HIATAL HERNIA MANY SYMPTOMS | ONE CAUSE

heartburn nausea constipation banic attacks

by Dr. Vikki Petersen, D.C., C.C.N., C.F.M.P.

DO YOU HAVE A HIATAL HERNIA?

I am sharing this information because there is a wide chasm between what traditional medicine and Root Cause Medicine says about how hiatal hernia presents itself and the treatment options available.

Let me give you an example:

Traditional medicine provides the following list of symptoms associated with hiatal hernia:

- 1. Heartburn
- 2. Regurgitation (GERD)
- 3. Throat irritation, due to regurgitation
- 4. Belching
- 5. Nausea or vomiting
- 6. Pain in the chest, considered secondary to GERD

7. Pain in the abdomen



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Compare that list to what we have seen during our decades of experience treating hiatal hernia:

- 1. Heartburn
- 2. Regurgitation (GERD)
- 3. Throat irritation, due to regurgitation
- 4. Belching
- 5. Nausea or vomiting
- 6. Pain in the chest/ chest tightness
- 7. Pain in the abdomen
- 8. Bloating
- 9. Constipation
- 10. Shortness of breath/inability to take a deep breath
- 11. Heart palpitations
- 12. Anxiety
- 13. Panic attacks
- 14. Trouble swallowing
- 15. Interrupted sleep

The first seven symptoms are the same; the remaining eight symptoms, which we find highly prevalent, are never mentioned in traditional medical literature.

"I wasn't able to eat, I was vomiting almost every night. I found out that that I had a hiatal hernia, my diaphragm was too high and my lungs couldn't expand. After one physical therapy session and being on the elimination diet, I felt like I could breathe again. I have been able to sleep through the night without vomiting, I feel like a new person now." - S.B.

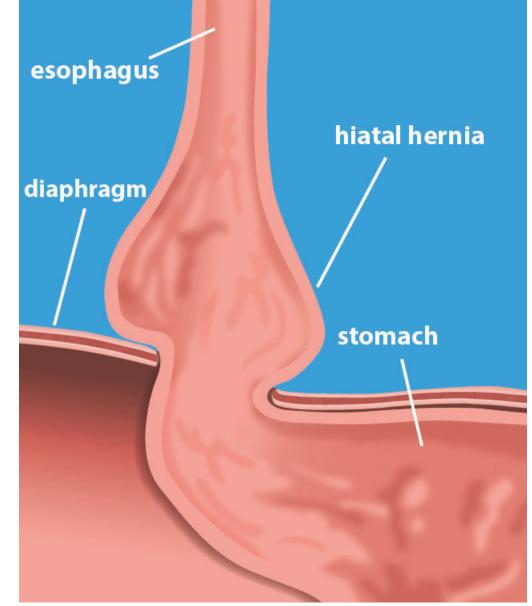
2 WHAT IS A HIATAL HERNIA?

iatal hernia defined:

A hiatus is an opening. A hernia is when something protrudes through an opening abnormally.

A little anatomy:

The esophagus, a tube connecting your mouth to your stomach, joins your stomach just below the diaphragm.



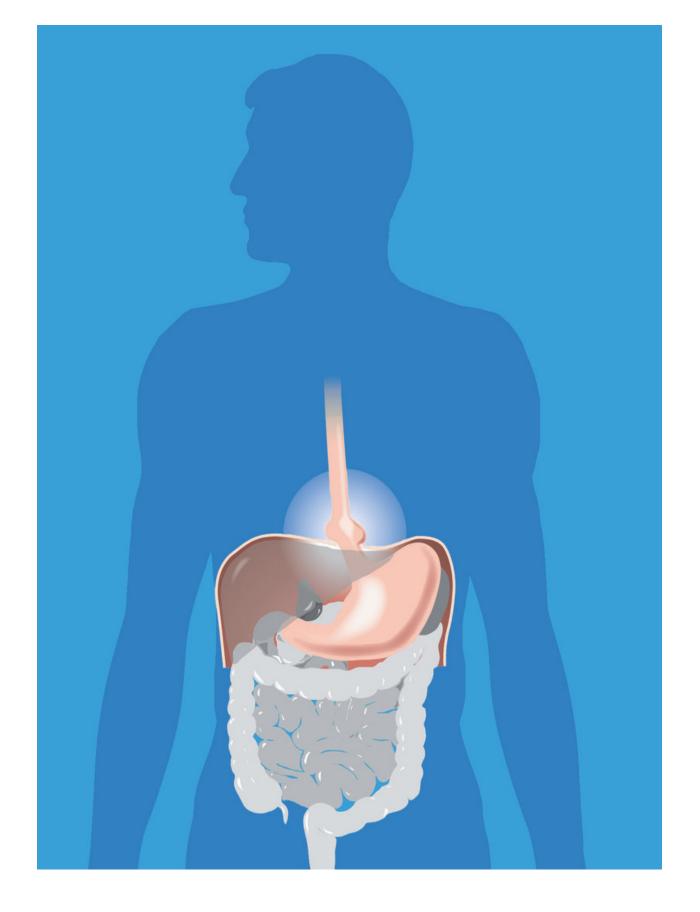
The diaphragm is made up of two dome shaped muscles that separate your chest from your abdomen. The diaphragm is primarily a breathing muscle.

In the case of a hiatal hernia a portion of the stomach is pushed up through the opening in the diaphragm into the chest.

Type I, also known Type II, known as a as a sliding hiatal paraesophageal hiatal hernia is the most hernia, is quite rare and it occurs when a part of the common, stomach is pushed up accounting for close to 95% of all through a different hiatal hernias. opening in the diaphragm. It can be life threatening, but is NOT the type of hiatal hernia we are discussing here.

raditional medicine has this to say about hiatal hernia:

WebMD August 2017: "Many people with hiatal hernia have no symptoms, but others may have heartburn related to gastroesophageal reflux disease, or GERD. ... People with heartburn may experience chest pain that can easily be confused with the pain of a heart attack."



Epocrates.com: Most of these

hernias [referring to the sliding type] cause mild or no

symptoms. The incidence of symptomatic cases of hiatal hernia is closely related to the diagnosis of GERD, as these two conditions are closely (but not completely) correlated.

Epocrates goes on to say: "hiatal hernia, like that of other frequently asymptomatic conditions, appears to depend on the vigor with which the diagnosis is pursued." [Note: it's NOT an asymptomatic condition based on our experience, quite the contrary.]

Emedicine, **Medscape**: Most hiatal hernias are asymptomatic and are discovered incidentally.

Journal of Thoracic Surgery: The junction between the esophagus and stomach becomes incompetent and the stomach's contents can reflux back up the esophagus causing heartburn or GERD. . [JJ Hyun 2011 Journal of Thoracic Surgery -

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3166665/].

The statement is accurate, but it fails to embrace the great diversity of other symptoms we have found caused by this highly misunderstood condition.

Research too revolves solely around the correlation of acid reflux and GERD to hiatal hernia.

In summary:

- Over 50% of the symptoms associated with the condition are missed
- Hiatal Hernia is assumed to have NO symptoms (or just those associated with GERD or reflux).
- A majority of those suffering, therefore, remain undiagnosed.
- Antacids are commonly used but they only act as a temporary band-aid, and long-term will worsen the condition as they can cause constipation, a contributing factor.
- A similar majority are given medications for the wrong problem.

E.g. Many patients with hiatal hernia are put on antidepressants and anti-anxiety medications due their panic attack or rapid heartbeat symptoms, when the root cause of their problem is a purely digestive one. Side effects of these drugs can be life threatening.



The incidence of hiatal is high and worsens with age. A full 60% of individuals over the age of 50 have the condition. If hiatal hernia was infectious, at that percentage it would be a health crisis.

I'd like to argue that it IS a crisis.

gnoring hiatal hernia symptoms is completely unfair to the millions of people suffering with:

- anxiety
- shortness of breath
- unrelenting chest

Traditional medicine states only 9% of those with hiatal hernia are symptomatic, but once again, they are only looking for the traditional symptoms of GERD and acid reflux, as we have mentioned previously.

- and abdominal pain
- heart palpitations
- acid reflux
- heartburn
- inability to sleep lying down (they have to sleep sitting up)
- constipation
- bloating and more.

Individuals are either given no help for their symptoms, or prescribed drugs that mask their symptoms but do nothing to address the true underlying cause of their problem.

If you are having chest pain or pressure, heart palpitations or a panic attack, as an example, traditional medicine will not even look for a hiatal hernia; they don't know the symptoms are related.

CAUSES

Do you experience some of the symptoms on the list? It's likely that you are on a medication to "suppress" those symptoms or you've been told "nothing is wrong", and you'll



just have to live with it. Few people have received the correct diagnosis of hiatal hernia.

Is that your experience? I'd love to hear from you.

Statistically speaking, most people suffering with hiatal hernia fall into one of the two above categories:

- They're taking drugs to mask their symptoms, or
- They're told nothing is really wrong with them and they're "just anxious or depressed".

The next question is, "How did I get it?" and of course, how to treat it... Let's start with the **internal** causes of hiatal hernia. There are several:

FOOD REACTIONS:

First, the very nature of a hiatal hernia stems from a stomach that is in an incorrect location and often in spasm. Not to ask a silly question, but what "goes into" your stomach? Yes, food. Therefore you won't be surprised to learn that a very common cause of hiatal hernia is a food reaction, or food sensitivity.

Of course if every time you ate a certain food you developed pain, reflux, or any of the symptoms we've mentioned, you probably would have figured out the association yourself. Due to the nature of a sliding hiatal hernia moving up and down, symptoms can come and go. Therefore, it isn't always clear cut what's causing the problem and that's why evaluating for the presence of food sensitivity reactions is so critical.



INFECTIONS:

You can also have infections in the stomach and intestines that can be causing symptoms. These infections can be present without causing a fever, though they can cause digestive complaints due to the irritation and inflammation they create. E.g. SIBO, parasites, yeast overgrowth.

CONSTIPATION:

A chronic hiatal hernia can also develop due to the increased abdominal pressure that occurs from chronic constipation. Getting to the root cause of constipation, bloating and gas is vital to resolve a hiatal hernia, thereby normalizing abdominal pressure.

Such treatment involves diagnosing food reactions, the presence of inhospitable bacteria or other organisms in the gut, low stomach acid, decreased enzymes, or a lack of healthy gut microbes. Making such a diagnosis is not difficult when you have the correct specialized testing available.

Now for the **physical** causes of hiatal hernia.

HIGH DIAPHRAGM:

You can have a diaphragm that is elevated, creating many hiatal hernia symptoms.

BREATHING EXCURSION:

Measurement of the diameter of your chest wall with a full deep breath, and upon exhalation, can reveal if the excursion or movement of your diaphragm and chest wall are appropriate or diminished.

WEAK CORE MUSCLES:

Poor tone or weakened abdominal and core muscles can affect the integrity of the upper abdomen and lend itself toward hiatal hernia.

BELLY WEIGHT:

Extra weight in the abdomen can weaken abdominal muscles and lead to hiatal hernia symptoms.

Physical causes continued...

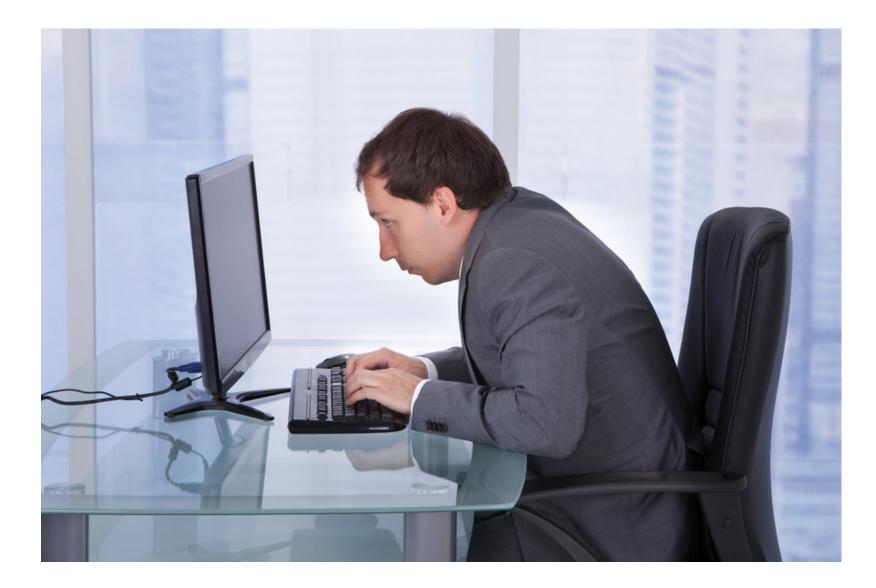
NECK PAIN, TIGHTNESS, "COMPUTER NECK" :

Nerves that orginate from your lower neck travel to the diaphragm and allow it to function normally. Having a history of neck pain, stiffness, an earlier neck injury or poor posture, can factually affect the normal operation of the diaphragm and lead to hiatal hernia.

LOW BACK PROBLEMS:

Your low back can seem far away from your diaphragm but there's a large muscle called the psoas (so-az) that

originates high up the spine, close to the origination of the diaphragm. Which travels down to your lower back and hips. Problems with the psoas, also known as tight hip flexors, can predispose you to diaphragm problems.



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Physical causes continued...

PREGNANCY, CURRENT OR HISTORY OF:

From a structural perspective, being pregnant, or having been pregnant in the past can create weaknesses of the abdominal musculature, potentially setting a woman up for hiatal hernia.

Many women suffer transient symptoms of acid reflux when pregnant that resolve on their own after the pregnancy. However, others continue to suffer with a variety of hiatal hernia-related symptoms that need to be addressed after the birth of the baby.

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Now that we've made the diagnosis, what do we do about it?

Unlike traditional medicine, that only offers antacids and steers away from surgery due to its high failure rate, Root Cause Medicine actually addresses the root cause of the problem.

The best part of our approach? Our patients enjoy an outstanding success rate without the use of drugs or surgery.

Here at Root Cause Medical we are a team of doctors spanning several disciplines:

Internal medicine Functional nutrition Chiropractic Physical therapy

> What's most interesting about hiatal hernia is it epitomizes why we composed our multi-disciplinary team the way we do.

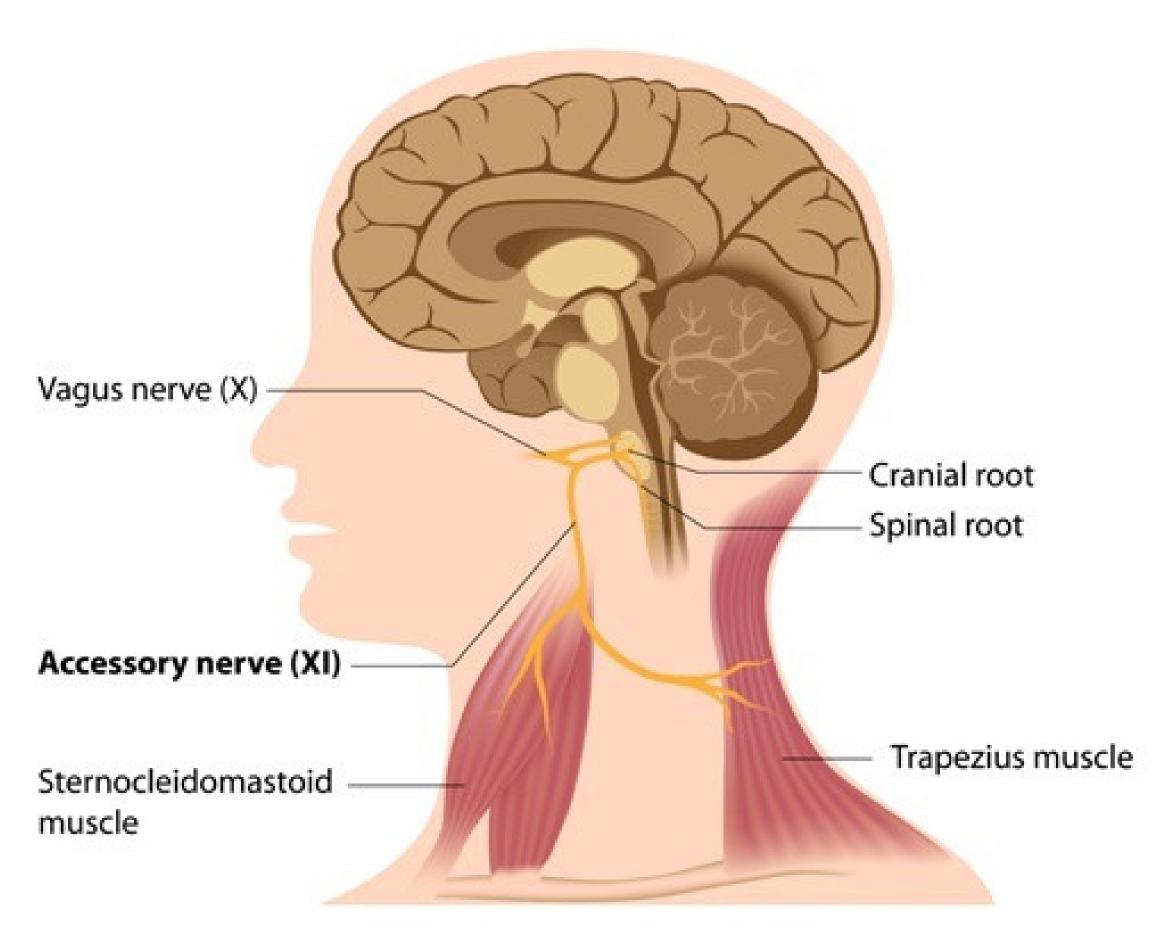
This condition typically requires assistance from all specialties.

Successful treatment addresses the root cause, and there's frequently more than one. Let's review them:

- Food sensitivities are extremely common we find them as one of the main causes to hiatal hernias.
- Infections in the stomach and/or intestines are also common. Remember, such infections can be present without a fever or feeling acutely ill.
 These are treated with specialized nutrition or short-term antibiotics as required.
- Weakness of the abdominal and/or chest musculature is often present, requiring a tailored physical therapy program to normalize.
- The presence of a high diaphragm or inadequate breath excursion as described above, require specialized physical therapy training to treat successfully. Our physical therapy department has this specialty.
- Nerve irritation of the phrenic nerve (the nerve which travels to the diaphragm) in the lower neck is not uncommon and requires chiropractic care to restore normal function and balance.

Irritation of the vagus nerve, the largest cranial nerve in the body, also can create hiatal hernia symptoms. The vagus joins with the phrenic nerve, the nerve traveling directly to the diaphragm. Irritation or over-stimulation of the vagus can affect the heart and cause symptoms such as palpitations, not to mention affecting the sphincter which joins the esophagus to the stomach and prevents reflux of the stomach contents up into the esophagus. Chiropractic care

normalizes the function of these nerves.



www.pulmonaryhypertensionnews.com

• Breaking the spasm between the stomach and diaphragm is a specialized procedure our doctors of chiropractic have been trained in. It is highly effective when done in concert with treatment of the rest of the underlying causes.

For those suffering with shortness of breath, chest pain, heart palpitations, and the anxiety attendant with such symptoms, this procedure can provide great relief, quickly. We have had patients shed tears of joy when they could take their first deep breath in a very long time.

Laboratory tests are required to diagnose the presence of:

- Food sensitivities
- Infections
- Imbalances of the gut microbes (100 trillion organisms reside in the intestine)
- Hormonal imbalance (sex hormones or stress hormones) occurring secondarily to chronic hiatal hernia and its attendant stress.

Do you have symptoms associated with hiatal hernia?

If you do you're in very good company.

If you've been told your symptoms have no cause, that is **incorrect**.

If you've been told your only option is drugs, that too is **incorrect**, based on our experience.

If you've received testing (such as an endoscopy) and been told you do<u>not</u> have a hiatal hernia yet you have many of the symptoms we've discussed, realize that a hiatal hernia is not always evident on an endoscopy. They can slide up and down or be "subclinical", yet still cause symptoms.

Are you tired of your symptoms and want help that involves NO dangerous drugs or surgery?

We will offer you a free phone consultation or inperson consultation to determine what the root cause of your symptoms actually is.

We look forward to hearing from you.

About the Author:

Dr. Vikki Petersen, a Doctor of Chiropractic, Certified Clinical Nutritionist and Certified Functional Medicine Practitioner, is founder of the renowned Root Cause Medical Clinic in Sunnyvale, California.





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For our videos on Hiatal Hernia:

https://www.youtube.com/watch?v=Fd-O-CaxWpO https://www.youtube.com/watch?v=ByQI-sIR9NY

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