

NOSE BLEED (EPISTAXIS)

Nose Bleed Explained

A nosebleed happens when one of the blood vessels in the lining of the nose bursts. Nosebleeds may be caused by infection, injury, allergic reaction, nose picking or an object being pushed into the nostril. Another name for nosebleed is epistaxis.

Bleeding from the nose is common in children and is usually not serious. Seek medical attention if nosebleeds are severe, frequent or prolonged.

Blood vessels in the nose are fragile

The small blood vessels in the septum (the partition between the nostrils, which divides the nose into two cavities) are fragile and can burst fairly easily, causing a nosebleed.

Children usually grow out of the condition. If the bleeding is very heavy, prolonged or does not stop with first aid measures, take your child to a doctor or a hospital emergency department.

Causes of nosebleeds

- fragile blood vessels that bleed easily, perhaps in warm dry air or after exercise
- an infection of the nose lining, sinuses or adenoids
- taking blood thinners such as Aspirin or Warfarin
- bumps or falls
- an object that has been pushed up the nostril
- nose picking
- occasionally, an underlying bleeding or clotting problem such as Haemophilia

First aid management for nosebleeds

To manage a nosebleed include:

Apply finger and thumb pressure on the soft part of nostrils below the bridge of the nose for at least 10 minutes.





- Encourage the person to breathe through their mouth while their nostrils are pinched. Loosen tight clothing around the neck.
- Place a cold cloth or cold pack over the person's forehead and one around the neck, especially around the sides of the neck.
- After 10 minutes, release the pressure on the nostrils and check to see if the bleeding has stopped. If bleeding persists, seek medical aid.
- Tell the person not to sniff or blow their nose for at least 15 minutes and not to pick their nose for the rest of the day. (Having a nose full of clotted blood is unpleasant and children in particular may find it difficult to avoid sniffing or nose blowing for a few hours. Fifteen minutes will at least give some time for the clot to stabilise.)
- You should go to the doctor or a hospital emergency department if the bleeding does not stop after simple first aid management. It is important to find and treat the cause of ongoing bleeding.

Frequent nosebleeds

If you or your child keeps having nosebleeds, see your doctor as the cause needs to be understood and treatment commenced. For example, if the cause is an ongoing infection, your doctor may prescribe an antibiotic ointment or medicine. Sometimes the vessel causing nosebleeds need cautery, which can be performed safely by your ENT surgeon whilst awake in many cases.

For severe, recurrent bleeding, an operation may be necessary. Please seek urgent care if this happens to you or your child.

Cautery

Cautery is a very effective technique for treating persistent nose bleeds. During the procedure, the chemical applied to the vessels creates a scab that may initially appear dark grey. It is important to protect this area from trauma and to let it heal, as disturbing it may cause further bleeding.

Please consider the following instructions for the first week after cautery has been performed:

- Some stinging or pain can occur after cautery in the nose, upper teeth and upper lip. This is normal and will resolve within the first 1-2 days. Please use Paracetamol as directed.
- Do not blow your nose for 3 days; when you start blowing your nose again, do this gently, one nostril at a time
- Try to sneeze with your mouth open
- Keep your head elevated for the first 48 hours
- Do not lift heavy items
- Avoid rigorous physical activity
- Apply the prescribed ointment (Chlorsig or Bactroban) to the nostril twice daily, every day for 2 weeks

If there is some further bleeding, use 2-3 spray of Otrivine to each nostril and pinch the nose for 5 minutes. If there is significant bleeding that you are unable to stop, please go to your nearest emergency department for immediate care.