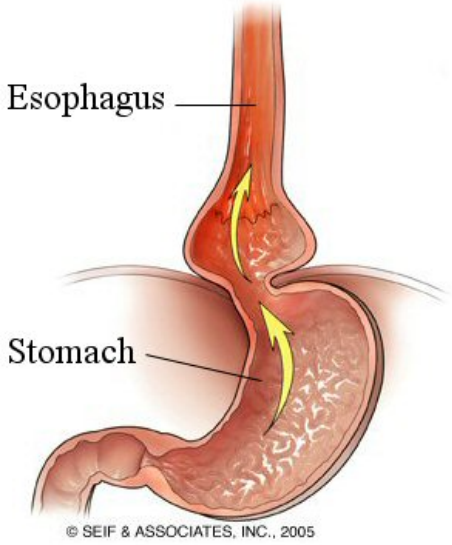
Hiatal Hernia

A hiatal hernia occurs when a part of the stomach slides above the diaphragm. The diaphragm is the thin muscle separating the belly *(abdomen*) from the chest. A hiatal hernia can be something you are born with or develop over time. Hiatal hernias may allow stomach acid to flow back into your *esophagus*, the tube which carries food from your mouth to your stomach. If this acid causes problems it is called GERD (gastro-esophageal reflux disease).



SYMPTOMS

Common symptoms of GERD are heartburn (burning in your chest). This is worse when lying down or bending over. It may also cause belching and indigestion. Some of the things which make GERD worse are:

- Increased weight pushes on stomach making acid rise more easily.
- Smoking markedly increases acid production.
- Alcohol decreases lower *esophageal sphincter* pressure (valve between stomach and esophagus), allowing acid from stomach into esophagus.
- Late evening meals and going to bed with a full stomach increases pressure.
- Anything that causes an increase in acid production.
- Lower esophageal sphincter incompetence.

DIAGNOSIS

Hiatal hernia is often diagnosed with x-rays of your stomach and small bowel. This is called an UGI (upper gastrointestinal x-ray). Sometimes a gastroscopic procedure is done. This is a procedure where your caregiver uses a flexible instrument to look into the stomach and small bowel.

HOME CARE INSTRUCTIONS

- Try to achieve and maintain an ideal body weight.
- Avoid drinking alcoholic beverages.
- Stop smoking.
- Put the head of your bed on 4 to 6 inch blocks. This will keep your head and esophagus higher than your stomach. If you cannot use blocks, sleep with several pillows under your head and shoulders.
- Over-the-counter medications will decrease acid production. Your caregiver can also prescribe medications for this. Take as directed.
- 1/2 to 1 teaspoon of an antacid taken every hour while awake, with meals and at bedtime, will neutralize acid.
- **DO NOT** take aspirin, ibuprofen (Advil® or Motrin®), or other nonsteroidal anti-inflammatory drugs.
- Do not wear tight clothing around your chest or stomach.
- Eat smaller meals and eat more frequently. This keeps your stomach from getting too full. Eat slowly.
- Do not lie down for 2 or 3 hours after eating. Do not eat or drink anything 1 to 2 hours before going to bed.
- Avoid caffeine beverages (colas, coffee, cocoa, tea), fatty foods, citrus fruits and all other foods and drinks that contain acid and that seem to increase the problems.
- Avoid bending over, especially after eating. Also avoid straining during bowel movements or when urinating or lifting things. Anything that increases the pressure in your belly increases the amount of acid that may be pushed up into your esophagus.

SEEK IMMEDIATE MEDICAL ATTENTION IF:

- There is change in location (pain in arms, neck, jaw, teeth or back) of your pain, or the pain is getting worse.

- You also experience nausea, vomiting, sweating (*diaphoresis*), or shortness of breath.
- You develop continual vomiting, vomit blood or coffee ground material, have bright red blood in your stools, or have black tarry stools.

Some of these symptoms could signal other problems such as heart disease.

MAKE SURE YOU:
- Understand these instructions.
- Monitor your condition.
- Contact your caregiver if you are not doing well or are getting worse.

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