



High Blood Pressure During Pregnancy

JAMA. 2001;285(12):1664 (doi:10.1001/jama.285.12.1664)

Online article and related content
current as of November 10, 2009.

Supplementary material

Key Words

<http://jama.ama-assn.org/cgi/content/full/285/12/1664/DC1>

Correction

[Contact me if this article is corrected.](#)

Citations

[Contact me when this article is cited.](#)

Topic collections

Women's Health; Pregnancy and Breast Feeding; JAMA Patient Page; Hypertension

[Contact me when new articles are published in these topic areas.](#)

Related Articles published in
the same issue

Association of Maternal Endothelial Dysfunction With Preeclampsia
[John C. Chambers et al. JAMA. 2001;285\(12\):1607.](#)

Subscribe

<http://jama.com/subscribe>

Email Alerts

<http://jamaarchives.com/alerts>

Permissions

permissions@ama-assn.org

<http://pubs.ama-assn.org/misc/permissions.dtl>

Reprints/E-prints

reprints@ama-assn.org

High Blood Pressure During Pregnancy

Most pregnancies are free from major complications, but occasionally problems may arise that can be life-threatening for the mother and/or the fetus. Complications from **hypertension** (high blood pressure) occur in 6% to 8% of all pregnancies in the United States. High blood pressure during pregnancy can cause premature delivery and low birth weight and may be a sign of a serious condition in pregnant women known as **preeclampsia**. An article in the March 28, 2001, issue of *JAMA* examines how the arteries of women who had preeclampsia during a previous pregnancy respond to stimuli that cause arteries to **dilate** (widen).



WHAT IS HYPERTENSION?

Hypertension refers to blood pressure that is higher than normal. Blood pressure readings measure the amount of force the blood applies against the artery walls. Blood pressure is recorded by 2 numbers: the **systolic pressure** (the highest pressure exerted when the heart pumps blood to the body) and the **diastolic pressure** (the lowest pressure exerted when the heart is at rest). A woman may have high blood pressure before she gets pregnant, or she may develop high blood pressure during pregnancy (**gestational hypertension**).

WHAT IS PREECLAMPSIA?

Preeclampsia is a complication of pregnancy that is associated with abnormally high blood pressure and **proteinuria** (protein in the urine). Women with preeclampsia may also experience persistent headache, blurred vision, and abdominal pain. If convulsions (seizures) also occur, the condition is then called **eclampsia**.

Complications for the fetus that are associated with preeclampsia are

- Low birth weight
- Premature birth
- Stillbirth

HOW TO PROTECT YOURSELF AND YOUR BABY

Make sure you follow your doctor's schedule of regular prenatal visits and inform him or her of any problems you are experiencing. At your prenatal visits, your doctor will measure your blood pressure and the level of protein in your urine and monitor you for any complications of pregnancy.

Sources: National Heart, Lung, and Blood Institute, American Academy of Family Physicians, American College of Obstetricians and Gynecologists, American Heart Association, The AMA Home Medical Library, The AMA Complete Guide to Women's Health, The AMA Encyclopedia of Medicine

FOR MORE INFORMATION

- National Heart, Lung, and Blood Institute
NHLBI Information Center
PO Box 30105
Bethesda, MD 20824-0105
301/592-8573
www.nhlbi.nih.gov
- American College of Obstetricians and Gynecologists
ACOG Resource Center
High Blood Pressure During Pregnancy (AP034)
PO Box 96920
Washington, DC 20090-6920
www.acog.org
- American Academy of Family Physicians
Preeclampsia
800/274-2237, extension 5103
familydoctor.org/handouts/064.html

INFORM YOURSELF

To find this and previous JAMA Patient Pages, go to the Patient Page Index on JAMA's Web site at www.jama.com. A JAMA Patient Page on blood pressure was published February 3, 1999.

Brian Pace, MA, Writer

Cassio Lynn, MA, Illustrator

Richard M. Glass, MD, Editor

The JAMA Patient Page is a public service of JAMA. The information and recommendations appearing on this page are appropriate in most instances, but they are not a substitute for medical diagnosis. For specific information concerning your personal medical condition, JAMA and the AMA suggest that you consult your physician. This page may be reproduced noncommercially by physicians and other health care professionals to share with patients. Any other reproduction is subject to AMA approval. To purchase bulk reprints, call 718/946-7424.

