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The diaphragmatic hernia-anatomical and clinical aspects

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A diaphragmatic hernia occurs when one or more of the abdominal organs move upward into the chest through a defect (opening) in the diaphragm. It can be congenial or won. There are two types of diaphragmatic hernias: Morgagni hernia (retro-costoxifoidea) and the bochdalek hernia (postero-lateral). Prenatal diagnosis is done exclusively by 3D sonography and the postpartum one by the X-ray as the first intention. The confirmation of the diagnosis is made with the digestive tube's radiography through the contrast substance with frontal and sagittal reconstructions or MRI (also to highlight the discontinuity of the diaphragm). The traumatic hernia may result from injuries, height drops, difficult and prolonged labor, with diaphragm rupture, penetration of one or more abdominal organs into the chest, with compression of the lungs and heart and cardio disturbances – constant breathing. The treatment of diaphragmatic hernias is surgical, both in recent hernias, by removing the respiratory disorders, as well as in latent phase hernias to prevent a dramatic complication. Operative intervention may be urgent or timed. The diaphragmatic hernia is a severe disease which can endanger the patient's life if he is not getting the specialized treatment.

Biography

Bianca-Maria Corozel is currently studying Medicine at University of Oradea - Faculty of Medicine.

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