

Nosebleeds

Nosebleeds (also called epistaxis) are often caused by injuring the membranes of a blood vessel in the nose with cotton swabs, finger tips, hard nose-blowing or objects falling on the nose or other trauma. Other causes include chemical irritants, infections, or abnormalities of the blood vessels of the nose. Diseases such as elevated blood pressure or bleeding illnesses may also cause a nosebleed. The most common cause is excessive drying of the nasal passages from dry air, especially in the winter. They are twice as common in children. Most resolve with direct pressure on the nose, although some may need further medical intervention such as packing or cautery.

The nose may bleed from one or both nostrils. There also may be bleeding down the back of the throat with spitting of blood, coughing of blood, or vomiting of blood. Swallowed blood irritates the stomach frequently causing vomiting. Most nosebleeds do not result in enough blood loss to cause problems. But, a very prolonged, heavy nosebleed may result in a low blood level (anemia). If you have had a large nosebleed recently, you may notice dark or tar-like bowel movements -- these are a sign that you have swallowed a significant amount of blood. (The dark color is from digested blood.)

TREATMENT

The first-line treatment is direct pressure. Grasp the nose firmly between the thumb and first finger and squeeze it for 10 to 30 minutes without releasing the nose or peeking. Placing an ice pack on the bridge of the nose may help slow the blood flow to the nose. Lean our head slightly forward (tuck your chin into your chest) so that any blood running down the throat may be spit out rather than swallowed. This may help prevent vomiting. If a nosebleed happens when you are participating in an athletic event, a trainer or team doctor may pack the nose with cotton or apply certain medicines to stop the bleeding.

If you continue to bleed, it may be necessary to have the nose treated by a doctor. Your doctor may do one or more of the following: pack absorbent gauze into the nose so as to place pressure on the bleeding site, apply medicines to the bleeding areas to help stop the bleeding, or cauterize bleeding blood vessels. The main side effects of packing are discomfort, inability to breathe through your nose, and an increased risk of sinus infection. (In some people, there is also a risk of slowed heart rate or decreased blood pressure, and the doctor may recommend hospitalization.)

DO:

- ◆ Remain in a sitting position with your head slightly forward (chin to chest) and squeeze the lower half of your nose with your thumb and index finger for 10 to 30 minutes.
- ◆ Keep your mouth open if you have to sneeze.
- ◆ If the nosebleed is caused by high blood pressure, work with your doctor to get your blood pressure under good control.
- ◆ Humidify the air in your home and, if possible, at work.
- ◆ On the second day, place a little petroleum jelly just inside your nostril to protect it from drying and to soften any crusts that form.

- ◆ A scarf or cloth mask may be helpful if you have to be out in cold, dry air.
- ◆ Use salt water nasal sprays if dryness is a problem.
- ◆ If irritating chemicals or dusts are a problem, avoid them or use a filter-type mask.
- ◆ If you had packing put in by a doctor, make an appointment with that doctor to have it removed. *Do no remove medical packing yourself!*

DO NOT:

- ◆ Don't blow your nose forcefully or blow out any clots.
- ◆ Don't pick your nose, pick at any clots, or put anything into it (cotton swabs, handkerchief corners, tissue).
- ◆ If you get nosebleeds often, avoid things that cause them like dry air.
- ◆ Don't use decongestant nasal sprays – they can be a problem, and you should discuss them with your doctor.
- ◆ Avoid coffee, tea, or alcohol until at least 24 hours after bleeding has stopped.
- ◆ Don't bend, stoop, lift or do strenuous exercise.
- ◆ Don't take aspirin, ibuprofen or other anti-inflammatory medications because they may slow clotting and promote bleeding. Tylenol® (acetaminophen) is okay.

CALL YOUR DOCTOR IF:

- ◆ Your nose is gushing.
- ◆ You vomit from swallowed blood.
- ◆ If you are still bleeding after 30 minutes of pressure.
- ◆ You are having more than three or four nosebleeds a day.
- ◆ You have a temperature of greater than 102° F, especially if your nose was packed or cauterized.
- ◆ If allergies or infections are a problem.
- ◆ If you have a new or persistent headache.
- ◆ Your nosebleeds are caused by high blood pressure or a blood problem or a bleeding disease like anemia, hemophilia or leukemia.
- ◆ You are on blood thinners such as aspirin, heparin or warfarin.

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