



Education

High Blood Pressure During Pregnancy (Preeclampsia)

In this discussion of preeclampsia you will learn about the effect of high blood pressure during the late stages of pregnancy. You will also learn about the symptoms and treatment of preeclampsia.

What is preeclampsia?

Preeclampsia is a condition of high blood pressure and other changes that may occur after the 20th week of pregnancy. When you have preeclampsia, your blood pressure goes up, you retain water, and there is protein in your urine. It is also called toxemia or pregnancy-induced hypertension (PIH).

Preeclampsia may be mild or severe. Severe preeclampsia affects the mother's blood system, kidneys, liver, brain, and other organs. It can cause serious problems for the mother and the baby. Sometimes, but very rarely, it causes death. If convulsions occur, the disease is called eclampsia.

How does it occur?

The cause of preeclampsia is not known. About 6 to 8% of pregnant women have preeclampsia. It is more likely to occur during first pregnancies than later pregnancies and in women less than 25 years old or over 35 years old. Women who have chronic hypertension, kidney disease, or diabetes, or who are pregnant with more than 1 baby, also have a greater risk of preeclampsia.

What are the symptoms?

If you have mild preeclampsia, you may not have any symptoms and may feel perfectly well. You should go to all prenatal checkups so your health care provider will be able to spot the condition quickly by measuring your blood pressure.

The main symptom of mild preeclampsia is puffiness or swelling of the hands and face (also called edema).

Additional symptoms of severe preeclampsia include:

- sudden weight gain (1 pound a day or more)
- blurred vision
- severe headaches
- dizziness
- intense stomach pain
- nausea and vomiting
- urinating less than a pint in 24 hours
- shortness of breath.

In severe cases, convulsions may occur. When this happens, the condition is called eclampsia and your health care provider should be called right away.

How is it diagnosed?

Your health care provider will measure your blood pressure and test your urine at each prenatal checkup. You will have blood tests to confirm the diagnosis.

How is it treated?

Treatment depends on how close you are to your due date. Delivery of the baby is the best treatment. If your due date is near and your baby has developed enough, your provider may decide to start your labor early and deliver the baby before the due date. Or you may have surgery (a C-section) to deliver the baby.

If your baby has not developed enough and the preeclampsia is not too severe, you will need to:

- Rest in bed, lying on your left side as much as possible to take the weight of the baby off your major blood vessels.
- Have more frequent checkups.
- Eat less salt.
- Drink plenty of water.
- See your provider for additional checkups, which may include more frequent ultrasound scans and other tests of the baby's health.

If your symptoms become more severe, you may need to stay in the hospital. You will be given medicine to lower your blood pressure. You will probably have blood tests and various other tests to check your condition and the health of the baby.

How long will the effects of preeclampsia last?

The symptoms of preeclampsia last until 3 to 7 days after the baby is born.

When should I call my health care provider?

Call your provider right away if:

- You have swelling of your hands, feet, or face.
- You have changes or problems with your vision.
- You have severe headaches.
- You have nausea and vomiting.
- You have abdominal pain.
- You have suddenly gained a lot of weight.
- You are urinating very little or infrequently.
- You become short of breath.
- You start bruising easily.
- You become very tired more easily.

How can I help prevent hypertension in pregnancy?

Currently, there is no sure way to prevent preeclampsia. Many factors may contribute to the development of high blood pressure during pregnancy. Some can be controlled and some cannot. Follow your health care provider's instructions for diet and exercise. Practice the following good health habits:

- Use little or no added salt in your meals.
- Don't eat a lot of fried foods and junk food.
- Get enough rest.
- Exercise according to your provider's recommendations.
- Elevate your feet several times during the day.
- Avoid drinking alcohol and beverages containing caffeine.
- Avoid a lot of weight gain.

If you have a high risk for preeclampsia, your provider may recommend that you take low doses of aspirin or calcium every day.

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