Excessive blood loss during or after delivery of a baby may affect the function of the pituitary gland, leading to a form of maternal hypopituitarism known as Sheehan syndrome (SS). Such extensive bleeding may reduce the blood flow to the pituitary gland causing the pituitary cells to be damaged or die (necrosis). Thus, the production of the usual pituitary hormones will be reduced, perhaps by a significant amount. During pregnancy the pituitary gland will enlarge and may double in size. At this time the gland is especially vulnerable to a severe drop in blood pressure (sometimes called "shock") and excessive maternal bleeding may induce the "shock" and the damage to the cells of the gland. At that time the amount of hormones produced by the pituitary may be decreased giving rise to the symptoms associated with hypopituitarism. There appear to be two forms of the disorder; a chronic form and an acute form, depending on the amount of damage to the gland's cells. The acute form reflects considerable damage so that symptoms become apparent soon after delivery. In chronic cases, the volume of damage is much less and symptoms may not appear for months or years after delivery. Sheehan syndrome affects women with excessive blood loss and circulatory collapse following childbirth. The incidence of Sheehan syndrome is not known. In patients with severe hemorrhaging on delivery accompanied by long-lasting low blood pressure, treatment is started as soon as possible. Women believed to have the chronic form usually have blood drawn and the levels for several hormones are determined.