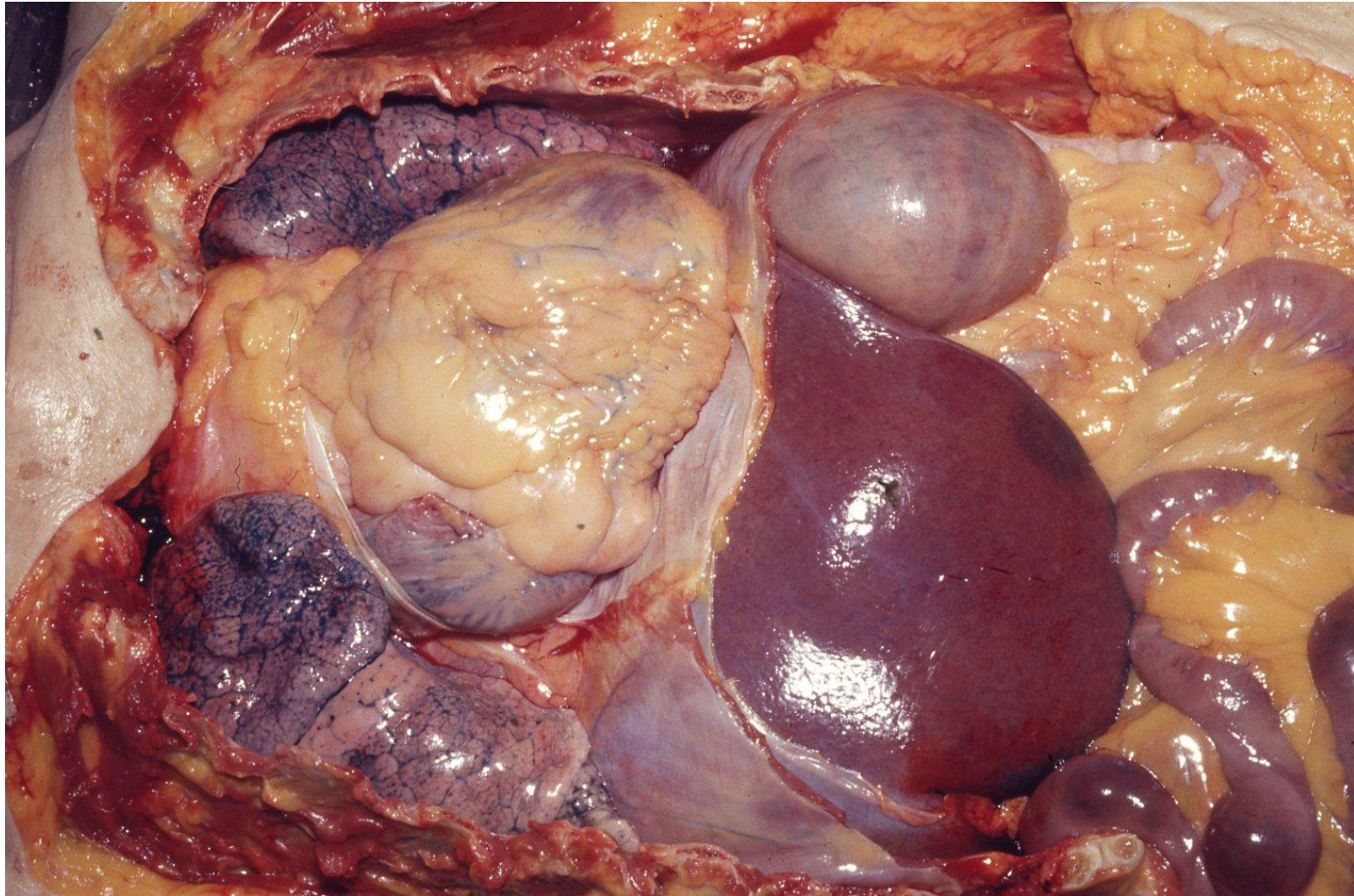


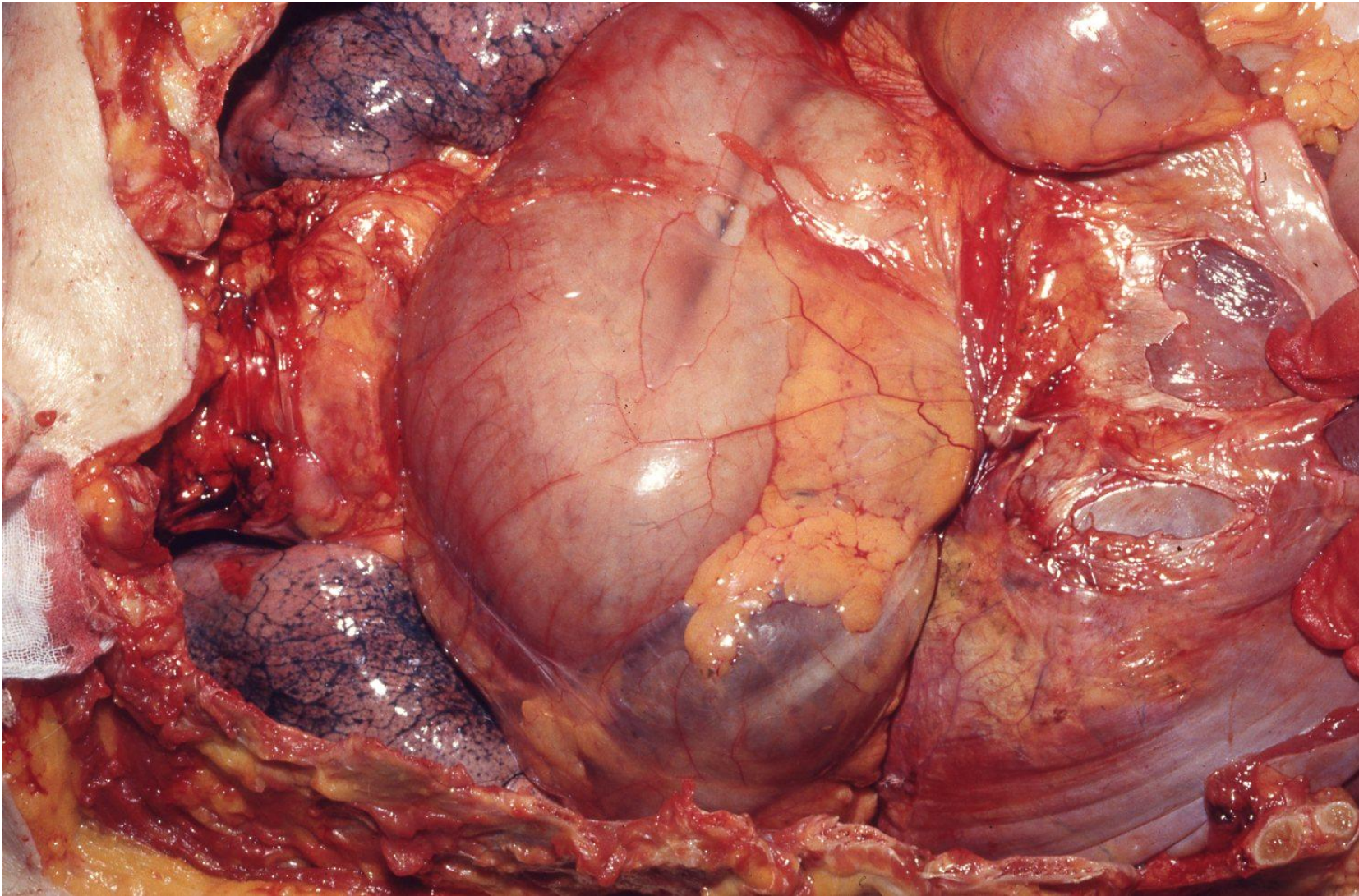
Hiatal hernia, advanced

A 78-year-old female patient died of advanced hiatal hernia. The patient received surgery for prolapse of the uterus and rectum 10 years ago. She complained of heartburn for 8 years. Brain infarction happened 3 years ago, and right hemiparesis and aphasia persisted to leave her bedridden. Dyspnea worsened 3 days ago, and respiratory and heart failure led her to death. At autopsy, the stomach, transverse colon and omentum were massively herniated through the esophageal hiatus into the thoracic cavity, as paraesophageal hiatal hernia. Compression of the heart and lungs by the herniated abdominal organs accelerated heart and respiratory failure in the present aged case. The esophagus reveals extensive reflux esophagitis. Such a marked laxity of the esophageal hiatus may happen in the elderly with a prolonged bedridden state.

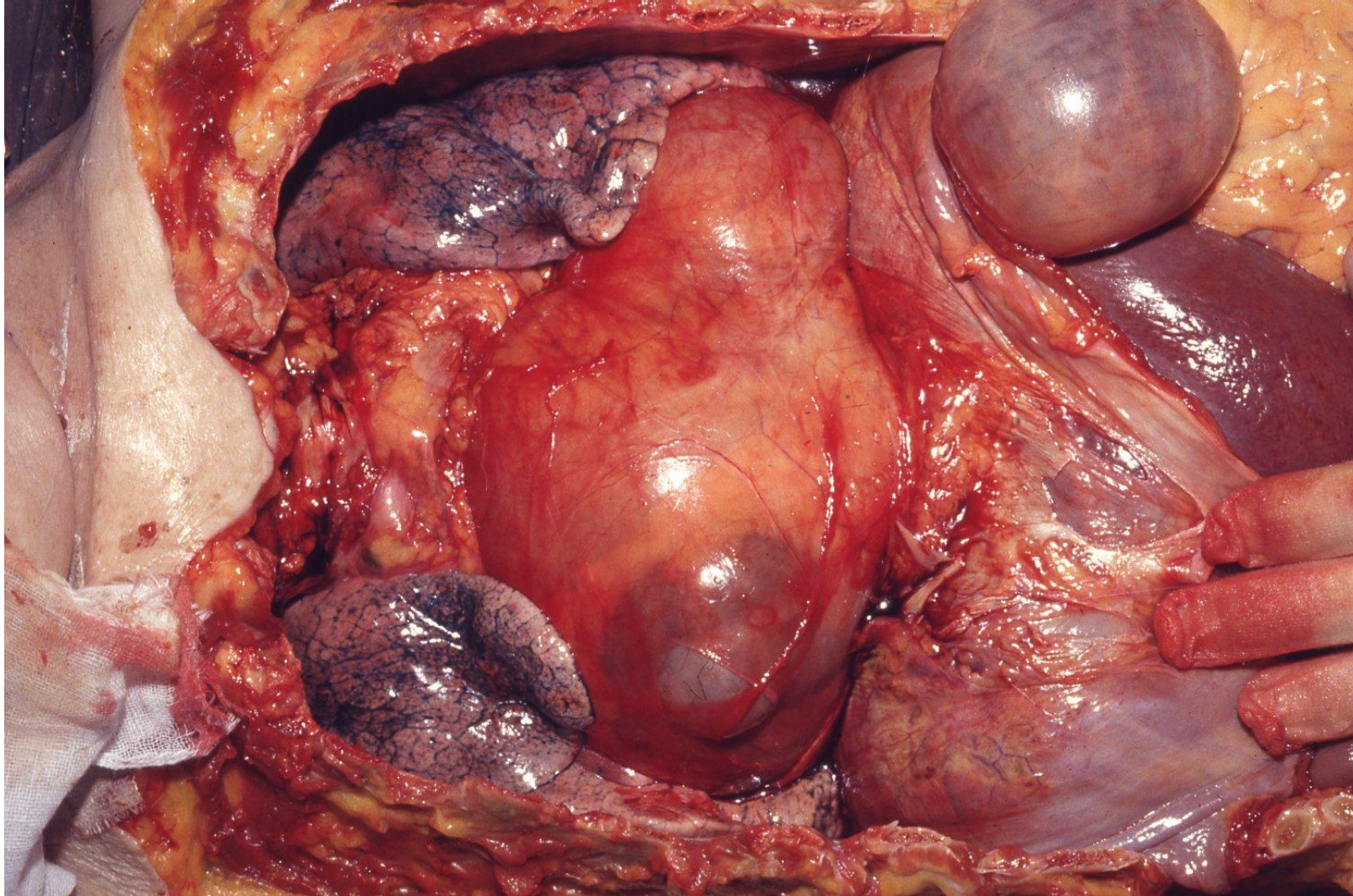
Ref.: Janssen W, et al. Death from paraesophageal hiatus hernia: post-mortem assessment and forensic relevance. Leg Med (Tokyo). 2003; 5(Suppl 1): S267-S270. doi: 10.1016/s1344-6223(02)00146-3



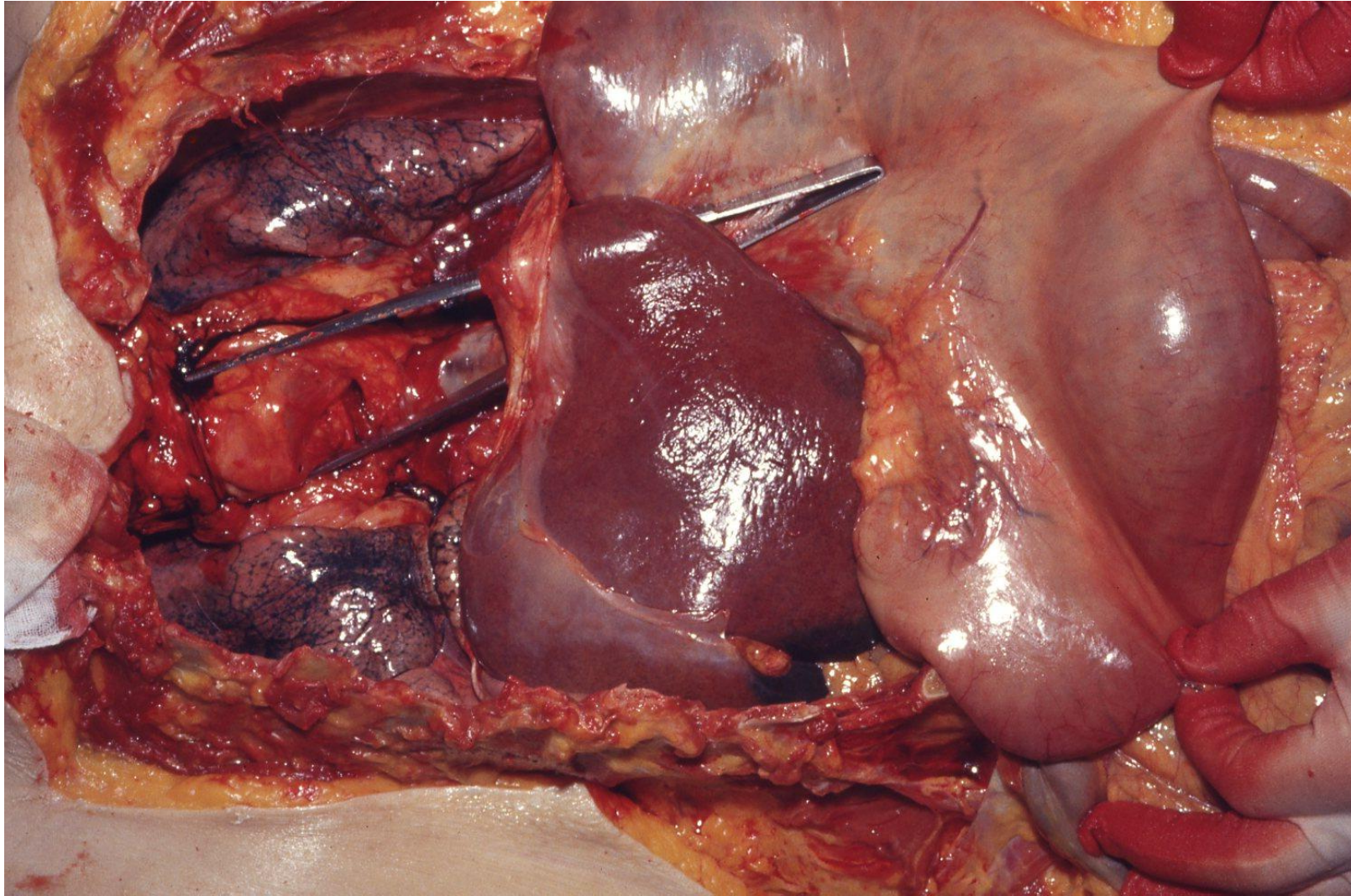
Advanced hiatal hernia seen in a 78-year-old bedridden female patient with a history of cerebral infarction. At autopsy, the heart in the thoracic cavity is compressed anteriorly, Note part of the dilated stomach in the abdominal cavity. Macro-1



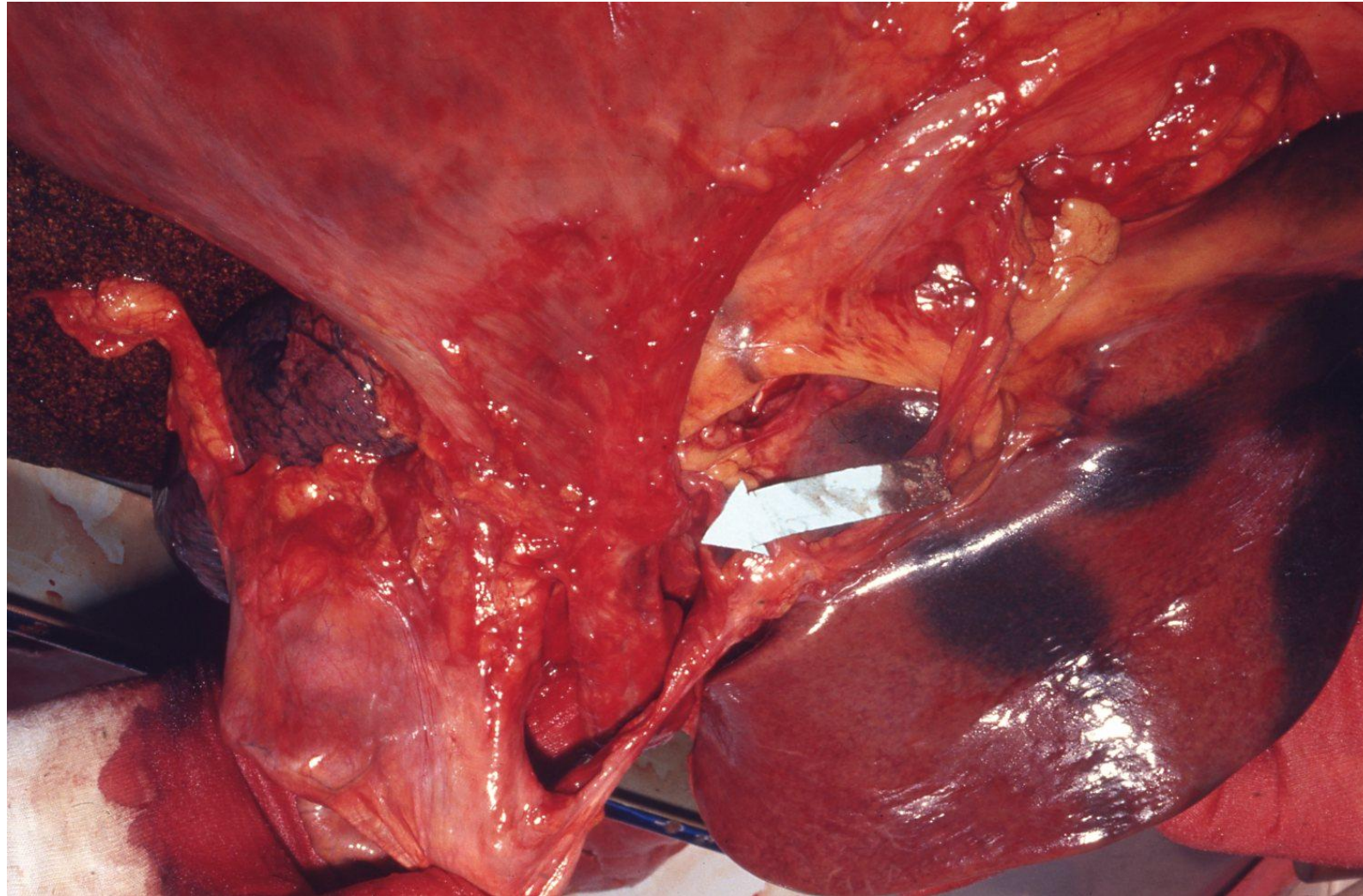
Advanced hiatal hernia seen in a 78-year-old bedridden female patient with a history of cerebral infarction. After removal of the heart, the stomach, transverse colon and omentum are massively herniated into the retromediastinal space. Compression of both lungs is evident. Macro-2



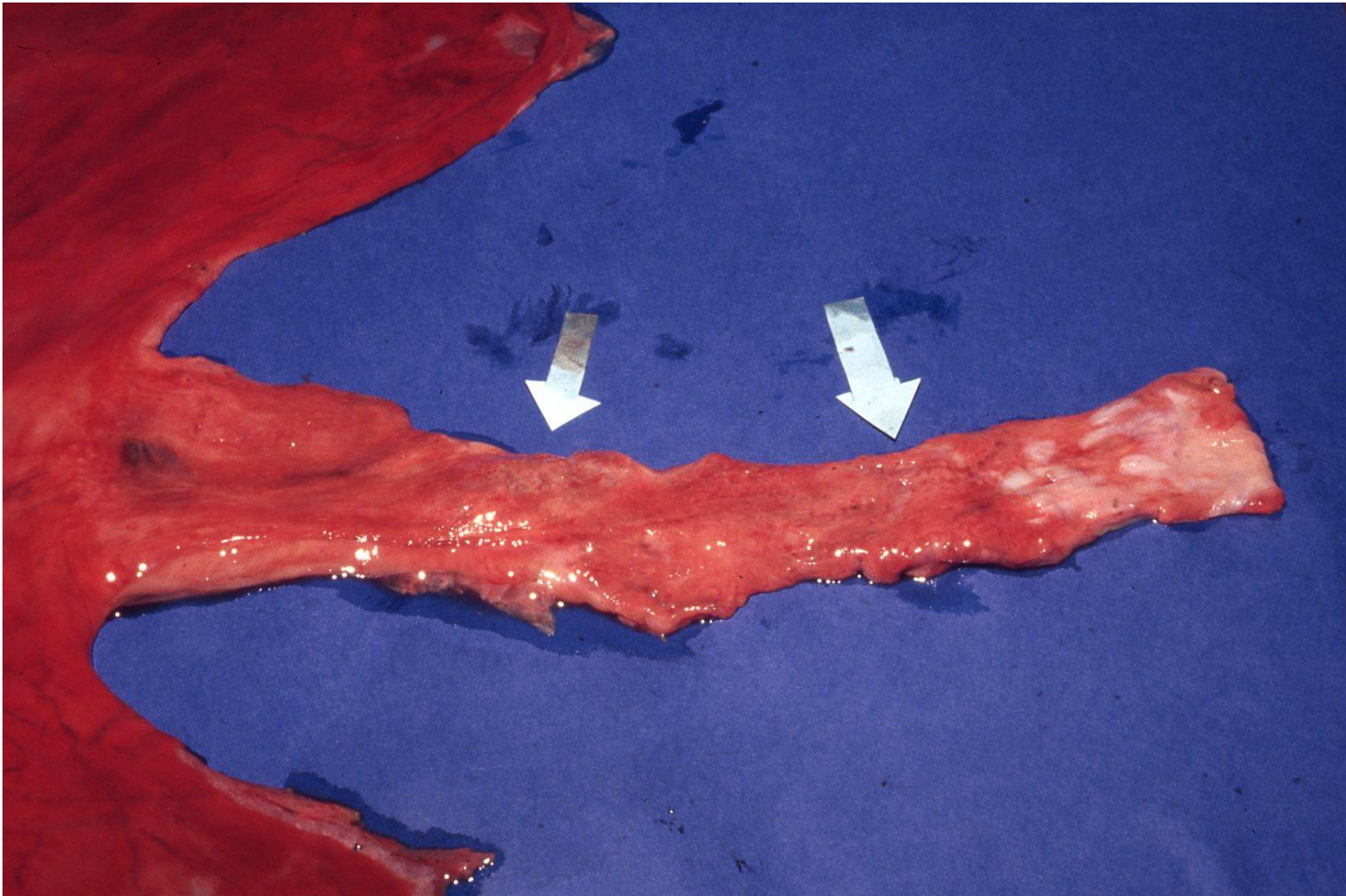
Advanced hiatal hernia seen in a 78-year-old bedridden female patient with a history of cerebral infarction. After removal of the heart, the dilated stomach has massively been herniated into the retromediastinal space. Compression of both lungs is evident. Macro-3



Advanced hiatal hernia seen in a 78-year-old bedridden female patient with a history of cerebral infarction. After removal of the heart, a markedly widened hernia hole is shown by a tweezer. The herniated stomach was easily returned to the abdominal cavity. Compression of both lungs is evident. Macro-4



Advanced hiatal hernia seen in a 78-year-old bedridden female patient with a history of cerebral infarction. After removal of the heart, a large hole of esophageal hernia is shown by an arrow. Macro-5



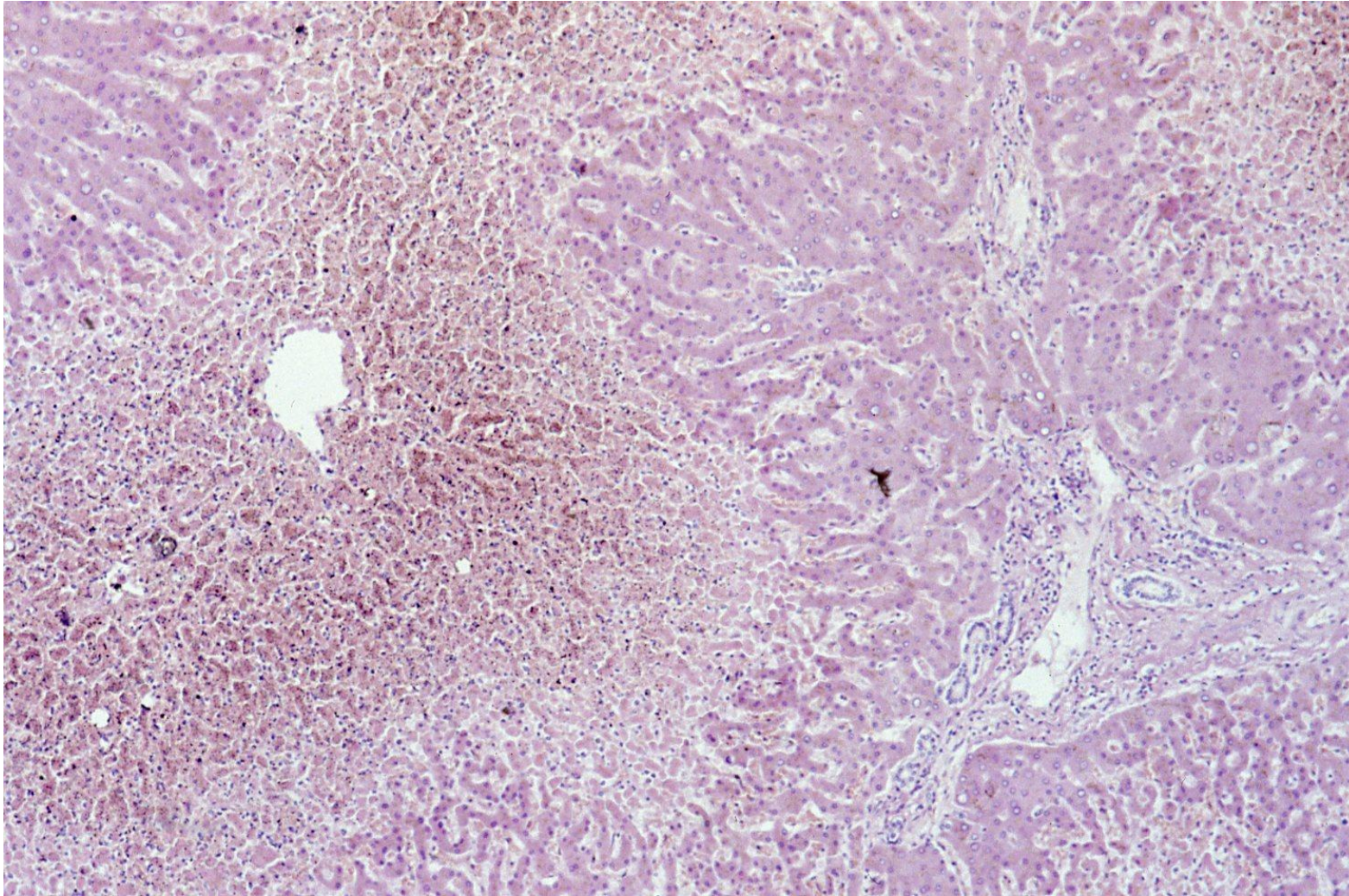
Advanced hiatal hernia seen in a 78-year-old bedridden female patient with a history of cerebral infarction. The esophagus reveals extensive reflux esophagitis. Diffuse erosive change is evident as arrows indicate. Macro-6



Advanced hiatal hernia seen in a 78-year-old bedridden female patient with a history of cerebral infarction. Both lungs show marked atelectasis. An arrow indicates a calcified old tuberculous nodule. Macro-7



Advanced hiatal hernia seen in a 78-year-old bedridden female patient with a history of cerebral infarction. The liver shows central congestive necrosis particularly beneath the capsule. Macro-8



Advanced hiatal hernia seen in a 78-year-old bedridden female patient with a history of cerebral infarction. The liver microscopically shows central congestive necrosis particularly, representing acute heart failure. H&E