

Nosebleeds (epistaxis)

Nosebleeds are a very common and frustrating problem that is only very rarely life threatening. **As long as you have a nose and have blood going through your body, you can have a nosebleed.** There are multiple procedures that can decrease the frequency and severity of the episodes, but **nothing can guarantee that a bleed will not recur.**

The vast majority of cases result from either trauma (from serious accidents to simple nose picking) and/or **dryness**. Dried nasal mucosa can easily become cracked and bleed. Dryness also results in the formation of scabs and crusts that can tear when the nose is blown or picked. Occasionally, however, if nosebleeds are severe or frequent enough, further evaluation for underlying causes may be required. This includes making sure that the blood pressure is adequately controlled, the blood is able to form clots and stop bleeding normally, etc...

If an offending blood vessel is identified, cautery may be beneficial in controlling the bleed. In many instances, however, only a large patch of irritated or dried nasal mucosa is seen without an obvious bleeding site. In severe bleeding, it is sometimes impossible to control the bleed without packing the nose. This is the equivalent of a glorified medical tampon for the nose to apply pressure to a bleeding site. There are many types and sizes of packs that are used in different situations.

When you leave the office, your bleeding will be at least temporarily controlled. However, nothing can guarantee that a bleed will not recur – not cautery, not packing, not anything. The only way to guarantee no bleeding is to not have a nose or not having blood pumping through your body.

If you have been experiencing nosebleeds, do the following to decrease the frequency and severity of the episodes:

- **Do not take aspirin, Advil, Aleve, Motrin, ibuprofen, Celebrex.** Tylenol (acetaminophen) is the only over the counter pain medication that does not thin out the blood and increase the likelihood of bleeding)
- If you are taking aspirin or any other blood thinning medication (Coumadin, Warfarin, Plavix, Heparin, Lovenox, etc...) for heart problems, stroke prevention or clotting issues, discuss with your primary physician before stopping the medication
- **Humidify your nose**, moisture is your friend! Use over the counter nasal saline (salt water) sprays multiple times a day. There is no such thing as too much. A room humidifier is also helpful. Saline gel (Ayr), Vaseline ointment or Neosporin at night may be beneficial as well
- Heat causes an increase in blood flow to the nose. It is **best to avoid anything too hot in temperature** – hot showers, saunas, jacuzzis, and even foods that are spicy or too hot in temperature
- **Avoid any heavy lifting or strenuous activity** for about a week (anything that gets your blood pressure or heart rate too high). **Do not bend forward** to pick up objects or to tie your shoe. This causes blood to rush to your head and can trigger a bleeding episode
- **If you need to sneeze, do not hold it in.** Sneeze through your mouth. Holding the sneeze in will suddenly increase the pressure inside the vessels of your nose
- If you are constipated, take stool softeners (every time you bear down, your blood pressure can temporarily go up)

If you are having an active nosebleed:

- Stay calm and do not panic. Stress and anxiety will increase your blood pressure
- **Pinch your nose at the opening of the nostrils**, not on the bridge of your nose. This applies pressure to the most likely areas of bleeding
- **Apply something cold** to the bridge of the nose and/or inside the mouth. The cold temperature helps to clamp down the blood vessels and decrease blood flow
- If the bleeding persists and you have some handy, apply a few generous squirts of **Afrin** (oxymetazoline) or **Neo-Synephrine** (phenylephrine) nasal spray to the bleeding nostril. This can also help to clamp down the blood vessels
- **Keep your head above the level of your heart.** Do not lie flat or bend your head over too much. Tilting the head forward or back will only result in the blood coming forward out the nostril or back into the throat. It does not affect the duration or severity of the bleeding.