

What is preeclampsia?

Preeclampsia is a serious problem for as many as one in 12 women during pregnancy. It generally occurs after the 20th week and is marked by a sudden increase in blood pressure and protein in the urine. Preeclampsia is a leading cause of premature birth. It must be watched closely as it can threaten the life of both the mother and the baby. Currently, the only effective treatment is delivery, which, if too premature, may lead to serious complications for the baby.



Preeclampsia warning signs include:

- High blood pressure
- Protein in the urine
- Sudden weight gain
- Headaches
- Swelling of the face or hands
- Blurred or altered vision
- Chest pain
- Pain in the upper right abdomen area
- Nausea and vomiting
- Breathing with difficulty, gasping or panting

To ensure the well-being of mother and baby and reduce bad outcomes from preeclampsia, it is important to know the warning signs, trust yourself, attend regular prenatal visits and have a strong partnership with your health care providers.

For more information about preeclampsia, heart disease, and risk reduction, visit these websites:

Preeclampsia Foundation: www.preeclampsia.org

American Heart Association: www.heart.org

National Heart Lung and Blood Institute:
www.nhlbi.nih.gov/educational/hearttruth

Women Heart: www.womenheart.org

Women's Health: www.healthywomen.org

General diet and activity guidelines: www.mypyramid.gov

DASH diet: www.dashdiet.org

BMI calculator: www.nhlbisupport.com/bmi

BMI categories:

Category	BMI value
Underweight	< 18.5
Normal weight	18.5–24.9
Overweight	25–29.9
Obesity	30 or greater



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www.preeclampsia.org

Preeclampsia & Heart Disease

Pregnancy history is significant
to future heart health



Preeclampsia: a screening test for heart disease

Heart disease is the leading cause of death for women. Despite a downward trend over the last four decades, death rates from this disease now appear to be increasing in women aged 35 to 54 years.

Women who have had preeclampsia have approximately double the risk for heart disease and stroke over their next five to 15 years. Other important factors are the severity of the mother's preeclampsia, whether or not it recurred, and a history of low birth weight babies. This does not mean you will definitely develop these heart problems if you had preeclampsia, but for some women pregnancy can be considered a "failed stress test", possibly unmasking other health issues.

Many of the risk factors for preeclampsia and diseases affecting your blood pressure and heart are the same. They include a family history of high blood pressure, heart disease and diabetes, being overweight, problems with blood clotting, and metabolic syndrome.

Metabolic syndrome is a term for a set of risk factors such as:

- Waist size larger than 35 inches (for women)
- High blood pressure
- High blood sugar
- High blood triglycerides (a type of fat)
- Low HDL ("good" cholesterol)

If you have three or more of these symptoms, physicians consider you to have metabolic syndrome.



What can I do to reduce my risk for heart disease?

If you had preeclampsia, you should take extra care to monitor the health of your heart, consider seeing a preventive cardiologist, and make lifestyle modifications now to reduce your risk. If you have other risk factors in addition to your history of preeclampsia, these steps become even more important.

Talk to your health care provider about your pregnancy history

New guidelines from the American Heart Association encourage assessment of a woman's pregnancy history. You should let your health care providers know:

- How many pregnancies have you had?
- Did you have preeclampsia (or high blood pressure) in any of them?
- Did you have gestational diabetes in any of them?
- How many miscarriages or stillbirths?
- Were any of your babies born early or small for gestational age?
- What was the weight of your babies?

Know your family health history

If you have a history of high blood pressure or heart disease in your family, you are more likely to get it later in life. Be sure to tell your care team about your family's health history.

Live a healthy life

Eat a heart-healthy diet and get regular exercise, such as walking 30 minutes five times a week and doing muscle-strengthening exercises two or more times a week. Proper diet and exercise can reduce your risk factors for heart disease.

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Stay at a healthy weight

Body mass index (BMI) measures your body fat based on your height. A healthy BMI is between 19 and 25. A BMI greater than 25 may increase your risk for heart disease. If your BMI is too high, talk to your care provider about different methods for losing weight.

If you smoke, stop!

You should also try to avoid second-hand smoke. Tobacco raises blood pressure and damages blood vessels.

Talk with your doctor about aspirin

Taking low-dose aspirin may reduce your risk of heart attack and stroke.

Know your numbers

Blood Pressure: A healthy blood pressure is around 120/80. If your blood pressure is higher, talk to your care provider about ways to lower it including lifestyle and diet modifications. Medications such as beta blockers or ACE inhibitors may be prescribed for higher blood pressures.

Cholesterol: Talk to your care provider about tracking your cholesterol (blood fats or “lipids”). If your levels are high, ask how you can lower them. Diets that include omega 3 fatty acids may help. Aim for these levels:

- Total cholesterol: less than 200 mg/dl
- HDL (good cholesterol): more than 50 mg/dl
- LDL (bad cholesterol): less than 100 mg/dl
- Triglycerides: less than 150 mg/dl

Blood glucose (blood sugar): Talk to your care provider about tracking blood sugar levels. If they are high, ask how you can lower them. Aim for these fasting levels:

- Normal: less than 100 mg/dl
 - Pre-diabetes: 100 to 125 mg/dl
 - Diabetes: more than 126 mg/dl
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