

Rise in use of antihypertensives in delivery with preeclampsia

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(HealthDay)—Use of antihypertensive treatments during delivery

hospitalizations in women with preeclampsia has increased since 2006, according to a study published online Feb. 5 in *Obstetrics & Gynecology*.

Kirsten L. Cleary, M.D., from Columbia University in New York City, and colleagues performed a [retrospective cohort study](#) to evaluate [antihypertensive drugs](#) dispensed during delivery hospitalizations complicated by [preeclampsia](#) from 2006 to 2015. Overall, 239,454 patients were included in the analysis, with 126,595 women having mild, 31,628 having superimposed, and 81,231 having severe preeclampsia.

The researchers found that overall, 105,409 women received a hypertensive agent. Receipt of oral labetalol increased from 20.3 percent in 2006 to 31.4 percent in 2014 for all patients with preeclampsia. Over the same time period, receipt of intravenous labetalol increased from 13.3 to 21.4 percent, hydralazine from 12.8 to 16.9 percent, and nifedipine from 15 to 18.2 percent. Patients receiving more than one medication increased from 16.5 to 25.8 percent. The proportion of patients receiving any antihypertensive increased from 37.8 percent in 2006 to 49.4 percent in 2015. For severe preeclampsia, rates of antihypertensive administration varied significantly by hospital. The risk for stroke in women with severe preeclampsia decreased from 13.5 per 10,000 deliveries in 2006 to 2008 to six per 10,000 deliveries in 2012 to 2014.

"Use of multiple antihypertensive agents to treat preeclamptic women increased over the study period for [women](#) with mild, superimposed, and severe preeclampsia," the authors write.

One author disclosed financial ties to the pharmaceutical industry.

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