



EPISTAXIS

OVERVIEW:

Nosebleeds (medical term is "epistaxis") are very common. Almost every person has had at least one in their lifetime. There are two main types of nosebleeds (anterior vs. posterior) and posterior can be more serious than the other.

CAUSES:

1. Some medications, taken to prevent blood clots, can increase your risk of a nosebleed.
2. Constant exposure to dry air.
3. Consistent use of steroid nasal sprays (such as those used to manage allergies or congestion).
4. Recurring colds or sinus infections.
5. Digital manipulation- putting your finger, a q-tip, or other items up your nose.
6. Snorting drugs into your nose, such as cocaine.

SELF CARE:

1. Sit down while bending forward slightly at the waist. Do not lie down or tilt your head back as this will allow you to swallow blood and can lead to vomiting.
2. Grip the soft part of BOTH nostrils at the bottom of your nose. Do not grip the bony bridge of your nose, as that will not help stop the bleeding, and do not apply pressure to just one side, even if the bleeding is only on one side.
3. Squeeze your nose closed for at least 15-20 minutes and use a clock to time yourself. Do not release the pressure every so often to check whether the bleeding has stopped. Many people hurt their chances of stopping the bleeding by releasing the pressure too soon and preventing a clot to form.
4. Apply a cold compress or ice pack to the bridge of your nose. This may help the blood vessels constrict and slow the bleeding. *If you follow the steps outlined above, and your nose continues to bleed, repeat all the steps once more and this time apply pressure for a total of at least **30 minutes**. If you continue to bleed, seek emergency medical care.*

IN OFFICE TREATMENT:

1. Silver nitrate- chemical cautery provides a reaction, when applied to the tissue, to form a scar as it binds to the tissue and obstructs the bleeding vessel. One application is highly successful and is a quick painless procedure. This method may need to be done multiple times if the episodes return. ***It is not uncommon you may have some oozing or light bleeding after this procedure until the area has healed completely.***
2. Nasal packing- a nasal tampon is inserted into the nose and expanded to swell and fill the nasal cavity and apply pressure over the bleeding point. This will typically remain in your nose up to 1 week and in addition, an oral antibiotic must be prescribed to prevent a possible infection.
3. Rhinorocket- With more severe nose bleeds, an inflatable nasal tamponade device specifically designed to apply pressure and get the nosebleed to stop will be inserted. This will typically remain in your nose up to 1 week and in addition, an oral antibiotic must be prescribed to prevent a possible infection.

PREVENTION:

1. Humidifier.
2. Keep your nose moist with Vaseline.
3. Avoid touching, picking or blowing your nose.