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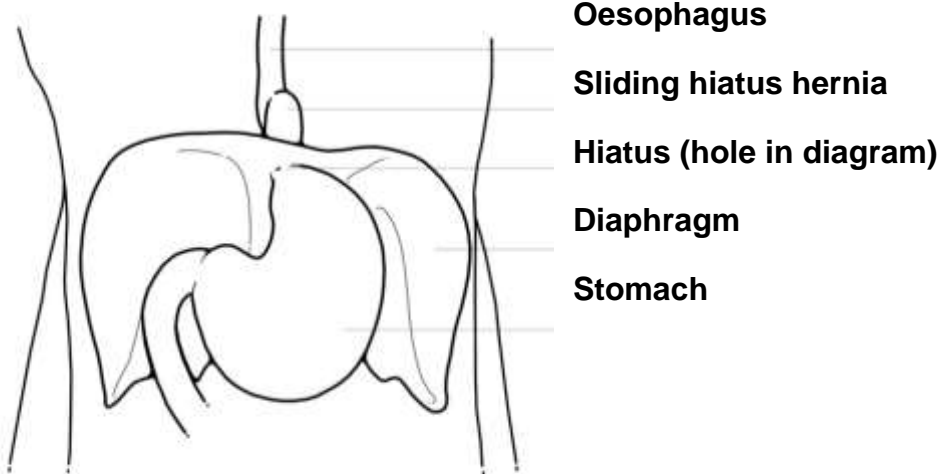
Patient information

Hiatus Hernia

Digestive Diseases Care Group

What is a hiatus hernia?

Hiatus hernia is when part of the stomach slides through the diaphragm into your chest. Hiatus Hernia is very common and often does not cause any problems. In some people it may cause heartburn or discomfort.



There are two types of hiatus hernia:

- **Sliding hiatus hernia** – the most common type. These are small hernia that slide up and down and in and out of the lower chest. The sphincter at the bottom of the oesophagus and the top of the stomach push through the hole (hiatus) in the diaphragm.
- **Rolling hiatus hernia** – This is less common. Part of the stomach pushes up through the hole in the diaphragm next to the oesophagus.

Symptoms

The main symptoms of a hiatus hernia are:

- Heartburn. If heartburn or reflux symptoms go on for a long time or are severe, this is called gastro-oesophageal reflux disease (GORD).
- Deep burning chest pain, which may include the shoulder blades. The pain is made worse by bending forward, straining or lying down. Drinking coffee or other hot drinks, or eating spicy food can make these symptoms worse. The pain may disturb sleep and may be so severe as to be mistaken for angina or a heart attack.
- Difficulty swallowing due to constant acid irritation

Other symptoms can include a croaky voice and asthma symptoms.

However in many cases a hiatus hernia causes no symptoms and is diagnosed by chance during routine investigation.

Causes

The exact cause of hiatus hernia is uncertain, but is more common in people who are:

- Over 50.
- Smokers.
- Overweight or obese.
- Pregnant.

It is thought that physical efforts e.g. excessive coughing, vomiting, straining or sudden physical exertion can be a contributing factor of hiatus hernia as it creates extreme pressure in the abdomen.

It is estimated that a third of people over 50 have a hiatus hernia, possibly due to the diaphragm getting weaker with age, allowing part of the stomach to push through.

Treatment

Prevention / Self-help

You can reduce the symptoms of your sliding hiatus hernia and prevent it causing you more problems by making these lifestyle changes:

- Eat small frequent meals rather than occasional large meals.
- Try avoiding foods that are hot, spicy, acidic or difficult to digest, coffee and alcohol as these can make your symptoms worse.
- Avoiding eating or drinking late at night.
- If overweight, losing weight will help minimise the symptoms.
- Wear loose-fitting, comfortable clothes.

- If you smoke, try to stop - smoking increases the risks of reflux problems.
- Elevating the head of the bed by four to six inches (ten to fifteen centimetres) to minimise acid regurgitation.

Over-the-counter medicines

Antacids

Antacids can be taken either in liquid or tablet form. Those containing magnesium or aluminium generally work by neutralising the stomach acid. Others contain an ingredient called an alginate, which forms a barrier that floats on the top of the stomach contents and prevents them splashing back up into the oesophagus. Many antacids contain a mixture of ingredients.

Acid-blocking medicines

If antacids don't work for you, or you need to take large quantities to get relief, your doctor or pharmacist may recommend one of the more powerful acid-blocking medicines. H₂ blockers are one type of over-the-counter medicines that cut the amount of acid that the stomach produces. An example is ranitidine (Zantac). Another type of medicine, known as a proton-pump inhibitor, completely stops acid production. An example is omeprazole (Zanprol) which can be bought over the counter or prescribed by your family doctor (GP).

Surgery

Rarely, a sliding hiatus hernia causes such severe symptoms or complications that your doctor will recommend surgery. If you have a rolling hiatus hernia, you are more likely to need surgery. Surgery involves pushing the stomach back into the correct position and securing it there, before repairing any gap in the diaphragm. The procedure can usually be done by keyhole surgery although open surgery (through a cut in the abdomen) is sometimes needed.

Complications

Acid reflux may cause painful damage or ulceration to the gullet lining. In some cases, it can cause bleeding and anaemia may result from blood loss.

Rarely the hiatus hernia can become strangulated (knotted) cutting off blood supply and require emergency surgery.

Severe and long-lasting inflammation can cause scarring and narrowing of the oesophagus which may cause pain and affect the ability to swallow food properly. This is called a stricture. This can be treated endoscopically with balloon dilatation.

Barrett's oesophagus is a rare condition that changes the cells of the lower oesophagus, increasing the risk of cancer of the oesophagus.

There is a low risk of cancer of the oesophagus if you have long term acid reflux.

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Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

Further information

If you have any questions or queries, please contact:
The Gastroenterology Unit during the following hours

Monday – Thursday	0800 – 2100 hrs
Friday	0800 – 1700 hrs
Saturday/Sunday/BH	0800 – 1600 hrs

Tel: 0151 706 2819/2656

Text phone number: 18001 0151 706 2819/2656

Clinic appointment enquiries

Tel: 0151 706 5555

Text phone number: 18001 0151 706 5555

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