Hiatus hernia

A hiatus hernia is where part of the stomach pushes up into the lower chest through a defect in the diaphragm. This makes you more prone for acid to reflux into your oesophagus (gullet) which can cause heartburn and other symptoms. However, a hiatus hernia often does not cause any symptoms. If symptoms do occur, treatment with acid-suppressing medication usually works well.

Understanding the upper gut

The gut or 'gastrointestinal tract' is the tube that starts at the mouth, and ends at the anus. The upper gut includes the oesophagus (gullet), stomach, and duodenum. Food passes down the oesophagus into the stomach. The stomach makes acid which is not essential, but helps to digest food. After being mixed in the stomach, food passes into the duodenum (the first part of the small intestine) to be digested.
The walls of the stomach contain muscle. At the junction of the stomach and the oesophagus there is a thickened area of muscle which is called a sphincter. The sphincter acts like a valve. When food comes down the oesophagus into the stomach, the sphincter relaxes. However, it closes at other times to stop food and acid in the stomach refluxing back into the oesophagus.

The diaphragm is a large flat muscle that separates the lungs from the abdomen. It helps us to breathe. The oesophagus comes through a hole ('hiatus') in the diaphragm just before it turns into the stomach. Normally all of the stomach is below the diaphragm. The muscle fibres in the diaphragm around the lower oesophagus help the sphincter to keep the oesophagus closed to prevent reflux of acid and food.

What is a hernia and what is a hiatus hernia?

- **A hernia** is when part of an organ protrudes (pushes) through a muscular wall that holds it in place. There are different types of hernia. For example, an inguinal hernia is the most common type when part of the lower bowel protrudes through the muscle in the groin.

- **A hiatus hernia** is when part of the stomach protrudes through the diaphragm.

Types of hiatus hernia

There are two main types of hiatus hernia.

- **Sliding hiatus hernia** is the most common type. In this situation the sphincter at the bottom of the oesophagus and the top of the stomach protrude through the hole (hiatus) in the diaphragm. The hernia may slide up and down, in and out of the lower chest. They are often quite small.

- **Rolling hiatus hernia** is less common. In this situation, part of the stomach protrudes up through the hole in the diaphragm next to the oesophagus.
What causes hiatus hernia and how common is it?

Hiatus hernias are common. It is estimated that up to half of people develop a hiatus hernia, usually in middle age. Many are small, and many people with a hiatus hernia do not know they have it as it often causes no symptoms.

The cause of hiatus hernia is not clear. Most cases occur in people over the age of 50. It may be that the diaphragm weakens with age and allows part of the stomach to protrude through the hole in the diaphragm. Factors which increase the pressure in the abdomen such as regular coughing or obesity may increase the risk of developing a hiatus hernia.

(There is a rare type of hiatus hernia which occurs in newborn babies due to a congenital defect of the stomach or diaphragm. This is not dealt with further in this leaflet.)

What are the symptoms of hiatus hernia?

Many people with a hiatus hernia often have no symptoms.

Reflux symptoms: The hernia itself does not cause symptoms. However, if you have a hiatus hernia, the ways which normally prevent stomach acid from refluxing into the oesophagus do not work so well. The sphincter may not work properly, and the normal pressure of the diaphragm on the oesophagus is lost. Therefore, you are more prone for acid in the stomach to reflux (regurgitate) into your oesophagus. The refluxed acid can cause inflammation at the lower part of the oesophagus which can cause one or more of the following symptoms.

- **Heartburn** is the main symptom. It is a burning feeling which rises from the upper abdomen or lower chest up towards the neck. (It is confusing as it has nothing to do with the heart!)

- **Other common symptoms include:** pain in the upper abdomen and chest, feeling sick, an acid taste in the mouth, bloating, belching, and a burning pain when you swallow hot drinks. Like heartburn, these symptoms tend to come and go, and tend to be worse after a meal.

- **Some uncommon symptoms** may occur; this makes the diagnosis of reflux difficult in some cases as the symptoms can mimic other conditions. For example:
  - A persistent cough, particularly at night. This is due to the refluxed acid irritating the windpipe. Asthma symptoms can sometimes be due to acid reflux.
  - Hoarseness
- Severe chest pain develops in some cases (and may be mistaken for a heart attack)

Note: most people with acid reflux do not have a hiatus hernia. It is just that having a hiatus hernia makes you more prone to reflux.

**How is a hiatus hernia diagnosed?**

A hiatus hernia may be diagnosed if you have tests for symptoms of reflux. Endoscopy is the common test. This is where a thin, flexible telescope is passed down the oesophagus into the stomach. This allows a doctor or nurse to look inside. A hiatus hernia may be seen. A special x-ray test called a barium swallow is another way to confirm the presence of a hiatus hernia.

**What is the treatment of hiatus hernia?**

- If you have no symptoms, you do not need any treatment. The hiatus hernia itself causes no harm.

- If you have reflux symptoms, then treatment is the same as any for any other cause of reflux symptoms. Treatment includes antacids and acid-suppressing medicines. [See the leaflet called 'Acid reflux and oesophagitis' for details of treatment.]

- Rarely, a hiatus hernia causes severe symptoms of reflux which are not helped so well with medication. Therefore, an operation is occasionally advised. During this operation the stomach is put back into the correct position, and the weakened diaphragm around the lower oesophagus is tightened.

**What are the possible complications of a hiatus hernia?**

Possible complications may occur if you have severe, long-term reflux of acid into the oesophagus which occurs in some cases. These include:

- **Stricture:** If you have severe and long-standing inflammation it can cause scarring and narrowing (a stricture) of the lower oesophagus. This is uncommon.

- **Barrett's oesophagus:** This uncommon condition is where the cells that line the lower oesophagus change from the usual type. If you develop this condition you have an increased risk of developing cancer of the oesophagus.
• **Cancer of the oesophagus:** The risk of this cancer is increased if you have long-standing, severe acid reflux.

But note: the risk of cancer developing is small, and it has to be stressed that most people with reflux, even those with severe reflux, do not develop Barrett’s oesophagus or cancer.

**Suggested lifestyle changes**

- You may find it helpful to lose weight if necessary
- Raise the head of the bed, by using blocks under the feet
- Avoid heavy meals just before bed time
- Loosen tight clothing including bra’s and belts
- Avoid stooping or heavy lifting after meals

*If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo)*
https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust

© West Suffolk NHS Foundation Trust