Epistaxis (nose bleed)

Epistaxis (nasal bleeding) is a common condition. Many nose bleeds can be controlled at home. Some, however, may need medical intervention to control the bleeding.

General causes
- trauma (e.g., a blow to the nose/picking the nose/presence of foreign body)
- high blood pressure
- upper respiratory tract infection (cold)
- anticoagulant therapy, e.g., warfarin or aspirin
- there may be other underlying conditions that could cause nose bleeds.

Treatment
Treatment will vary depending on the severity and site of bleeding. There are two main sites of bleeding:

- anterior (front part of the nose – also known as ‘Little’s area’)
- posterior (back part of the nose).

Initial treatment
- Sit up and bend your head forward slightly to prevent the swallowing of blood.
- Apply continuous pressure firmly to the tip of the nostrils for ten to 15 minutes. Breathe through your mouth while you do this.
- Keep cool and remove any surplus layers of clothing.
- Apply ice to the bridge of the nose and the nape of the neck as this may help to constrict blood vessels and reduce bleeding.
- Avoid swallowing any blood as this could make you feel nauseated. Spit this out into a bowl. If bleeding persists despite initial treatment you will be seen by a doctor who will examine your nose and try to locate a bleeding point. The doctor may put some local anaesthetic spray or liquid up your nose.
- If the bleeding point is identified, the doctor may treat it with chemical cautery (silver nitrate sticks). If this is not possible it will be necessary to put a dressing (nasal pack) into one or both of the nostrils. If nasal packing is required then a stay in hospital will also be necessary.

Treatment while in hospital
It is routine for blood samples to be taken when admitted to hospital for epistaxis. One of these samples will be used to test for anaemia. A drip (intravenous fluids) may be needed and you will be advised to stay on bedrest while you have dressings in your nose.

There is a call bell beside each bed in case you need assistance. The nurses caring for you will wheel you to the bathroom and help you with personal hygiene when necessary.

Your blood pressure will be monitored regularly. You may be given a light sedative to help you relax. Oral antibiotics or a nasal cream may also be given.
You will be advised to avoid hot drinks as this may dilate any weak blood vessels you have in your nose and as increase the risk of further bleeding. If you need to sneeze, try to sneeze through your mouth. Packs are generally left for 24 to 48 hours before removal if no further bleeding has occurred. If bleeding persists, despite all of the above treatments, then a reassessment will be required.

**Advice following discharge**
Avoid blowing your nose, do not pick your nose and avoid strenuous exercise for at least two weeks. Keep baths and showers cool and avoid bending over for two weeks as well. You may be given medication to take home with you. The nurse will explain how and when these medications should be taken.

If a sick certificate is required please request this on the day of your discharge. Your GP will be informed of your recent admission. If further bleeding should occur, don’t panic, stay calm and follow the initial advice that is included in this leaflet.

If this fails contact the ward for advice or go straight to your nearest emergency department.

**Contact information**

F5 ward: 023 8120 6511  
           023 8120 4644

NHS 111: 111

If you need a translation of this document, an interpreter or a version in large print, Braille or audio, please call 023 8120 4688 for help.