# FORM THE PARISH NURSE….

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**SALEM UNITED CHURCH OF CHRIST**

## Disorders of the Nose and Sinuses

Nosebleed

**Signs and Symptoms** – Sudden bleeding from one nostril

Most people experience a nosebleed at one time or another. Sometimes the cause is a hard impact on the nose, but often a nosebleed is simply the result of a cold, sinus infection, dry air, or a scab being knocked off. Sometimes there may be no apparent reason.

Among children and young adults, most nosebleeds begin on the septum, the cartilage that separates the two nasal chambers. This form of nosebleed is not serious and usually is easy to stop. The front of your septum, just inside your nostril, contains many fragile blood vessels. These vessels are easily damaged, either directly as from a blow or indirectly form crusting in your nose produced by breathing very dry air. A head cold or an allergy can also cause crusting.

In older people, nosebleeds may begin on the septum or deeper in the nose. These deeper nosebleeds, which are rare, often are harder to stop.

**Diagnosis**

In most cases, you can stop a nosebleed easily, and there is no need for further examination. However, when the bleeding is hard to stop or occurs frequently, you should visit your physician.

Your physician will examine your nose with a special instrument and light to see precisely where the problem lies. If the problem appears to be deep in your nose, your physician will look for other, more serious, problems such as a tumor in the back part of your nose.

**Treatment**

Use these easy steps to stop the common nosebleed:

1. Sit up or stand - don't lie down. An upright position decreases the blood pressure in the veins of your nose, which slows the flow of blood.
2. Pinch your nose with your thumb and index finger and breathe through your mouth. Do this for 5 to 10 minutes - the pressure on your bleeding septum should stop the flow of blood.

Some people apply an ice bag to their nose to constrict the blood vessels and stop the bleeding. This method is harmless, but it does not help to stop the bleeding - the cold reaches the vessels on the outside of the nose, not those on the septum.

If a nosebleed is difficult to stop or occurs frequently, you should see your physician. Treatment may involve several steps. First, a suction device removes excess blood. Then you will have a medicated cotton ball placed in your nose. The medication anesthetizes and shrinks your nasal linings.

*Cautery*

If the bleeding still continues, your physician may recommend chemical or electric cautery. For this procedure, the physician applies a topical anesthetic to the inside of your nose and then burns the affected blood vessels with a chemical or with a tiny electric instrument (cautery) to promote coagulation of the blood.

If the bleeding persists after cautery, your physician will gently pack your nostril with medicated gauze. The packing, which is left in place for several days, exerts pressure on the bleeding site to stop the blood flow. When the packing is removed, your vessels may be cauterized again to discourage recurrence of the bleeding.

*Surgery*

Nosebleeds caused by an underlying disease, such as hypertension or arteriosclerosis, or that occur far back in your nose are often the most difficult to stop. Your physician will probably recommend the help of a specialist who can place a special pack in your nasal cavity. Its placement requires a special technique and sedation. This procedure is done in a hospital, where you will need to stay 2 or 3 days for observation. This procedure may be uncomfortable, but it usually is effective in stopping the bleeding.

In rare instances, the standard techniques do not work, and you may lose a large amount of blood. This can be dangerous and may require surgery to block the arteries that supply blood to the nosebleed site. The operation requires a hospital stay of several days.

*Prevention*

If you have frequent nosebleeds, you can take steps to prevent or decrease the frequency of their occurrence. Apply petroleum jelly to your nasal septum once or twice each day. Increase the humidity of the air you breathe by using a humidifier or vaporizer. Don't pick your nose, and avoid blowing your nose for several hours after a nosebleed. Blowing your nose increases pressure on the damaged vessels and can lead to another bloody nose.

**BEWARE: NOSE-DROP ADDICTION**

Your local drugstore sells many products designed to relieve nasal congestion, including nasal sprays and nose drops. These products reach a large area of the mucous membrane directly, so they provide quick decongestion. But use them carefully and only for a limited period, if at all. They can be addicting.

Use nonprescription nasal sprays or nose drops no more than 3 or 4 times a day over a period of no more than 3 to 4 days. If you use them frequently over several weeks, they can have a rebound effect, causing your nose to become even more congested between applications of the medication. As a result, you will need greater and more frequent doses of the spray or drops.

Prolonged use of nasal sprays and drops can cause irritation of your mucous membrane, a stinging or burning in your nose, and a chronic inflammation of the mucous membrane known as rhinitis medicamentosa.

The only way to treat the problem of nose - drop addiction is to stop using nose drops. Your nose may become more congested than ever at first, but after a few weeks the congestion should gradually wear off as the inflammation subsides. If the initial problem of congestion remains, consult an allergist or an ear, nose, throat specialist.

Litin, S. C., & Nanda, S. (2018). *Mayo Clinic family health book*. Rochester, MN: Mayo Clinic.