.uk

ERIC (Children's Bowel & Bladder Charity)
Helpline: 0808 169 9949
www.eric.org.uk

www.medicinesforchildren.org.uk



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The primary source for the information in this leaflet is the British National Formulary for Children. For details on any other sources used for this leaflet, please contact us through our website, www.medicinesforchildren.org.uk

We take great care to make sure that the information in this leaflet is correct and up-to-date. However, medicines can be used in different ways for different patients. It is important that you ask the advice of your doctor or pharmacist if you are not sure about something. This leaflet is about the use of these medicines in the UK, and may not apply to other countries. The Royal College of Paediatrics and Child Health (RCPCH), the Neonatal and Paediatric Pharmacists Group (NPPG), WellChild and the contributors and editors cannot be held responsible for the accuracy of information, omissions of information, or any actions that may be taken as a consequence of reading this leaflet.