

What is a Hiatus Hernia?

A Hiatus Hernia is where a part of your stomach is pushing through a hole in the diaphragm into your lower chest. The diaphragm helps you to breath and is the large flat muscle that separates the chest cavity that contains your lungs and heart from the abdomen. Normally the stomach sits below the diaphragm and a sphincter helps keep the oesophagus closed to prevent reflux of acid and food.

Symptoms

Many people have no symptoms associated with a Hiatus Hernia, while others may experience heartburn or reflux, which is a burning feeling that rises from the abdomen or lower chest towards the neck. This is sometimes associated with the regurgitation of food or fluids and can leave an acid taste in the mouth or back of the throat.

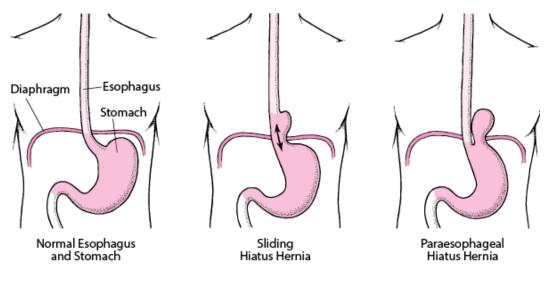
Other symptoms may also include:

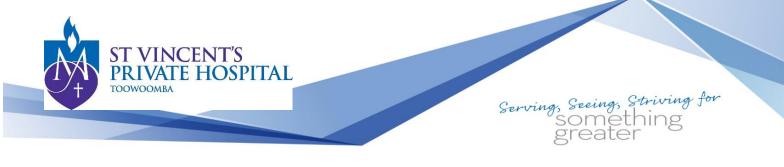
- A persistent cough especially at night as the refluxed acid is irritating to the windpipe (trachea).
- Chest or abdominal pain
- Vomiting or difficulty swallowing
- Bad breath or gum problems

Types of Hiatus Hernia

Sliding Hiatus Hernia - is the most common, it is such names as the hernia may slide up and down in and out of the chest cavity. It is often quite small.

Rolling Hiatus Hernia – is less common and in the case the stomach protrudes up through a hole in the diaphragm next to the oesophagus.





Causes

The cause of a Hiatus Hernia is unclear, but it is more common in people over 50 years of age. This may be in part due to the fact that the muscle of the diaphragm weakens with age which then allows the stomach to poke through a hole in the diaphragm. Other factors that may increase the risk of them developing may include pressure on the abdomen such as weight lifting, regular coughing or obesity.

Treatment / Prevention

If you have symptoms such as reflux, your doctor may prescribe PPI's (Proton Pump Inhibitor's) or antacid medications.

Changing lifestyle factors such as:

- weight loss
- avoiding foods- such as fatty or spicy foods that aggravate the reflux
- avoiding pressure on your abdomen even avoiding straining while on the toilet.

In some instances, medication is not enough to help with the symptoms and surgery may be required to put your stomach back in the correct position and tighten the diaphragm around the area.

It is important to discuss any concerns with your GP as early treatment is best for long term health.

References

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