Preeclampsia and Eclampsia
(Toxemia of Pregnancy)

Preeclampsia is a condition of high blood pressure during pregnancy. It can happen at 20 weeks or later in pregnancy. If high blood pressure occurs in the second half of pregnancy with no other symptoms, it is called gestational hypertension and goes away after the baby is born. If any of the symptoms listed below develop with gestational hypertension, it is then called preeclampsia. Eclampsia (*convulsions*) may follow preeclampsia. This is one of the reasons for regular prenatal checkups. Early diagnosis and treatment are very important to prevent eclampsia.

CAUSES

There is no known cause of preeclampsia/eclampsia in pregnancy. There are several known conditions that may put the pregnant woman at risk, such as:

- The first pregnancy.
- Having preeclampsia in a past pregnancy.
- Having lasting (*chronic*) high blood pressure.
- Having multiples (twins, triplets).
- Being age 35 or older.
- African American ethnic background.
- Having kidney disease or diabetes.
- Medical conditions such as lupus or blood diseases.
- Being overweight (*obese*).

SYMPTOMS

- High blood pressure.
- Headaches.
- Sudden weight gain.
- Swelling of hands, face, legs, and feet.
- Protein in the urine.
- Feeling sick to your stomach (*nauseous*) and throwing up (*vomiting*).
- Vision problems (blurred or double vision).
- Numbness in the face, arms, legs, and feet.
- Dizziness.
- Slurred speech.
- Preeclampsia can cause growth retardation in the fetus.
- Separation (*abruption*) of the placenta.
- Not enough fluid in the amniotic sac (*oligohydramnios*).
- Sensitivity to bright lights.
- Belly (*abdominal*) pain.

DIAGNOSIS

If protein is found in the urine in the second half of pregnancy, this is considered preeclampsia. Other symptoms mentioned above may also be present.

TREATMENT

It is necessary to treat this.

- Your caregiver may prescribe bed rest early in this condition. Plenty of rest and salt restriction may be all that is needed.
- Medicines may be necessary to lower blood pressure if the condition does not respond to more conservative measures.
- In more severe cases, hospitalization may be needed:
  - For treatment of blood pressure.
  - To control fluid retention.
  - To monitor the baby to see if the condition is causing harm to the baby.
- Hospitalization is the best way to treat the first sign of preeclampsia. This is so the mother and baby can be watched closely and blood tests can be done effectively and correctly.
- If the condition becomes severe, it may be necessary to induce labor or to remove the infant by surgical means (*cesarean section*). The best cure for preeclampsia/eclampsia is to deliver the baby.

Preeclampsia and eclampsia involve risks to mother and infant. Your caregiver will discuss these risks with you.

Together, you can work out the best possible approach to your problems. **Make sure you keep your prenatal visits as scheduled.** Not keeping appointments could result in a chronic or permanent injury, pain, disability to you, and death or injury to you or your unborn baby. If there is any problem keeping the appointment, you must call to reschedule.

HOME CARE INSTRUCTIONS

- Keep your prenatal appointments and tests as scheduled.
- Tell your caregiver if you have any of the above risk factors.
- Get plenty of rest and sleep.
- Eat a balanced diet that is low in salt, and do not add salt to your food.
- Avoid stressful situations.
- Only take over-the-counter and prescriptions medicines for pain, discomfort, or fever as directed by your caregiver.

SEEK IMMEDIATE MEDICAL CARE IF:

- You develop severe swelling anywhere in the body. This usually occurs in the legs.
- You gain 5 pounds (2.3 kilograms) or more in a week.
- You develop a severe headache, dizziness, problems with your vision, or confusion.
- You have abdominal pain, nausea, or vomiting.
- You have a seizure.
- You have trouble moving any part of your body, or you develop numbness or problems speaking.
- You have bruising or abnormal bleeding from anywhere in the body.
- You develop a stiff neck.
- You pass out.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

Document Released: 03/14/2011
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