

Study shows increased risk of early mortality in women with hypertensive disease

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In a study to be presented on Feb. 5 at the Society for Maternal-Fetal Medicine's annual meeting, The Pregnancy Meeting, in Atlanta, researchers will present findings from a study titled, Long-term mortality risk following hypertensive disease of pregnancy (HDP).

It has long been recognized that <u>pregnancy</u> puts considerable stress on the body and that there are specific conditions during pregnancy that will indicate lifelong health issues. The objective of this study was to assess whether <u>women</u> with a history of any hypertensive <u>disease</u> during pregnancy have increased risk for early <u>mortality</u> and to determine the timing and most common cause of their deaths.

The study looked at births from 1939 to 2012 using the Utah Population Database. Based on birth certificate data, researchers assigned a diagnosis of HDP and, when possible, the category of disease (gestational hypertension, preeclampsia, HELLP syndrome—a serious complication of high-blood-pressure during pregnancy, and eclampsia). Exposed women had a singleton pregnancy complicated by HDP and lived in Utah for more than a year following delivery. Primary cause of death was ascertained from death certificates.

Of 2,083,331 birth certificates evaluated, 61,727 (3%) had HDP. Of these, all-cause mortality was significantly increased for women with a history of HDP. They also had the greatest risk of mortality due to Alzheimer's disease, diabetes, ischemic heart disease, and stroke.



"We now know that women with a history of any category of HDP are at increased risk for mortality from a variety of causes," stated Lauren Theilen, M.D. one of the researchers on the study who will present the findings at the SMFM annual meeting. Dr. Theilen is with the University of Utah Health Sciences Center in Salt Lake City. "It's important for physicians who care for these women beyond their childbearing years to recognize the significance of a history of HDP so that these women may receive appropriate screening and intervention," Theilen added.

The study concluded that women with a history of HDP have <u>increased</u> <u>risk</u> of early mortality with the highest hazard ratios for neurologic, endocrine and circulatory causes. Increased mortality risk for these women begins approximately 20 years after pregnancy.

Provided by Society for Maternal-Fetal Medicine

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