

High Blood Pressure in Pregnancy



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Introduction

People who have or get high blood pressure while pregnant need special care during this time.

This booklet gives you information on how to keep you and your baby safe. Your doctor or midwife will review this information with you and can answer any questions.

About Blood Pressure

Blood pressure is the force of the blood pushing against the inside of your blood vessels.

Usually, blood pressure rises after 20 weeks pregnant. When a person's blood pressure gets too high, we call this hypertension (say *hi-per-ten-shun*). This results from blood vessels narrowing, which forces the heart to work harder. This usually does not make you feel unwell, but it can become serious in pregnancy.

High blood pressure happens in about 10 of 100 pregnancies.

Blood pressure readings have 2 numbers.

1. **The top number** - The "systolic" (say *sis-tal-ick*) pressure is when the heart squeezes the blood out through blood vessels into the body.
2. **The bottom number** - The "diastolic" (say *die-es-tal-ick*) pressure is when your heart relaxes and fills with blood returning from blood vessels in the body.

High blood pressure in pregnancy is when the systolic pressure is more than 140 and the diastolic pressure is more than 90, when measured 2 times at least 15 minutes apart.

Types of High Blood Pressure

Pre-existing hypertension

High blood pressure that was there before the pregnancy or happens within the first 20 weeks of pregnancy.

Gestational hypertension

High blood pressure that happens after 20 weeks of pregnancy. This can sometimes happen even after the baby is delivered.

Pre-eclampsia

High blood pressure that usually happens after 20 weeks of pregnancy. Either or both of these are present:

- Protein is found in the urine.
- There are signs of damage to kidney or other organs.

Protein is found when urine is tested with a test strip or by sending a sample to the laboratory.

The causes of pre-eclampsia are not fully known. We know it can cause less blood flow to the placenta and cause your blood pressure to rise very high. The high blood pressure can affect body organs such as the liver or kidneys.

If pre-eclampsia happens, it can get worse very quickly. Sometimes, it can threaten the life of the mother / birth parent and baby.

When to get help

Watch for any of these warning signs:

- systolic blood pressure 150 mm Hg or higher and diastolic blood pressure 100 mmHg or higher, measured 2 times at least 15 minutes apart
- persistent headache, especially across your forehead or between your eyes
- blurred vision, sensitive to light, spots in front of eyes, or trouble seeing
- pains in the upper belly or chest on the right side
- feeling sick to your stomach (nausea) or throwing up (vomiting)
- feeling short of breath, chest pains or chest tightness
- feeling unwell
- count less than 6 baby movements over 2 hours
- gush or trickle of fluid from the vagina

Contact your doctor, midwife, or the maternity unit of your delivery hospital ***right away*** if you do have any of the warning signs listed above.

Call 9-1-1 for an ambulance if any of these happen:

- lots of bright red bleeding from your vagina
- severe, constant pain in you upper belly
- severe nausea and vomiting

Monitoring Blood Pressure and Pregnancy

These are the ways your blood pressure will be monitored through your pregnancy. If your pregnancy is being looked after by your family doctor or midwife, you can expect them to ask a pregnancy specialist (obstetrician) to see you.

Regular blood pressure checks

You might be asked to check your blood pressure at home.

Here is how to do this:

1. Before taking your blood pressure, sit down for 10 minutes.
2. Roll up your sleeve so that your upper arm is bare.
3. Place the blood pressure cuff snugly around your arm, placing it so that the bottom edge of the cuff is 2.5 cm (one inch) above the elbow joint of your inner arm.
4. Press the power button of the blood pressure unit once.
5. Try not to move or talk until the machine finishes and your blood pressure displays on the screen.

Fetal heart rate monitoring (Non-stress test)

The pattern of a baby's heartbeat often reflects the baby's condition. This test gives a tracing of the baby's heartbeat and can also show any contractions you might be having.

Your partner or another support person is welcome to join you for this test. It takes between 20 to 80 minutes. The nurse who does the test explains the process to you. They will review the results and, if needed, consult with your doctor or midwife.

Ultrasound scans

An ultrasound scan is a simple, pain-free test. It uses high-frequency sound waves to create images of your baby during pregnancy. It can also show changes in your cervix, in the amount of fluid surrounding your baby, in blood flow to the placenta, and in your baby's growth.

Counting your baby's movements

Feeling your baby's movements is a sign that they are well. Your baby's activity levels will vary throughout the day. It is helpful to keep a record of this pattern.

Start counting your baby's movements each day when your pregnancy is in the third trimester (starting around 28 weeks of pregnancy). See the "Instructions for Fetal Movement Counting" form we gave you for how to do this.

Blood Tests

Because high blood pressure affects many body systems, your doctor will order blood tests. These give valuable information on how well all the systems are working. Blood tests will include a complete blood count, blood clotting factors, and tests for kidney and liver function.

Urine Tests

Normally, you should have very little or no protein in your urine. When there is less blood flow to the kidneys, they do not work correctly. Protein in your urine tells us things are getting worse.

Treating High Blood Pressure

Your doctor or midwife might start you on a medicine to treat your blood pressure.

Your doctor or midwife might recommend that you have your baby sooner than expected. You might have to change your delivery hospital to one that specializes in high risk pregnancies and deliveries. It depends on how far along you are in your pregnancy and how much the high blood pressure has impacted your health or the health of your baby.

Care at Home

While most factors affecting blood pressure in pregnancy are beyond your control, there are things you can do to care for yourself and your baby.

- Go to all your prenatal care and hospital appointments, even when you are feeling fine.
- Take medicines as directed. Your doctor or midwife will help choose the ones that are safe for you and your baby.
- Check your blood pressure as directed.
- Eat a variety of healthy foods each day. Include plenty of fruits, vegetables, whole grains, lean proteins, and healthy fats in your diet.
- Stay active. Being active for 30 minutes each day can help you manage your weight and reduce stress.
- Try to get 8 to 10 hours of sleep each night.
- Take time each day to check in with yourself on your emotional health.
- Connect with others for support.

Care after Delivery

High blood pressure in pregnancy reaches its highest levels about 3 to 6 days after the end of the pregnancy. It usually gets better in about 6 weeks.

Your doctor or midwife will continue to measure your blood pressure in the weeks after the end of the pregnancy. They will adjust or stop blood pressure medicines as needed. They will talk with you about what you can do to prevent high blood pressure in a future pregnancy and even later in life.

Delivery Hospitals and Maternity Units

**Abbotsford Regional Hospital
and Cancer Centre**

32900 Marshall Road, Abbotsford

Maternity Unit: 604-851-4817

Burnaby Hospital

3935 Kincaid Street, Burnaby

Labour and

Delivery Unit: 604-412-6293

Chilliwack General Hospital

45600 Menholm Road, Chilliwack

Maternity Unit: 604-795-4107

Langley Memorial Hospital

22051 Fraser Highway, Langley

Maternity Unit: 604-514-6034

Ridge Meadows Hospital

11666 Laity Street, Maple Ridge

Maternity Unit: 604-463-1818

Royal Columbian Hospital

330 East Columbia Street,

New Westminster

Maternity Unit: 604-520-4587

Surrey Memorial Hospital

13750 96th Avenue, Surrey

Family Birthing Unit: 604-585-5572

Peace Arch Hospital

15521 Russell Avenue, White Rock

Maternity Unit: 604-535-4500

Extension 757273

My Notes and Questions

www.fraserhealth.ca

This information does not replace the advice
given to you by your healthcare provider.

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