

Nosebleeds

Nosebleeds may result from many different causes. Most nosebleeds stop on their own in a few minutes; it may help to have your child sit quietly with his or her head tilted forward and gently squeeze the nostrils. If nosebleeds do not stop or if they occur frequently, call our office.

What are nosebleeds?

Nearly all kids get a “bloody nose” once in a while. Nosebleeds are very frequent in preschool-aged children; they are less common after puberty. There are a number of possible causes, including excessive nose picking, dry air, allergies, and injuries. Nosebleeds rarely signal a serious medical problem.

Most childhood nosebleeds come from the septum—the hard tissue between the nostrils. Nosebleeds nearly always stop after a few minutes. If your child has a nosebleed that simply won't stop or if he or she has a lot of nosebleeds, get medical help.

What do they look like?

- Blood coming from one or both nostrils.
- Blood flow is usually slow but steady. Occasionally, there is a lot of blood running freely from the nose.
- Much less often, vomiting of blood or blood in a bowel movement may be the first sign that your child has had a nosebleed. (This may occur if a nosebleed happens at night and your child swallows the blood.)

What causes nosebleeds?

- Abnormal or excessive nose picking. All children (and adults!) pick their nose at times. However, very frequent or forceful nose picking can cause nosebleeds.
- Injuries, for example, falling or getting hit in the nose.
- Foreign bodies; younger children may place objects in their noses.
- Dry air may irritate the sensitive lining of the nose (especially in winter).
- Certain diseases involving the nose and upper airway: infections (including colds), sinusitis, allergies, or polyps.
- Rarely, nosebleeds are caused by blood vessel abnormalities, bleeding problems, or other diseases.

What are some possible complications of nosebleeds?

- Usually none.
- Very rarely, severe or repeated nosebleeds may cause a lot of blood loss, resulting in anemia (low levels of red blood cells or hemoglobin).

What puts your child at risk of nosebleeds?

- Conditions leading to irritation of the lining of the nose such as allergies or colds.
- Blood disorders that lead to easy bleeding, for example, hemophilia.

Can nosebleeds be prevented?

- Teach children to keep objects out of their noses.
- In the wintertime, use a humidifier to avoid dry air indoors.
- If instructed by the doctor, use saline (saltwater) nose drops or put a thin layer of petroleum jelly (Vaseline) on the septum (the hard tissue between the nostrils).

How are nosebleeds treated?

At home:

- Most nosebleeds stop on their own in a few minutes. The following steps may be helpful:
 - Put gentle pressure on the nostrils. It may help to hold a cold washcloth to the nose.
 - Have your child sit quietly. Keep the head tilted forward; this helps keep blood from trickling back into the throat.
 - If the nosebleed doesn't stop within several minutes, try a nasal spray such as Afrin or Neo-Synephrine.
 - If there is a lot of blood coming from your child's nose, or if the nosebleed doesn't stop within 5 to 10 minutes, it's a good idea to seek medical help.

At the doctor's office or emergency room:

- The doctor may place a small gauze pack inside the nostril to control the bleeding.
- Once the bleeding is under control, the doctor may try to locate the blood vessel that is causing the bleeding. A medication called silver nitrate can be placed to seal off the bleeding vessel. This must be done carefully to avoid injuring the delicate tissues inside the nose.

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- *If nosebleeds are severe or frequent*, further examination and tests may be needed to find out what's causing them. This may include:
 - A visit to an ear, nose and throat (ENT) doctor (also called an otorhinolaryngologist).
 - Tests to be sure your child doesn't have a bleeding disorder.
- Nosebleeds that are very frequent (at least once a month) or take a long time to stop (more than 5 to 10 minutes).
- A lot of blood coming from the nose, or if the nosebleed simply won't stop.
- Blood in vomit or bowel movements. (Bowel movements may look tarry and black, not red.)
- Bruises or easy bleeding, or if you or others in your family have a bleeding disorder.

When should I call your office?

Call our office if your child has any of the following: