

Nosebleeds

General Information: The lining of the nasal cavity is rich with blood vessels that help warm and humidify the air we breathe. Sometimes, these blood vessels are exposed on the surface of the nasal lining and bleed easily in response to dryness, crusting, sneezing, and trauma.

Prevention:

- (1) Avoid digital manipulation (picking, rubbing, etc.) of the nose.
- (2) Avoid excessive nose-blowing.
- (3) Maintaining a moist nasal environment is important and can be accomplished by gently applying Bactroban (mupirocin) ointment to the fleshy outer portion of the nostril and gently inhaling to coat the inside of the nostril. Performing ointment application twice daily is recommended.
- (4) Saline nasal spray may be used intermittently throughout the day to maintain nasal moisture.
- (5) A humidifier at night will help prevent drying and crusting in the nose, especially during the colder months when heaters are on and drying the air.
- (6) Avoid heavy straining or weight-bearing exercise after a nosebleed.
- (7) Adults with high blood pressure should confirm adequate blood pressure control if frequent nosebleeds persist.

Medicines to Avoid: Ibuprofen (Motrin, Advil, Nuprin) and aspirin are common over-the-counter medications that prevent blood from clotting normally. Other medications that affect blood clotting include warfarin (Coumadin), clopidogrel (Plavix), ketoprofen (Actron, Orudis), naproxen (Naprosyn, Aleve). Even one dose of these medications can make nosebleeds more likely to occur.

Please note that acetaminophen (Tylenol) does not affect blood clotting and is the recommended medication for fever, aches, and pain in patients prone to nosebleeds.

To Stop a Nosebleed: Pinch the nose closed with a washcloth or towel using gentle pressure. Keep the pressure constant for 10-15 minutes – watch the clock and time it, because it's longer than you think. Keep the head in a neutral position – tilting the head back can lead vomiting swallowed blood.

Nasal decongestant sprays (such as Afrin) can sometimes be used to help slow the bleeding. Avoid packing any tissue paper or gauze into the nasal cavity as this may scratch the lining of the nose and cause further bleeding. Nosebleeds that do not respond to these measures after 30-60 minutes may require evaluation, cauterization, and packing in the Otolaryngology Clinic or Emergency Department.

Contact Information: The Otolaryngology nurse can be reached at (603) 650-4399 and can answer any additional concerns or questions you may have. My secretary can be reached at (603) 650-8123. The Dartmouth-Hitchcock Medical Center operator is available 24 hours-a-day and can be reached at (603) 650-5000.

In addition, the following web page has helpful information regarding common pediatric ear, nose, and throat concerns: <http://www.entnet.org/kidsent>.