

# Maternity Services at Calvary

## Hypertension in Pregnancy

Hospitality  
Healing  
Stewardship  
Respect

### What is hypertension?

High blood pressure is called hypertension. Blood pressure is considered hypertensive when the top reading of your blood pressure is  $\geq 140$  mmHg and/or the lower reading is  $\geq 90$  mmHg.

### Why is it important?

You may already have hypertension before pregnancy or may develop hypertension during pregnancy. Left untreated, hypertension can have a harmful effect on both mum and baby. Rising blood pressure can be a sign that a serious condition called Preeclampsia is developing. Preeclampsia is pregnancy-related and can be dangerous as it can damage your organs and cause low birth weight babies, premature births and sometimes stillbirth.

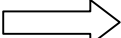
### So what can I do about it?

Early recognition and treatment is the key to managing high blood pressure and preeclampsia. By being aware of the signs and symptoms of these conditions, you can tell your health professional as soon as symptoms arise. This will lead to quicker management of the condition.

### Signs and symptoms of worsening hypertension or preeclampsia:

- Severe frontal headache that does not go away with over the counter medication.
- Strange vision such as blurred vision or flashing in front of your eyes.
- Vomiting and nausea.
- Sudden swelling of your hands, feet or face.
- Severe pain in the upper abdomen immediately below your ribs. (Severe epigastric pain).
- A significant decrease in baby movements over last 24 hours.

**If you experience any of these symptoms please call  
Calvary Birth Suite on 6201 6034 at any time.**

See over for further information 

### Why might I get preeclampsia?

While the cause of preeclampsia is still relatively unknown, there are risks factors that identify some women as being more susceptible to developing the condition.

- First ever pregnancy
- Pre-existing hypertension
- BMI over 35
- Maternal age  $\leq 19$  or  $\geq 40$
- Multiple pregnancy
- Gestational Diabetes
- Previous preeclampsia
- Pre-existing medical conditions such as renal issues, autoimmune disease, diabetes
- More than 10 years between pregnancies
- New partner
- Family history of preeclampsia

### What tests might I need if my blood pressure rises?

- **Blood pressure** readings are taken multiple times to gauge whether the high blood pressure is just a once-off occurrence or is consistently high.
- A **cardiotocography** (CTG) records baby's heart rate and any uterine activity (contractions). This gives an indication if your baby is being affected by the hypertension.
- **Urine** is tested to see if your kidneys are being affected by the hypertension.
- **Ultrasound** is used to monitor the size of your baby; the amniotic fluid volume around baby; and the arterial blood flow in the umbilical cord.
- **Blood tests** give an indication of your iron and platelet levels. They also indicate if your kidneys and liver are being affected by the hypertension.

### What else can I do?

The progression of hypertension disorders in pregnancy is not always predictable. There are things that you can do to ensure timely management of the condition and others that may slow down the progression of the disorder.

- Report any signs or symptoms of worsening blood pressure to your Doctor or Midwife. Remember you can call the Calvary Birth Suite on 6201 6034 any time of the day or night if you are concerned.
- Attend all antenatal appointments.
- Continue on any antihypertensive medications you have been prescribed even if you are feeling well.
- Make changes in your diet to healthy food options.
- Gently exercise if your hypertension is currently under control.

**If you require further information, please talk to your Doctor or Midwife in the Antenatal Clinic or Birth Centre, or call Birth Suite on 6201 6034.**