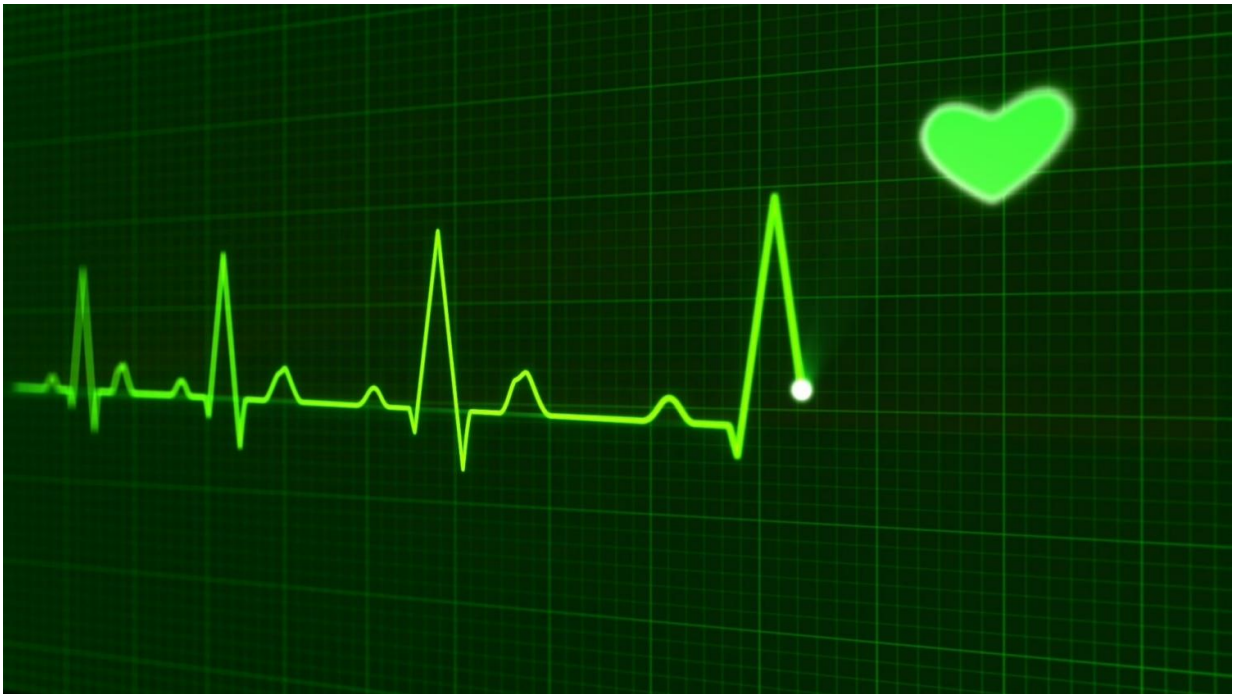


Women most at risk for heart failure weeks after giving birth

April 2 2018, by Jeffron Boynés



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Heart failure is a leading cause of maternal morbidity and death in the U.S.—with the rate of pregnancy-related deaths more than doubling between 1987 and 2011. Even so, much about heart failure-related hospitalizations before, during and after delivery is unknown.

A study from the University of Illinois at Chicago has found that women

are at the highest risk for [heart failure](#) within the six weeks after delivery, known as the postpartum period.

"This finding lends support to using delivery-related hospitalization as a window of opportunity to identify high-risk women and develop surveillance strategies before discharge," said the study's lead author, Mulubrhan Mogos, assistant professor of nursing at UIC.

The results of the study also suggest that [heart](#) failure is a significant clinical problem among relatively young reproductive-age women, especially among women with the presence of an additional disease or condition, such as hypertension, Mogos said.

The study found that although less than 2 percent of all pregnancy-related hospitalizations occurred during the postpartum period, nearly 60 percent of pregnancy-related heart failure hospitalizations took place during the same time.

The researchers published their findings in the journal *Circulation: Heart Failure*.

The study's findings highlight the need for close monitoring of high-risk women before they are discharged from the hospital after giving birth and through the [postpartum period](#), according to Mogos and his colleagues. Typically, women are discharged from the [hospital](#) within two to three days after delivery and are not evaluated by their [health care providers](#) again until six weeks later.

The study analyzed more than 50 million pregnancy-related hospitalizations in the U.S. from 2001 to 2011. From 2001 to 2006, there was a 7.1 percent increase each year in heart failure diagnoses among postpartum hospitalizations, the rates then stabilized until 2011, the final year analyzed.

Heart failure rates during the antepartum period, or prior to delivery, increased by an average of 4.9 percent per year from 2001 to 2011, which may be attributable, at least in part, to the presence of [high blood pressure](#), diabetes or other risk factors or conditions the women had before becoming pregnant, as well as improved testing to detect heart failure, researchers found.

The women who had a heart failure diagnosis—before and after giving birth—tended to be older and black, according to researchers. The women were from the southern United States and lived in low-income household areas and engaged in risky behaviors, including using tobacco, drugs and alcohol, according to the study.

Mogos and his co-authors concluded that at-risk mothers require close observation postpartum, ideally from a multidisciplinary team that includes heart [failure](#) specialists. This attention has been linked to better outcomes and fewer readmission rates.

"Health education about expectations and their risk status during delivery-related hospitalization may empower [women](#) to seek immediate support from their social network and healthcare provider," Mogos said.

In addition, "There is a need for increased awareness and public health measures to address risk factors and promote prevention strategies among historically disadvantaged groups," he said.

More information: Mulubrhan F. Mogos et al. Heart Failure in Pregnant Women, *Circulation: Heart Failure* (2018). [DOI: 10.1161/CIRCHEARTFAILURE.117.004005](#)

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