High Blood Pressure During Pregnancy

What is high blood pressure?
High blood pressure (also called hypertension) happens when your blood moves through your arteries at a higher pressure than normal. Having high blood pressure while you are pregnant can cause serious problems. There are different names for it depending on when it starts and how it affects the body (see Table below).

Who is at risk?
You are more likely to have these problems if you have had high blood pressure before pregnancy or during a previous pregnancy. Other risk factors include:
- Being pregnant for the first time
- Being pregnant with twins
- Being older than 40 years
- Obesity
- Diabetes
- Lupus or kidney disease
- A close relative who had preeclampsia

Can it be prevented?
If you had preeclampsia earlier than 34 weeks in a previous pregnancy or at any time during two previous pregnancies, your doctor might want you to take a baby aspirin starting early in your pregnancy. Some doctors also recommend aspirin if you are having twins or have chronic hypertension, diabetes, kidney disease, or lupus. Calcium pills may help prevent preeclampsia if you don’t get enough calcium in your diet, but this problem is rare in the United States.

How do I know if I have it?
You might have symptoms, but most of the time you can’t tell. One of the reasons you need to see your doctor so often while you’re pregnant is to get your blood pressure checked. Your blood pressure is high if it is 140/90 mm Hg or higher. Some women with high blood pressure have headaches, vision changes, upper abdominal pain, or swelling in their hands or face. Call your doctor right away if you have any of these symptoms, especially in the second half of your pregnancy or after delivery.

How is it treated?
You may need to take medicine or stay in the hospital. Depending on how far along your pregnancy is, your doctor may decide to induce labor. If delivery is planned before 34 weeks of pregnancy, you might need steroid shots to help your baby’s lungs get ready to breathe.

<table>
<thead>
<tr>
<th>Name</th>
<th>When it starts</th>
<th>Other problems</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic hypertension</td>
<td>Before pregnancy or before 20 weeks (4½ months) of pregnancy</td>
<td>May or may not have protein in the urine</td>
</tr>
<tr>
<td>Gestational hypertension</td>
<td>After 20 weeks of pregnancy</td>
<td>No protein in the urine</td>
</tr>
<tr>
<td>Preeclampsia/eclampsia</td>
<td>After 20 weeks of pregnancy</td>
<td>Protein in the urine</td>
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</tbody>
</table>
High Blood Pressure During Pregnancy  (continued)

Will it go away after I have my baby?
Most of the time, the problems start to go away right after delivery. But it’s important to know that preeclampsia and eclampsia can show up for the first time after your baby is born, and it may get worse before it gets better. Call your doctor right away if you have headaches, vision changes, upper abdominal pain, or very bad swelling in your hands after you leave the hospital.

It can take up to 12 weeks after your baby is born for your blood pressure to return to normal. If it doesn’t, you may have chronic hypertension and will need to manage your blood pressure in the future.

If you have preeclampsia there is a greater chance that you will develop high blood pressure, diabetes, or heart disease later in life. Talk to your doctor to find out how often you should be checked for these conditions.

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