

High blood pressure during pregnancy associated with more bothersome menopause symptoms

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Women with high blood pressure during pregnancy are at an increased risk for chronic hypertension, diabetes, coronary artery disease, stroke, and early cardiovascular death. A new study suggests that they may also



be at risk for more bothersome menopause symptoms, including hot flashes. Study results are published online today in *Menopause*.

Hypertensive disorders of pregnancy (HDP), such as gestational hypertension and preeclampsia, are well recognized as female-specific predictors of cardiovascular disease, the leading cause of death in women. Similarly, certain menopause symptoms, such as hot flashes, are known to be indicators of cardiovascular risk, although the exact link is unknown. Despite the fact that HDP and hot flashes are both tied to heart disease, there has been little research to link the two.

Researchers in this new study involving nearly 2,700 women theorized that by understanding the connection between HDP and hot flashes, they may help clinicians better identify women at higher risk for cardiovascular disease so that they can intervene with effective treatment strategies. The purpose of the study was to investigate the association between a history of HDP and menopause symptoms. In the end, it was concluded that women with a history of HDP experienced more severe menopause symptoms compared with women without a history of HDP or with women without a pregnancy. On more detailed analysis, the researchers additionally found that women with HDP using hormone therapy had significantly higher total menopause symptoms than women with no such history.

Results are published in the study "Hypertensive disorders of pregnancy and menopausal symptoms: a cross-sectional study from the data registry on experiences of aging, menopause and sexuality."

"This large cross-sectional study shows a link between hypertensive disorders of pregnancy and menopause symptoms, both unique to women and predictive of future cardiovascular disease risk. Future studies are needed to determine whether these risks are additive to better inform development of more accurate models for cardiovascular risk



prediction in women and strategies for risk reduction," says Dr. Stephanie Faubion, lead author of the study and NAMS medical director.

Provided by The North American Menopause Society

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