

BP trajectory may ID risk for hypertensive disorders of pregnancy

February 22 2022



Women with blood pressure that increases or shows little or no decline

during the first half of pregnancy are at substantially higher risk for developing a hypertensive disorder in the second half of pregnancy, according to a study published in the March issue of *Hypertension*.

Erica P. Gunderson, from Kaiser Permanente Northern California in Oakland, and colleagues assessed distinct [blood pressure](#) trajectories from 0 to 20 weeks of gestation and their relationship with subsequent pregnancy-related hypertension in a retrospective cohort of 174,925 women with no prior hypertension or history of preeclampsia, prenatal care entry ≤ 14 weeks, and a stillborn or live singleton birth between 2009 and 2019.

The researchers found that for low-increasing, moderate-stable, and elevated-stable blood pressure groups, there was elevated risk for preeclampsia/eclampsia (adjusted odds ratios, 3.25, 5.3, and 9.2, respectively) and gestational hypertension (adjusted odds ratios, 6.4, 13.6, and 30.2, respectively), compared with an ultra-low-declining blood pressure group (referent). The associations for preeclampsia/eclampsia were modified by race/ethnicity and prepregnancy obesity, with the highest risks seen for Black women, followed by Hispanic and Asian [women](#) for all blood pressure trajectories and with increasing obesity class.

"Early pregnancy blood pressure patterns revealed racial and [ethnic differences](#) in associations with preeclampsia/eclampsia risk within equivalent levels and patterns," the authors write.

More information: Erica P. Gunderson et al, Early Pregnancy Blood Pressure Patterns Identify Risk of Hypertensive Disorders of Pregnancy Among Racial and Ethnic Groups, *Hypertension* (2021). [DOI: 10.1161/HYPERTENSIONAHA.121.18568](#)

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Citation: BP trajectory may ID risk for hypertensive disorders of pregnancy (2022, February 22)
retrieved 25 April 2023 from

<https://medicalxpress.com/news/2022-02-bp-trajectory-id-hypertensive-disorders.html>

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