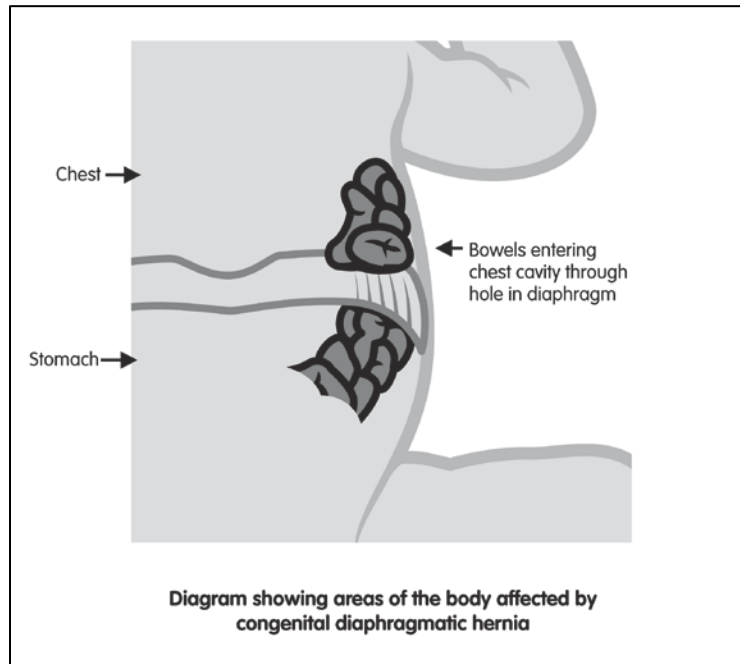


## Congenital diaphragmatic hernia



A congenital diaphragmatic hernia (CDH) is a hole in the diaphragm from one inch to several inches across that can result in the bowels entering the chest cavity through the hernia and preventing the lungs from growing.

The diaphragm is the sheet of muscle inside the body that separates the chest (containing the lungs) from the stomach (containing the bowels, liver etc).

CDH usually occurs on the left side of the chest. The cause of CDH is unknown.

### Diagnosis

CDH is usually diagnosed by seeing the stomach and some of the bowels in the chest area on an ultrasound scan. CDH can be associated with other problems, so it's

important to carry out other checks, which may involve taking a sample of amniotic fluid and a detailed scan of your baby's heart.

CDH can cause an increase in the amniotic fluid around your baby which may lead to an early delivery.

It is a serious condition. Overall 85 per cent of those diagnosed before birth may die before or after delivery, but of those with no other problems, around 50 per cent survive.

## **What happens at the delivery?**

You should be able to deliver your baby in the normal way unless there are other reasons for requiring a caesarean section.

Most babies have breathing difficulties at birth and will require immediate support for this. In severe cases, this may not be successful and your baby may die within hours. Surgery will usually be delayed until your baby's lungs are strong enough. This may take two-three weeks. During this time your baby will receive intensive care.

## **Surgery**

The surgery is carried out through an incision on the stomach. The bowel is pulled down and the diaphragm repaired. If the hole in the diaphragm is big, there may be a need to use an artificial patch to repair it.

Your baby will still require help with breathing after surgery, so intensive care will continue. This may be needed for several weeks.

## **Can I feed my baby?**

Most babies will need drip feeds (parenteral nutrition) through a long-line. This is usually placed in a small vein in your baby's arm or leg and fed through into a large vein. Sometimes an operation under anaesthetic is necessary to insert the line directly into a large vein. Once recovered, your baby should be able to feed normally.

## **What are the long term effects and after care?**

There may be no long-term effects at all. However, some babies may grow up suffering from chronic lung problems. This can result in repeated hospital admissions with respiratory infections. These babies can also have feeding problems.

Following discharge from the unit, there will be regular check-ups in order to monitor your baby's progress.

### **More information about Bliss and its services**

Further advice, support and information can be requested by phoning our Family Support Helpline on freephone **0500 618140**. The line is open from 9am to 9pm, Monday to Friday. You can also email us at [enquiries@bliss.org.uk](mailto:enquiries@bliss.org.uk)