

Recovering from pre-eclampsia

This leaflet explains more about what to expect if you had pre-eclampsia in your pregnancy.

If you have any further questions, please speak to a doctor or midwife caring for you.

What is pre-eclampsia?

Pre-eclampsia is a condition that can occur in pregnant women when there is a problem with the placenta (the organ that links the baby's blood supply to the mother's, also called the afterbirth). As a result, the mother can develop:

- high blood pressure (hypertension)
- protein in her urine (proteinuria)
- fluid retention and swelling (oedema).

Pre-eclampsia occurs in one in 10 pregnant women and can affect both the mother and her unborn baby.

Most cases are mild. However, in some cases, further complications can develop, such as eclampsia. This is a type of seizure that the mother can have. It is rare, but can be life-threatening for the mother and the baby. Signs include:

- high blood pressure (140/90 or above)
- protein in the urine of the mother
- poor growth of the baby.

Can it be cured?

Delivery of your baby is the only cure; therefore some women have their labour induced early.

When can I leave hospital?

You can leave hospital once your symptoms have settled, your blood tests are improving and your blood pressure has returned to normal (140/90 or below without medication; 150/100 or below with medication). This is usually three or four days after your baby is born.

After I leave hospital

Eat and drink as normal. We advise all our new mothers to eat a balanced and healthy diet and to avoid alcohol if breast feeding. For further information about healthy eating, visit www.nhs.uk/LiveWell/Goodfood.

Will it happen in my next pregnancy?

If you have had pre-eclampsia before, you are seven times more likely to experience it in your next pregnancy. Booking for the pregnancy early and attending antenatal clinics regularly is vital for mothers more likely to develop pre-eclampsia. You may be prescribed a **small dose (75mg) of daily aspirin** from early in your next pregnancy to help prevent it. If pre-eclampsia occurred early in the pregnancy (necessitating delivery of the baby before 34 weeks), your doctor may want to screen you for certain conditions, such as anti-phospholipid syndrome.

Are there long-term risks to my health?

In most cases, blood pressure returns to normal within about six weeks after your baby is born and the protein in your urine goes away. **It is important to make sure both your blood pressure and urine are normal when you have your six week postnatal check with your GP.**

Women who have had pre-eclampsia are three times more likely to develop high blood pressure in later life, and two to three times more likely to suffer a stroke or heart attack compared to women who have not had pre-eclampsia. It is therefore very important to have your blood pressure measured regularly – this can be done by a doctor or nurse at your GP surgery.

There are other risk factors for strokes and heart attacks that you may be able to change. These include stopping smoking, eating a healthy diet, taking regular exercise and losing weight if you are overweight.

What can I do to help myself in future pregnancies?

Seek expert advice early on in your next pregnancy – or even before conception – to plan your antenatal care. Insist on frequent antenatal checks and ensure your blood pressure and urine are checked at each visit. Never miss an appointment and report any unusual signs or symptoms to your midwife or doctor.

Signs to look out for:

- Unusual headaches that don't go away.
- Blurred vision, flashing lights or spots before your eyes.
- Bad pain just below your ribs, especially on your right side.
- Vomiting (not the 'morning sickness' of early pregnancy).

What should I do if I have a problem?

- Contact your midwife or GP immediately.
- Ring and then attend our early pregnancy and acute gynaecology unit (EPAGU) on **020 7188 0864** (if you are less than 18 weeks pregnant). Your GP can also refer you. The EPAGU is open Monday to Friday from 8.30am to 6.30pm and, at weekends, from 9.30am to 3.15pm.
- If you are over 18 weeks pregnant, telephone the antenatal day unit on **020 7188 1723** (lines are open 9am to 7pm).
- If you need help outside these hours, telephone the gynaecology ward (**020 7188 2687**) or the hospital birth centre (**020 7188 2975**).

Will I have a follow-up appointment?

Yes. You will be seen six weeks after your delivery either by your obstetric consultant and his/her team, or by your GP, depending on the severity of the pre-eclampsia.

Useful sources of information

Action on Pre-eclampsia

www.apec.org.uk

Stop smoking helpline

t: 0800 022 4 332 (Monday to Friday, 9am to 8pm and Saturday and Sunday 11am to 5pm)
www.smokefree.nhs.uk

Pharmacy medicines helpline

For information about any medicines that you have been prescribed at Guy's and St Thomas' hospitals, you can speak to the staff caring for you or call our helpline.

t: 020 7188 8748 9am to 5pm, Monday to Friday.

Patient Advice and Liaison Service (PALS) – To make comments or raise concerns about the Trust's services, please contact PALS. Ask a member of staff to direct you to the PALS office or:
t: 020 7188 8801 at St Thomas' t: 020 7188 8803 at Guy's e: pals@gstt.nhs.uk

Knowledge & Information Centre (KIC) – For more information about health conditions, support groups and local services, or to search the internet and send emails, please visit the KIC on the Ground Floor, North Wing, St Thomas' Hospital.

t: 020 7188 3416

Language support services – If you need an interpreter or information about your care in a different language or format, please get in touch using the following contact details.

t: 020 7188 8815 fax: 020 7188 5953

NHS Direct – Offers health information and advice from specially trained nurses over the phone 24 hours a day.

t: 0845 4647 w: www.nhsdirect.nhs.uk

NHS Choices – Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

w: www.nhs.uk

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To join, please call 0848 143 4017, email members@gstt.nhs.uk or visit www.guysandstthomas.nhs.uk