



South Infirmarv-Victoria University Hospital

Ollscoile Ospidéal Otharlann an Deiscirt-Victoria

A teaching Hospital of University College Cork

OTORHINOLARYNGOLOGY/HEAD & NECK (ENT)

Paediatric Epistaxis

Epistaxis in childhood is a common condition that usually resolves with time. A recent study in Ireland showed that 80.8% of patients found that the frequency and severity of epistaxis had reduced following topical treatment with **Naseptin® cream** to each nasal cavity twice daily for two weeks. These patients were followed up three months after completing the course of Naseptin®.

It would be very beneficial for this child to be treated with Naseptin® initially. This two-week course can be repeated if necessary.

In persistent epistaxis, Allergic rhinitis should be taken into account. 30% of children presenting with epistaxis were found to have allergic rhinitis in a large Irish study.

We will not be offering this child an ENT casualty appointment at present. However, if the child still has epistaxis after three months and the parents are keen to try nasal cautery, we would be delighted to accept an OPD referral. It is essential to wait at least three months as it takes the parents/guardians time to determine if the epistaxis has settled.

Garry S, Wauchope J, Hintze JM, Ryan EJ, O' Cathain E, Heffernan CB. Factors affecting Naseptin treatment success - A prospective cohort study. *Int J Pediatr Otorhinolaryngol.* 2023 Aug;171:111620. doi: 10.1016/j.ijporl.2023.111620. Epub 2023 Jun 17. PMID: 37348251.

Nae A, M Colreavy. Initial management of allergic rhinitis in the community- could it be expanded? *Eur J Rhinol Allergy* 2021; 4:62-67. DOI: 10.5152/ejra.2021.21723.