




High Blood Pressure During Pregnancy



For Everyone
DECEMBER 13, 2024

WHAT TO KNOW

Some women have high blood pressure during pregnancy. This can put the mother and baby at risk for problems during the pregnancy.



What are high blood pressure complications during pregnancy?

High blood pressure can also cause problems during and after delivery.^{[1] [2]} The good news is that high blood pressure is preventable and treatable.

High blood pressure, also called [hypertension](#), is very common. Hypertensive disorders affect 5% to 10% of women during pregnancy, which is a 25% increase during the past 2 decades.^[3]

High blood pressure in pregnancy has become more common. However, with good blood pressure control, you and your baby are more likely to stay healthy.

The most important thing to do is talk with your health care team about any blood pressure problems so you can get the right treatment and control your blood pressure—**before** you get pregnant. Getting treatment for high blood pressure is important before, during, and after pregnancy.

Complications from high blood pressure for the mother and infant can include the following:

- **For the mother:** [preeclampsia](#), [eclampsia](#), [stroke](#), the need for labor induction (giving medicine to start labor to give birth), and placental abruption (the placenta separating from the wall of the uterus).^{[1] [4] [5]}
- **For the baby:** preterm delivery (birth that happens before 37 weeks of pregnancy) and low birth weight (when a baby is born weighing less than 5 pounds, 8 ounces).^{[1] [6]} When the mother's blood pressure is high, it is hard for the baby to get enough oxygen and nutrients to grow. This may cause the mother to deliver the baby early.

Learn what to do if you have high blood pressure before, during, or after pregnancy.

What should I do if I have high blood pressure before, during, or after pregnancy?

Before pregnancy

Make a plan for pregnancy and talk with your doctor or health care team about the following:

- Any health problems you have or had and any medicines you are taking. If you are planning to become pregnant, talk to your doctor.^[7]
- Your doctor or health care team can help you find medicines that are safe to take during pregnancy.
- Ways to keep a healthy weight through healthy eating and regular physical activity.^{[1] [7]}

During pregnancy

- Get early and regular [prenatal care](#). Go to every appointment with your doctor or health care professional.
- Talk to your doctor about any medicines you take and which ones are safe. Do not stop or start taking any type of medicine without talking with your doctor. This includes over-the-counter medicines. [\[7\]](#)
- Keep track of your blood pressure at home with a [home blood pressure monitor](#). Contact your doctor if your blood pressure is higher than usual or if you have symptoms of preeclampsia.
- Talk to your doctor or insurance company about getting a home monitor.
- Continue to choose healthy foods and keep a healthy weight. [\[8\]](#)

After pregnancy

- Pay attention to how you feel after you give birth. If you had high blood pressure during pregnancy, you have a higher risk for stroke and other problems after delivery.
- Tell your doctor or call 9-1-1 right away if you have symptoms of preeclampsia after delivery. You might need emergency medical care. [\[9\]](#) [\[10\]](#)

Resource



For Health Care Professionals: Hypertension in Pregnancy Change Package

Health care professionals can visit Million Hearts® and use the [Hypertension in Pregnancy Change Package](#) in their practice. The change package lists process improvements, tools, and resources to help clinicians care for women of reproductive age.

High blood pressure conditions and pregnancy

Health care professionals can make the following diagnoses for pregnancy-related high blood pressure. Your doctor or nurse should look for these conditions before, during, and after pregnancy:

- **High blood pressure during pregnancy** occurs when a pregnant woman has a blood pressure reading of 140/90 mm Hg or higher in two readings that are 4 or more hours apart.
- **Severe high blood pressure during pregnancy** occurs when a pregnant woman has a blood pressure reading of 160/110 mm Hg on two or more occasions.
- **Chronic hypertension during pregnancy** is when a pregnant woman has pre-existing high blood pressure and is diagnosed in the first 20 weeks of pregnancy or if the high blood pressure lasts 12 weeks after the woman has given birth.
- **Gestational hypertension** is when a pregnant woman who previously had normal blood pressure has high blood pressure during pregnancy.
- **Preeclampsia** occurs when a woman who previously had normal blood pressure suddenly develops high blood pressure and protein is found in her urine or has other problems after 20 weeks of pregnancy. Women who have chronic hypertension can also get preeclampsia.
- **Eclampsia** is a medical emergency. Eclampsia is when a pregnant woman with preeclampsia has seizures that have no other cause.

Health care professionals can recommend low-dose aspirin for some pregnant women at higher risk of preeclampsia. If taken at the appropriate time, low-dose aspirin has been shown to reduce the risk of preeclampsia.

Preeclampsia and eclampsia

Preeclampsia is one of the leading causes of pregnancy-related death. It occurs in about 2% to 8% of all pregnancies. [\[3\]](#) Some women with preeclampsia can develop seizures. This is called **eclampsia**, which is a medical emergency. [\[1\]](#) [\[11\]](#)

Symptoms of preeclampsia include:

- A headache that will not go away.
- Changes in vision, including blurry vision, seeing spots, or having changes in eyesight.
- Pain in the upper stomach area.
- Nausea or vomiting.
- Swelling of the face or hands.
- Sudden weight gain.
- Trouble breathing.

Some women have no symptoms of preeclampsia. That's why it is important to visit your health care team regularly, especially during pregnancy.

You are more at risk for preeclampsia if: [\[1\]](#)

- This is the first time you have given birth.
- You had preeclampsia during a previous pregnancy.
- You have chronic (long-term) high blood pressure, chronic kidney disease, or both.
- You have a history of thrombophilia (a condition that increases risk of blood clots).
- You are pregnant with multiple babies (such as twins or triplets).
- You became pregnant using in vitro fertilization.
- You have a family history of preeclampsia.
- You have type 1 or type 2 diabetes.
- You have obesity.
- You have lupus (an autoimmune disease).
- You are older than 40.

In rare cases, preeclampsia can happen after you have given birth. This is a serious medical condition known as **postpartum preeclampsia**. It can happen in women without any history of preeclampsia during pregnancy [\[3\]](#) The symptoms for postpartum preeclampsia are similar to the symptoms of preeclampsia. Postpartum preeclampsia is typically diagnosed within 48 hours after delivery but can happen up to 6 weeks later. [\[9\]](#)

Tell your health care provider or call 9-1-1 right away if you have symptoms of postpartum preeclampsia. You might need emergency medical care. [\[9\]](#) [\[10\]](#)

More information

For more information about high blood pressure during pregnancy, see the following resources:

- [Hypertension in Pregnancy Change Package](#) [↗](#) (Million Hearts®)
- [Heart Health and Pregnancy](#) [↗](#) (NHLBI)
- [Preeclampsia and Eclampsia](#) [↗](#) (NICHD)
- [Pregnancy Complications](#) [↗](#) (Office on Women's Health)

SOURCES

CONTENT SOURCE:

[National Center for Chronic Disease Prevention and Health Promotion; About the Division for Heart Disease and Stroke Prevention](#)

REFERENCES

1. American College of Obstetricians and Gynecologists, Task Force on Hypertension in Pregnancy. [Hypertension in pregnancy. Report of the American College of Obstetricians and Gynecologists' Task Force on Hypertension in Pregnancy](#) [↗](#). *Obstet Gynecol*. 2013;122(5):1122–1131.
2. Hutcheon JA, Lisonkova S, Joseph KS. Epidemiology of pre-eclampsia and the other hypertensive disorders of pregnancy. *Best Pract Res Clin Obstet Gynaecol*. 2011;25(4):391–403.
3. Folk DM. Hypertensive Disorders of Pregnancy: Overview and Current Recommendations. *J Midwifery Womens Health*. 2018;63(3):289-300.
4. Callaghan WM, Creanga AA, Kuklina EV. [Severe maternal morbidity among delivery and postpartum hospitalizations in the United States](#) [↗](#). *Obstet Gynecol*. 2012;120(5):1029–1036.
5. Creanga AA, Berg CJ, Ko JY, et al. [Maternal mortality and morbidity in the United States: where are we now?](#) [↗](#) *J Womens Health (Larchmt)*. 2014;23(1):3–9.
6. Macdonald-Wallis C, Tilling K, Fraser A, Nelson SM, Lawlor DA. [Associations of blood pressure change in pregnancy with fetal growth and gestational age at delivery: findings from a prospective cohort](#) [↗](#). *Hypertension*. 2014;64(1):36–44.
7. Centers for Disease Control and Prevention. Medicine and pregnancy. Accessed January 17, 2024.
8. Liu Y, Croft JB, Wheaton AG, et al. [Clustering of five health-related behaviors for chronic disease prevention among adults, United States, 2013](#). *Prev Chronic Dis*. 2016;13:160054.

9. Mayo Clinic. Postpartum preeclampsia. Accessed May 22, 2021. <https://www.mayoclinic.org/diseases-conditions/postpartum-preeclampsia/symptoms-causes/syc-20376646>

.0. Matthys LA, Coppage KH, Lambers DS, Barton JR, Sibai BM. [Delayed postpartum preeclampsia: an experience of 151 cases](#). *Am J Obstet Gynecol.* 2004;190(5):1464–1466.

.1. Centers for Disease Control and Prevention. Pregnancy complications in the United States. Accessed May 22, 2021.

SOURCES

- American College of Obstetricians and Gynecologists. Preeclampsia and high blood pressure during pregnancy. Accessed May 22, 2021. <https://www.acog.org/Patients/FAQs/Preeclampsia-and-High-Blood-Pressure-During-Pregnancy>
- Bigelow CA, Pereira GA, Warmley A, et al. [Risk factors for new-onset late postpartum preeclampsia in women without a history of preeclampsia](#). *Am J Obstet Gynecol.* 2014;338.e1–338.e8
- Whelton PK, Carey RM, Aronow WS, et al. [2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APhA/ASH/ASPC/NMA/PCNA guideline for the prevention, detection, evaluation, and management of high blood pressure in adults: a report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines](#). *Hypertension.* 2017;71(6):e13–e115.