Int J Pediatr Otorhinolaryngol. 2006 Aug;70(8):1351-6. Epub 2006 Feb 28.

Adenotonsilectomy improves enuresis in children with obstructive sleep apnea syndrome.

Weissbach A, **Leiberman A**, **Tarasiuk A**, **Goldbart A**, **Tal A**.

Department of Pediatrics B, Soroka University Medical Center, Faculty of Health Sciences, Ben-Gurion University of the Negev, Beer-Sheva, Israel.

OBJECTIVES: To evaluate the prevalence of nocturnal enuresis (NE) in children diagnosed with obstructive sleep apnea syndrome (OSAS) and the effect of tonsillectomy and adenoidectomy on enuresis. DESIGN, SETTING, AND PARTICIPANTS: All children 4-18 years of age who underwent polysomnography (PSG) between January 2003 and May 2004 were included (n=161). The evaluation was based on a retrospective review of a standard sleep questionnaire and a full overnight PSG, followed by an additional structured telephone questionnaire performed 9 months after adenotonsillectomy (T&A) (range 5-14). RESULTS: We identified 144 (89%) children with an apnea hypopnea index >1. Of these 144 children, 42 [29.2% (95% CI, 21.8-36.6)] were reported to have enuresis, 27 of these 42 underwent T&A. Among the 27 enuretic children who had undergone adenotonsillectomy, 74.1% had 3 or more wet nights per week before the procedure compared to 37%, 1 month after [n=27 (chi2=3.308, McNemar pv<0.0001)]. Of the 27 children who underwent adenotonsillectomy, any decrease in enuresis severity was reported by 70.4% (95% CI 53.2-87.62), while in 56% of these 27 (95% CI 41.96-70.06) it occurred 1 month postoperatively. In 11/27 children (41%), enuresis totally disappeared within 1 month, while in 3/27 (11%) enuresis disappeared throughout the remaining time of follow-up. CONCLUSIONS: Obstructive sleep apnea in children is frequently associated with nocturnal enuresis. Adenotonsillectomy has a favorable therapeutic effect on enuresis in children with obstructive sleep apnea presenting this symptom.

PMID: 16504310 [PubMed - indexed for MEDLINE]