

ASK the Pharmacist



Q:

A member of my family seems to get a lot of nosebleeds; Should I be concerned and what can I do about them?

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A:

The definition of a nosebleed is simply bleeding from the blood vessels located within the nose. The medical term for this condition is epistaxis. The vast majority of nosebleeds are mere nuisances but occasionally they may be frightening and, like many other seemingly benign symptoms, very rarely they can be an indicator of a significant underlying health issue. Nosebleeds are common due to the rich supply of blood vessels within the nose and its vulnerable protruding position which leaves it susceptible to trauma. Physicians classify them into two different types. An anterior nosebleed is one that comes from the front of the nose and begins with a flow of blood out of one or the other nostril if the patient is sitting or standing up. A posterior nosebleed is one that comes from deep within the nose and flows down the back of the mouth and throat even if the patient is sitting or standing up. Obviously, if the affected person is lying down, even an anterior nosebleed will seem to flow in both directions due to the effects of gravity. It is important to make this distinction since posterior nosebleeds are often quite severe and will quite likely require a physician's care. Posterior nosebleeds are more likely to occur in older people, people with high blood pressure and in cases of injury to the nose or face. Nosebleeds in children are almost always of the anterior type. What causes the nose to bleed? The most common reason is the climate which contributes to the vast majority of the anterior type of nosebleeds. When the air is dry, either outside or inside a house (due to the moisture reducing effects of most household heaters), the nasal membranes become virtually parched causing them to crust, crack and bleed. This is especially common during the winter months where dramatic fluctuations in temperature and humidity combined with the sudden changes induced by going from the cold outside to the warmth of a house can change the interior of the nostrils making the nose to be even more susceptible to bleeding. Other common causes of nosebleeds include infections, trauma (yes, nose picking falls under this label), allergies, the use of blood thinning medications such as ibuprofen (Advil), Aspirin and naproxen (Aleve), alcohol abuse, high blood pressure, hormonal changes (particularly during pregnancy). Far less common causes include the remote possibility of a tumor or an inherited genetic bleeding disorder, an autoimmune disorder, a structural problem within the nose, a polyp, or the snorting of drugs such as cocaine. If the nose does bleed, it can almost always be stopped without the need for a visit to the doctors. The affected person should first make sure that they keep their head higher than their heart (i.e. sit or stand or at least elevate the head with a pillow or two), then they should pinch all the soft parts of the nose together between the thumb and one or two fingers and press the pinched parts firmly against the face. This should be held for at least 5 minutes. Ideally ice should be applied to the cheeks and nose which will reduce the blood supply to the nose (note sucking ice is also useful, although not appropriate in young children due to the choking risk). A spray or two of a decongestant nasal spray (such as Dristan or Otrivin) can also help but is generally not necessary in order to stop the bleeding. Once the bleeding has stopped, steps should be taken to prevent the nose from bleeding again. These steps generally make sense and include ensuring the head is kept higher than the heart, do not pick or blow your nose (sniffing is ok and if you have to sneeze, open your mouth so that more of the air will escape through it lessening the pressure to the nasal membranes), do not strain or bend down to lift a heavy object, do not smoke, if you need to eat, keep the diet to soft, cool foods and beverages for a little while as well. Physician help should be sought if the nosebleed persists despite the above measures, if the blood loss is large, if there is a concurrent fever or headache, if the affected person feels weak or faint or if the nosebleeds keep occurring. Future nosebleeds can be prevented by keeping the inside of the nose moist through the application of products such as Secaris nasal gel, Vaseline and/ or saline mists on a regular basis (three times a day is generally suggested). An adequate fluid intake should be consumed and smoking as well as cough and cold remedies (which work in part by further drying the nasal membranes) should be abstained from. If these preventative measures fail to stop the nosebleeds from recurring, a procedure called nasal cautery can be performed right in your physician's office. This is a fast and relatively painless procedure in which either a needle is heated and placed in the nostrils or a caustic agent such as a silver nitrate stick cause a mild burn to the tissues which seals the bleeding vessels and induces the formation of a scar. This layer of scar tissue helps prevent future bleeding from that particular site. For more information about this or any other health related questions, contact the pharmacists at Gordon Pharmasave, Your Health and Wellness Destination.