

Paraesophageal Hernias: Symptoms, Causes, and Treatment

A paraesophageal hernia is a type of hiatal hernia where part of the stomach pushes through the diaphragm and sits next to the esophagus. Unlike more common sliding hiatal hernias, paraesophageal hernias are less frequent but can pose serious health risks if left untreated.

This blog will explore paraesophageal hernias, their symptoms, causes, and treatment options to help you better understand this condition.

What is a Paraesophageal Hernia?

The diaphragm is a thin muscle that separates the chest cavity from the abdomen. It has a small opening called the esophageal hiatus, through which the esophagus passes to connect with the stomach. In a paraesophageal hernia, part of the stomach slips through this opening and sits next to the esophagus.

Sliding hiatal hernias involve the stomach moving up and down through the hiatus, while paraesophageal hernias keep the stomach fixed in the chest cavity, which can lead to complications.

Types of Paraesophageal Hernias

There are different classifications of hiatal hernias, and paraesophageal hernias typically fall under **Type II, Type III, or Type IV**:

1. **Type I:** Hiatal hernia where the stomach and esophagus are displaced into the thoracic cavity
 2. **Type II:** The stomach herniates next to the esophagus without affecting its position.
 3. **Type III:** Both the stomach and the gastroesophageal junction herniate into the chest, type I&II combined
 4. **Type IV:** Other abdominal organs, such as the intestines or spleen, also herniate into the chest cavity.
-

Symptoms of Paraesophageal Hernias

Many people with paraesophageal hernias may not experience symptoms initially, but as the hernia enlarges, symptoms can develop and include:

- **Chest Pain:** Often mistaken for heart-related issues.
 - **Chronic Cough:** likely leading from silent aspiration, which irritates the airways
 - **Difficulty Swallowing (Dysphagia):** Caused by the stomach pressing on the esophagus.
 - **Reflux or Heartburn:** Stomach acid flowing back into the esophagus.
 - **Shortness of Breath:** Due to the hernia compressing the lungs.
 - **Early Satiety:** Feeling full after eating only small amounts of food.
 - **Nausea and Vomiting:** Sometimes severe enough to cause dehydration.
 - **Stomach Pain or Discomfort:** Especially after eating or lying down.
 - **Complications:** In advanced cases, the hernia can cause bleeding, ulcers, or strangulation (cutting off blood supply to the herniated stomach), which is a surgical emergency.
-

Causes and Risk Factors

The exact cause of paraesophageal hernias is not always clear, but several factors can contribute to their development:

1. **Weakening of the Diaphragm:** Often due to aging or trauma.
 2. **Increased Abdominal Pressure:** Caused by obesity, chronic coughing, heavy lifting, or pregnancy.
 3. **Congenital Factors:** Some individuals are born with an unusually large esophageal hiatus.
 4. **Previous Surgery:** Abdominal or thoracic surgeries can increase the risk of hernias.
-

Diagnosis of Paraesophageal Hernias

Diagnosing a paraesophageal hernia involves a combination of medical history, physical examination, and diagnostic tests:

1. **Imaging Studies:**
 - **X-rays with Barium Swallow:** To visualize the stomach and esophagus.
 - **CT Scans:** Provide detailed images of the chest and abdomen.

2. **Endoscopy:** A camera is passed through the mouth to examine the esophagus and stomach.
 3. **Esophageal Manometry:** Measures pressure and movement in the esophagus.
 4. **pH Monitoring:** Assesses acid reflux in cases where GERD symptoms are prominent.
-

Treatment of Paraesophageal Hernias

Treatment depends on the severity of the hernia, the presence of symptoms, and the risk of complications.

1. Lifestyle Changes

- **Dietary Modifications:** Eating smaller meals, avoiding trigger foods (like spicy or fatty foods), and not lying down immediately after eating.
- **Weight Management:** Reducing abdominal pressure through weight loss.
- **Elevating the Head of the Bed:** Helps prevent nighttime reflux.

2. Medications

- **Antacids, H2 Blockers, or Proton Pump Inhibitors (PPIs):** To manage acid reflux and reduce symptoms of GERD.

3. Surgical Repair

Surgery is typically recommended for symptomatic paraesophageal hernias or those at risk of complications. The procedure may involve:

- **Reducing the Hernia:** Moving the stomach back into the abdominal cavity.
- **Repairing the Hiatus:** Strengthening or reducing the size of the esophageal opening in the diaphragm.
- **Mesh Placement:** To reinforce the repair in some cases.
- **Fundoplication:** Wrapping part of the stomach around the esophagus to prevent reflux.

Surgery is often performed robotically which minimizes recovery time and reduces the risk of complications.

Risks and Complications

Without treatment, paraesophageal hernias can lead to severe complications, such as:

- **Strangulation:** Cutting off the blood supply to the herniated stomach, causing tissue death.
 - **Obstruction:** Blocking food from passing through the digestive tract.
 - **Bleeding or Ulceration:** Due to stomach irritation from prolonged acid exposure.
 - **Aspiration Pneumonia:** Caused by refluxed stomach contents entering the lungs.
-

Recovery and Outlook

Recovery from paraesophageal hernia surgery typically involves:

- A short hospital stay, often 1-2 days for robotic procedures.
- Gradual reintroduction of solid foods over 4-6 weeks.
- Avoiding heavy lifting or strenuous activities for 4-6 weeks.
- Regular follow-ups to ensure the hernia does not recur.

The outlook is generally excellent after surgery, with significant symptom relief and a low risk of recurrence when lifestyle changes are maintained. Postoperative diet is as important as the procedure itself and strict adherence is required.

Final Thoughts

Paraesophageal hernias are less common but potentially more severe than other types of hiatal hernias. Awareness of symptoms and early diagnosis can prevent complications and improve outcomes. If you suspect you may have a paraesophageal hernia, consult a healthcare provider to explore your options.

Surgical advancements have made treatment safer and more effective, offering patients relief and a return to normal activities with minimal disruption. You can regain control of your health and quality of life with the right treatment.