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**Original article:**

**A Prospective Analysis of Etiology and Efficacy of Various Treatment Modalities Used in Epistaxis at a Tertiary Care Teaching Hospital**

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**Abstract:**

**Background:** Present study was conducted to identify the etiological profile and to determine the various treatment modalities for management of epistaxis as well as success rates of these treatment modalities.

**Methods:** A prospective descriptive study of patients with the chief complaint of epistaxis was included in the study at Department of ENT, Uttar Pradesh Rural Institute of Medical Sciences & Research. Saifai, Etawah, Uttar Pradesh, INDIA.

**Results:** A total of 89 patients were studied. There were 57 males and 32 females with a male to female ratio of 1.78:1. Their ages ranged between 4 and 78 years. The commonest cause of epistaxis was trauma (35.96%) followed by idiopathic (26.97%) and hypertension (20.22%). All patients with non-traumatic epistaxis had previous history of nasal bleeding ranging from one to three episodes. According to the bleeding site, 56 patients (62.92%) had anterior nasal bleeding, 21 (23.6%) had posterior bleeding. Non-surgical measures were the main intervention methods used in study. Of this, Silver Nitrate Cautery (57.3%) and anterior nasal packing (29.21%) were most common non-surgical measures. Prophylactic broad spectrum antibiotics were prescribed in all patients who had nasal packing, local cauterization and those who underwent surgical Intervention.

**Conclusion:** Traumatic epistaxis remains the most common etiological factor for causing epistaxis in present study. Multiple methods for treating epistaxis are available, and occasionally more than one treatment is used. We should manage a case of epistaxis in an orderly manner and every effort should be made to find out the cause before deciding to go to the next modality of management. Conservative approach is arguably sufficient in the management of most cases of epistaxis without the need for surgical intervention.

**Keywords:** Epistaxis, Trauma, Anterior nasal packing, Hypertension, Posterior nasal packing.