**What is recommended**

- Emergency management and treatment (as in non-HHT patients).
- Look for underlying brain AVMs to prevent recurrence.
- If the patient’s clinical condition requires the insertion of a nasogastric tube, it should be soft, of small diameter (unless clinical circumstances demand a large bore tube), and put in place with extreme caution due to the risk of triggering a severe episode of epistaxis related to the presence of mucous telangiectases.

**What you should not do**

- No specific contraindications.