

Bedwetting



I get asked quite often about bedwetting and incontinence. Previously, I've hesitated a bit to write a general blog about these conditions because there can be more to the subject than meets the eye. However, I want to use these conditions as an example of a principle I'd like to teach this week.

So, let's not bury the lede. The main point I'd like to impart is that people need to understand that a lot of sufferings – not all, but a great many – are extrinsic. This means that certain conditions stem from something outside of the body, which can affect how we address them.

What do I mean?

Well, just because you've been taking the same over-the-counter allergy medication for five years doesn't mean that it can't cause sudden trouble for you now!

Just because you've been on birth control pills since you were in your twenties doesn't mean that you can't start experiencing ill effects from hormonal tinkering in your late thirties.

Just because you've had three cups of coffee every day for your entire adult life doesn't mean that your body won't be bothered by those very same stimulants now.

Body's change! Mother Nature is brilliant; we just need to pay attention.

Yes, homeopathy uproots conditions politely and effectively. But if we're dumping something antagonistic into our bodies every single day – something that is exacerbating our suffering – then we can't always expect to erase the continual stimulus we're exposing ourselves to on a daily basis.

Isn't that logical?

So, let's look at the examples. Did you know bedwetting can be triggered by chocolate? Did you know coffee, tea, wine and liquor can cause incontinence?

These are all stimulants and diuretics! These are *extrinsic* forces that we are asking our bodies to overcome. The defense of "I used to be able to handle it" bears no weight. Again ... bodies change. We must stay in tune with our bodies as we progress through our lifetimes.

For instance, I ate a candy bar every day when I was a teenager! We'd walk home from school, stop at the store and grab a candy bar. It's just what we always did!

There is absolutely no way that I could get away with that now.

So, the first step in evaluating any condition is assessing what is *extrinsic* – what's coming in that may be

contributing to our disorder. And I'll share with you a little piece of wisdom that I've learned along the way. That one thing that you're already prickling up about, leading you to say, "Oh, I could *never* do without that!" is often the culprit. By the way, this goes for drugs too. But that's a subject for another blog.

"What? Take my daily allotment of chocolate?! No way!"

Now, I'm not necessarily telling anyone that they have to give chocolate up. But it might be prudent to know if it is the most likely extrinsic factor contributing to the condition. If we want the best chance of uprooting our suffering, we may need to identify and perhaps resist consistently "replanting" the condition with our daily behavior.

Humans rationalize. Many times, we never reconsider old decisions. If we want to eat chocolate, we'll soothe ourselves by reinforcing that it's never bothered us before. But again, bodies change. We need to re-examine how extrinsic factors affect us here and now.

So, if you've considered all the various issues that could be overstimulating hence contributing to bedwetting or incontinence, then allow homeopathy to nudge your system gently back to normal.

But an excellent medicine to think of for bedwetting (as well as for leaking and general incontinence not related to sleep) is [*Cantharis 30*](#), most often taken twice daily until the condition resolves. Then, if the issue reappears at a later time the medicine would be reintroduced.

Now, here's an important point that I want to make: I'm not saying that *Cantharis* will not act unless chocolate, coffee, wine, etc., are eliminated. I'm simply urging folks to consider what could be causing or stimulating the condition so that they can adjust accordingly.

This elegant homeopathic may be utilized by young and old alike. It matters not whether the sufferer is a child or an older adult. I hope by now that all my students feel empowered to consult a *materia medica* to determine if *Cantharis* 30 is a good fit, but it's undoubtedly one of the first medicines to consider.

However, keep in mind that there's more than one way to skin a cat when we address bedwetting and incontinence – as well as many other conditions. To that end, I'll return to this topic with a deeper dive for my Mighties in my [Memo to Mighty Members](#) later in the week.

Meanwhile, be mindful of how your body exists today – not what its “always” been able to tolerate. It's surprising how many solutions reside in the extrinsic details.

Pass on the good news of homeopathy!

Warmly,

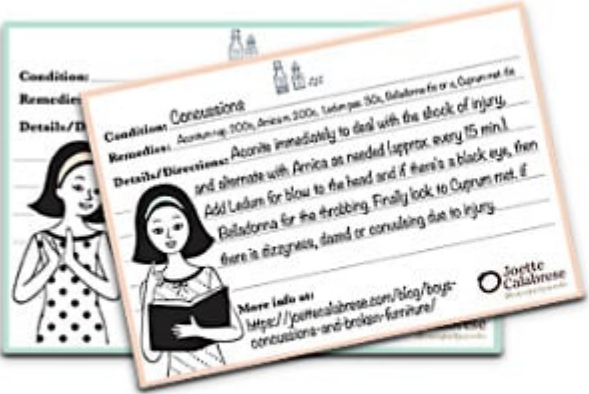
A handwritten signature in cursive script, appearing to read 'Jette', with a long, looping tail.

P.S. I teach protocols for bedwetting (as well as a host of other conditions) in my course [Good Gut, Bad Gut: A Homeopathic Strategy to Uproot Seemingly Unrelated Illness in Body and Mind](#). I also discuss female incontinence in [Feminopathy: How You Can Correct Female Ailments Using Safe, Inexpensive, and Effective Homeopathy](#). And of course, both topics are covered in my magnum opus, [The Survivalist Guide to Homeopathy](#).

Are you confused about which one you should choose? My team has designed a [Course Selector on my Learning Center website](#). Take a quick survey (by simply checking a few boxes

next to the conditions your family is facing) to find out which of my courses is the best fit for you right now.

And remember – aside from receiving more detailed information from me on a variety of topics, all of my Mighties ([Joette's Mighty Members](#)) qualify for a 10% discount on course purchases. If you need assistance getting your discount, email contact@practicalhomeopathy.com for more information.



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