Pregnancy Complications

Complications of pregnancy are health problems that occur during pregnancy. They can involve the mother's health, the baby's health, or both. Some women have health problems before they become pregnant that could lead to complications. Other problems arise during the pregnancy. Keep in mind that whether a complication is common or rare, there are ways to manage problems that come up during pregnancy.



Health Problems Before Pregnancy

Before pregnancy, make sure to talk to your doctor about health problems you have now or have had in the past. If you are receiving treatment for a health problem, your doctor might want to change the way your health problem is managed. Some medicines used to treat health problems could be harmful if taken during pregnancy. At the same time, stopping medicines that you need could be more harmful than the risks posed should you become pregnant. Be assured that you are likely to have a normal, healthy baby when health problems are under control and you get good prenatal care.

Condition	How it can affect pregnancy
Asthma	Poorly controlled asthma may increase risk of preeclampsia, poor weight gain in the fetus, preterm birth, cesarean birth, and other complications. If pregnant women stop using asthma medicine, even mild asthma can become severe.
Depression	Depression that persists during pregnancy can make it hard for a woman to care for herself and her unborn baby. Having depression before pregnancy also is a risk factor for postpartum depression.
Diabetes	High blood glucose (sugar) levels during pregnancy can harm the fetus and worsen a woman's long-term diabetes complications. Doctors advise getting diabetes under control at least three to six months before trying to conceive.
Eating disorders	Body image changes during pregnancy can cause eating disorders to worsen. Eating disorders are linked to many pregnancy complications, including birth defects and premature birth. Women with eating disorders also have higher rates of postpartum depression.

Epilepsy and other seizure disorders	Seizures during pregnancy can harm the fetus, and increase the risk of miscarriage or stillbirth. But using medicine to control seizures might cause birth defects. For most pregnant women with epilepsy, using medicine poses less risk to their own health and the health of their babies than stopping medicine.
High blood pressure	Having chronic high blood pressure puts a pregnant woman and her baby at risk for problems. Women with high blood pressure have a higher risk of preeclampsia and placental abruption (when the placenta separates from the wall of the uterus). The likelihood of preterm birth and low birth weight also is higher.
HIV	HIV can be passed from a woman to her baby during pregnancy or delivery. Yet this risk is less than 2 percent if a woman takes certain HIV medicines during pregnancy. Women who have HIV and want to become pregnant should talk to their doctors before trying to conceive. Good prenatal care will help protect a woman's baby from HIV and keep her healthy.
Migraine	Migraine symptoms tend to improve during pregnancy. Some women have no migraine attacks during pregnancy. Certain medicines commonly used to treat headaches should not be used during pregnancy. A woman who has severe headaches should speak to her doctor about ways to relieve symptoms safely.
Overweight and Obesity	Recent studies suggest that the heavier a woman is before she becomes pregnant, the greater her risk of a range of pregnancy complications, including preeclampsia and preterm delivery. Overweight and obese women who lose weight before pregnancy are likely to have healthier pregnancies.
Sexually transmitted infections (STIs)	Some STIs can cause early labor, a woman's water to break too early, and infection in the uterus after birth. Some STIs also can be passed from a woman to her baby during pregnancy or delivery. Some ways STIs can harm the baby include: low birth weight, dangerous infections, brain damage, blindness, deafness, liver problems, or stillbirth.
Thyroid disease	Uncontrolled hyperthyroidism (overactive thyroid) can be dangerous to the mother and cause health problems such as heart failure and poor weight gain in the fetus. Uncontrolled hypothyroidism (underactive thyroid) also threatens the mother's health and can cause birth defects.
Uterine fibroids	Uterine fibroids are not uncommon, but few cause symptoms that require treatment. Uterine fibroids rarely cause miscarriage. Sometimes, fibroids can cause preterm or breech birth. Cesarean delivery may be needed if a fibroid blocks the birth canal.

Pregnancy Related Problems

Sometimes pregnancy problems arise — even in healthy women. Some prenatal tests done during pregnancy can help prevent these problems or spot them early. Use this chart to learn about some common pregnancy complications. Call your doctor if you have any of the symptoms on this chart. If a problem is found, make sure to follow your doctor's advice about treatment. Doing so will boost your chances of having a safe delivery and a strong, healthy baby.

	-	
Problem	Symptoms	Treatment
Anemia – Lower than normal number of healthy red blood cells	 Feel tired or weak Look pale Feel faint Shortness of breath 	Treating the underlying cause of the anemia will help restore the number of healthy red blood cells. Women with pregnancy related anemia are helped by taking iron and folic acid supplements. Your doctor will check your iron levels throughout pregnancy to be sure anemia does not happen again.
Depression – Extreme sadness during pregnancy or after birth (postpartum)	 Intense sadness Helplessness and irritability Appetite changes Thoughts of harming self or baby 	Women who are pregnant might be helped with one or a combination of treatment options, including: Therapy Support groups Medicines A mother's depression can affect her baby's development, so getting treatment is important for both mother and baby.
Ectopic (ek-TOP-ihk) pregnancy – When a fertilized egg implants outside of the uterus, usually in the fallopian tube	Abdominal painShoulder painVaginal bleedingFeeling dizzy or faint	With ectopic pregnancy, the egg cannot develop. Drugs or surgery is used to remove the ectopic tissue so your organs are not damaged.

pregnancy — more

Fetal problems – Unborn baby has a health issue, such as poor growth or heart problems	 Baby moving less than normal Baby is smaller than normal for gestational age Some problems have no symptoms, but are found with prenatal tests 	Treatment depends on results of tests to monitor baby's health. If a test suggests a problem, this does not always mean the baby is in trouble. It may only mean that the mother needs special care until the baby is delivered. This can include a wide variety of things, such as bed rest, depending on the mother's condition. Sometimes, the baby has to be delivered early.
Gestational diabetes – Too high blood sugar levels during pregnancy	Usually, there are no symptoms. Sometimes, extreme thirst, hunger, or fatigue Screening test shows high blood sugar levels	Most women with pregnancy related diabetes can control their blood sugar levels by a following a healthy meal plan from their doctor. Some women also need insulin to keep blood sugar levels under control. Doing so is important because poorly controlled diabetes increases the risk of: Preeclampsia Early delivery Cesearean birth Having a big baby, which can complicate delivery Baby born with low blood sugar, breathing problems, and jaundice
High blood pressure (pregnancy related) – High blood pressure that starts after 20 weeks of pregnancy and goes away after birth	High blood pressure without other signs and symptoms of preeclampsia	The health of the mother and baby are closely watched to make sure high blood pressure is not preeclampsia.
Hyperemesis gravidarum (HEYE-pur-EM- uh-suhss grav- uh-DAR-uhm) (HG) – Severe, persistent nausea and vomiting during	 Nausea that does not go away Vomiting several times every day Weight loss Reduced appetite Dehydration 	Dry, bland foods and fluids together is the first line of treatment. Sometimes, medicines are prescribed to help nausea. Many women with HG have to be hospitalized so they can be fed fluids and nutrients through a tube in their veins. Usually, women with HG begin to feel better by the 20th week of pregnancy. But some women vomit and feel nauseated

throughout all three trimesters.

extreme than "morning sickness"	Feeling faint or fainting	
Miscarriage — Pregnancy loss from natural causes before 20 weeks. As many as 20 percent of pregnancies end in miscarriage. Often, miscarriage occurs before a woman even knows she is pregnant	Signs of a miscarriage can include: • Vaginal spotting or bleeding* • Cramping or abdominal pain • Fluid or tissue passing from the vagina *Spotting early in pregnancy doesn't mean miscarriage is certain. Still, contact your doctor right away if you have any bleeding.	In most cases, miscarriage cannot be prevented. Sometimes, a woman must undergo treatment to remove pregnancy tissue in the uterus. Counseling can help with emotional healing.
Placenta previa – Placenta covers part or entire opening of cervix inside of the uterus	 Painless vaginal bleeding during second or third trimester For some, no symptoms 	If diagnosed after the 20th week of pregnancy, but with no bleeding, a woman will need to cut back on her activity level and increase bed rest. If bleeding is heavy, hospitalization may be needed until mother and baby are stable. If the bleeding stops or is light, continued bed rest is resumed until baby is ready for delivery. If bleeding doesn't stop or if preterm labor starts, baby will be delivered by cesarean section.
Placental abruption — Placenta separates from uterine wall before delivery, which can mean the fetus doesn't get enough oxygen.	 Vaginal bleeding Cramping, abdominal pain, and uterine tenderness 	When the separation is minor, bed rest for a few days usually stops the bleeding. Moderate cases may require complete bed rest. Severe cases (when more than half of the placenta separates) can require immediate medical attention and early delivery of the baby.
Preeclampsia (pree-ee-CLAMP- see-uh) – A condition starting after 20 weeks of	 High blood pressure Swelling of hands and face Too much protein in urine 	The only cure is delivery, which may not be best for the baby. Labor will probably be induced if condition is mild and the woman is near term (37 to 40 weeks of pregnancy). If it is too early to deliver, the

pregnancy that causes high blood pressure and problems with the kidneys and other organs. Also called toxemia.	Stomach painBlurred visionDizzinessHeadaches	doctor will watch the health of the mother and her baby very closely. She may need medicines and bed rest at home or in the hospital to lower her blood pressure. Medicines also might be used to prevent the mother from having seizures.
Preterm labor – Going into labor before 37 weeks of pregnancy	 Increased vaginal discharge Pelvic pressure and cramping Back pain radiating to the abdomen Contractions 	Medicines can stop labor from progressing. Bed rest is often advised. Sometimes, a woman must deliver early. Giving birth before 37 weeks is called "preterm birth." Preterm birth is a major risk factor for future preterm births.

Infections During Pregnancy

During pregnancy, your baby is protected from many illnesses, like the common cold or a passing stomach bug. But some infections can be harmful to your pregnancy, your baby, or both. This chart provides an overview of infections that can be harmful during pregnancy. Learn the symptoms and what you can do to keep healthy. Easy steps, such as hand washing, practicing safe sex, and avoiding certain foods, can help protect you from some infections.

Infection	Symptoms	Prevention and treatment
Bacterial vaginosis (BV)	Grey or whitish discharge that has a foul, fishy odor	How to prevent BV is unclear. BV is not passed through sexual contact, although it is linked with
A vaginal infection that is caused by an overgrowth of bacteria normally found in the vagina.	 Burning when passing urine or itching Some women have no symptoms 	having a new or more than one sex partner. Women with symptoms should be tested for BV.
BV has been linked to preterm birth and low birth weight babies.		Antibiotics are used to treat BV.
Cytomegalovirus	Mild illness that may	Good hygiene is the best way to

(SEYE-toh-MEG-uhloh VEYE-ruhss) (CMV)

A common virus that can cause disease in infants whose mothers are infected with CMV during pregnancy. CMV infection in infants can lead to hearing loss, vision loss, and other disabilities.

include fever, sore throat, fatigue, and swollen glands

Some women have no symptoms

keep from getting CMV.

No treatment is currently available. But studies are looking at antiviral drugs for use in infants. Work to create a CMV vaccine also is underway.

Group B strep (GBS)

Group B strep is a type of bacteria often found in the vagina and rectum of healthy women. One in four women has it. GBS usually is not harmful to you, but can be deadly to your baby if passed during childbirth.

No symptoms

You can keep from passing GBS to your baby by getting tested at 35 to 37 weeks. This simply involves swabbing the vagina and rectum and does not hurt.

If you have GBS, an antibiotic given to you during labor will protect your baby from infection. Make sure to tell the labor and delivery staff that you are a group B strep carrier when you check into the hospital.

Hepatitis B virus (HBV)

A viral infection that can be passed to baby during birth. Newborns that get infected have a 90 percent chance of developing lifelong infection. This can lead to liver damage and liver cancer. A vaccine can keep newborns from getting HBV. But 1 in 5 newborns of mothers who are HBV positive don't get the vaccine at the hospital before leaving.

There may be no symptoms. Or symptoms can include:

- Nausea, vomiting, and diarrhea
- Dark urine and pale bowel movements
- Whites of eyes or skin looks yellow

Lab tests can find out if the mother is a carrier of hepatitis B.

You can protect your baby for life from HBV with the hepatitis B vaccine, which is a series of three shots:

- First dose of hepatitis B vaccine plus HBIG shot given to baby at birth
- Second dose of hepatitis B vaccine given to baby at 1-2 months old
- Third dose of hepatitis B vaccine given to baby at 6 months old (but not before 24 weeks old)

Influenza (flu)

Flu is a common viral infection that is more likely to cause severe illness in pregnant women than in women who are not pregnant. Pregnant woman with flu also have a greater chance for serious problems for their unborn baby, including premature labor and delivery.

- Fever (sometimes) or feeling feverish/chills
- Cough
- Sore throat
- Runny or stuffy nose
- Muscle or body aches
- Headaches
- Feeling tired
- Vomiting and diarrhea (sometimes)

Getting a flu shot is the first and most important step in protecting against flu. The flu shot given during pregnancy is safe and has been shown to protect both the mother and her baby (up to 6 months old) from flu. (The nasal spray vaccine should not be given to women who are pregnant.)

If you get sick with flu-like symptoms call your doctor right away. If needed, the doctor will prescribe an antiviral medicine that treats the flu.

Listeriosis (lih-steeree-OH-suhss)

An infection with the harmful bacteria called listeria. It is found in some refrigerated and ready-to-eat foods. Infection can cause early delivery or miscarriage.

- Fever, muscle aches, chills
- Sometimes diarrhea or nausea
- If progresses, severe headache and stiff neck

Avoid foods that can harbor listeria.

Antibiotics are used to treat listeriosis.

Parvovirus B19 (fifth disease)

Most pregnant women infected with this virus don't have serious problems. But there is a small chance the virus can infect the fetus. This raises the risk of miscarriage during the first 20 weeks of pregnancy. Fifth disease can cause severe anemia in women who have red blood cell disorders like sickle cell or immune system problems.

- Low-grade fever
- Tiredness
- Rash on face, trunk, and limbs
- Painful and swollen joints

No specific treatment, except for blood transfusions that might be needed for people who have problems with their immune systems or with red blood cell disorders. There is no vaccine to help prevent infection with this virus.

Sexually transmitted infection (STI)

An infection that is passed through sexual contact. Many STIs can be passed to the baby in the womb or during birth. Some effects include stillbirth, low birth weight, and lifethreatening infections. STIs also can cause a woman's water to break too early or preterm labor.

Symptoms depend on the STI. Often, a woman has no symptoms, which is why screening for STIs during pregnancy is so important. STIs can be prevented by practicing safe sex. A woman can keep from passing an STI to her baby by being screened early in pregnancy.

Treatments vary depending on the STI. Many STIs are treated easily with antibiotics.

Toxoplasmosis (TOK-soh-plaz-MOHsuhss)

This infection is caused by a parasite, which is found in cat feces, soil, and raw or undercooked meat. If passed to an unborn baby, the infection can cause hearing loss, blindness, or intellectual disabilities. Mild flu-like symptoms or possibly no symptoms. You can lower your risk by:

- Washing hands with soap after touching soil or raw meat
- Washing produce before eating
- Cooking meat completely
- Washing cooking utensils with hot, soapy water
- Not cleaning cats' litter boxes

Medicines are used to treat a pregnant woman and her unborn baby. Sometimes, the baby is treated with medicine after birth.

Urinary tract infection (UTI)

Bacterial infection in urinary tract. If untreated, it can spread to the kidneys, which can cause preterm labor.

- Pain or burning when urinating
- Frequent urination
- Pelvis, back, stomach, or side pain
- Shaking, chills, fever, sweats

UTIs are treated with antibiotics.

Yeast infection

An infection caused by an overgrowth of bacteria normally found in the vagina. Yeast infections are more common during pregnancy than in other times of a woman's life. They do not threaten the health of your baby. But they can be uncomfortable and difficult to treat in pregnancy.

- Extreme itchiness in and around the vagina
- Burning, redness, and swelling of the vagina and the vulva
- Pain when passing urine or during sex
- A thick, white vaginal discharge that looks like cottage cheese and does not have a bad smell

Vaginal creams and suppositories are used to treat yeast infection during pregnancy.

- 1. Maternal and Infant Health Research: Pregnancy and Complications this online resource discusses various pregnancy complications, such as depression, obesity, gestational diabetes, and pregnancy-related illness and death.
 - www.cdc.gov/reproductivehealth/maternalinfanthealth/PregComplications.htm
- 2. <u>Complications (Copyright © March of Dimes)</u> this online resource provides information on common complications and infections during pregnancy.
 - www.marchofdimes.com/pnhec/188.asp
- 3. <u>Pregnancy Complications (Copyright © American Pregnancy Association)</u> this online resource provides links to various complications that may arise when you are pregnant. It gives an overview of some common issues.
 - www.americanpregnancy.org/pregnancycomplications/

== Indicates Federal Resource

Source: www.womenshealth.gov/pregnancy/you-are-pregnant/pregnancy-complications.cfm (accessed 11/16/10)

The information provided here is not intended to be used for the diagnosis or treatment of a health problem or as a substitute for consulting a licensed medical professional.

Supported in part by project H49MC00083 from the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau (Title V, Social Security Act).