

CHAPTER 7: WHEN PREGNANCY BECOMES COMPLICATED

Medications Used to Manage Preeclampsia and Gestational Hypertension

(formerly known as Pregnancy Induced Hypertension or PIH)

Drug type and names	When/how given	Benefits and/or purposes	Possible risks and/or side effects	Comments
Anticonvulsants (for seizure prevention) <ul style="list-style-type: none"> magnesium sulfate 	<ul style="list-style-type: none"> Given intravenously when mother has severe preeclampsia. Initially, mother receives a large dose to quickly raise blood levels to a therapeutic level, and then magnesium sulfate is given in an intravenous (IV) solution by continuous infusion. 	<ul style="list-style-type: none"> Prevents or controls seizures by depressing central nervous system function. 	To mother: <ul style="list-style-type: none"> Jitteriness, irritability Flushing of face and trunk Sweating Lowered temperature Low blood pressure Lethargy, blurred vision Nausea and vomiting Pulmonary edema, especially when combined with corticosteroid treatment Impaired reflexes Respiratory depression Cardiac arrest (very rare) Postpartum constipation To fetus: <ul style="list-style-type: none"> Drug crosses to fetus at levels close to those in the mother. To newborn: <ul style="list-style-type: none"> Takes 3–4 days to eliminate from circulation. Reduced muscle tone Low blood calcium levels Respiratory depression 	<ul style="list-style-type: none"> Women often find magnesium to be extremely uncomfortable, but it is very effective in preventing seizures.
Antihypertensives (to lower blood pressure) <ul style="list-style-type: none"> labetalol (Normodyne, Trandate) nifedipine (Procardia) methylodopa 	<ul style="list-style-type: none"> Labetalol is given intravenously or by mouth. Nifedipine and methylodopa are given by mouth. 	<ul style="list-style-type: none"> Lowers blood pressure by dilating blood vessels throughout the mother's body. Helps treat high blood pressure during pregnancy and childbirth. 	To mother: <ul style="list-style-type: none"> Labetalol may cause slowing of heart rate, shortness of breath, and drowsiness. Nifedipine may cause transient hypotension (low blood pressure) and possible liver problems. To fetus and newborn: <ul style="list-style-type: none"> Labetalol effects include neonatal hypotension (low blood pressure), slow heart rate, and hypoglycemia (low blood sugar). 	<ul style="list-style-type: none"> Labetalol is contraindicated in women with asthma or with certain cardiac problems. Nifedipine should not be used with magnesium sulfate.