**Health Issues that Arise During Pregnancy**

1. Pregnancy-induced hypertension: Hypertensive disorder risk is higher < 48 hours after delivery. An office visit is recommended within the first 7 days after delivery. Blood Pressure (BP) ≥150/100 mmHg can be treated with oral medication such as nifedipine or labetalol. Hospitalize if signs of end-organ (liver injury or pulmonary edema) or BP ≥ 160/110. Lifestyle modification and annual BP and bodyweight monitoring follow-ups are recommended.

2. Gestational diabetes mellitus (GDM): Women with GDM are at a very high risk of developing diabetes. ACOG recommends that women with GDM have a 75-g, 2-hour fasting oral glucose tolerance test 4 to 12 weeks postpartum to screen for type 2 DM.[[28]](https://www.ncbi.nlm.nih.gov/books/NBK565875/)

3. Thyroid disorders: The mother can experience symptoms of hypo- or hyperthyroidism. The diagnosis of postpartum thyroiditis depends on clinical presentation and elevated free T4 and low TSH. Hyperthyroidism is transient and usually not treated. Beta-blockers can be used if symptoms are needed. Hypothyroidism is treated with levothyroxine. The American Thyroid Association recommends annual testing in women with hypothyroidism with a history of postpartum thyroiditis.[[29]](https://www.ncbi.nlm.nih.gov/books/NBK565875/)