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Nosebleeds

Injuries, colds, dry air, high blood pressure, nose picking or blowing, and anti-inflammatory medicines like aspirin all contribute to nosebleeds; they can also happen spontaneously. Most nosebleeds are brief and stop on their own. Must of the time they can be controlled at home. Firmly pinch the soft part of the nose between the first finger and thumb for at least 5-10 minutes. Avoid swallowing the blood; it may cause nausea or vomiting.

Medical attention is needed when the bleeding cannot be controlled by pinching or if the nose bleeds repeatedly. Ice packs placed over the nose and sucking ice cubes or popsicles may help control the bleeding. Decongestant nose spray (Afrin) may also be used (only if you do NOT have high blood pressure or heart problems) to help constrict blood vessels and control the nosebleed by spraying into or placing a soaked cotton ball in your nose. Do not pick or blow your nose and try to avoid sneezing, straining, or heavy lifting. Sleep with your head elevated. You can also use a humidifier in your room or saline nose spray a few times daily to help prevent drying and further bleeding. A small amount of non-petroleum jelly such as Ayr nasal gel can be applied to the nostril twice a day.

Most nosebleeds come from an area near the front of the nostril septum. This area can be cauterized if direct pressure fails to stop the bleeding. Sometimes a pack is placed in the nose to give pressure over the area that is bleeding. If your nose has been packed, the packing should be removed generally in 3-5 days by your doctor and, if you have to sneeze, put firm pressure on the nostril so that the packing stays in place. Do not drink any alcohol, hot liquids or take aspirin (unless directed by a physician) or other anti-inflammatory drugs for 3-4 days.

See your doctor or go to the emergency room right away if:

- Bleeding continues through or behind the nose packing
- You have fever, pain, headache or other troublesome symptoms