



BASIC INFORMATION

DESCRIPTION

Preeclampsia is high blood pressure in pregnancy, accompanied by swelling that doesn't go away, and by large amounts of protein in the urine (found during urine tests). It occurs during the second half of pregnancy and up to two weeks after delivery. Preeclampsia can develop gradually, or come on quite suddenly. Eclampsia is a severe form of preeclampsia which results in seizures.

FREQUENT SIGNS AND SYMPTOMS

Mild preeclampsia:

- Significant blood-pressure rise, even if still in the normal range. There may be no symptoms. It can show up unexpectedly during a routine blood pressure check and urine test.
- Swelling in the face, arms and fingers (upper body). It is unlike the common swelling that affects most pregnancies.
- Excessive weight gain (more than a pound a week during the last trimester).

Severe preeclampsia (severe PIH):

- Continued blood-pressure rise.
- Continued swelling and puffiness.
- Blurred vision; headache.
- Irritability.
- Abdominal pain.

Eclampsia:

- Worsening of above symptoms, particularly headache.
- Muscle twitching.
- Seizures.
- Coma.

CAUSES

Unknown. Believed to be caused by a substance or toxin produced by the placenta.

RISK INCREASES WITH

- Diabetes mellitus.
- Prepregnancy high blood pressure.
- Chronic kidney disease.
- Immune disorders, such as lupus.
- First pregnancy; teenage mothers; women over 40.
- Preeclampsia during one pregnancy does not mean it will recur with subsequent pregnancies, but it does increase the risk of recurrence.
- Multiple gestation (twins, etc.).
- Family history of preeclampsia or eclampsia.

PREVENTIVE MEASURES

- There's nothing reliable enough to be used as a predictor of who will develop preeclampsia. Obtain good prenatal care throughout pregnancy. Your blood pressure will be checked periodically at your office visits to see if there are any changes. The best screening strategy for preeclampsia is the early detection of an abnormal blood pressure trend over time.

- Studies are ongoing about possible treatments that may prevent preeclampsia.

EXPECTED OUTCOME

Delivery in a timely fashion. Even if the baby is premature, its chances are better on the outside. Sometimes eclampsia occurs in the week after delivery, but the basic pattern is one of steadily falling blood pressure from the moment of delivery. Pressure returns to normal within a few months at the most. From then on, cardiovascular health should be as good as if the woman never had preeclampsia.

POSSIBLE COMPLICATIONS

- Stroke or seizures; pulmonary edema; kidney failure.
- Low birth weight and other problems for the baby. If premature labor occurs, the newborn's survival chances depend on its maturity. Fetal death may occur.
- Severe eclampsia continues to be a significant contributor to maternal mortality.



TREATMENT

GENERAL MEASURES

- Diagnostic tests may include laboratory blood studies, 24-hour urine study (to check the protein levels), and possibly other tests to rule out complications.
- Treatment will depend on severity of the signs and symptoms, and the maturity of the fetus. Options include home care for mild symptoms, hospital care if condition deteriorates; and early delivery if the situation is severe. Eclampsia, due to seizures, is likely to require hospital care and timely delivery.
- If you are at home, weigh yourself daily and keep a record. Use a home test to check for protein in the urine (instructions will be provided).
- Additional information available from the Preeclampsia Foundation at www.preeclampsia.org.

MEDICATION

- Women with preeclampsia may be given magnesium sulfate before giving birth, or shortly after, to reduce seizure risk.
- Drugs as needed on an emergency basis, to control severe high blood pressure and prevent seizures.
- Drugs to stimulate labor (possibly).

ACTIVITY

Rest often; this is important in controlling preeclampsia. Rest on your left side to help circulation.

DIET

You will be advised if a special diet is necessary.



NOTIFY OUR OFFICE IF

You or a family member has symptoms of preeclampsia at any stage of pregnancy: Swelling and puffiness; severe headache or vision disturbance; weight gain of 3 or more pounds in 24 hours; nausea, vomiting; diarrhea; cramping; abdominal pains; irritability.