

Heartburn and Hiatus Hernia

What is heartburn?

Heartburn is a pain behind the breast bone, often described as 'burning' in quality. Pain can also be felt at the same level in the mid-line of the back. Most people suffer from heartburn at one time or another. In fact, heartburn has nothing to do with the heart - it is a digestive problem. Heartburn is generally related to meals and posture and can often be relieved by remedies for indigestion.

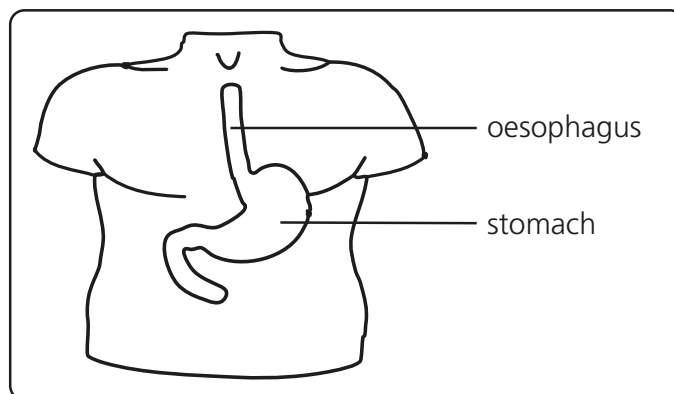
Pain from the heart is also felt in the chest and sometimes in the upper abdomen. There are two kinds of *heart* pain. The first, angina, is a pain in the chest due to a temporary shortage of oxygen being carried in the blood to the heart muscle. Angina should be suspected if the chest pain is brought on by exercise and relieved by rest. The second is the more severe and prolonged pain of a heart attack. A heart attack should be suspected if the pain is felt intensely in the centre of the chest, spreading perhaps to one or both arms (especially the left) and into the lower jaw; or feels like a heavy pressure or is 'vice-like'.

Potentially dangerous confusion can arise when someone neglects their heart pain believing it to be heartburn.

What causes heartburn?

Acid is present in the stomach to digest food. Heartburn occurs when small amounts of this acid rise up into the gullet (oesophagus) - the tube which carries food from the mouth to the stomach. This is called reflux.

The gullet, unlike the stomach, does not have a protective lining. So, when it is exposed to the acid, it can become inflamed and painful.



Why doesn't everyone get heartburn?

At the bottom of the gullet there is a muscle which, by its contraction, acts as a barrier to keep the acid in the stomach. If this doesn't work properly, reflux occurs. The reason why this muscle fails to work properly is not fully understood.

Some known factors that can lead to heartburn include:

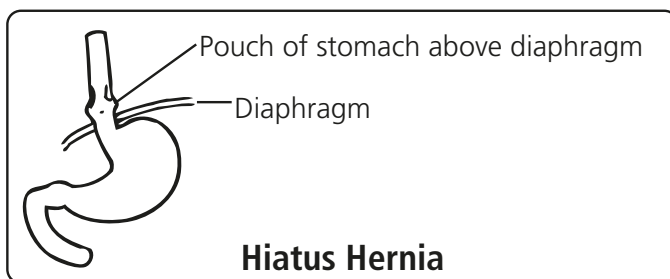
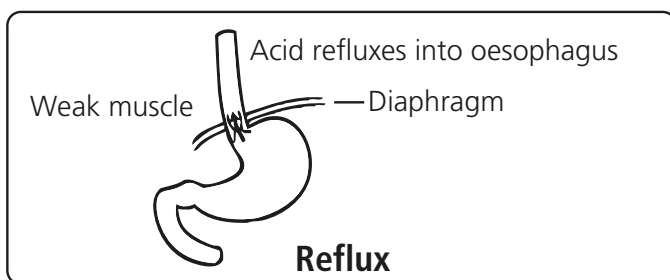
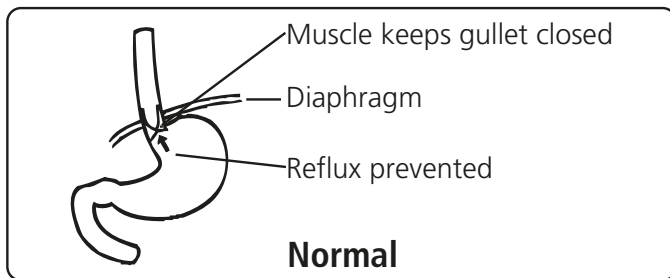
- pregnancy
- smoking
- eating large meals, especially near bedtime
- being overweight
- bending a lot
- wearing tight clothing around the waist

In most of these cases, it is the increased pressure which overcomes the normal muscle contraction and causes heartburn. Smoking, on the other hand, relaxes the muscle around the gullet, with the same result.

What is hiatus hernia?

A sheet of muscle (called the diaphragm) separates the stomach from the chest. If a small part of the stomach rises into the opening where the gullet passes through the diaphragm (called the hiatus), this is called a hiatus hernia.

Many people who suffer from frequent heartburn have a hiatus hernia, which can be shown on an x-ray. However, not everyone with a hiatus hernia suffers from heartburn.



What complications can occur?

If acid reflux leads to inflammation (oesophagitis), the gullet can become scarred and narrowed (stricture). Difficulty in swallowing, especially lumpy foods, may result. If you have difficulty in swallowing, you should consult your doctor.

How can I avoid heartburn?

The most important and helpful aspects of treatment are those which you can do for yourself.

Stop smoking

After a meal, when the stomach is full, smoking increases the chances that you will suffer from heartburn.

Avoid becoming overweight or lose weight

For many patients, weight reduction is the most important remedy. It is worth trying to improve your eating habits. Include more fruit, vegetables and high-fibre foods in your diet. Regular exercise can also help you to lose weight.

Diet

You may find particular foods can make your symptoms worse. These might include: acidic fruit drinks, drinks which are too hot, spirits (such as whiskey and brandy), or fatty and spicy meals. It is better to eat 'little and often', fill but do not over-fill the stomach. Food should be eaten slowly and chewed well.

Sleeping

Let your evening meal digest well before you go to bed. Night-time symptoms can also be reduced by raising the head of the bed on blocks by 6 inches. Gravity helps to keep the acid in the stomach where it should be. Some people are helped by sleeping on their left side.

Posture

Avoid bending from the waist or stooping just after meals. Instead, try and bend from the knees, keeping the back straight. Meals are better taken while sitting on an upright chair rather than slumped in front of the television.

Clothing

Avoid tight belts and underclothes as they increase pressure on the stomach.

Pregnancy

It is common for pregnant women to suffer from heartburn. By eating sensibly and keeping your weight increase within the recommended limits, you can lessen the severity of heartburn.

What medical treatment is available?

Many people who suffer from occasional heartburn take antacids either in tablet or liquid form, which are available from the chemist.

Some antacid preparations relieve symptoms by forming a layer on top of the stomach contents.

If you find that you have to take these medicines regularly, or you don't get any relief, it is best to visit your doctor. He or she can decide if tests are needed to find the cause of the problem.

Your doctor can also prescribe stronger medicine which will reduce or prevent the production of acid in the stomach and allow the inflamed gullet to heal.

Alternative medical remedies are also a possible option but the British Digestive Foundation recommends that you discuss this with your doctor.

What surgical treatment is available?

When symptoms are severe, or there are complications and medical treatment does not help, your doctor may recommend surgery to correct a hiatus hernia and prevent heartburn (reflux). This surgical procedure, called fundoplication, involves replacing the stomach back to its original position under the diaphragm. The surgeon then wraps and stitches the upper few centimetres of the stomach around the oesophagus (gullet) to prevent heartburn (reflux) recurring. This operation can be carried out either by traditional open surgery or by keyhole (laparoscopic) surgery.

This procedure may also be advised for patients without a hiatus hernia who suffer from severe reflux.

For more information please contact The Endoscopy Unit 01392 402400.

This information can be offered in other formats on request, including a language other than English and Braille.

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