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(ref your email 25.03.25)

[REDACTED]
Coroners Office
Coroners Service

By email only: [REDACTED]

Dear Sarah

BSG Response to Coroners' Regulation 28 Prevention of Future Deaths Report on Hiatus Hernia

Thank you for bringing to our attention the circumstances leading to the death of Mr Thomas Glover. We understand that he was a patient who developed multi-organ failure and died after likely delayed surgical intervention for a para-oesophageal hiatus hernia.

Hiatus hernia is a common condition with estimates suggesting that up to a third of people aged over 50 may have a hernia. Whilst the majority of people have the more common, type I or 'sliding' type of hiatus hernia, around 5% have a 'para-oesophageal' hernia (types II-IV). Hiatus hernias typically cause acid reflux and heartburn. Whilst severe complications are still rare, para-oesophageal hernias are at significantly higher risk of developing complications such as strangulation, bleeding or incarceration. Patients with these complications may present acutely and may need prompt surgical intervention.

This matter has been discussed within the Oesophageal section of the BSG, including both surgical and medical colleagues.

Following consideration of the Regulation 28 Report, the stated concerns around Mr Glover's care appear to centre around: -

- Lack of awareness amongst non-gastroenterology specialists of the two different types of hiatus hernia and the relative risks posed,
- Paucity of NHS England patient information regarding the symptoms and potential complications of para-oesophageal hiatus hernia,
- Lack of awareness amongst affected patients of their increased risk of complications.

The British Society of Gastroenterology ("The Society") currently has no published guidance on the diagnosis and treatment of Hiatus Hernia. Nor was the Society consulted on the referenced patient information provided by NHS England. However, it is the view of the Society that hospital emergency staff, especially non-GI specialists should be aware of the potential for hiatus hernias (of any kind, as the differentiation between sliding and para-oesophageal hernias is often not made at diagnosis) to develop complications such as ischaemia or strangulation and patients with a known hiatus hernia presenting with concerning symptoms should be reviewed by an appropriate specialist as a matter of urgency.

The Coroner may be minded to send a Regulation 28 Prevent of Future Deaths report to the Royal College of Emergency Medicine (RCEM). The Coroner may also be minded to send a Regulation 28 Prevent of Future Deaths report to NHS England concerning the content of its website guidance.

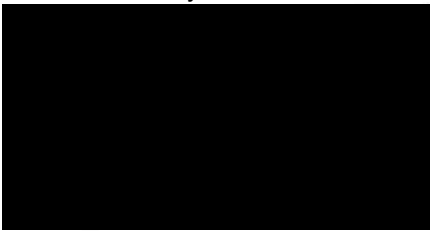
The Society agrees that patients diagnosed with a hiatus hernia of any kind, but especially a para-oesophageal hernia, are told to be aware of potential symptoms indicating a complication such as strangulation or ischaemia. These symptoms might include: -

- Significant Chest pain
- Significant Epigastric pain
- Dysphagia
- Shortness of breath
- Significant early satiety

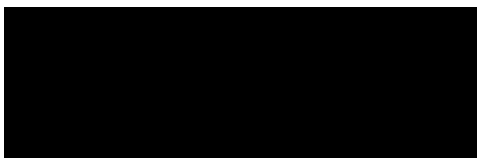
Whilst The Society is not a patient-facing Charity, we will work with Guts UK, a national charity for the digestive system, to develop a patient information leaflet for hiatus hernia, highlighting the need for extra vigilance following diagnosis of a para-oesophageal hernia.

Thank you for bringing this matter to our attention.

Yours sincerely



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