

Appendix H

GRADE Clinical study characteristics

1.1 Fluid and diet restriction for the management of bedwetting

Table 1.1-1: Fluid restriction and avoiding punishment with placebo compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	Serious ³	Serious ⁴

¹ Results taken from Cochrane review and not study

² The study had unclear allocation concealment and blinding

³ The fluid restriction group also received random waking

⁴ The confidence interval crosses the MID

Table 1.1-2: Fluid restriction and avoiding punishment with placebo compared to fluid restriction and avoiding punishment with imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	Serious ³	no serious imprecision

¹ Results taken from Cochrane review and not study

² The study had unclear allocation concealment and blinding

³ The fluid restriction group also received random waking

Table 1.1-3: Diet restriction compared to Imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who became completely dry	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Number of children who had a greater than 50% improvement in the number of dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children completely dry at follow up	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children who had a greater than 50% improvement in the number of dry nights at follow up	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children who dropped out of the trial	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MIDs

1.2 *Lifting and waking in the management of bedwetting*

Table 1.2-1: Random waking compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean wet nights per week at 4 weeks	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.2-2: Random waking compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.2-3: Random waking compared to enuresis alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean wet nights per week at 4 weeks	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.2-4: Random waking compared to an enuresis alarm and imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1-2-5: Random waking and star chart compared to no treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.2-6: Waking and star chart compared to enuresis alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
mean number of wet nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1-2-7: Waking (part of a 3 step program) compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	serious ³
Number of children who relapsed after 12 months	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	serious ³

¹ The study had unclear allocation concealment and blinding

² Children in random waking group also received bladder training

³ The confidence interval crosses the MID(s)

Table 1.2-8: Waking (part of a 3 step program) compared to motivational therapy and 3 step program - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	serious ³

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who relapsed after 12 months	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	serious ³

¹ The study had unclear allocation concealment and blinding

² Children in random waking group also received bladder training

³ The confidence interval crosses the MID(s)

Table 1.2-9: Waking combined with fluid restriction and parents avoiding punishment of children and placebo compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	serious ³	serious ⁴

¹ Results taken from Cochrane review and not study

² The study had unclear allocation concealment and blinding

³ Children in the waking group also received fluid restriction

⁴ The confidence interval crosses the MID(s)

Table 1.2-10: Waking combined with fluid restriction and parents avoiding punishment of children and placebo compared to Waking combined with fluid restriction and parents avoiding punishment of children and imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	serious ³	no serious imprecision

¹ Results taken from Cochrane review and not study

² The study had unclear allocation concealment and blinding

³ Children in the waking group also received fluid restriction

Table 1.2-11: Waking with alarm clock set before child wets compared to waking with alarm clock set 2 to 3 hours after child goes to bed - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Dry for 14 consecutive nights in first month	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed after 3 months	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ¹
Number of children who relapsed after 6 months	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

1.3 *Bladder training and retention control training for the management of bedwetting*

Table 1.3-1: Retention control training and placebo compared to and desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at follow up	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who relapsed	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.3-2: Retention control training and placebo compared to retention control training and desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at follow up	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.3-3: Stop start training compared to an enuresis alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crossed the MID(s)

Table 1.3-4: Stop start training compared to dry bed training with an enuresis alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.3-5: Stop start training compared to star charts - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.3-6: Bladder training (part of a 3 step program) compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	serious ³
Number of children who relapsed after 12 months	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	serious ³

¹ The study had unclear allocation concealment and blinding

² Bladder training group also received random waking

³ The confidence interval crosses the MID(s)

Table 1.3-7: Bladder training (part of a 3 step program) compared to motivational therapy and 3 step program - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	serious ³
Number of children who relapsed after 12 months	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	serious ³

¹ The study had unclear allocation concealment and blinding

² Bladder training group also received random waking

³ The confidence interval crosses the MID(s)

Table 1.3-8: Retention control training compared to waiting list - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Results taken from Cochrane review and not study

² The study had unclear allocation concealment and blinding

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.3-9: Retention control training compared to desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

1.4 Star Charts in the management of bedwetting

Table 1.4-1: Star chart compared to enuresis alarms - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.4-2: Star chart with rewards and enuresis alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Number of relapses at 2.5 years	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,3}

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.4-3: Star chart compared to dry bed training - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.4-4: Star chart compared to stop start training - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.4-5: Star chart and placebo compared to star chart and imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per month at the end of treatment	1	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Results taken from Cochrane review and not study

² The study had unclear allocation concealment

³ The confidence interval crosses the MID(s)

Table 1.4-6: Star chart and waking compared to no treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week in the last 3 weeks of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MIDs

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.4-7: Star chart and waking compared to enuresis alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per weeks in the last 3 weeks of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.4-8: Star chart compared to no treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who were dry for 14 consecutive nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,3}
Mean number of wet nights in 3 weeks at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.4-9: Star charts compared to enuresis alarms - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights in 3 weeks at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who failed or relapsed after 6 months	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.4-10: Star chart compared to cognitive behavioural therapy - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who were dry for 14 consecutive nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights in 3 weeks at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who failed or relapsed after 6 months	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.4-11: Star chart compared to play therapy - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children who failed or relapsed	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children who achieved 14 consecutive dry nights (excludes children who were lifted)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Results taken from Cochrane review and not study

² The study had unclear allocation concealment and blinding

³ The confidence interval crosses the MID

1.5 Dry bed training for the management of bedwetting

Table 1.5-1: Dry bed training without an alarm compared to no treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	very serious ^{1,2,3}	no serious inconsistency	no serious indirectness	serious ⁴
Mean number of wet nights per week at the end treatment (no sd)	2	randomised trial	very serious ^{1,2,3,5}	no serious inconsistency	no serious indirectness	serious ⁶
Number of children who relapsed	1	randomised trial	very serious ^{1,7}	no serious inconsistency	no serious indirectness	serious ⁴

¹ Bollard 1981 did not report method of blinding

² Unclear allocation concealment in Bollard 1981 and Bollard 1982

³ Results from Bollard 1982 were obtained from the Cochrane review - results presented as a graph in paper

⁴ The confidence interval crosses the MID(s)

⁵ Results (Bollard 1981) from Cochrane review - not reported in paper

⁶ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

⁷ Unclear allocation concealment in Bollard 1981

Table 1.5-2: Dry bed training without an alarm compared to dry bed training with an alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	very serious ^{1,2,3}	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at the end of treatment (no sd)	2	randomised trial	very serious ^{1,2,3,4}	no serious inconsistency	no serious indirectness	Serious ⁵
Number of children who relapsed or failed	2	randomised trial	very serious ^{1,2,3}	no serious inconsistency	no serious indirectness	Serious ⁶

¹ Bollard 1981 did not report method of blinding

² Unclear allocation concealment in Bollard 1981 and Bollard 1982

³ Results from Bollard 1982 were obtained from the Cochrane review - results presented as a graph in paper

⁴ Results (Bollard 1981) from Cochrane review - not reported in paper

⁵ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

⁶ The confidence interval crosses the MID(s)

Table 1.5-3: Dry bed training without an alarm compared to dry bed training with an alarm with therapist at hospital- Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	Serious ³
Number of children who relapsed	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ⁴

¹ Bollard 1981 had an unclear blinding method and unclear allocation concealment

² Result from Cochrane review - paper did not present this results

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

⁴ The confidence interval crosses the MID(s)

Table 1.5-4: Dry bed training without an alarm compared to dry bed training with an alarm with parent as therapist - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision ²
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,3}	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who relapsed	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ⁴

¹ Bollard 1981 had an unclear blinding method and unclear allocation concealment

² No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

³ Result from Cochrane review - paper did not present this results

⁴ The confidence interval crosses the MID(s)

Table 1.5-5: Dry bed training without an alarm compared to an alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at the end treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children who relapsed	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ⁴

¹ Bollard 1981 had an unclear blinding method and unclear allocation concealment

² Result from Cochrane review - paper did not present this results

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

⁴ The confidence interval crosses the MID(s)

Table 1.5-6: Dry bed training with an alarm compared to no treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	very serious ^{1,2,3}	no serious inconsistency	no serious indirectness	no serious imprecision

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment (no sd)	2	randomised trial	very serious ^{1,2,3,4}	no serious inconsistency	no serious indirectness	serious ⁵
Number of children who relapsed	1	randomised trial	very serious ^{1,6}	no serious inconsistency	no serious indirectness	serious ⁷

¹ Bollard 1981 did not report method of blinding

² Unclear allocation concealment in Bollard 1981 and Bollard 1982

³ Results from Bollard 1982 were from the Cochrane review - results presented as a graph in paper

⁴ Result (Bollard 1981) from Cochrane review - not reported in paper

⁵ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

⁶ Unclear allocation concealment in Bollard 1981

⁷ The confidence Interval crosses the MID

Table 1.5-7: Dry bed training with an alarm with therapist at hospital compared to no treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children who relapsed	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ⁴

¹ Bollard 1981 had an unclear blinding method and unclear allocation concealment

² Results from Cochrane review - paper did not present this result

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

⁴ The confidence interval crosses the MID

Table 1.5-8: Dry bed training with an alarm with parent as therapist compared to no treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children who relapsed	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision

¹ Bollard 1981 had an unclear blinding method and unclear allocation concealment

² Results from Cochrane review - paper did not present this result

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.5-9: Dry bed training with an alarm with therapist at home compared to dry bed training with an alarm with therapist at hospital - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children who relapsed	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ⁴

¹ Bollard 1981 had an unclear blinding method and unclear allocation concealment

² Results from Cochrane review - paper did not present this result

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

possible and the mean difference and CI were not estimable

⁴ The confidence interval crosses the MID(s)

Table 1.5-10: Dry bed training with an alarm with therapist at home compared to dry bed training with an alarm with parents as therapist - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children who relapsed	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ⁴

¹ Bollard 1981 had an unclear blinding method and unclear allocation concealment

² Results from Cochrane review - paper did not present this result

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

⁴ The confidence interval crosses the MID(s)

Table 1.5-11: Dry bed training with an alarm with therapist at hospital compared to dry bed training with an alarm with parents as therapist - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who relapsed	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ⁴

¹ Bollard 1981 had an unclear blinding method and unclear allocation concealment

² Results from Cochrane review - paper did not present this result

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

⁴ The confidence interval crosses the MID(s)

Table 1.5-12: Dry bed training with an alarm compared to an alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights at the end of treatment	1	randomised trial	very serious ²	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,4}	no serious inconsistency	no serious indirectness	serious ⁵
Number of children who dropped out	1	randomised trial	very serious ²	no serious inconsistency	no serious indirectness	serious ³
Number of children who relapsed	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ³

¹ Bollard 1981 had an unclear blinding method and unclear allocation concealment

² Bennett 1995 had a large drop out and unclear allocation concealment

³ The confidence interval crosses the MID(s)

⁴ Results from Cochrane review - paper did not present this result

⁵ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.5-13: Dry bed training with an alarm with parents as therapist compared to an alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,3}	no serious inconsistency	no serious indirectness	serious ⁴
Number of children who relapsed	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Bollard 1981 had an unclear blinding method and unclear allocation concealment

² The confidence interval crosses the MID(s)

³ Results from Cochrane review - paper did not present this result

⁴ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.5-14: Dry bed training with an alarm compared to stop start training - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Bennett 1995 had a large drop out and unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.5-15: Dry bed training with an alarm compared to star charts - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,3}
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Bennett 1995 had a large drop out and unclear allocation concealment

² The confidence interval crosses the MID(s)

³ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.5-16: Dry bed training without an alarm at hospital with parent and child compared to no treatment for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Keating 1983 had no blinding and unclear allocation concealment

² Results obtained from Cochrane review - results were presented as graphs in the paper

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.5-17: Dry bed training without an alarm at home with parent and child compared to no treatment for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Keating 1983 had no blinding and unclear allocation concealment

² Results obtained from Cochrane review - results were presented as graphs in the paper

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.5-18: Dry bed training without an alarm at hospital with parent compared to no treatment for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Keating 1983 had no blinding and unclear allocation concealment

² Results obtained from Cochrane review - results were presented as graphs in the paper

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.5-19: Dry bed training without an alarm at hospital with parent and child compared to dry bed training without an alarm at home with parent and child for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ⁴
Number of children who relapsed	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Keating 1983 had no blinding and unclear allocation concealment

² Results obtained from Cochrane review - results were presented as graphs in the paper

³ The confidence interval crosses the MID(s)

⁴ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.5-20: Dry bed training without an alarm at hospital with parent and child compared to dry bed training without an alarm at hospital with parent for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ⁴
Number of children who relapsed	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Keating 1983 had no blinding and unclear allocation concealment

² Results obtained from Cochrane review - results were presented as graphs in the paper

³ The confidence interval crosses the MID(s)

⁴ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.5-21: Dry bed training without an alarm at home with parent and child compared to dry bed training without an alarm at hospital with parent and child for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ⁴

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who relapsed	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Keating 1983 had no blinding and unclear allocation concealment

² Results obtained from Cochrane review - results were presented as graphs in the paper

³ The confidence interval crosses the MID(s)

⁴ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.5-22: Dry bed training with an alarm compared to no treatment for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of dry nights per week at the end of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision

¹ Nawaz 2002 had unclear allocation concealment

² The confidence interval crosses the MID

Table 1.5-23: Dry bed training with an alarm compared to an alarm for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of dry nights per week at the end of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Nawaz 2002 had unclear allocation concealment

² The confidence interval crosses the MID

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Table 1.5-24: Enuresis alarm compared to no treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	6	randomised trial	Very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at end of treatment (no SDs)	1	randomised trial	Very serious ²	no serious inconsistency	no serious indirectness	serious ³
Number of drop outs at end of trial	2	randomised trial	Very serious ¹	no serious inconsistency	no serious indirectness	serious ⁴

¹ The studies had unclear allocation concealment and blinding

² The study had unclear allocation concealment and blinding

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible

⁴ The confidence interval crosses the MID(s)

Table 1.5-25: Unsupervised enuresis alarm compared to supervised enuresis alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at end of treatment (no SDs)	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.5-26: Enuresis alarm compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Over 80% improvement in number of wet nights at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at end of treatment (no SDs)	2	randomised trial	very serious ³	no serious inconsistency	no serious indirectness	serious ⁴
Mean number of wet nights per week at follow-up (no SDs)	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ⁴

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ The studies had unclear allocation concealment and blinding

⁴ No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.5-27: Enuresis alarm compared to amitriptyline - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week after treatment (no SDs)	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.5-28: Enuresis alarm compared to enuresis alarm with desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 4 consecutive dry weeks	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at end of treatment (no SDs)	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ³
Number of children relapsed at 6 months	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of drop outs at end of trial	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,4}

¹ The study had unclear blinding

² The confidence interval crosses the MID(s)

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible

⁴ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.5-29: Enuresis alarm and placebo compared to enuresis alarm and desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision

¹ The study had unclear allocation concealment

Table 1-5-30: Enuresis alarm compared to enuresis alarm and imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at follow-up	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.5-31: Enuresis alarm compared to dry bed training - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.5-32: Enuresis alarm compared to enuresis alarm and retention control training - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	4	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean change of number of wet nights during treatment (no SDs)	2	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ⁴
Mean change of number of wet nights during follow up (no SDs)	2	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ⁴
Number of children who relapsed at 6 months	2	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children who relapsed at 12 months	2	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of drop outs by end of trial	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ The studies had unclear allocation concealment and blinding

² The results from Fielding (1980) were from the Cochrane review

³ The confidence interval crosses the MID(s)

⁴ No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.5-33: Enuresis alarm compared to enuresis alarm and star charts for correct behaviour - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 dry consecutive nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of relapses at 2.5 years	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.5-34: Enuresis alarm compared to enuresis alarm and star charts for dry night - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 dry consecutive nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of relapses at 2.5 years	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.5-35: Enuresis alarm and star chart for correct behaviour compared to enuresis alarm and star charts for dry night - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 dry consecutive nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision ²
Number of relapses at 2.5 years	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.5-36: Enuresis alarm compared to no treatment for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	4	randomised trial	very serious ^{1,2,3,4}	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at end of treatment	2	randomised trial	very serious ^{1,3}	no serious inconsistency	no serious indirectness	serious ⁵
Number of children who relapsed at 6 months	2	randomised trial	very serious ^{2,4}	no serious inconsistency	no serious indirectness	serious ⁵
Number of drop outs at end of trial	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ⁵

¹ Lynch (1984) had unclear allocation concealment and blinding

² Wagner (1982) had unclear allocation concealment and blinding

³ Nawaz (2002) had unclear allocation concealment

⁴ Wagner (1985) had unclear allocation concealment and only the patients were blinded

⁵ The confidence interval crosses the MID(s)

Table 1.5-37: Pad and bell enuresis alarm compared to body worn enuresis alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹
Mean number of wet nights per week at end of treatment (no SDs)	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who relapsed at 6 months	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹
Number of drop outs at end of trial	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹

¹ The confidence interval crosses the MID(s)

² No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.5-38: Enuresis alarm compared to desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who achieved 5 wet nights in 28 nights	1	randomised trial	very serious ³	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at end of treatment	2	randomised trial	very serious ^{1,3}	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed at 3 months	2	randomised trial	very serious ^{1,3}	no serious inconsistency	no serious indirectness	no serious imprecision
Number of children who dropped out by the end of the trial	2	randomised trial	very serious ^{1,3}	no serious inconsistency	no serious indirectness	serious ²
Adverse event - False alarm	1	randomised trial	very serious ³	no serious inconsistency	no serious indirectness	no serious imprecision

- ¹ Ng (2005) had unclear allocation concealment
- ² The confidence interval crosses the MID(s)
- ³ Wille (1986) had unclear allocation concealment and blinding

Table 1.5-39: Enuresis alarm compared to imipramine for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at end of treatment (no SDs)	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ³
Number of children who relapsed at 6 months	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

- ¹ The study had unclear allocation concealment and blinding
- ² The confidence interval crosses the MID(s)
- ³ No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.5-40: Enuresis alarm compared to enuresis alarm with desmopressin for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at the end of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who relapsed at 3 months	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out by the end of the trial	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.5-41: Enuresis alarm compared to dry bed training for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed at 6 months	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.5-42: Enuresis alarm compared to enuresis alarm and retention control training for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	Serious ³
Number of children who relapsed at 6 months	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	Serious ³
Number of children who relapsed at 12 months	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	Serious ³

Table 1.5-43: Enuresis alarm compared to desmopressin for children with monosymptomatic nocturnal enuresis - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive or a 90% improvement in the number of dry nights	2	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
50%-90% reduction in number of wet nights at end of treatment	1	randomised trial	very serious ²	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per month at end of treatment	1	randomised trial	very serious ²	no serious inconsistency	no serious indirectness	serious ³
Number of children relapsed at 6 months	1	randomised trial	very serious ²	no serious inconsistency	no serious indirectness	serious ³

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who dropped out of the trial	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ³

¹ Longstaffe (2000) had unclear blinding

² Tuygun (2007) had unclear allocation concealment and blinding

³ The confidence interval crosses the MID(s)

Table 1.5-44: Enuresis alarm compared to enuresis alarm with desmopressin for children with monosymptomatic nocturnal enuresis - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved at least 75% reduction in the number of wet nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ²	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out by the end of the trial	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.5-45: Enuresis alarm compared to no treatment for children with severe wetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per 3 weeks at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Number of drop outs at end of trial	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment and blinding

² Wide confidence interval - strong uncertainty of where the effect lies

³ The confidence interval crosses the MID(s)

Table 1.5-46: Enuresis alarm compared to enuresis alarm and desmopressin for children with severe wetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 4 consecutive dry weeks	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at end of treatment (no SDs)	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ³
Number of children relapsed at 6 months	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear blinding

² The confidence interval crosses the MID(s)

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.5-47: Enuresis alarm compared to enuresis alarm and desmopressin for children with family and behavioural problems - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 4 consecutive dry weeks	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at end of treatment (no SDs)	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ³
Number of Children relapsed at 6 months	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear blinding

² The confidence interval crosses the MID(s)

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible

1.6 *Desmopressin and the management of bedwetting*

Table 1.6-1: 20 micro grams intranasal desmopressin compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights in the last 2 weeks of treatment (no SDs)	2	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Uygur (1997) had unclear allocation concealment and blinding

² Muller (2001) had unclear allocation concealment

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.6-2: Intranasal desmopressin compared to amitriptyline - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹
Mean number of wet nights per week at end of treatment	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹
Mean number of wet nights per week at follow up	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹
Number of children who dropped out by end of trial	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	very serious ^{1,2}

¹ The confidence interval crosses the MID(s)

² Wide confidence interval - strong uncertainty of where the effect lies

Table 1.6-3: Intranasal desmopressin compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week after treatment (no sd)	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.6-4 Tablet desmopressin compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who dropped out by end of trial	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.6-5: Tablet desmopressin compared to imipramine for children with night and day wetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who had 0-1 wet nights per month	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.6-6: Intranasal desmopressin compared to intranasal desmopressin and amitriptyline - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹
Mean number of wet nights per week at end of treatment	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at end of follow up	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹
Number of children who dropped out by end of trial	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹

1 The confidence interval crosses the MID(s)

Table 1.6-7: Tablet desmopressin compared to tablet desmopressin and oxybutynin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who dropped out by end of trial	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.6-8: Tablet desmopressin compared to tablet desmopressin and oxybutynin for children with night and day wetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who had 0-1 wet nights per month	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.6-9: 0.2mg tablet desmopressin compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	3	randomised trial	very serious ^{1,2,3,4,5}	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per 2 weeks at end of treatment	1	randomised trial	serious ^{3,5}	no serious inconsistency	no serious indirectness	serious ⁶

¹ Ferrara (2008) had unclear allocation concealment and blinding

² Schulman (2001) had unclear allocation concealment

³ Skoog (1997) had unclear allocation concealment

⁴ Results from Schulman (2001) from Cochrane review

⁵ Results from Skoog (1997) from Cochrane review

⁶ The confidence interval crosses the MID(s)

Table 1.6-10: 0.4 mg tablet desmopressin compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	serious ^{1,2,3,4}	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per 2 weeks at end of treatment	1	randomised trial	serious ^{2,4}	no serious inconsistency	no serious indirectness	no serious imprecision

¹ Schulman (2001) had unclear allocation concealment

² Skoog (1997) had unclear allocation concealment

³ Results from Schulman (2001) from Cochrane review

⁴ Results from Skoog (1997) from Cochrane review

Table 1.6-11: 0.6 mg tablet desmopressin compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	serious ^{1,2,3,4}	no serious inconsistency	no serious indirectness	serious ⁵

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per 2 weeks at end of treatment	1	randomised trial	serious ^{2,4}	no serious inconsistency	no serious indirectness	no serious imprecision

¹ Schulman (2001) had unclear allocation concealment

² Skoog (1997) had unclear allocation concealment

³ Results from Schulman (2001) from Cochrane review

⁴ Results from Skoog (1997) from Cochrane review

⁵ The confidence interval crosses the MID(s)

Table 1.6-12: 0.2 mg tablet desmopressin compared to 0.4 mg tablet desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights in last 2 weeks of treatment	2	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ The studies had unclear allocation concealment

² Results from Schulman (2001) and Skoog (1997) from Cochrane review

³ The confidence interval crosses the MID(s)

Table 1.6-13: 0.2 mg tablet desmopressin compared to 0.6 mg tablet desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights in last 2 weeks of treatment	2	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ The studies had unclear allocation concealment

² Results from Schulman (2001) and Skoog (1997) from Cochrane review

³ The confidence interval crosses the MID(s)

Table 1.6-14: 0.4 mg tablet desmopressin compared to 0.6 mg tablet desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights in last 2 weeks of treatment	2	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ The studies had unclear allocation concealment

² Results from Schulman (2001) and Skoog (1997) from Cochrane review

³ The confidence interval crosses the MID(s)

Table 1.6-15: Tablet desmopressin compared to melt desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.6-16: Intranasal desmopressin compared to enuresis alarm for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 5 wet nights in 28 nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out by end of trial	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.6-17: Tablet desmopressin compared to enuresis alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at end of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed at 3 months	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,3}
Number of children who dropped out at end of trial	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

³ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.6-18: All desmopressin compared to enuresis alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at the end of treatment	2	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at the end of follow up	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ³
Number of children who relapsed at 3 months	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ³
Number of children who dropped out	2	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Ng (2005) had unclear allocation concealment

² Wille (1986) had unclear allocation concealment and blinding

³ The confidence interval crosses the MID(s)

Table 1.6-19: Tablet desmopressin compared to imipramine for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who had 0-1 wet nights per month	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.6-20: Tablet desmopressin compared to tablet desmopressin and enuresis alarm for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at end of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed at 3 months	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out by end of trial	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.6-21 Tablet desmopressin compared to tablet desmopressin and oxybutynin for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who had 0-1 wet nights per month	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.6-22: 20 micro grams intranasal desmopressin compared to placebo for children with monosymptomatic nocturnal enuresis - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights in last 2 weeks of treatment	1	randomised trial	very serious ²	no serious inconsistency	no serious indirectness	serious ³
Number of children who dropped out by end of trial	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ³

¹ Longstaffe (2000) had unclear blinding

² Rushton (1995) had unclear allocation concealment and blinding

³ The confidence interval crosses the MID(s)

Table 1.6-23: 40 micro grams intranasal desmopressin compared to placebo for children with monosymptomatic nocturnal enuresis - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.6-24: 0.4 mg tablet desmopressin compared to placebo for children with monosymptomatic nocturnal enuresis - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per 2 weeks at end of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Yap (1998) had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.6-25: Intranasal desmopressin compared to enuresis alarm for children with monosymptomatic nocturnal enuresis - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out by end of trial	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear blinding

² The confidence interval crosses the MID(s)

Table 1.6-26: Desmopressin compared to enuresis alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
50-90% reduction in the number of wet nights at end of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per month at end of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed at 6 months	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.6-27: All desmopressin compared to enuresis alarm for children with monosymptomatic nocturnal enuresis - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	Randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
50-90% reduction in the number of wet nights at end of treatment	1	Randomised trial	serious ²	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per month at end of treatment	1	Randomised trial	serious ²	no serious inconsistency	no serious indirectness	serious ³

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who relapsed at 6 months	1	Randomised trial	serious ²	no serious inconsistency	no serious indirectness	serious ³
Number of children who dropped out	1	Randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ³

¹ Longstaffe (2000) had unclear blinding

² Tuygun (2007) had unclear allocation concealment

³ The confidence interval crosses the MID(s)

Table 1.6-28: 10 micro grams intranasal desmopressin compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per 2 weeks at end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision

¹ The study had unclear allocation concealment and blinding

Table 1.6-29: 40 micro grams intranasal desmopressin compared to placebo for young children - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,3}
Mean number of wet nights in the last 2 weeks of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision

- ¹ The study had unclear allocation concealment and blinding
- ² The confidence interval crosses the MID(s)
- ³ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.6-30: 10 micro grams intranasal desmopressin compared to 40 micro grams intranasal desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

- ¹ The study had unclear allocation concealment and blinding
- ² The confidence interval crosses the MID(s)

Table 1.6-31: Side effects of tablet desmopressin compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with vomiting causing withdrawal	1	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children with rhinitis, pharyngitis, infection, headache or fever	1	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

- ¹ The study had unclear allocation concealment
- ² The results were taken from the Cochrane review and not the study
- ³ The confidence interval crosses the MID(s)

Table 1.6.32: Side effects of tablet desmopressin compared to melt desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with headaches	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,3}

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with diarrhoea	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,3}
Number of children with viral gastroenteritis	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,3}

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ Wide confidence interval - strong uncertainty of where the effect lies

1.7 Tricyclic medication and the management of bedwetting

Table 1.7-1: Imipramine compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	6	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	no serious imprecision
Number of children who had >80% improvement at the end of treatment	1	randomised trial	very serious ³	no serious inconsistency	no serious indirectness	serious ⁴
Number of children who showed >50% improvement in the number of dry nights	2	randomised trial	very serious ⁵	no serious inconsistency	no serious indirectness	serious ⁵
Mean number of wet nights per week at the end of treatment	1	randomised trial	serious ^{6,7}	no serious inconsistency	no serious indirectness	serious ⁴

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment (no sd)	6	randomised trial	very serious ^{5,8}	no serious inconsistency	no serious indirectness	serious ⁹
Mean number of wet nights per 2 weeks during treatment	1	randomised trial	serious ^{6,10}	no serious inconsistency	no serious indirectness	serious ⁴
Mean number of wet nights during 26 nights of treatment	1	randomised trial	very serious ³	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at follow up	1	randomised trial	serious ^{6,7}	no serious inconsistency	no serious indirectness	serious ⁴
Mean number of wet nights per week at follow up (no sd)	1	randomised trial	very serious ³	no serious inconsistency	no serious indirectness	serious ⁹
Number of children who dropped out	1	randomised trial	very serious ^{3,11}	no serious inconsistency	no serious indirectness	very serious ^{4,12}

¹ All studies had unclear allocation concealment, 5 studies had unclear blinding

² Results from Agarwala (1968) and Poussaint (1965) were taken from Cochrane review

³ Study had unclear allocation concealment and blinding

⁴ The confidence interval crosses the MID(s)

⁵ Studies had unclear allocation concealment and blinding

⁶ Study had unclear allocation concealment

⁷ Results from Attenburrow (1984) from taken from the Cochrane review

⁸ Results from Drew (1966), Fournier (1987) and Harrison (1970) taken from the Cochrane review

⁹ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

¹⁰ Results from Agarwala (1968) taken from the Cochrane review

¹¹ Results from Harrison (1970) taken from the Cochrane review

¹² Wide confidence interval - strong uncertainty of where the effect lies

Table 1.7-2: Low dose imipramine compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights during 26 nights of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.7-3: Low dose imipramine compared to high dose imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights during 26 nights of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.7-4: Imipramine compared to desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²

¹ Study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.7-5: Imipramine compared to desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who had 0-1 wet nights per month	1	randomised trial	very serious ^{1,3}	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,3}	no serious inconsistency	no serious indirectness	serious ⁴
Mean number of wet nights per week after treatment with imipramine and desmopressin (separate treatments) (no sd)	1	randomised trial	very serious ^{1,3}	no serious inconsistency	no serious indirectness	serious ⁴

¹ Study had unclear allocation concealment

² The confidence interval crosses the MID(s)

³ Results taken from the Cochrane review

⁴ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.7-6: Imipramine compared to alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who had >80% improvement in the number of dry nights at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	very serious ^{1,3}	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment (no sd)	2	randomised trial	very serious ^{3,4}	no serious inconsistency	no serious indirectness	serious ⁵
Mean number of wet nights per week at the end of follow up (no sd)	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ⁵

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ Results in Fournier (1982) were taken from the Cochrane review

⁴ The studies had unclear allocation concealment and blinding

⁵ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.7-7: Imipramine compared to imipramine and alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of drop outs at end of trial	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	no serious imprecision

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at follow-up (no SDs)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	Serious ³

¹ Study had unclear allocation concealment

² Results were taken from the Cochrane review

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.7-8: Imipramine compared to desmopressin and oxybutynin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²

¹ Study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.7-9: Imipramine compared to desmopressin and oxybutynin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who had 0-1 wet nights per month	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²

¹ Study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.7-10: Amitriptyline compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment (no sd)	2	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	Serious ³

¹ Study had unclear allocation concealment

² Results taken from the Cochrane review

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.7-11: Amitriptyline compared to desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	Serious ¹
Number of children who dropped out of the trial	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	Serious ¹
Mean number of wet nights per week at the end of treatment	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	Serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of follow up	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	Serious ²

¹ The confidence interval crosses the MID(s)

² No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.7-12: Amitriptyline compared to alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Median number of days to arrest	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment and blinding

² No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.7-13: Amitriptyline compared to amitriptyline and desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹
Number of children who dropped out of the trial	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ¹
Mean number of wet nights per week at the end of treatment	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of follow up	1	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ²

¹ The confidence interval crosses the MID(s)

² No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.7-14: Nortriptyline compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment (no sds)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment and blinding

² Results taken from the Cochrane review

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.7-15: Imipramine compared to placebo for children with bedwetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children who had >90% improvement in the number of dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children who had 50 to 90% improvement in the number of dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children who relapsed at 6 months	2	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.7-16: Imipramine compared to desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who had 0-1 wet nights per month	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.7-17: Imipramine compared to oxybutynin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children who had 50-90% improvement in the number of dry nights	1	randomised trial	very serious ³	no serious inconsistency	no serious indirectness	Serious ²
Mean number of wet nights per week during treatment	1	randomised trial	very serious ³	no serious inconsistency	no serious indirectness	Serious ³
Number of children who relapsed at 6 months	1	randomised trial	very serious ³	no serious inconsistency	no serious indirectness	Serious ²

¹ Studies had unclear allocation concealment

² The confidence interval crosses the MID(s)

³ Study had unclear allocation concealment and blinding

Table 1.7-18: Imipramine compared to alarm - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed at 6 months	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at end of treatment (no SDs)	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ³

¹ The study had clear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible and the mean difference and CI were not estimable

Table 1.7-19: Imipramine compared to imipramine and oxybutynin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children who had 50-90% improvement in the number of dry nights	1	randomised trial	very serious ³	no serious inconsistency	serious ²	no serious imprecision

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week during treatment	1	randomised trial	very serious ³	no serious inconsistency	no serious indirectness	no serious imprecision
Number of children who relapsed at 6 months	1	randomised trial	very serious ³	no serious inconsistency	no serious indirectness	Serious ²

¹ Studies had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ Study had unclear allocation concealment and blinding

Table 1.7-20 : Imipramine compared to desmopressin and oxybutynin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who had 0-1 wet nights per month	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.7-21: Imipramine compared to placebo for children with severe wetting - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved >90% improvement in the number of dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,3}

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.7-22: Imipramine and placebo compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children who achieved greater than 50% improvement in the number of dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²

¹ Study had unclear allocation concealment and blinding

² the confidence interval crosses the MID(s)

Table 1.7-23: Imipramine and placebo compared to nortriptyline and placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children who achieved greater than 50% improvement in the number of dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.7-24: Nortriptyline and placebo compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children who achieved greater than 50% improvement in the number of dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.7-25: Imipramine compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with anxiety	1	randomised trial	very serious ¹	serious	no serious indirectness	serious ²
Number of children with lethargy	1	randomised trial	serious ^{3,4}	no serious inconsistency	no serious indirectness	very serious ^{2,5}
Number of children with sleep disturbances	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children with dizziness	1	randomised trial	serious ^{3,4}	no serious inconsistency	no serious indirectness	serious ²
Number of children with giddiness	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children with dizziness and dry mouth	1	randomised trial	serious ^{3,4}	no serious inconsistency	no serious indirectness	serious ²
Number of children with gastrointestinal	1	randomised trial	very serious ^{1,4}	no serious inconsistency	no serious indirectness	very serious ^{2,5}
Number of children with upset stomach	1	randomised trial	serious ³	no serious inconsistency	no serious indirectness	very serious ^{2,5}
Number of children with abdominal pain	2	randomised trial	no serious limitations	no serious inconsistency	no serious indirectness	serious ²
Number of children with abdominal pain and epistaxis	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with vomiting and drowsiness leading to withdrawal	1	randomised trial	serious ^{3,4}	no serious inconsistency	no serious indirectness	serious ²
Number of children with vomiting, sweating and sickness	1	randomised trial	serious ^{3,4}	no serious inconsistency	no serious indirectness	serious ²
Number of children with anorexia	1	randomised trial	serious ^{3,4}	no serious inconsistency	no serious indirectness	serious ²
Number of children with weight loss	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children with constipation	1	randomised trial	serious ^{3,4}	no serious inconsistency	no serious indirectness	very serious ²

¹ Unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ Unclear allocation concealment

⁴ Results taken from the Cochrane review

⁵ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.7-26: Low dose imipramine compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with anxiety	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children with sleep disturbances	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with abdominal pain	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children with weight loss	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²

¹ Unclear allocation concealment and blinding

² Wide confidence interval - strong uncertainty of where the effect lies

Table 1.7-27: Low dose imipramine compared to high dose imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with anxiety	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children with sleep disturbances	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children with abdominal pain	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²
Number of children with weight loss	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Serious ²

¹ Unclear allocation concealment and blinding

² Wide confidence interval - strong uncertainty of where the effect lies

Table 1.7-28: Imipramine compared to desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with pallor, restlessness and cold extremities	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Unclear allocation concealment and blinding

² Results taken from the Cochrane review

³ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.7-29: Amitriptyline compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who became irritable	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children who were calmer	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children who were drowsy	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children with fatigue	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children with stomach ache	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children with lower appetite	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Unclear allocation concealment and blinding

² Results taken from the Cochrane review

³ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.7-30: Nortriptyline compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Headache, aching arms and sore tummy	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ Unclear allocation concealment and blinding

² Results taken from the Cochrane Review

³ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.7-31: Imipramine compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with dry mouth or nausea	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Unclear allocation concealment

² Wide confidence interval - strong uncertainty of where the effect lies

Table 1.7-32: Imipramine compared to oxybutynin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with dry mouth or nausea	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Unclear allocation concealment

² Wide confidence interval - strong uncertainty of where the effect lies

Table 1.7-33: Imipramine compared to imipramine and oxybutynin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with dry mouth or nausea	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Unclear allocation concealment and blinding

² Wide confidence interval - strong uncertainty of where the effect lies

1.8 Anticholinergic medication for the management of Nocturnal Enuresis

Table 1.7-34: Oxybutynin compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week during treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.7-35: Oxybutynin compared to oxybutynin and imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week during treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.7-36: Oxybutynin compared to placebo for children with monosymptomatic NE - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved >90% improvement in the number of dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who achieved 50 to 90% improvement in the number of dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed at 6 months	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.7-37: Oxybutynin compared to imipramine for children with monosymptomatic NE - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved >90% improvement in the number of dry nights dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who achieved 50 to 90% improvement in the number of dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed at 6 months	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.7-38: Oxybutynin compared to oxybutynin and imipramine for children with monosymptomatic NE - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved >90% improvement in the number of dry nights dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who achieved 50 to 90% improvement in the number of dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who relapsed at 6 months	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.7-39: Oxybutynin compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with dry mouth or nausea	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.7-40: Oxybutynin compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with dry mouth or nausea	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 15-15: Oxybutynin compared to oxybutynin and imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with dry mouth or nausea	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

1.9 Dose escalation in the management of bedwetting

Table 1.9-1: Increasing desmopressin compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who required full dosage of 0.6 mg desmopressin	1	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	no serious imprecision
Number of children who only required 0.2mg desmopressin	1	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children who only required 0.4mg desmopressin	1	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	very serious ^{3,4}
Number of children who achieved over 50% reduction in number of wet nights	1	randomised trial	very serious ^{2, 5}	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights in first 2 of treatment	1	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights in last 2 weeks of treatment	1	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	no serious imprecision
Number of children who had dropped out by end of trial	1	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	very serious ^{3,4}

- ¹ Results were obtained from Cochrane review, paper did not present this outcome
² Unclear allocation concealment
³ The confidence interval crossed the MID(s)
⁴ Wide confidence interval - strong uncertainty of where the effect lies
⁵ No intention to treat analysis

1.10 Treatment for children who do not respond to initial treatment with desmopressin and / or enuresis alarms for the management of bedwetting

Table 1.10-1: Enuresis alarm compared to DBT for children resistant to enuresis alarms - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	2	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at the end of treatment (no sd)	2	randomised trial	very serious ^{1,4}	no serious inconsistency	no serious indirectness	serious ⁵
Number of children who relapsed	2	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children who dropped out	1	randomised trial	very serious ^{1,6}	no serious inconsistency	no serious indirectness	serious ³

- ¹ Studies had unclear allocation concealment and blinding
² Result from Butler (1988) from Cochrane review
³ The confidence interval crosses the MID(s)
⁴ Results from Butler (1988) and Butler (1990) taken from the Cochrane review
⁵ No information on variability was given in the study, therefore calculation of standard deviation was not possible
⁶ The study had unclear allocation concealment and blinding

Table 1.10-2: Desmopressin compared to placebo for children resistant to enuresis alarms - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,3}	no serious inconsistency	no serious indirectness	serious ⁴
Number of children who relapsed	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	no serious imprecision

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

³ Results taken from the Cochrane review

⁴ No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.10-3: Enuresis alarm and placebo compared to enuresis alarm and desmopressin for children resistant to enuresis alarm or desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 28 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per week at the end of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.10-4: Desmopressin compared to placebo for children resistant to tricyclics - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per month at the end of treatment	2	randomised trial	serious ^{3,4}	no serious inconsistency	no serious indirectness	no serious imprecision
Mean number of wet nights per month at follow up	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

³ The studies had unclear allocation concealment

⁴ Results from Tuvemo (1978) taken from the Cochrane review

Table 1.10-5: Desmopressin compared to placebo for children with severe wetting resistant to enuresis alarms - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment

² Results taken from the Cochrane review

³ No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.10-6: Desmopressin tablets compared to placebo for children with bedwetting resistant to enuresis alarms or desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at the end of treatment	1	randomised trial	serious ³	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ⁴

¹ The study had unclear allocation concealment and it was unclear who was blinded

² Results taken from the Cochrane review

³ The confidence interval crosses the MID(s)

⁴ No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.10-7: Desmopressin spray compared to placebo for children with bedwetting resistant to enuresis alarms or desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ⁴

¹ The study had unclear allocation concealment and it was unclear who was blinded

² Results taken from the Cochrane review

³ The confidence interval crosses the MID(s)

⁴ No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.10-8: Tablet desmopressin compared to intranasal desmopressin for children with bedwetting resistant to enuresis alarms or desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at the end of treatment (no sd)	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ⁴

¹ The study had unclear allocation concealment and it was unclear who was blinded

² Results taken from the Cochrane review

³ The confidence interval crosses the MID(s)

⁴ No information on variability was given in the study, therefore calculation of standard deviation was not possible

Table 1.10-9: Imipramine compared to placebo for children with bedwetting resistant to enuresis alarms and desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,3}
Number of children who achieved >50% improvement	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights in the last 2 weeks of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who dropped out	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

³ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.10-10: Imipramine compared to tolterodine for children with bedwetting resistant to enuresis alarms and desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,3}
Number of children who achieved >50% improvement	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights in the last 2 weeks of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study unclear allocation concealment

² The confidence interval crosses the MID(s)

³ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.10-11: Tolterodine compared to placebo for children with bedwetting resistant to enuresis alarms and desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Number of children who achieved >50% improvement	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights in the last 2 weeks of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.10-12: Desmopressin compared to placebo for children treatment resistant to imipramine therapy - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.10-13: Desmopressin and placebo compared to desmopressin and tolterodine for monosymptomatic children resistant to desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who achieved 50% improvement	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.10-14: Enuresis alarm and desmopressin compared to enuresis alarm and placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with headaches	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.10-15: Desmopressin compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with headaches	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,3}
Number of children with abdominal pain	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	very serious ^{2,3}
Number of children with nausea and vertigo	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

³ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.10-16: Imipramine compared to tolterodine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with slight mood change	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children with insomnia	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children with palpitations	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children with slight nausea	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Table 1.10-17: Tolterodine compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children with slight mood change	1	randomised trial	serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment

² The confidence interval crosses the MID(s)

Children resistant to TRICYCLIC therapy

Desmopressin compared to placebo for children resistant to imipramine therapy

Two randomised controlled trials, **Aladjem (1982)** (Aladjem et al. 137-40) and **Tuvemo (1978)** (Tuvemo 753-55) compared desmopressin to placebo in children who had not responded to tricyclics. **Aladjem (1982)** (Aladjem et al. 137-40) gave children 10 µg intranasal desmopressin and **Tuvemo (1978)** (Tuvemo 753-55) gave children 20 µg micrograms intranasal desmopressin.

Table 1.10-18: Desmopressin compared to placebo for children resistant to tricyclics - Clinical summary of findings

Outcome	Desmopressin	Placebo	Relative risk (95% CI)	Absolute effect	Quality
Number of children who achieved 14 consecutive dry nights	6/15 (40%)	1/17 (5.9%)	RR 6.8 (0.92 to 50.24)	342 more per 1000 (from 5 fewer to 1000 more)	LOW
Mean number of wet nights per month at the end of treatment	33	35	-	MD -9.71 (-10.93 to -8.49)	MODERATE
Mean number of wet nights per month at follow up	15	17	-	MD -1.2 (-7.54 to 5.14)	LOW

Oxybutynin for children who had previously failed to respond to imipramine

One observational study **Kosar (1999)** (Kosar, Arikan, and Dincel 115-18) considered oxybutynin treatment for children who had not responded to treatment with imipramine.. The study outcome was the mean number of wet nights per week at the end of treatment. Children had an age range of 6 to 18 years and had 3 months of treatment. All patients had failed to respond to imipramine (25 mg for children aged 6 to 8 years and 50 mg from children aged over 8 years). Children were given 10 mg daily oxybutynin for one month, if they did not respond they were given 15 mg daily oxybutynin for one month, they did not respond again their dose was increased to 20 mg daily oxybutynin.

Children resistant to IMIPRAMINE

Desmopressin compared to no treatment for children with bedwetting for children resistant to imipramine therapy

One randomised controlled trial **Terho (1984)** (Terho and Kekomaki 925-27) compared 20 µg intranasal desmopressin to no treatment for children resistant to imipramine.

Table 1.10-19: Desmopressin compared to placebo for children treatment resistant to imipramine therapy - Clinical summary of findings

Outcome	Desmopressin	Placebo	Relative risk (95% CI)	Absolute effect	Quality
Mean number of wet nights per week at the end of treatment	49	49	-	MD -26.6 (-37.46 to -15.74)	LOW

1.11 Psychological treatments for the management of bedwetting

Table 1.11-1: Psychotherapy compared to enuresis alarms - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crossed the MID(s)

Table 1.11-2: 3 step program compared to motivational therapy - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	serious ³
Number of children who relapsed at 12 months	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	serious ³

¹ The study had unclear allocation concealment and blinding

² 3 step program also included bladder training and random waking

³ The confidence interval crosses the MID(s)

Table 1.11-3: 3 step program compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	serious ³
Number of children who relapsed at 12 months	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	serious ³

¹ The study had unclear allocation concealment and blinding

² 3 step program also included bladder training and random waking

³ The confidence interval crosses the MID(s)

Table 1.11-4: Motivational therapy and 3 step program compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	no serious imprecision

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who relapsed at 12 months	1	randomised trial	very serious ¹	no serious inconsistency	serious ²	serious ³

¹ The study had unclear allocation concealment and blinding

² 3 step program also included bladder training and random waking

³ The confidence interval crosses the MID(s)

Table 1.11-5: CBT compared to no treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who became dry for 3 weeks	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per 3 weeks at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision

¹ The study had unclear allocation concealment and blinding

² Wide confidence interval - strong uncertainty of where the effect lies

Table 1.11-6: CBT compared to enuresis alarms - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who became dry for 3 weeks	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per 3 weeks at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children failed or relapsed at 6 months	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.11-7: CBT compared to enuresis star charts - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who became dry for 3 weeks	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Mean number of wet nights per 3 weeks at the end of treatment	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children failed or relapsed at 6 months	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who dropped out	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

1.12 Information and Educational interventions for the management of bedwetting

Table 1.12-1: CD Rom information and enuresis alarm intervention compared to usual enuresis alarm treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	Very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed at 6 months	1	randomised trial	Very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.12-2: Written leaflet information and enuresis alarm intervention compared to usual enuresis alarm treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	Very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed at 6 months	1	randomised trial	Very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.12-3: CD rom information and enuresis alarm intervention compared to written leaflet information and enuresis alarm intervention - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	Very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed at 6 months	1	randomised trial	Very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ Study had unclear allocation concealment and blinding

² The confidence interval crosses the MIDs

1.13 Alternative treatments for the management of bedwetting

Table 1.13-1: Hypnotherapy compared to imipramine - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who became completely dry or had a reduced number of wet nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who relapsed at 6 months	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

Table 1.13-2: Acupuncture compared to sham acupuncture - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Number of children who failed to achieve 14 consecutive dry nights or relapsed after treatment	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment and blinding

² Results taken from the Cochrane review

³ The confidence interval crosses the MID(s)

Table 1.13-3: Chiropractic treatment compared to no treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of 2 weeks of treatment	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment and blinding

² Results taken from the Cochrane review

³ Study did not give standard deviations - unclear estimate of effect

Table 1.13-4: Chiropractic treatment compared to sham chiropractic treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who had greater than 50% improvement in the number of dry nights	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	very serious ^{3,4}
Mean number of wet nights per 2 weeks at follow up	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment and blinding

² Results taken from the Cochrane review

³ The confidence interval crosses the MID(s)

⁴ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.13-5: Homotoxicological remedies compared to placebo - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	Very serious ^{2,3}

- ¹ The study had unclear allocation concealment and blinding
² The confidence interval crosses the MID(s)
³ Wide confidence interval - strong uncertainty of where the effect lies

Table 1.13-6: Homotoxicological remedies compared to desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved 14 consecutive dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision

- ¹ The study had unclear allocation concealment and blinding

Table 1.13-7: Trance with suggestions compared to no treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at follow up	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

- ¹ The study had unclear allocation concealment and blinding
² Results from Cochrane review
³ Study did not give standard deviations - unclear estimate of effect

Table 1.13-8: Suggestions without trance compared to no treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at follow up	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

- ¹ The study had unclear allocation concealment and blinding
- ² Results from Cochrane review
- ³ Study did not give standard deviations - unclear estimate of effect

Table 1.13-9: Trance without suggestions compared to no treatment - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at follow up	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

- ¹ The study had unclear allocation concealment and blinding
- ² Results taken from the Cochrane review
- ³ Study did not give standard deviations - unclear estimate of effect

Table 1.13-10: Trance with suggestions compared to suggestions without trance - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at follow up	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

- ¹ The study had unclear allocation concealment and blinding
- ² Results taken from the Cochrane review
- ³ Study did not give standard deviations - unclear estimate of effect

Table 1.13-11: Trance with suggestions compared to trance without suggestions - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at follow up	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment and blinding

² Results taken from the Cochrane review

³ Study did not give standard deviations - unclear estimate of effect

Table 1.13-12: Suggestions without trance compared to trance without suggestions - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Mean number of wet nights per week at the end of treatment	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³
Mean number of wet nights per week at follow up	1	randomised trial	very serious ^{1,2}	no serious inconsistency	no serious indirectness	serious ³

¹ The study had unclear allocation concealment and blinding

² Results taken from the Cochrane review

³ Study did not give standard deviations - unclear estimate of effect

Table 1.13-13: Laser acupuncture compared to desmopressin - Clinical study characteristics

Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
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Outcome	Number of studies	Design	Limitations	Inconsistency	Indirectness	Imprecision
Number of children who achieved at greater than 90% improvement in the number of dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²
Number of children who achieved 50% to 90% improvement in the number of dry nights	1	randomised trial	very serious ¹	no serious inconsistency	no serious indirectness	serious ²

¹ The study had unclear allocation concealment and blinding

² The confidence interval crosses the MID(s)

