

# Images in medicine

## Hiatal hernia

Ebaa Samkari<sup>1,&</sup>, Meshari Mohammed Alharthi<sup>1</sup>

<sup>1</sup>Umm Al Qura University, Makkah, Saudi Arabia

<sup>&</sup>Corresponding author: Ebaa Samkari, Umm Al Qura University, Makkah, Saudi Arabia

Key words: Hiatal hernia, bronchial asthma, chronic pancreatitis

Received: 04/02/2016 - Accepted: 06/02/2016 - Published: 10/05/2016

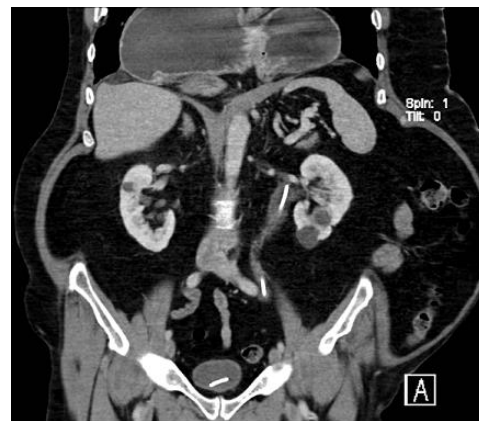
**Pan African Medical Journal. 2016; 24:40 doi:10.11604/pamj.2016.24.40.9037**

This article is available online at: <http://www.panafrican-med-journal.com/content/article/24/40/full/>

© Ebaa Samkari et al. The Pan African Medical Journal - ISSN 1937-8688. This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/2.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

## Image in medicine

61 years old known case of bronchial asthma, chronic pancreatitis, presented with postprandial epigastric cramping abdominal pain and vomiting for one month no history of trauma. Initial evaluation revealed paraesophageal hernia. EGD finding is grade II esophagitis with nodular mucosa and superficial ulceration, Distal part of the funds, body and the Antrum were rolled back into thoracic cavity. Abdominal computed tomography (CT) showed undulating diaphragm and large complex hiatal hernia. The cardia is above the diaphragm. The entire stomach is in the chest, paraesophageal, right and left to esophagus. The patient is symptomatic and surgery done for him.



**Figure 1:** Abdominal computed tomography