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An Ayurvedic Perspective on Hiatus Hernia and its Management: A Case Report

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ABSTRACT:

Hiatus hernia is a structural disorder in which the stomach protrudes into the thoracic cavity through the diaphragmatic hiatus. It is commonly associated with gastroesophageal reflux disease (GERD), heartburn, nausea, and abdominal discomfort. Conventional management includes lifestyle modifications, acid suppression, and surgical procedures. Ayurveda, however, offers a holistic approach that addresses *Dosha* (humoral) imbalance and impaired *Agni* (digestive fire). This report presents the case of a 65-year-old female with symptoms of heartburn, chest pain, constipation, indigestion, and nausea. Based on clinical and Ayurvedic evaluation, the condition was correlated with *Amlapitta* (hyperacidity) and *Vidagdha Ajirna* (acidic indigestion due to Vata-Pitta imbalance). Ayurvedic formulations with *Deepana-Pachana* (carminative-digestive), *Vata Anulomana* (regulation of Vata), and *Pitta Shamana* (pacifying Pitta) actions—such as *Sutshekhar Ras*, *Praval Pishti*, *Kamdudha Ras*, *Shankh Bhasma*, *Amlapittantak Kadha*, and *Shool Vajrini Vati*—were administered with dietary and lifestyle modifications. After treatment, the patient experienced significant symptomatic relief. This case highlights the potential role of Ayurveda in managing hiatus hernia and supports the need for further systematic studies.

KEYWORDS: Hiatus hernia, Ayurveda, *Amlapitta*, *Vidagdha Ajirna*, gastroesophageal reflux, complementary medicine, case report.

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INTRODUCTION:

Hiatus hernia is the herniation of the stomach into the thoracic cavity through the diaphragmatic hiatus, often leading to gastroesophageal reflux. It is more common in elderly individuals and women, and its prevalence is estimated at 10–20% in the adult population [1,2]. Risk factors include obesity, pregnancy, aging, and conditions that increase intra-abdominal pressure [3]. Clinical manifestations may include heartburn, retrosternal pain, regurgitation, dysphagia, and respiratory complaints [4,5]. Conventional management typically involves proton pump inhibitors (PPIs), antacids, lifestyle modifications, and surgery in severe cases. However, long-term use of PPIs carries risks such as nutrient deficiencies, kidney disease, and rebound acid hypersecretion [6,7]. Surgical outcomes may not always be permanent [8]. Ayurveda provides an alternative approach by correcting Agni (digestive fire) and restoring dosha (humoral) balance. In Ayurvedic terms, this condition can be correlated with Amlapitta (acid reflux disorder) and Vidagdha Ajirna (acidic indigestion), where impaired digestion and aggravated Vata and Pitta lead to regurgitation, burning, bloating, and indigestion [9–11]. This case report presents Ayurvedic management of hiatus hernia and demonstrates significant symptomatic improvement.

Case Presentation

A 65-year-old female presented with complaints of heartburn, chest pain, constipation, nausea, and indigestion for 2 years. She had no family history of gastrointestinal illness, hypertension, diabetes, or major systemic illness. The patient was a housewife, with a dietary history of consuming hot, sour, and spicy foods (*Amla Ahara* – acidic foods) along with irregular eating habits.

General Examination:

- Blood pressure: 134/90 mmHg
- Pulse: 74/min
- Weight: 85 kg (obese)
- Systemic examination: Normal

Ayurvedic Examination (Rogi Pariksha):

- **Nadi (Pulse):**
  - *Gati* (movement): *Sarpa gati* (serpentine) and *Manduka gati* (frog-like)
  - *Dosha Nadi:* Vata-Pitta (*Laghu Ruksha Vata Nadi* – light and dry Vata pulse, *Ushna Tikshna Pitta Nadi* – hot and sharp Pitta pulse)
  - *Panchatmak Dosha Nadi: Pachak Pitta* (digestive Pitta), *Saman Vayu* (regulatory Vata), *Udan Vayu* (upward-moving Vata)
  - *Dhatu Nadi:* Rasa (plasma), Rakta (blood), Mamsa (muscle)
  - *Avyava Nadi:* Superficial – Hridaya (heart), Deep – Amashaya (stomach)
- **Agni:** *Mandagni* (weak digestion)
- **Mala (Stool):** *Malavastambha* (constipation)
- **Mutra (Urine):** Normal
- **Jivha (Tongue):** *Saam* (coated)
- **Akruti (Build):** Obese
- **Bala (Strength):** Moderate
- **Abhyavaran Shakti:** Moderate intake capacity
- **Jaran Shakti:** Decreased digestive power
- **Koshtha (Bowel):** *Krura* (hard bowel)
- **Prakruti:** Kapha-Pittaja
- **Abdominal examination:** Mild swelling at epigastrium with tenderness

Samprapti Ghatak (Pathogenesis):

- **Dosha:** Vata, Pitta

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- **Dushya:** Rasa (plasma), Rakta (blood), Mamsa (muscle), Anna (food)
- **Srotodushti:** *Sanga* (obstruction), *Vimarg Gamana* (displacement), *Ati Pravritti* (excessive activity)
- **Vyadhi Udbhava Sthana:** *Amashaya* (stomach)
- **Vyadhi Sanchar Sthana:** Anna Vaha Srotas (food channels), Rasa Vaha Srotas (plasma channels), Purisha Vaha Srotas (fecal channels)
- **Vyadhi Adhishthana:** *Amashaya* (stomach), Grahanashaya)
- **Vyakti Sthana:** Anna Vaha Srotas, Amashaya

Endoscopic examination confirmed the diagnosis of hiatus hernia.

Informed Consent: Written informed consent was obtained from the patient for publication of this case report.

Treatment

Medicines Prescribed:

Medicine Combination	Dose	Frequency	Anupan (Vehicle)	Timing
Sutshekhar Ras + Praval Pishti + Kamdudha Ras + Shankh Bhasma	250 mg each	BD	Ghee	Before meals
Amlapittantak Kadha	20 ml	BD	20 ml water	After meals
Shool Vajrini Vati	2 tablets	BD	Warm water	After meals

Lifestyle and Diet Advice (Pathya-Apathya):

- **Pathya (wholesome):** *Moong dal khichdi* (light rice-lentil preparation), *chaas* (sweetened buttermilk), *elaichi banana* (cardamom banana), *khadi shakkar* (unrefined sugar)
- **Apathya (unwholesome):** Avoid heavy, sour, and spicy foods; avoid straining during defecation; elevate head while sleeping; reduce physical and emotional stress.

Duration of therapy: 6 weeks, with follow-up every 15 days.

Results and Observation

Symptom Improvement (Severity Score 0–3):

Symptom	Before Treatment	After Treatment
Stomach pain	3	1
Nausea	2	1
Heartburn	3	1
Constipation	2	1
Indigestion	3	1

The patient experienced significant symptomatic relief within 6 weeks of treatment.

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DISCUSSION:

Hiatus hernia is associated with structural weakness of the diaphragm and increased intra-abdominal pressure [1,3,4]. Lifestyle and dietary factors play a major role in symptom severity [5,12]. Conventional management often provides temporary relief but requires long-term drug use or surgical interventions, each associated with potential drawbacks [6–8]. Ayurveda addresses the root cause by correcting *Agni* and pacifying aggravated *doshas* [9–11].

In this case, Ayurvedic formulations acted synergistically:

- Deepana–Pachana (digestive-carminative): Sutshekhar Ras, Pippali, Maricha, Sonth improved digestion and reduced Agnimandya (weak digestion)[13].
- Pitta-Shamana (Pitta pacifying): Praval Pishti, Shankh Bhasma, Kamdudha Ras reduced heartburn and acid reflux [14].
- Vata-Anulomana (regulating Vata): Shool Vajrini Vati and lifestyle measures improved bowel regulation [15].

Thus, treatment addressed *Samprapti Ghatak* (pathogenetic factors) by pacifying Vata-Pitta, correcting *Agni*, and preventing further complications. Similar outcomes have been reported in Ayurvedic management of gastrointestinal disorders, though high-quality clinical trials remain limited [16,17].

CONCLUSION:

This case highlights the potential of Ayurvedic therapy in providing effective symptomatic relief in hiatus hernia. The management focused on addressing Agni Dushti (digestive dysfunction) and restoring Dosha balance, which are considered central to the pathophysiology of the condition in Ayurveda. The use of herbal-mineral formulations, tailored to the patient's constitution and disease presentation, along with dietary regulation (Pathya) and lifestyle modifications, contributed to improvement in heartburn, regurgitation, and epigastric discomfort, thereby enhancing overall quality of life. The integrative approach emphasizes holistic care, targeting not just the mechanical or symptomatic aspects of hiatus hernia but also the underlying metabolic and digestive imbalances. The case underscores the safety, tolerability, and complementary value of Ayurvedic interventions alongside conventional therapy, particularly in patients seeking non-invasive management strategies. However, to establish robust evidence, larger prospective clinical studies and randomized trials are essential. Such studies would help in validating efficacy, standardizing treatment protocols, and optimizing dosage regimens for broader clinical application. In conclusion, Ayurvedic management offers a promising complementary approach for hiatus hernia by integrating herbal therapy, dietary guidance, and lifestyle measures, supporting symptomatic relief and long-term digestive health.

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