

Introduction

Welcome to M.O.P.



Welcome to M.O.P.

Have you been told your child is sure to “outgrow” bedwetting? That accidents — daytime or nighttime — are normal? Or that bedwetting is caused by a “small bladder,” “deep sleep,” anxiety, or behavior issues?

None of that is true!

But these myths cause a lot of suffering, because they lead families down the wrong treatment path. Every day I work with stressed-out families — kids who are teased at school, who are afraid to go on sleepovers, who’ve lost self-esteem. Parents who are tired of waiting for that magical day when their child will “outgrow” bedwetting or when that bedwetting medication will work. A day that never seems to come.

The reality is, some children do not outgrow bedwetting, and the most common remedies don’t get to the root of the problem. But here’s the good news: bedwetting and daytime accidents can be resolved — if you treat these conditions properly.

In this book, I will introduce you to the only reliable method of resolving these issues: M.O.P., short for the Modified O’Regan Protocol.

M.O.P. will be a game-changer for your family.

I didn’t invent this method — I wish I were that smart! I merely adapted it from the research of Dr. Sean O’Regan, a pediatric kidney specialist from Ireland, who was on a mission to solve his own son’s bedwetting back in the 1980s.

M.O.P. is not a miracle cure. It’s not going to resolve your child’s bedwetting tomorrow or next week, and you are likely to experience setbacks along the way. **M.O.P.** is a trial-and-error process that involves daily enemas and laxatives, and research proves that it works.

Wait, did I just say “daily enemas”? Yes, I did!

I realize that “enema” is not a word any parent wants to hear. But I assure you this regimen is safe, and it quickly becomes routine. Many kids feel so much better that they actually ask for their daily enema. I’m not making that up!

M.O.P. is based on five important facts:

- » **Fact #1: Bedwetting and accidents are NOT normal.** Yes, accidents are very common, but that is not the same thing as normal — no matter what your doctor may have told you.
- » **Fact #2: Virtually all bedwetting and daytime accidents are caused by chronic constipation.** That’s right. Accidents are caused by a rectum stuffed with poop — not “deep sleep” or an “underdeveloped bladder” or “stress” or behavior issues.
- » **Fact #3: You cannot assume a child will outgrow bedwetting.** In fact, left untreated, a child who is bedwetting at age 9 has about a 70% chance of becoming a bedwetting adult.¹ The earlier you treat these issues, the better.

1 “Don’t Assume Your Child Will Outgrow Bedwetting.” <https://www.bedwettingandaccidents.com/single-post/2017/06/22/Don%E2%80%99t-Assume-Your-Child-Will-Outgrow-Bedwetting>

» **Fact #4: You must treat bedwetting aggressively. Doctors may tell you M.O.P. is “too extreme.”** I would argue that yes, **M.O.P.** is extreme — extremely effective. Nothing else comes close.

» **Fact #5: Bedwetting and accidents are never a child’s fault.** Bedwetting is, straight up, a medical condition — something that children have absolutely no control over. It is critical for parents and children to understand this. Our children’s book, *Bedwetting And Accidents Are Not Your Fault*, is required reading for you and your child!

Despite what you may have heard, bedwetting is not a mystery. It is a medical condition with a very obvious cause — and a very clear solution.

What’s New in This Edition

This edition marks the first time I have described **M.O.P.** as a four-phase process, a change I made based on input from our Facebook support group. Also, to minimize the risk of relapse, I have extended the length of the first three phases; I now recommend moving to the next phase only after a child has achieved at least 7 days and nights of dryness — not just 5 days/nights.

On the laxative front, this edition includes more extensive information about alternatives to Miralax and more advice on overnight oil-retention enemas. When the first edition of *The M.O.P. Book* was published, I knew little about these enemas, which a support-group member had tried on the recommendation of her doctor in Iceland. Two years later — after feedback from many other members and my own patients — I have a lot more to say about adding olive oil or mineral oil enemas to **M.O.P.** I’ve even given this practice a name: **DOUBLE M.O.P.**



The anthology edition of this book not only updates the old version but also includes extensive content from our blog posts, *The Physician's Guide to M.O.P.*, the **M.O.P.** tracking calendar, and more. This anthology will save you a lot of time researching and downloading!

Most significantly, this edition includes an entire additional book, *Answers to 52 Questions About M.O.P.*, a volume drawn from conversations in our Facebook support group. This amazing group, somewhat of a laboratory for **M.O.P.**, offers real-time input on all aspects of the protocol. The group includes some of the most challenging cases I have come across, and these parents are willing to push the envelope.

I have learned many lessons from them. Perhaps the most important: different variations of **M.O.P.** work for different children. *Answers to 52 Questions About M.O.P.* includes the most commonly asked questions about **M.O.P.**, along with a wide variety of perspectives from parents in the trenches.

The instructions spelled out in *The M.O.P. Book* sound (relatively!) simple, but *Answers to 52 Questions About M.O.P.* tells a more complex story. I recommend reading it before you embark on M.O.P.

In short, here's what you can expect to learn from this anthology:

- What causes accidents — and why M.O.P. is the best solution
- The scientific basis for M.O.P.
- How to implement M.O.P. with confidence
- Strategies to rebound from setbacks
- How to get your child and doctor on board
- What to do if you don't get results

M.O.P. may be a radical departure from treatments you've tried, but I want to assure you and your family: you are heading in the right direction.

If, at any point during this process, you'd like to ask me questions or get input from parents experienced with M.O.P., you can join our private Facebook support group. Details can be found under Support Services at [BedwettingAndAccidents.com](https://www.BedwettingAndAccidents.com).

Also, to supplement this book, you can purchase a set of five short videos via our website. In one of the videos, I talk directly to kids, explaining that accidents are never, ever a child's fault. In another video, I show the various products that can be used with M.O.P. All of the video content is covered in this anthology, but I know some folks prefer the video format.

OK, let's get your child started on the path to dryness!



Steve Hodges, M.D.

Associate Professor of Pediatric Urology,
Wake Forest University School of Medicine