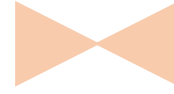




**Peach Pediatric ENT**

**Dr. Andy Sipp**

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## Nosebleed Care Sheet

### Why does my child have nosebleeds?

Nosebleeds are common in children. The bleeding comes from tiny blood vessels that are located on the septum (the cartilage in the center of the nose that divides the nostrils). These blood vessels get bigger and swollen when your child has nasal congestion, colds or allergies. The cold, dry air in winter combined with running the heat inside your home can also irritate the blood vessels inside your nose. If the blood vessels crack open, a nosebleed occurs. Nosebleeds commonly happen during sleep, when a child is upset or crying, during physical activity, or from rubbing or picking your nose. To simply put it, nosebleeds are a wound inside your nose that we need to help heal with proper treatment.

### How to treat and prevent nosebleeds:

1. The nose heals best when it is covered on the inside with a good moisturizing agent. Dr. Sipp likes the following over-the-counter medications to moisturize the nose:
  - a. Nasal saline spray or nasal saline gel (i.e. Ayr saline gel)- Use nasal saline spray or gel inside the nose twice a day for one month, even if you are not having nosebleeds.
  - b. Aquaphor, Neosporin, Bacitracin or Polysporin ointment- Apply to the inside of nose twice a day for two weeks. These medicated ointments work better than plain Vaseline. They are best applied by placing a large dollop of ointment on a Q-tip and then applying ointment to the front part of nose and gently squeezing both nostrils to spread it throughout the inside of the nose.
2. Do not put your fingers in your nose, pick your nose, or aggressively itch or rub your nose. If your nose itches, gently squeeze from the outside and rub.
3. Avoid nasal steroid sprays, like Flonase or Nasocort, as these medications can irritate the nose and cause nosebleeds.

## **How do I stop an active nosebleed?**

1. Pinch your nose at the tip or soft part and squeeze (as if you are trying to make a funny voice).
2. Lean your head forward toward the ground, not backwards. Leaning backwards can make the blood run down your throat and cause you to choke.
3. Spray 2-3 sprays of Afrin nasal spray (oxymetazoline) in the side of the nose that is actively bleeding. This nose spray causes your blood vessels to tighten and can significantly shorten the length of a nosebleed. Do not use Afrin more than 5 days in a month as it can become habit forming.
4. Avoid stuffing tissues, toilet paper, wash cloths or tampons inside the nose to stop a nosebleed as this can create more trauma to the inside of the nose and make the bleeding last longer.
5. It is common for blood clots (large black strings that look like mucus) to come out of your nose during an active nosebleed.
6. If your nosebleed takes longer than 45 minutes to stop, go to your nearest emergency room for evaluation and treatment.

## **What can Dr. Sipp do to treat my nosebleeds?**

If you have already tried the above mentioned treatments for over a month with no improvement or resolution of your nosebleeds, see Dr. Sipp to discuss the following options:

1. Nasal cautery- This is a procedure we can do in the office on children who are old enough to tolerate a little burning in the nose. Dr. Sipp will use silver nitrate (a chemical compound) to clot the blood vessels inside the nose where the bleeding is coming from. If your child can not tolerate the discomfort in the office, we can discuss doing the procedure in the OR under general anesthesia.
2. Nasal packing- This is used only to stop a severe active nosebleed. It is very unpleasant, but can be useful to control a bad nosebleed.
3. Bleeding disorder evaluation- In some cases, we worry that the nosebleeds could be caused from an underlying or undiagnosed bleeding disorder. Dr. Sipp will ask some questions about your family history and your child's medical history to determine if a bleeding disorder work-up is necessary. In most cases, we will order some basic bloodwork and then refer you to a hematologist (blood disorder specialist) if needed.