

## Epistaxis (Nosebleeds)

### Definition:

- Although they can be scary, nosebleeds are rarely a cause for alarm. They are common in children ages 3-10 years. Since most nosebleeds in children are caused by nose picking or irritation due to hot dry air, using a few simple tips may help children avoid them in the future.

### Care Advice:



### **How to stop the bleeding**

- Stay calm and reassure child.
- With child upright in a chair or in caregiver's lap, tilt child's head slightly forward. **DO NOT** have your child lean back. This may cause blood to flow down the back of the throat, which tastes bad and may cause gagging, coughing, and/or vomiting.
- Gently pinch the soft part of the nose with your thumb and forefinger (just below the bony ridge) with a tissue or clean washcloth.
- Keep pressure on the nose for about 10-15 minutes. If you stop too soon the bleeding may start again. If the bleeding does not stop, make sure you are putting pressure on the right spot.
- If the bleeding does not stop, parents may use **Afrin** nose spray for children **greater than 6 years of age**. The Afrin can be used twice a day for no more than **3 days in a row**.
- You may use prescription medication such as Amicar or tranexamic acid if it has been prescribed by the hematologist or Hemophilia Treatment Center.
- Have your child relax for a while after the nosebleed. Discourage nose blowing, picking, rubbing, or any rough play.
- If bleeding continues for greater than 30 minutes, your child needs to be seen in the ED for further evaluation.

### **Prevention**

- Keep the inside of your child's nose moist with Saline Nasal Gel which can be bought over the counter, e.g. AYR gel or with Vaseline, coconut or olive oil. Dab gently around the base of the opening of the nostrils.
- Encourage fluids so your child can stay well hydrated.
- Humidify bedrooms if the air in the home is dry. This is especially important when the outside air is dry or during winter months when heaters are on. Either warm or cool mist humidifiers are fine.
- Make sure the child wears protective athletic equipment when participating in sports that could cause a nose injury.
- Avoid aspirin, ibuprofen and other NSAIDs as these medicines can make bleeding worse.
- Take precautions such as keeping the nails short and filed

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For children with recurrent nosebleeds despite using the moisture preventions, sometimes they may need to see an Ear, Nose and Throat specialist. Sometimes, the child may need a nasal cautery procedure which can be done in the office or in the operating room depending on their age. The procedure may help decrease the frequency of the nosebleed, but it is rarely a CURE. So it is important to continue doing the things we mentioned in the Prevention section.

### Nasal Cautery - Post Procedure

Sometimes the nose will continue to have some bleeding after the procedure which is normal. It should decrease with time.

Follow the same precautions as listed above to help the nose stay moist and clot properly if there is a bleed.

Follow up with ENT (next available appointment) for recurrent nosebleeds. Call 858-309-7701 to make an appointment.

If your child has a known bleeding disorder, talk to your hematologist/oncologist about how to optimize your blood count or other medications you may need to prevent recurrent bleeding.

**Please take your child to the Emergency Department if you are unable to stop nosebleed for greater than 30 minutes.**

### When to call our office

If you are an established patient, call our office or on-call emergency number below when a nosebleed has lasted for more than 30 minutes. Call if child is weak, dizzy, pale, or extremely tired after a nosebleed. Call our office during the day if nosebleeds are a frequent problem even after saline gels, saline spray and humidification are used or you have other concerns or questions.

If you are an established hematology patient, for questions during the day please contact the appropriate case manager:

Kappi Farrow, BSN, RN, CPN Hemophilia/Bleeding Disorder Case Manager 858-966-7918

Rosalie Brooks, RN Thrombosis/Clotting Disorder Case Manager 858-966-8647

Beth Shehee, BSN, RN Sickle Cell/Hematology Disorder Case Manager 858-966-6709

For after-hours emergency or on weekends, call the hospital operator at 858-576-1700 and ask to speak with the hematologist on-call.