

EAES Multidisciplinary Rapid Guideline: systematic review, meta-analysis, GRADE assessment and evidence-informed recommendations on the surgical management of paraesophageal hernias

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Standards and Guidelines

Oesophagus

Stomach & H. Pylori

Surgery

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An interdisciplinary European panel developed evidence-based clinical practice recommendations for the management of paraesophageal hernias using GRADE methodology and structured evidence-to-decision frameworks.

KEY POINTS

- The panel suggests surgery over conservative management for asymptomatic or minimally symptomatic paraesophageal hernias (conditional recommendation), but recommends conservative management over surgery in frail patients (strong recommendation).
- For hiatal closure in paraesophageal hernia repair, the panel suggests mesh over sutures (conditional recommendation).
- The panel suggests fundoplication over gastropexy in elective paraesophageal hernia repair, but suggests gastropexy over fundoplication in patients with cardiopulmonary instability requiring emergency repair (conditional recommendations).
- The guideline applies to adult patients with moderate to large type II to IV paraesophageal hernias with at least 50% of the stomach herniated to the thoracic cavity, and conditional recommendations require joint decision-making between surgeon and patient.

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