Preeclampsia At-A-Glance

- Preeclampsia is a serious disease related to high blood pressure; it is now understood that preeclampsia is a multi-systemic disease that affects all organ systems and is far more than high blood pressure and renal dysfunction.

- In the United States, preeclampsia impacts one in every 12 pregnancies. The incidence of preeclampsia has increased by 25 percent in the U.S. during the past two decades.

- Globally, preeclampsia and other hypertensive disorders of pregnancy are a leading cause of maternal and infant illness and death. By conservative estimates, these disorders are responsible for 76,000 maternal and 500,000 infant deaths each year.

- Preeclampsia can happen to any pregnant woman during the second half of her pregnancy or up to six weeks after delivery.

- Risks to the mother include seizures, stroke, organ damage, and death. Risks to the baby are premature birth, growth restriction, and death.

- Preeclampsia can develop gradually, or have a sudden onset, flaring up in a matter of hours, even though the signs and symptoms may have gone undetected for weeks or months.

- Early recognition and reporting of symptoms is the key to early detection and management of preeclampsia; contact your doctor or midwife right away if you experience any of the following symptoms. Having symptoms doesn’t necessarily mean you have preeclampsia, but they are cause for concern and require immediate medical evaluation.
  
  o Swelling of the hands and face, especially around the eyes (swelling of the feet is more common in late pregnancy and probably not a sign of preeclampsia)
  o Weight gain of more than five pounds in a week
  o Headache that won’t go away, even after taking medication such as acetaminophen
  o Changes in vision like seeing spots or flashing lights; partial or total loss of eyesight
  o Nausea or throwing up, especially suddenly, after mid pregnancy (not the morning sickness that many women experience in early pregnancy)
  o Upper right belly pain, sometimes mistaken for indigestion or the flu
  o Difficulty breathing, gasping, or panting
  o “I just don’t feel right”

- It’s also important to know that some women with preeclampsia have NO symptoms. The only way your doctor or midwife can diagnose it is by monitoring your blood pressure and protein in your urine ...so keep all your prenatal appointments.

- Interventions for women with preeclampsia include increased monitoring, magnesium sulfate, antihypertensive medications, corticosteroids for fetal lung maturation, and delivery.

- Preeclampsia can also impact the mother’s long-term health, and is a risk factor for heart disease and stroke. Tell all your doctors, present and future, if you experience any problems during pregnancy.