



Hiatus Hernia

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Version 4

> About this leaflet

The purpose of this leaflet is to tell you about Hiatus Hernia, its causes and treatments.

> What is a hernia?

A hernia occurs when an internal part of the body, such as an organ, pushes through a weakness in the surrounding muscle, or tissue wall. The most common type is a Hiatus Hernia, which often does not cause symptoms or problems.

Types of hernia

1. Sliding hiatus hernia - the most common.

These are small hernias that slide up and down, in and out of the chest area. The sphincter (ring like muscle) at the bottom of the oesophagus and top of the stomach push through the weakness (hiatus) in the diaphragm.

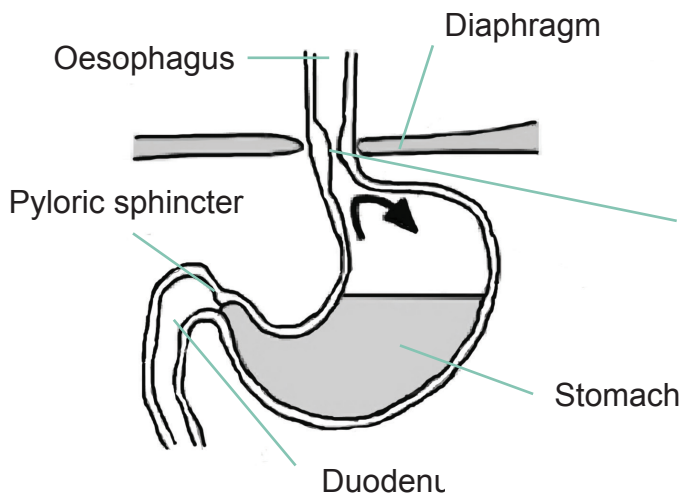
2. Rolling hiatus hernia - less common.

Part of the stomach may 'push up' through the weakness in the diaphragm next to the oesophagus.

Symptoms

Most patients will experience no symptoms from their Hiatus Hernia; this is especially true of the sliding hiatus hernia. However, when symptoms do occur they usually take the form of heartburn and regurgitation, this is when the stomach acid refluxes back into the oesophagus. Some patients with fixed Hiatus Hernias experience this chronic reflux of acid.

Some prescription medication and drugs, (such as antispasmodics, some heart medications known as calcium channel blockers and some antidepressants) weaken the muscle strength of the lower oesophagus. If you find you are having problems with heartburn, you should not stop taking these medications, but discuss treatment with your GP.

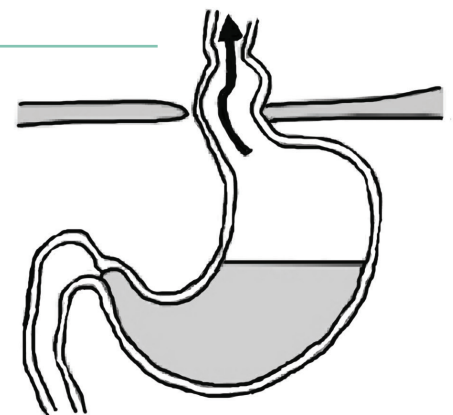


Normal stomach and oesophagus

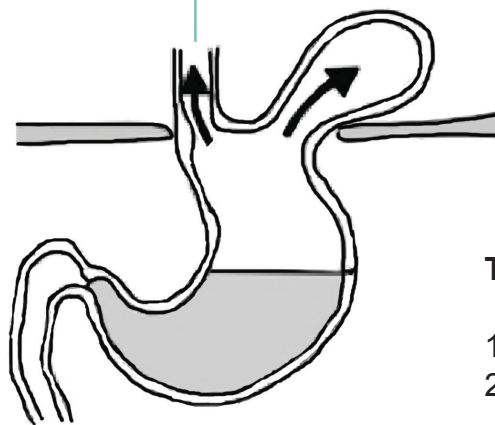
The junction between oesophagus and stomach (cardiac sphincter) is usually tightly closed to prevent 'reflux' of acidic stomach contents.

Hiatus hernia

The tightening effect of the diaphragm is lost and part of the stomach is able to bulge through the diaphragm. This allows the acidic stomach contents to 'reflux' into the oesophagus.



1.



2.

Types of Hiatus Hernia

1. Sliding hiatus hernia
2. Rolling hiatus hernia

> Treatment

To reduce your symptoms, you should consider the following lifestyle changes:

- Being a healthy weight will help to reduce symptoms as it will reduce abdominal pressure.
- Eat smaller meals, with snacks in-between if needed. Avoid eating two to three hours before going to bed.
- Avoid/reduce quantity of foods that may increase acid reflux, for example, spicy or fatty meals and foods that are difficult to digest.
- Avoid, or drink only a moderate amount of alcohol.
- Do not smoke. This includes e-cigarettes.
- Bending, poor posture, abdominal exercise and tight clothes/belts can increase abdominal pressure and cause reflux.
- Bend from the knees when picking items up.
- Wear more loose fitting/comfortable clothes.
- Try elevating the head of your bed by eight to 10 inches by using extra pillows or a wedge under the top part of the mattress. Gravity will help keep stomach acid out of the oesophagus while you are sleeping.



Other treatments

Your Consultant or GP may also suggest the following treatments:

- Some medicines effectively reduce the secretions of the stomach acid, while others increase the muscle strength of the lower oesophagus, thereby reducing acid reflux.
- In most cases your GP or Consultant will try methods of treatment as suggested above before considering surgery. Surgery tends to be reserved for those patients with complications that cannot be handled with medications. Occasionally the more complicated hiatus hernia may require surgery on an emergency basis.

➤ Further information

You can find out more at: <https://patient.info/digestive-health>

➤ Contact

If you have any problems or questions, please contact the day unit via the switchboard on 0141 951 5000. The day unit operates Monday to Friday 7.30am to 8pm but please only telephone the unit between the hours of 8am and 7pm. Outwith these hours you should contact the Senior Nurse via the switchboard as well.

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