

Pregnancy and Heart Health

What to know to live healthfully beyond your pregnancy



Creating a world without heart and vascular disease

Pregnancy is an exciting time in a woman's life filled with anticipation of what's to come. Many people believe that conditions that occur during pregnancy resolve themselves when the baby is born, but often, that's not the case.

The reality: Many pregnancy-induced conditions increase a woman's health risks immediately following delivery and for many years to come. In fact, pregnancy is often thought of as a woman's first "stress test" that can unmask underlying heart and vascular problems and future risk.

For women who are pregnant, it's important to understand the long-term heart and vascular impacts that can result from pregnancy-induced conditions.



Unique heart disease risk factors in pregnancy

High blood pressure during pregnancy

How common is it?

- Pregnancy-induced hypertension (or high blood pressure) affects about 10-15 percent of pregnancies.

What are the health concerns it causes?

- Studies have shown that women who have high blood pressure during pregnancy are two to three times more likely to develop chronic high blood pressure — a major risk factor for heart disease.
- High blood pressure is most likely to occur within the first five years of delivery. It may also increase a woman's risk of developing diabetes and high cholesterol.

Preeclampsia during pregnancy

What is it?

- Preeclampsia is a more serious hypertensive disorder in pregnancy when a woman experiences new onset of high blood pressure, along with rapid weight gain, protein in the urine and swelling.

What are the health concerns it causes?

- Preeclampsia more than doubles the risk of dying from heart disease and also increases the risk for stroke and preterm labor.

Gestational diabetes

What is it?

- Gestational diabetes is diabetes that develops during pregnancy and usually resolves after delivery.

What are the health concerns it causes?

- Women who experience gestational diabetes are at significantly higher risk of developing type 2 diabetes, which often develops within five years of delivery.
- Women with gestational diabetes are also at a much higher risk of heart attack and stroke.

Can type 2 diabetes be prevented?

- The good news is that lifestyle (as with many risk factors) is a powerful prevention tool.
- Studies have shown that women who had gestational diabetes and maintained three or more healthy behaviors did not have any increase in heart disease risk. Essentially, a healthy lifestyle offset their risk for developing heart disease. See the next page for healthy lifestyle tips.

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Lower your risk ... make healthy lifestyle choices

High blood pressure, high cholesterol and diabetes may be preventable!



Breastfeed, if possible

Breastfeeding may help you lose pregnancy weight and it lowers your risk for heart disease and diabetes. The longer you breastfeed, preferably one year, the more cardio-protective it is.



Be tobacco-free

Quitting smoking drops your risk dramatically and it continues to drop over days, weeks and years. Within five years, most smokers cut their risk of stroke to nearly that of a nonsmoker.



Move more ... sit less

Being moderately physically active for 30 minutes, five days a week or more decreases your risk of heart disease and it can be fun for you and your family. Engaging in less screen time and other sedentary activities improves your heart health.



Make healthier eating choices

Eating a variety of foods and mostly plants can protect your heart. Eat more whole foods — such as vegetables, fruits and whole grains — and more healthy fats. Eat fewer highly processed foods, foods high in sugar (e.g., sugar-sweetened beverages), saturated fats and salt.



Maintain or move toward a healthier weight

Losing just 5-10 percent of your body weight will reduce your risk. More importantly, you'll feel better and have more energy to do the things you enjoy!

Did you know?

Young women who follow a healthy lifestyle have an almost **75 percent reduction** in heart disease and its risk factors (high blood pressure, diabetes and high cholesterol).

Learn more

Minneapolis Heart
Institute Foundation
www.mplsheart.org

Quit Plan
www.quitplan.com

American Heart Association
www.heart.org

Go Red for Women
www.goredforwomen.org

Women Heart
www.womenheart.org

Don't fall through the cracks ... talk to your doctor

If you experienced pregnancy complications (high blood pressure, preeclampsia, gestational diabetes) or delivered a baby that was preterm or small for its gestational age:

- ✓ See your primary care provider or OBGYN regularly. In some cases, you may be referred to a specialist, such as a cardiologist.
- ✓ Follow-up screening should begin no later than 12 weeks after your delivery to determine if you have developed any cardiovascular risk factors post-partum (diabetes, high blood pressure or high cholesterol).

Ask your provider to:

- ✓ Check your blood pressure at every visit (minimally once a year).
- ✓ Check your blood glucose and cholesterol yearly.