

Development of a therapeutic algorithm for optimal nosebleed management

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Approximately 60 percent of people experience epistaxis, commonly known as nosebleed, at least once in their lifetime. Of those who experience nosebleed, six percent require medical treatment. A study in the September 2013 issue of *Otolaryngology–Head and Neck Surgery*, explores which nosebleed treatment options demonstrate the best outcomes.

"Although data exist on the efficacy of the different epistaxis management techniques, outcome comparisons between the modalities for both primary management as well as management of cases of recurrence are currently lacking," the authors stated.

The study analyzed various treatment outcomes of adult patients with epistaxis presenting to otolaryngologists at a tertiary care center between 2005 and 2011. The authors observed 147 patients (94 men and 53 women) who underwent cauterization, tamponade or nondissolvable packing, and/or proximal vascular control through embolization or surgical ligation. Treatment outcomes were then compared with the intent to derive an algorithm for optimal nosebleed management.

According to the study, nondissolvable packing demonstrated the highest rate of failure or recurrence (57.4 percent) for initial bleed management. Chemical cautery was significantly more successful in achieving lasting hemostasis for the first bleeding episode. The authors also found that the duration of the nondissolvable pack placement had no significant impact on nosebleed recurrence. Furthermore, among patients who failed initial



management, those who next underwent more <u>invasive procedures</u> such as cautery, embolization or surgical ligation experienced better outcomes and shorter inpatient stays.

Because the subgroup analyses were limited in size for some of the treatment groups in this study, the authors urge caution when considering these findings.

Although most cases of nosebleed do not require medical intervention, those patients who do present to a tertiary care <u>otolaryngologist</u> and need medical attention require a systematic, stepwise approach to address their condition. This study demonstrates "good outcomes with initial treatment with chemical cautery and with procedures that achieve directed vascular control in patients who develop epistaxis recurrence."

Provided by American Academy of Otolaryngology

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