

Maternal C-type natriuretic peptide tied to pre-eclampsia

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(HealthDay)—Levels of maternal plasma amino terminal propeptide of C-type natriuretic peptide (NTproCNP) may be useful in defining phenotypes associated with pre-eclampsia in late pregnancy, according to a study published online April 5 in *BJOG: An International Journal of Obstetrics and Gynaecology*.

Eric A. Espiner, M.D., from the University of Otago in New Zealand, and colleagues retrospectively reviewed data from the Screening for Pregnancy Endpoints (SCOPE) cohort and bio-banked samples of [maternal plasma](#). Radioimmunoassay was used to measure NTproCNP in early (14 to 16 weeks of gestation, and again at 19 to 21 weeks of gestation) and late (34 to 36 weeks of gestation) pregnancy in three groups of 20 women: pre-eclampsia; gestational hypertension (GHT) with small for [gestational age](#) (SGA); and [uncomplicated pregnancy](#).

The researchers observed no differences in plasma NTproCNP in early pregnancy between women with vascular disorders and controls. However, in [late pregnancy](#), levels in pre-eclampsia (28.8 pM) and in GHT with SGA (28.6 pM) were significantly increased ($P = 0.01$ and 0.027 , respectively) compared to controls (21.3 pM). Associations of NTproCNP with concurrent diastolic and mean arterial pressure were seen when combining all three groups at 34 to 36 weeks of gestation ($r = 0.46$).

"Plasma NTproCNP measurements may have clinical application in late pregnancy in defining the different phenotypes associated with pre-eclampsia," the authors write.

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More information: [Abstract](#)
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