

PREECLAMPSIA

Pregnancy is a very significant process for every woman, so it is important to take care of both you and your baby. Preeclampsia can become a complication during pregnancy that is characterized by a sudden rise in blood pressure. Preeclampsia usually begins after 20 weeks of pregnancy in women whose blood pressure has been normal.



CAUSE OF PREECLAMPSIA

The exact cause of preeclampsia is unknown. The condition is thought to begin in the placenta and may be associated with autoimmune disorders, placental abnormalities such as insufficient blood flow, and genetics.



RISK FACTORS

- Having hypertension (high blood pressure) or chronic kidney disease before or during pregnancy.
- Obesity
- 40 years of age or older
- Multiple pregnancies (more than one baby)
- Family history
- Having diabetes, lupus or thrombophilia, among others.

POSSIBLE COMPLICATIONS OF PREECLAMPSIA

- Placental abruption (detachment from the uterus)
- Poor growth of the fetus, caused by lack of nutrients and oxygen.
- Premature delivery
- Baby may be still born or have low birth weight
- Damage to kidneys, liver, brain, cardiovascular system, and other organs
- Increased risk of heart diseases.
- Eclampsia, which occurs when preeclampsia is severe enough to affect brain function, causing seizures or coma.
- HELLP syndrome, which occurs when a woman with preeclampsia or eclampsia has damage to the liver and blood cells.

SYMPTOMS

- Proteinuria (protein in the urine)
- Swelling of the face, hands, and feet
- Constant headache
- Vision problems such as blurred vision or spots
- Pain in the right upper abdomen
- Difficulty breathing

DIAGNOSIS

Your health care provider will monitor your blood pressure. If you have high blood pressure (140/90 or higher), especially after the 20th week of pregnancy, you will most likely have some tests, such as blood tests or other laboratory tests to look for extra protein in your urine and other signs of disease.



TREATMENT

Often, giving birth can eliminate preeclampsia. When deciding about treatment, your health care provider will consider several factors, such as how severe it is, how many weeks pregnant you are, and what the potential risks are to you and your baby.

Symptoms usually disappear within 6 weeks after delivery. In rare cases, symptoms may not go away or may not start until after delivery (postpartum preeclampsia). This can be very serious and should be treated immediately.



For more information, please call the Clinical Management Unit at 787.706.2552 or commercialclinicalmanagement@ssspr.com

