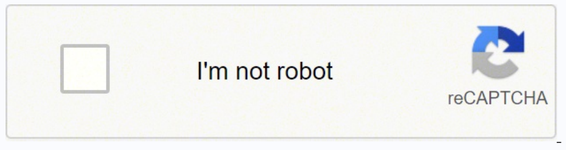

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Can high blood pressure harm my unborn baby

CC0 Rawpixel/Pixabay According to the Center for Disease Control (CDC) there are approximately 75 million American adults (32%) who have high blood pressure. However, only half of those actually have the condition under control. In 2014, high blood pressure was either the primary or contributing cause of death in over 410,000 Americans. But what exactly creates high blood pressure? The level of blood pressure depends on the amount of blood that is being pumped by the heart and the amount of resistance of blood flow to the arteries. The narrower the arteries, combined with a high level of blood flow, will result in a higher blood pressure. Here is an overview on how to read blood pressure numbers, the cause and symptoms associated with abnormal levels and the treatments and preventative steps that should be started if this currently is or could potentially be an issue. Age Range Blood pressure is something that should be regularly looked at during your check-ups with your healthcare provider. Those that are 40 or older or are aged 18-39 and have a high risk of high blood pressure, should have this checked more often. If you don't have a regular doctor whom you meet with annually, visit one of the local pharmacies where they may have a machine that allows you to check your blood pressure for free. Health resource fairs are also another option of where you can get free blood pressure screenings. But once you have your blood pressure numbers, you need to understand what they mean.. Blood Pressure ReadingsThere are four main categories that people's blood pressure will fall into. The first is the normal category which is ideal. The top (systolic) number represents the amount of force that is exerted as the heart contracts and pumps blood. The bottom (diastolic) number is the amount of force exerted in between the contractions. If the numbers are around 120/80mm Hg, this would be a good blood pressure reading. The second category is elevated blood pressure when the systolic number is between 120-129 and diastolic number is 80mm Hg. Then there is the stage 1 high blood pressure (hypertension) which is a systolic number between 130-139mm Hg and diastolic number between 80-89mm Hg. And lastly, the stage two high blood pressure (hypertension) with systolic numbers of 140mm Hg or higher and diastolic numbers 90 or higher. Having said that, there are instances when the blood pressure can actually be too low and can lead to dizziness, fainting, blurred vision, fatigue and nausea. Blood pressure levels that are 90mm Hg systolic or 60mm Hg diastolic are considered low blood pressure. The seriousness of this though can range from just being dehydrated to needing serious medical attention. CausesThere are many factors that can play a role in causing high blood pressure in individuals. Some factors include obesity, lack of exercise, excess drinking or tobacco use or family genes. Those that intake too much sodium (salt) and not enough Potassium and Vitamin D are also increasing their risk of high blood pressure. And of course, there are factors such as age, race and stress levels that play an important role in one's blood pressure. Unfortunately though, there are many that have hypertension but do not realize it as it has developed over many years and by the time the symptoms appear, it is often too late. Symptoms While there are a few signs that can be associated with high blood pressure, they are rarely ever solely caused by it. These symptoms could be facial flushing when blood vessels in the face are dilated, which can be caused by stress, exposure to heat or hot water or due to consuming too much alcohol. Another sign may be headaches, nosebleeds or dizziness, but again there may be other factors playing a role such as side effects from blood pressure medication or due to another health issues such as diabetes. Because there aren't any clear signs, high blood pressure is also known as a "silent killer". But by having regular check-ups with a healthcare provider, they should be able to identify any damage done to the blood vessels or heart. If it goes undetected though, it can lead to heart issues such as a heart attack or stroke. Treatment Learning how to treat low and high blood pressure is extremely important. They are both done by adopting a healthy lifestyle that consists of a balanced diet that is low in salt complimented with regular exercise. It is also recommended to work closely with your doctor who can also show you how to regularly monitor your blood pressure at home. While there is no cure for high blood pressure, these steps will greatly contribute to the quality of life and reduce the potential for future heart disease, stroke and kidney disease. Some healthcare providers will also prescribe high blood pressure medication. There are some who claim that certain herbs help reduce blood pressure but it is highly recommended to consult with your doctor first as some herbs can have strong side effects if taken in too high of a quantity. Currently, there are no high blood pressure specialists that regularly recommend taking herbs to lower your blood pressure. MORE FROM LIFE123.COM Table of Contents A small percentage of pregnant women in the U.S. have high blood pressure at some point during their pregnancy. Some cases are mild; other cases are severe. Treatment varies depending on the type you have and how far along you are in your pregnancy. There are three main types of high blood pressure during pregnancy: Chronic hypertension. This is high blood pressure you had before you became pregnant. It can also refer to high blood pressure you get before the 20th week of pregnancy. Sometimes you may have high blood pressure for a long time before becoming pregnant but don't know it until your first prenatal visit with your doctor. Chronic hypertension can lead to serious problems, including preeclampsia. This type of high blood pressure continues after you have your baby. Gestational hypertension. This is high blood pressure you get after your 20th week of pregnancy. Most of the time, this hypertension doesn't hurt you or your baby. You may not even have other symptoms. However, sometimes this type of hypertension is severe. It can cause your baby to be born smaller than normal (have a low birth weight). Your baby may even be born early because of it. It can lead to preeclampsia. And while it usually goes away within three months of giving birth, it can raise your risk of getting high blood pressure in the future. Preeclampsia. This is a sudden rise in your blood pressure after your 20th week of pregnancy, typically in your third trimester. It also may cause damage to your liver, kidneys, or brain. You may have seizures. You may have significant swelling in your legs and sometimes your arms and face. This condition is serious. It can hurt both you and your baby, and even be life threatening. Some women get preeclampsia after they deliver their baby. This is called postpartum preeclampsia. In some cases, high blood pressure during pregnancy can cause harm to you and your baby. You may develop gestational diabetes. You may experience problems with your heart or kidneys. You're also at greater risk for a stroke. High blood pressure may prevent the placenta from getting enough blood. (The placenta gives oxygen and food to your baby.) If the placenta doesn't get enough blood, your baby doesn't get enough oxygen and food. This can cause low birth weight and premature birth. High blood pressure can lead to placental abruption. This is when the placenta becomes unattached to the uterus. This can be a life threatening situation to both you and your baby. Watch for these symptoms. However, keep in mind that some of these symptoms are common among pregnant women and don't necessarily mean you have a problem. Talk with your doctor about all your symptoms. Constant headache. Changes to your vision. Abdominal pain. Nausea and vomiting. Shortness of breath. Swelling of your hands and face. Low, or no, urine. Some women have a higher chance to getting high blood pressure while they're pregnant. These include women who: Are having their first baby. Have a mom or sister who had high blood pressure while pregnant. Are carrying multiple babies (twins, triplets). Are older than 40 years old. Are African American. Were overweight when they became pregnant. Had high blood pressure before they became pregnant. No one test diagnoses high blood pressure while pregnant. Instead, your doctor will take your blood pressure at each of your prenatal appointments. He or she will keep track of your blood pressure readings during your pregnancy and be able to spot any changes that could indicate an overall problem. He or she will also use urine and blood tests to watch for possible issues. It can't be prevented. However, you can lower your chances of getting it by making necessary adjustments before getting pregnant. These include getting or maintaining a healthy weight, eating a healthy diet, and exercising regularly. If you have chronic hypertension before you get pregnant, talk with your doctor. He or she will look at how well your hypertension is being managed and let you know if you need to make any changes before getting pregnant. If you have chronic hypertension, you may have been taking medicine for it before you became pregnant. Tell your doctor which medicine you're taking. He or she may say it's okay to continue that medicine. But if the medicine isn't safe for your baby, you may need to switch to another medicine during your pregnancy. Like with all pregnancies, your doctor will check your blood pressure and urine during your regular appointments. If you have gestational hypertension, your doctor will monitor your blood pressure and urine more closely. He or she will do this to watch for signs of preeclampsia. Your doctor may also monitor your baby. One way to do that is with an ultrasound. This is a painless test that lets your doctor see your baby inside your body. If you have preeclampsia, treatment depends on where you are in relation to your due date. That's because preeclampsia often goes away after you have your baby. If you're 37 weeks or more pregnant, your doctor may suggest having the baby as soon as possible. However, if you're less than 37 weeks pregnant, your doctor may choose to monitor you even more closely than before. Along with the regular urine and blood tests, you may need to take medicine to help your blood pressure. You may also need to take medicine that help prevent seizures, which can happen with preeclampsia. You may be told to stay in bed until your baby is born. You may be given a steroid shot of a medicine that will help your baby's lungs develop quicker in case your baby needs to be born early. Your baby will continue to be watched with ultrasound. Your doctor may also watch your baby's health through a heart monitor. If your preeclampsia is extremely severe, your doctor may say you need to deliver your baby right away, regardless of how close you are to your due date. Go to each of your prenatal visits with your doctor. This will allow him or her to monitor your blood pressure. Your doctor may ask you to record your blood pressure at home. He or she can give advice on how to do that. Your doctor will check your urine at each visit. High levels of protein in urine can be a symptom of preeclampsia. Discuss all your medicines with your doctor. Also, don't start or stop taking any medicines, including over-the-counter medicines, without talking to your doctor. Some of these may affect your blood pressure. I'm pregnant and have high blood pressure. How great is my risk of developing gestational hypertension or preeclampsia? Is there anything I can do to reduce my risk? Will medicines help me? How often will I need to see you for appointments? What are my treatment options? Will I need bed rest? Will I need a C-section? Or can I have a vaginal birth? Copyright © American Academy of Family Physicians This information provides a general overview and may not apply to everyone. Talk to your family doctor to find out if this information applies to you and to get more information on this subject.

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