

cambridge.org/jlo

Editorial

Cite this article: Fishman J, Fisher E, Hussain M. Epistaxis audit revisited. *J Laryngol Otol* 2019;**132**:1045. <https://doi.org/10.1017/S0022215118002311>

This month's issue marks the final issue of 2018 for *The Journal of Laryngology & Otology*. The highlight in this month's issue is another excellent paper from the Integrate team investigating mortality following epistaxis.¹ This recent article follows the success of Integrate's national epistaxis and peritonsillar abscess audits, previously published in *The Journal*.²⁻⁶

The 'Epistaxis 2016: national audit of management' collected prospective data over a 30-day audit window in 113 centres. A higher than expected 30-day all-cause mortality rate of 3.4 per cent was identified in the audit. In this recent article, the study examines in more detail the subgroup of patients who died during the audit period. In their analysis, the authors found that patients who died were more likely to: come from a ward environment; have co-existing cardiovascular disease, diabetes or a bleeding diathesis; be on antithrombotic medication; or have received a blood transfusion. Patients did not die from exsanguination. The authors therefore concluded that epistaxis may be seen as a general marker of poor health and a poor prognostic sign in otherwise already morbid patients. Nevertheless, the aforementioned risk factors should serve as red-flag features associated with higher mortality in epistaxis patients.

The Journal Senior Editors would like to take this opportunity to thank all those who have contributed to the success of this year's journal, including all the authors, Assistant Editors, reviewers, advisers, production staff, our publishing partners at Cambridge University Press and all other colleagues at *The Journal*, for their dedication, enthusiasm and hard work. Finally, we wish all of our readers a happy and successful 2019.

References

- 1 Integrate (The National ENT Trainee Research Network). Epistaxis and mortality. *J Laryngol Otol* 2019;**133**:1061-6
- 2 Hopkins C, Fishman J, Youngs R, Fisher E, Hussain M. National audit of epistaxis management. *J Laryngol Otol* 2017;**131**:1033-4
- 3 Integrate (The National ENT Trainee Research Network); National ENT Trainee Research Network. Epistaxis 2016: national audit of management. *J Laryngol Otol* 2017;**131**:1131-41
- 4 Integrate (The National ENT Trainee Research Network); National ENT Trainee Research Network. The British Rhinological Society multidisciplinary consensus recommendations on the hospital management of epistaxis. *J Laryngol Otol* 2017;**131**:1142-56
- 5 Mehta N, Williams RJ, Smith ME, Hall A, Hardman JC, Cheung L *et al*. Can trainees design and deliver a national audit of epistaxis management? A pilot of a secure web-based audit tool and research trainee collaboratives. *J Laryngol Otol* 2017;**131**:518-22
- 6 ENT Trainee Research Collaborative - West Midlands. National prospective cohort study of peritonsillar abscess management and outcomes: the Multicentre Audit of Quinsies study. *J Laryngol Otol* 2016;**130**:768-76