

## The Pattern of Management of Nocturnal Enuresis in a Tertiary Hospital in Sudan

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### ABSTRACT

**Introduction:** Childhood enuresis is a stressful condition for both family members and patients. Different strategies can be offered to manage this condition with variable success rates. Data on the treatment of enuresis are scarce in Sudan. We compared the efficacy of treatment with albendazole, desmopressin, and a combination of these two medications.

**Methodology:** This is a prospective randomized hospital-based study conducted at Khartoum Children Hospital, Sudan. Children aged 5-15 years who presented with enuresis were recruited. Subjects were randomly assigned to one of 3 treatment groups (albendazole, desmopressin, or combination therapy) using a computer-generated table. The participants and clinician were aware of the treatment received by each individual.

**Results:** A total of 71 children were enrolled; 34 (47.9%) were males and 37 (52.1%) were females. All participants were offered counseling, motivation, and toilet training. Albendazole was administered to 17 patients, desmopressin to 17 patients, and combination therapy was offered to 20 patients. Five patients initially responded to counseling, motivation, and toilet training. Nine of 17 (52.9%) patients responded well to albendazole, 8/17 (47.1%) responded to desmopressin, and finally, 15/20 (75%) responded to combined therapy. Twelve patients declined to continue during non-pharmacological treatment.

**Conclusion:** Combined albendazole and desmopressin therapy seem to offer a better response in the treatment of children with enuresis.

**Keywords:** Albendazole, Counseling, Desmopressin, Enuresis, Enterobius vermicularis

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