

Acute gastric volvulus in a patient with hiatus hernia: a rare case report

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Background: Acute gastric volvulus is a rare but potentially life-threatening condition that requires prompt recognition and management. Its non-specific clinical presentation often poses diagnostic challenges, particularly in patients with predisposing anatomical anomalies such as a hiatus hernia.

Case Presentation: We report the case of a 48-year-old female who presented with a 24-hour history of sudden-onset, continuous upper abdominal pain and vomiting. Her medical history included asthma and gastritis secondary to a known hiatus hernia. Examination revealed upper abdominal tenderness and bi-basal crepitations, predominantly on the right side. Laboratory investigations showed elevated inflammatory markers, including a white cell count of 19.5 (neutrophils 16.9) and a CRP of 320. A contrast-enhanced CT scan confirmed a large hiatus hernia complicated by gastric volvulus, along with a right lower lobe pneumonia suggestive of aspiration. The patient was managed conservatively with nasogastric decompression, intravenous fluids, and antibiotics and was referred for surgical evaluation.

Conclusion: This case highlights the importance of maintaining a high index of suspicion for gastric volvulus in patients with upper abdominal pain and a history of hiatus hernia. Early imaging and multidisciplinary management are critical for optimal outcomes. Given its rarity and variable presentation, this case contributes to raising awareness among emergency and surgical teams.

Keywords: Abdominal pain, hiatus hernia, gastric volvulus.