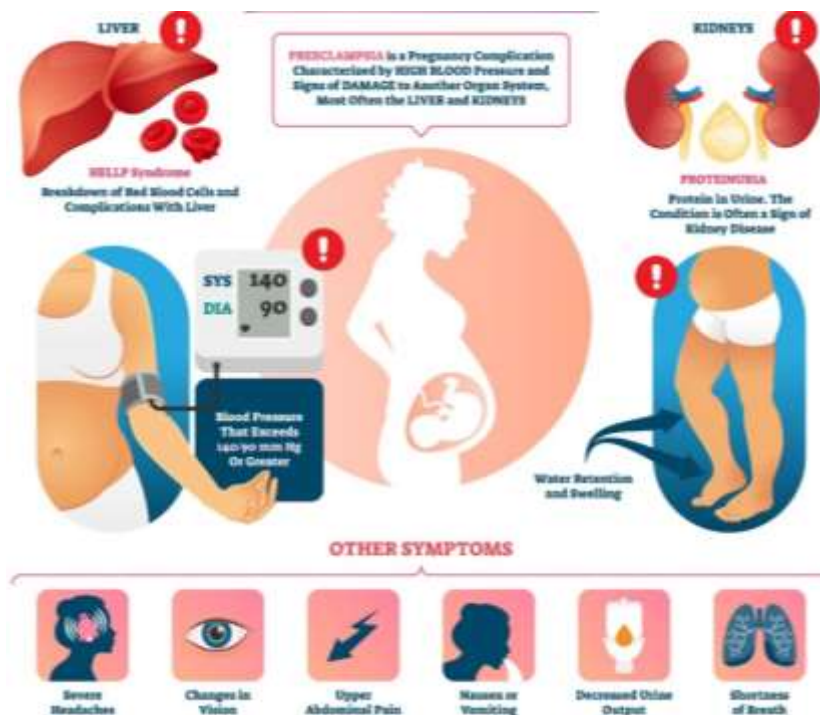


Pressure Care: Equipping Moms for a Healthy Delivery

Introduction

High blood pressure or hypertension occurs when the force of the blood against the walls of your blood vessels is too high. High blood pressure during pregnancy can lead to a condition called preeclampsia, and an even more dangerous form, eclampsia, which can hurt you and your baby. Preeclampsia is high blood pressure and elevated protein levels in the urine (pee), which usually begins after the 20th week of pregnancy. Preeclampsia puts stress on your heart and other organs and can cause fluid to build up in your lungs. It can also affect the blood supply to your baby. Most women with preeclampsia, who are treated, have healthy babies. However, left untreated, preeclampsia and eclampsia can cause seizures, coma, and other severe health problems. These conditions can also result in your baby having to be delivered early. A pre-term birth increases the risk of your baby having lung and other health problems.



Symptoms of Preeclampsia

Many pregnant women with preeclampsia do not have symptoms. The condition is usually only diagnosed after patients see their healthcare provider for routine visits and have their blood pressure and urine tested. During pregnancy, doctors diagnose high blood pressure if the systolic or top number is 140 (mm Hg) or higher or if the diastolic pressure the bottom number is 90 (mm Hg) or higher. The amount of protein in urine in cases of preeclampsia will be greater than 300 milligrams (mg) over a 24-hour urine collection.

Other symptoms of preeclampsia may include:

- A headache that won't go away
- Shortness of breath
- Blurred vision, seeing spots, loss of vision, light sensitivity
- Pain in the upper belly, under the ribs on the right side
- Trouble urinating (peeing)
- Nausea and vomiting
- Sudden weight gain
- Swelling in the hands or face
- Lightheadedness

**If you experience these symptoms, call your doctor immediately.*

When preeclampsia progresses to more severe forms, additional signs/symptoms may include:

- Blood pressure of 160/110 mmHg or higher
- Decreased kidney or liver function
- Vision changes
- Fluid in the lungs
- Seizures
- Low platelet count (this is a blood test. Platelets are part of the blood that helps it clot)

You're more likely to develop preeclampsia during pregnancy if the following apply to you:

- First pregnancy
- Personal or family history of preeclampsia
- Having twins or more
- You're 35 or older
- History of diabetes, high blood pressure, or kidney disease
- History of thyroid disease or autoimmune disorders like Lupus
- Blood vessel problems
- Poor diet/obesity

Lowering Your Risk of Preeclampsia

No one is entirely sure what causes preeclampsia. Things you can do to lower your risk include maintaining a healthy weight, controlling your blood pressure and blood sugar especially if you had high

blood pressure or diabetes before you got pregnant, exercising lightly every day, getting enough sleep, and following a nutritious diet low in salt, sugars, and fats. Women at higher risk for developing preeclampsia and its related complications may be advised to take a daily low-dose aspirin after 12 weeks of pregnancy. Your healthcare provider will tell you if you need to do this. Don't start doing this on your own because taking aspirin daily can cause stomach problems.

Diagnosis

Preeclampsia is often diagnosed during routine prenatal visits when your healthcare provider checks your blood pressure, urine and weight gain. If healthcare providers suspect preeclampsia, they may do the following:

- Order more tests to check kidney and liver functions
- Suggest a 24-hour urine collection to monitor protein levels
- Order an ultrasound to look at the size of your baby and check amniotic fluid volume
- Order fetal (baby) monitoring
- Check for a buildup of fluid in your lungs

Treatment

Preeclampsia often goes away after the baby is born. However, it may continue or even start after delivery. That's why the first six weeks after delivery are especially important for your health. Make sure to go to your follow-up visit with your healthcare provider. It is important to tell your doctor about any symptoms you may have like a headache, swelling, or dizziness. While the first six weeks are critical, pregnancy-related health problems can occur up to a whole year after giving birth, so you need to remain careful of your health.

At 37 weeks, babies are usually developed enough to be healthy outside the womb. If you're diagnosed with preeclampsia, your healthcare provider may recommend delivering your baby early so the condition does not worsen.

If you have mild preeclampsia and are not at 37 weeks, preeclampsia can sometimes be managed at home until your baby has matured enough to be delivered. At-home treatment would involve wearing a fetal monitor and possibly taking medicine to help your baby's lungs reach maturity if a premature delivery is needed. Your baby may have to be delivered early if the following signs and symptoms occur:

- The bottom number of your blood pressure is 110 mmHg or greater, or the top number is 160 mmHg or greater on two occasions at least four hours apart OR your blood pressure remains elevated, and medications need to be started
- Abnormal liver function test results
- Severe headaches
- Pain in the stomach
- Seizures or changes in mental function
- Fluid buildup in the lungs
- HELLP syndrome, which refers to a group of symptoms including hemolysis (destruction of red blood cells), elevated liver enzymes, and low platelet counts

- Low platelet count or bleeding
- Abnormal kidney function tests

If you develop severe preeclampsia, you may also be given magnesium sulfate, a medicine to prevent seizures and medications to help control your blood pressure.

Coping and Other Risk Factors to Consider

Dealing with preeclampsia can be hard. Planning ahead can help. It's important to know who you are going to call and how you are going to get to the hospital if an emergency occurs.

Several studies have shown that African American women have an increased risk of preeclampsia compared to other women. If you're Black, you may want to talk to your doctor about your risk level and prevention strategies.

If you're diagnosed with preeclampsia it's important to keep your stress levels down. Tell your healthcare provider if you don't have a secure place to live, enough food, or other support you need. You're not alone. Social workers and community organizations can be brought in to help find solutions for food, housing, childcare, transportation, mental health treatment, and other necessities.

After pregnancy, high blood pressure can also be a problem. It can increase the risk of developing other conditions like kidney problems, heart disease, and stroke. This is why it is important to continue checking and monitoring your blood pressure for up to a year after giving birth. Caring for a new baby can be tiring and stressful. Many new moms naturally shift their attention to their babies, but it is important to remain on the alert about your own health too.

What to Eat

First, reading food labels and avoiding foods high in salt, sugar, and unhealthy fats is essential. (See Food Label Guide Below) These foods can contribute to high blood pressure and other health problems. Instead, try to focus on eating whole, nutritious foods rich in vitamins and minerals.



Processed foods like potato chips, cookies, hot dogs, mac-n cheese, and soda, are often high in salt, sugar, and unhealthy fats. These foods are popular and can be convenient to buy and eat but they can also harm your health. Processed foods can contribute to high blood pressure, weight gain, and other health problems. It's best to limit your intake of processed foods and focus on whole, fresh foods instead.

Alcohol should also be avoided during pregnancy and the months after giving birth. Drinking alcohol during pregnancy can be harmful to the baby's development, and it can also increase your blood pressure

So, what should you eat during pregnancy to maintain a healthy blood pressure? Here are some tips:

- Eat plenty of fresh fruit and vegetables. These foods are rich in vitamins, minerals, and fiber, and they can help keep your blood pressure in a healthy range.
- Choose whole grains, like brown rice, instead of refined grains, like white rice or white bread. Whole grains are a good source of fiber and can help keep your blood pressure in check.
- Eat lean proteins like chicken, fish, and beans.
- Include healthy fats in your diet, such as those found in nuts, seeds, and avocados. These fats can help keep your blood pressure in a healthy range. Make sure the nuts are unsalted or lightly salted.
- Drink plenty of water. Staying hydrated is vital for overall health and can help keep your blood pressure in check.

If you can't get to a grocery store, the grocery store near you doesn't sell healthy options, or if you can't afford groceries, it's important to tell your healthcare provider this as soon as possible. They can work with local social workers and community organizations who can help you get the foods you need to nourish yourself and your baby. Remember, you are not alone, and many people want to help you.

How to Check Your Blood Pressure and Why Keeping a BP Journal is helpful

Taking your blood pressure helps you monitor your health and can identify any potential problems with your heart or blood vessels. Inside your *Pressure Care Kit*, you'll find a medical-grade automatic blood pressure cuff device and a blood pressure journal. To measure your blood pressure, follow these steps:

*You can also watch this American Heart Association video on how to take your blood pressure if you prefer: <https://nhci.heart.org/blog/video/release-the-pressure-smbp-training-video/>

1. Avoid having anything with caffeine for half an hour before you take your pressure.
2. Sit in a chair that supports your back. Make sure not to cross your ankles and that your feet are flat on the floor.
3. Put the cuff on your upper left arm. It should be snug but not too tight. The bottom of the cuff should be about an inch above your elbow. That puts the blood pressure cuff at about your heart level.
4. Turn on the blood pressure monitor and press the start button. The cuff will inflate and feel tight around your arm. It may feel uncomfortable. Some people get nervous when this happens in a doctor's office. It helps to remind yourself that this process is less than a minute. Try to breathe

normally. Focusing on someone or something else in the room or thinking about a happy memory can also help. The cuff will slowly deflate.

5. Write down the numbers on the screen. The monitor will show two numbers: the systolic pressure (the top number) and the diastolic pressure (the bottom number). Write down both numbers in your medical journal, along with the date and time. Do this at least twice a day.
6. Repeat the process at the same time each day. Try to take your blood pressure in the morning and at night, before eating or after waiting at least two hours after eating. Avoid talking when taking your blood pressure and don't take it just after exercising or when you're feeling stressed or angry.

Keeping a medical journal of your blood pressure readings is essential for tracking any changes over time. By recording your blood pressure two times a day and sharing your results with your healthcare provider, together you can identify any trends or potential problems.

Recommended Salt Intake During Pregnancy

- Whether or not you are pregnant, the recommended amount of salt, or sodium as it appears on food labels, should add up to no more than 2,300 milligrams (about twice the weight of a small paper clip) per day. That's about one teaspoon of salt. Pregnant women with high blood pressure, diabetes, or kidney disease should try to reduce their salt intake to 1500 milligrams per day, or 2/3rds of one teaspoon.
- Cutting back can be difficult because sodium is added to a lot of foods you might not expect. For example, a single slice of white bread has 240 milligrams of sodium. That means that you can take in 20% of your daily recommended amount of salt by eating the bread alone, never mind what's in the sandwich. So, when you're at the grocery store, look for foods that say low-sodium or salt-free and always check how much sodium is in each item of food.
- Another culprit during pregnancy is sugar. If your healthcare provider has told you to watch your blood glucose, it's important to check both the total sugars and added sugar levels on food labels.
- Besides reading food labels, it's best to cook at home so that you can control how much salt is added to your meals. Try cutting back on the amount of salt in your recipes or try using salt substitutes like *Mrs. Dash, which you'll find in your kit*, or using herbs and spices to flavor your food.
- If you do eat out, try to avoid sauces. Ketchup, soy sauce and salad dressings tend to have both added salt and sugar.
- Monitoring your salt and sugar intake can be harder when you're pregnant because many women have food cravings. Food cravings start at the end of the first trimester, peak during the second, and tend to taper off in the third trimester. Most women crave chocolate and other sugary foods, but those who crave salt tend to do so during the third trimester. If you gotta have your chocolate fix, maybe try eating just a square, or switching to dark chocolate. 75% to 85% dark chocolate has lower levels of added sugar and fat than milk or white chocolate. It's also higher in flavanols which are good for your heart and lower blood pressure.

Reading Food Labels

Nutrition Facts	
4 servings per container	
Serving size	1 cup (227g)
Amount per serving	
Calories	280
% Daily Value*	
Total Fat 9g	12%
Saturated Fat 4.5g	23%
Trans Fat 0g	
Cholesterol 35mg	12%
Sodium 850mg	37%
Total Carbohydrate 34g	12%
Dietary Fiber 4g	14%
Total Sugars 6g	
Includes 0g Added Sugars	0%
Protein 15g	
Vitamin D 0mcg	0%
Calcium 320mg	25%
Iron 1.6mg	8%
Potassium 510mg	10%

* The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.

1. Serving Information

2. Calories

3. Nutrients

4. Quick Guide to percent Daily Value (%DV)

- 5% or less is **low**
- 20% or more is **high**

What to do with the Blood Pressure Cuff When Finished

If, after a year of journaling, you no longer need the blood pressure cuff, you can give it back to your healthcare provider, or you can pass it and our educational materials along to another pregnant friend you know. Pregnancy can be a scary and lonely time for some mothers, especially those who lack a strong support system. Our connections are vital to all of us and help keep us physically and mentally safe. So, please check-in on her often and help keep her and her baby feeling safe and loved.