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NOSE BLEEDS

While most nose bleeds are simply annoying, they can be frightening and some are life threatening. Nose bleeds can result from a number of factors, including trauma, high blood pressure, nasal dryness and blood thinners such as coumadin, aspirin or ibuprofen. Sometimes, the reason for the nose bleed is not clear.

Treatment for nose bleeds usually begins with looking for a source and cauterizing (sealing) the responsible blood vessel if possible. Packing may be necessary if bleeding continues. The packing is meant to give the blood vessels time to heal without exposure to dry air and turbulent air flow. The pack also applies pressure to the blood vessels, discouraging further bleeding.

Nasal packing can be quite uncomfortable. First of all, it is necessary to breathe through the mouth which can cause the mouth and throat to get dry and sore. Frequent drinking is the only way to minimize this dryness.

Not being able to breath through the nose is uncomfortable as well, and your doctor will remove the packing as soon as it is safe to do so. In the meantime, you need only be concerned if you cannot breathe through your mouth. If you are having difficulty breathing with your mouth open, stay as calm as possible but go the emergency room as this can indicate a lung problem.

Excessive tear drainage from the eyes is not uncommon when nasal packing is in place. This is because tears normally drain in to the nose, so the packing blocks the tear duct. It is also common to have excess mucous drainage from the nose and this may be blood-tinged. There may also be blood streaks in the drainage from the throat.

If you are given an antibiotic prescription, begin taking it right away and take all of it until it is gone. Call the doctor if temperature is above 101.5 degrees, there is a sunburn-like rash, abnormal sleepiness, vomiting, diarrhea or stomach cramps. These are early signs of toxic shock syndrome which is rare but can occur with nasal packing in place even if you are taking antibiotics.

While the packing is in, it is necessary to sneeze with the mouth open and of course, not blow the nose. If the packing begins to come out of the nose, gently replace it if possible; if you cannot replace it and it is completely out, call your doctor. If the packing comes out completely, leave it out and call your doctor if the bleeding recurs.

Once the packing is removed, nose blowing should be kept to a minimum and be done only very gently for one week. Also, continue to sneeze with your mouth open for one week. Your doctor will likely recommend that you begin using a saline nasal spray. This spray can be bought without a prescription from the drugstore. It would be used at least four times per day (or however often your doctor tells you) but it is safe to be used as frequently as you like. This spray keeps the nose moist. Before going to bed, Ayr gel or ocean gel should be placed into each nostril without using anything sharp (including fingernails). A room humidifier can also be very helpful. Avoid hot, steamy showers and bending and straining which can also contribute to rebleeding.

Most nose bleeds are from the septum (partition in the middle of the nose) in the front of the nose. If a nose bleed occurs, pinch the lower nose (soft area below the bones) thereby putting pressure on the septum. (If you have Neo-Synephrine or another type of nasal decongestant spray, spray each side of the nose before pinching). Keep the head elevated (sitting or lying with the upper body propped up) and do not tilt the head backwards. Apply ice, a cold pack or a cold washcloth to the nose and cheeks. Remain calm. Watch the clock and hold pressure for fifteen minutes. If the nose is still bleeding, call your doctor or go to the emergency room.

See your doctor or go to the emergency room if bleeding keeps reappearing or cannot be stopped, the bleeding is rapid or large amounts of blood are being lost, bleeding goes down the back of the throat instead of out of the front of the nose or you feel weak or faint from the blood loss.