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Preeclampsia & Your Heart: *An Early Warning Sign for Cardiovascular Disease*



You may think of **preeclampsia**—high blood pressure during or immediately following pregnancy—as a condition specific to pregnancy. However, research is finding that preeclampsia appears to be a significant warning sign for heart disease after pregnancy. In fact, the American Heart Association’s guidelines on cardiovascular disease in women consider preeclampsia as a risk factor for heart disease as strong as a failed stress test—a test commonly used to identify existing heart disease.

Recognizing this important risk factor and the role of other **pregnancy complications** in later heart disease is vital to women’s heart health: **Cardiovascular disease is the leading cause of death in women in the United States and Europe.**

Read on to learn more about the relationship between preeclampsia and later heart disease—and how you can make sure your physician is aware of your medical history to help you monitor your heart health appropriately.

The Link Between Preeclampsia and Heart Disease

Preeclampsia is a medical condition marked by **high blood pressure** during pregnancy and post-partum. The condition is typically treated with medications; however, if blood pressure does not respond to treatment, early delivery may be advised. According to the **Preeclampsia Foundation**, 5–8 percent of all pregnancies are affected, and preeclampsia is a leading cause of infant and mother illness and death worldwide.

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Research has found that preeclampsia can be an early indicator of future cardiovascular problems in women:

- A history of preeclampsia **doubles the risk** of heart attack, stroke, and blood clots within 5–15 years after pregnancy.
- Women who have **repeat or severe preeclampsia** or preeclampsia accompanied by stillbirth are at greater risk of cardiovascular disease than women who have high blood pressure only or preeclampsia during a single pregnancy.
- **Many women may not be aware** that preeclampsia and other pregnancy complications can signal heart disease risk. A study found that 13 percent of women screened for heart disease risk factors during an OBGYN visit had three or more cardiovascular disease risk factors they were not aware of.

Medical researchers do not yet know exactly how and why preeclampsia and future cardiovascular disease are linked. One theory is that the additional strain that pregnancy places on the cardiovascular system unmasks early existing cardiovascular disease. However, more research is necessary to understand the connection.

What Does a History of Preeclampsia Mean for Diagnosis and Treatment of Cardiovascular Disease?

As more physicians and patients become aware of the link between preeclampsia and future heart disease, women who are at risk can be identified earlier and treated sooner.

If you are a woman who had preeclampsia during a pregnancy, make sure that your physician is aware that you have this heart disease risk factor. If you, like approximately 20 percent of women, use your OBGYN as your primary care physician, discuss your heart health with your OBGYN. Your primary care physician or OBGYN can help you determine next steps for your heart health if you had preeclampsia or other pregnancy complications that are linked with future heart disease, such as gestational diabetes or a preterm birth.



Questions to Ask Your Health Care Provider about Preeclampsia and Heart Health

- I had preeclampsia during one or more pregnancies. Should I be referred to a **cardiologist**?
- What other **risk factors** do I have (other pregnancy complications, cholesterol, obesity, etc.), and how can I reduce my risk?
- What **actions** should I be taking now to monitor my heart health?
- Are there **lab tests** or **diagnostic tests** that you would recommend based on my history of preeclampsia and other risk factors?
- Are there **lifestyle** or **medication changes** that would benefit my heart health?

What Should I Do If I Have Other Questions?

Ask them. Remember that though preeclampsia appears to be a risk factor for later cardiovascular disease, everyone is different. The key is to establish with your physician what your baseline cardiovascular health is now and make sure that your physician is aware that you had a pregnancy complication associated with later development of heart disease. Then, periodically ask your physician, **“Have we checked my heart health recently?”** Identifying and treating cardiovascular disease sooner rather than later will increase the odds of being able to work with your physician to slow or reverse the disease process.

For supporting reference materials, visit:
www.SecondsCount.org.