

Diagnosis and Management of Preeclampsia

Case Study and Commentary, Whitney B. You, MD, and Steven Julien, MD



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This article has a companion CME exam that follows the article. To earn credit, read the article and complete the CME evaluation on pages 613 and 614. Estimated time to complete this activity is 1 hour. Faculty disclosure information appears on page 612. Release date: 15 December 2008; valid for credit through 30 December 2009.

Program Audience

Primary care physicians.

Educational Needs Addressed

Preeclampsia is a pregnancy-specific condition that affects up to 8% of the gravid population. The syndrome is a leading cause of maternal and perinatal morbidity and mortality worldwide. Despite its relatively high prevalence, the etiology of preeclampsia remains elusive and the only definitive treatment is delivery. Women's health care providers have a responsibility for the diagnosis and management of preeclampsia and to be aware of the potential long-term health risks preeclampsia confers.

Educational Objectives

After participating in this CME activity, primary care physicians should be able to

1. Describe the approach to patient evaluation
2. Discuss the elements of appropriate maternal and fetal surveillance
3. Discuss the management of severe preeclampsia
4. Identify current standards of management in the inter- and postpartum periods

Preeclampsia is a pregnancy-specific condition that affects up to 8% of the gravid population. The syndrome is a leading cause of maternal and perinatal morbidity and mortality worldwide. Despite its relatively high prevalence, the etiology of preeclampsia remains elusive and the only definitive treatment is delivery. For pregnancies outside of term, the management of preeclampsia is a balance be-

tween promoting fetal maturity and preserving the life and well-being of both the mother and fetus.

CASE STUDY

Initial Presentation



A 28-year-old nulliparous woman presents for a prenatal appointment at 28 and 2/7 weeks estimated gestational age and is found to have a blood pressure of 142/95 mm Hg.

- What are the possible etiologies for this patient's hypertension?

Hypertension in the context of pregnancy is defined as a systolic blood pressure equal to or greater than 140 mm Hg or a diastolic reading of at least 90 mm Hg [1]. Further classification of the disease process depends on when in pregnancy hypertension is diagnosed and the associated clinical and laboratory findings.

Chronic hypertension is defined as hypertension (essential or secondary) that antedates pregnancy. The prevalence is approximately 3% [2]. For women whose prepregnancy blood pressure is unknown, the diagnosis can be made if the patient experiences sustained hypertension prior to 20 weeks of gestation. Although the definition of chronic hypertension is relatively straightforward, distinguishing it from a pregnancy-induced phenomenon can be a challenge.

Gestational hypertension is new-onset hypertension after 20 weeks of gestation without proteinuria [1]. If a patient truly has gestational hypertension, she should be normotensive by her 12th postpartum week; otherwise, she carries the diagnosis of chronic hypertension [1]. Women with gestational hypertension, especially those who develop it prior to 30 weeks, are more likely to develop preeclampsia.

Preeclampsia is gestational hypertension with new-onset proteinuria (defined as the excretion of ≥ 0.3 g protein in a 24-hour period). Should it not be possible to collect a 24-hour specimen, the persistence of 30 mg/dL or greater ($\geq 1+$ reading on dipstick) in a random urine sample may be suggestive of 300 mg of excretion in 24 hours. In general, however, random

From the Feinberg School of Medicine, Northwestern University, Chicago, IL.

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Nutrition for Nurses Emerald Charity Bilbrew, Jody Vogelzang, Kelli Whittington, 2024-03-07 Nutrition for Nurses is structured to support the flexible integration of nutrition content across both system based and nursing competency based curricula It can be used whether nutrition is taught as a standalone course or part of another nursing course The table of contents for Nutrition for Nurses presents content in 20 chapters organized into 9 thematic units The text emphasizes evidence based practice and holistic assessment to facilitate the integration of nutritional awareness for pre licensure nursing students in the provision of client centered care Nutrition for Nurses helps students develop sound clinical judgment as well as a deep understanding of the impact of nutrition on body systems across the lifespan Written and reviewed by highly experienced faculty Nutrition for Nurses includes a detailed narrative extensive features and learning resources and ample student support The presentation utilizes concepts promoting the development of clinical judgment by building upon the systematic model developed by the National Council of State Boards of Nursing NCSBN This is an

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competent and effective care to pediatric patients with the least amount of physical or psychological stress Nursing Alerts point students to critical information that must be considered in providing care Community Focus boxes emphasize community issues supply resources and guidance and illustrate nursing care in a variety of settings Critical thinking case studies offer opportunities to test and develop analytical skills and apply knowledge in various settings Emergency boxes guide you through step by step emergency procedures Family Centred Teaching boxes highlight the needs or concerns of families that you should consider to provide family centred care NEW Content updates throughout the text give you the latest information on topics such as perinatal standards mental health issues during pregnancy developmental and neurological issues in pediatrics new guidelines including SOGC and CAPWHN NEW Increased coverage on health care in the LGBTQ community and First Nations Metis and Inuit population NEW Medication Alerts stress medication safety concerns for better therapeutic management NEW Safety Alerts highlighted and integrated within the content draw attention to developing competencies related to safe nursing practice

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