

Nosebleeds in Children

What Are Nosebleeds?

Although annoying, nosebleeds (also called epistaxis) are generally not serious. They are very common, affecting about 30% of children younger than 5 years and 50% of children 5 years and older. The bleeding originates in the nose and may come out of one or both sides of the nose or the mouth. Bleeding from the front of the nose is called an anterior nosebleed. Bleeding from the back of the nose is called a posterior nosebleed.

The inside of the nose is separated in the middle by a piece of cartilage and bone called the septum. The septum has a thin lining filled with tiny blood vessels. These blood vessels moisturize, warm, and filter the air we breathe. The lining of the nose is fragile and may easily tear and bleed when the nose is picked, rubbed, or blown. Dry air and crusting in the nose may make the nose even more likely to bleed. Anything that dries out or injures the inside of the nose can cause a nosebleed. This includes inflammation from an upper respiratory infection or allergies, use of decongestant nasal sprays, heated indoor spaces, high altitudes, dry climates, injuring your face or nose, and inserting anything into your nose.

Most nosebleeds are anterior nose bleeds. Rarely, posterior nose bleeds occur from larger blood vessels in the back of the nose. This may look like bleeding that mostly goes down the throat rather than out the nose, and it may be difficult to stop. Medical conditions that prevent blood from clotting may cause or worsen nosebleeds in children. You should bring your child to their doctor if frequent nosebleeds are difficult to stop at home or interfere with daily life. In some cases, you may be referred to an otolaryngologist (also called an ears, nose, and throat [ENT] doctor). Sometimes, the ENT may examine your child's nose with a camera to determine where the bleeding is coming from.

To stop a nosebleed at home, (1) keep calm and instruct your child to breathe through their mouth; (2) sit up with your child leaning slightly forward with head tilted forward; and (3) pinch the soft part of nose above the nostrils together continuously for at least 10 minutes. After the bleeding stops, there may be large clumps of blood (blood clots) that come out of the nose or mouth. This is normal, as it is the body's way of stopping the bleeding. If the bleeding does not stop after 30 minutes, the volume of blood is more than 1 cup, or your child is having difficulty breathing or is vomiting from swallowing blood, seek emergency medical attention.

To prevent nosebleeds, keep the skin of the nose hydrated to make it less prone to injury; use a saline nasal spray (available over the counter) at least 1 to 2 times a day to moisturize the nasal passages; moisturize the air with a humidifier in the bedroom; gently apply a saline gel (available over the counter) inside the front of the

Nosebleeds are common in children and are generally not serious. Bleeding originates in the front (anterior nosebleed) or back (posterior nosebleed) of the nose and comes out the nostrils or mouth.

The lining inside the nose contains tiny blood vessels that can tear when the nose is picked, rubbed, or blown.
Injury is more likely to occur when the inside of the nose is too dry.

How to prevent nosebleeds

- ▶ Keep the inside of the nose hydrated with saline nose spray
- ▶ Keep air moisturized with a bedroom air humidifier
- ▶ Keep objects and fingers out of the nose, sneeze with your mouth open, and avoid blowing the nose forcefully

How to stop nosebleeds at home

- ▶ Have your child breathe through their mouth while sitting up with their head tilted forward
- ▶ Pinch the soft part of the nose above their nostrils together for at least 10 minutes

Clumps of dried blood may come out of the nose or mouth once the bleeding stops

 Seek medical evaluation for bleeding that is very heavy, causes breathing difficulties or vomiting, or does not stop after 30 minutes.

nose on both sides with a cotton swab; and avoid trauma to the nose—do not put objects (including fingers) in the nose, cut children's nails short, sneeze with the mouth open, and do not forcefully blow your nose.

Treatment depends on the cause of bleeding and is determined by your medical professional. Nosebleeds often improve or stop with the prevention methods listed above. If a nosebleed does not stop with pressure, a doctor may put something in the nose called a nasal pack to put pressure on the bleeding. Sometimes a doctor will put a medication on the area of bleeding to cause the bleeding to stop; this is called cauterization. The inside of the nose is numbed, and the bleeding blood vessel is sealed.

FOR MORE INFORMATION

StatPearls

<https://www.ncbi.nlm.nih.gov/books/NBK435997/>

American Academy of Otolaryngology—Head and Neck Surgery

<https://www.enthealth.org/conditions/nosebleeds/>

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