Hiatal hernia

Definition

Hiatal hernia is a condition in which part of the stomach extends through an opening of the diaphragm into the chest. The diaphragm is the sheet of muscle that divides the chest from the abdomen.

Alternative Names

Hernia - hiatal

Causes

The exact cause of hiatal hernias is unknown. The condition may be due to weakness of the supporting tissue. Your risk for the problem goes up with age, obesity, and smoking. Hiatal hernias are very common. The problem occurs often in people over 50 years.

This condition may cause <u>reflux</u> (backflow) of gastric acid from the stomach into the esophagus.

Children with this condition are most often born with it (congenital). It often occurs with gastroesophageal reflux in infants.

Symptoms

Symptoms may include:

- · Chest pain
- Heartburn, worse when bending over or lying down
- · Swallowing difficulty

A hiatal hernia by itself rarely causes symptoms. Pain and discomfort are due to the upward flow of stomach acid, air, or bile.

Exams and Tests

Tests that may be used include:

- Barium swallow x-ray
- Esophagogastroduodenoscopy (EGD)

Treatment

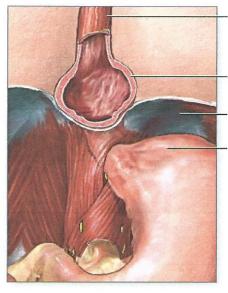
The goals of treatment are to relieve symptoms and prevent complications. Treatments may include:

- · Medicines to control stomach acid
- · Medicine to strengthen the muscles in the lower esophagus that keeps stomach contents from backing up
- Surgery to repair the hiatal hernia

Other measures to reduce symptoms include:

· Avoiding large or heavy meals





Esophagus

Cutaway view of hiatal hernia

Diaphragm

Stomach



*ADAM

- · Not lying down or bending over right after a meal
- · Reducing weight and not smoking
- · Raising the head of the bed 4 to 6 inches

If medicines and lifestyle measures do not help control symptoms, you may need surgery.

Outlook (Prognosis)

Treatment can relieve most symptoms of hiatal hernia.

Possible Complications

Complications may include:

- · Pulmonary (lung) aspiration
- · Slow bleeding and iron deficiency anemia (due to a large hernia)
- · Strangulation (closing off) of the hernia

When to Contact a Medical Professional

Call your health care provider if:

- You have symptoms of a hiatal hernia.
- You have a hiatal hernia and your symptoms get worse or do not improve with treatment.
- · You develop new symptoms.

Prevention

Controlling risk factors such as obesity may help prevent hiatal hernia.

References

Falk GW, Katzka DA. Diseases of the esophagus. In: Goldman L, Schafer AI, eds. *Goldman's Cecil Medicine*. 25th ed. Philadelphia, PA: Elsevier Saunders; 2016:chap 138.

Ferri FF. Hiatal hernia. In: Ferri FF, ed. Ferri's Clinical Advisor 2015. Philadelphia, PA: Elsevier Mosby; 2015:p. 571-2.

Petersen RP, Pellegrini CA, Oelsclanger BK. Hiatal hernia and gastroesophageal reflux disease. In: Townsend CM Jr, Beauchamp RD, Evers BM, Mattox KL, eds. Sabiston Textbook of Surgery. 19th ed. Philadelphia, PA: Elsevier Saunders; 2012:chap 44.

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