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Commentary on prophylactic systemic antibiotics for anterior epistaxis treated with nasal packing in the emergency department

Dear Editor,

We read with great interest the paper entitled “Prophylactic systemic antibiotics for anterior epistaxis treated with nasal packing in the emergency department” by Murano et al. [1]. The authors compared the infection rate between patients who were and were not prescribed prophylactic systemic antibiotics for anterior nasal packing in spontaneous epistaxis. They found that prophylactic antibiotic use for nasal packing in spontaneous epistaxis patients is unnecessary. This is an excellent study, and may help to avoid the abuse of antibiotics. However, there are areas that require further clarification.

The infection rate is related to the nasal packing material. Iodiform (or petrolatum) gauze increased the injury to the nasal mucosa and, thereby, induced infection of the nasal cavity. On the contrary, some biological materials including Merocel, absorbable styptic gauze, etc. do not increase the nasal mucosal injury [2,3]. The authors found that the most common method of anterior packing was the use of intranasal balloon devices (74/106, 69.8%), followed by foam polymer nasal tampon use (29/106, 27.3%) [1]. However, the type of packing material used in the remaining three cases was not discussed. The authors should, therefore, compare the infection rate between different packing materials in a future study. In addition, the duration of pack use can affect the infection of the nasal cavity. In this study, the pack was usually removed within 48–72 h after admission. However, the duration of pack use was increased because of the recurrence of epistaxis. The prolonged duration of pack use would cause obstruction of the ostiomeatal complex and affect drainage of the nasal sinus, thereby increasing the chance of infection of the nasal sinus [4]. Thus, we believe that prophylactic antibiotic use should be considered in this case.

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Conflict of interest

No.

Zhengcai Lou, MD

Department of Otorhinolaryngology, The Affiliated Yiwu Central Hospital, 699 Jiangdong Road, Yiwu City 322000, Zhejiang Province, China

E-mail address: louzhengcai@163.com.

References