

Watch the following video:

<https://youtu.be/CRhGx8A7Dqg?si=TLWwkHL28qt76JSg>

Answer the following questions:

1. *What underlying placental abnormalities contribute to both preeclampsia and eclampsia?*

- \* Uteroplacental arteries become fibrous → narrow = ↓ blood flow  
↳ Hypoperfusion → ↑ pro-inflammatory proteins
- \* Local vasospasms

2. *What is the timing of preeclampsia in pregnancy?*

- \* After 20 wks. gestation
- \* Up to 6 wks. after delivery

3. *What are the risk factors that predispose individuals to preeclampsia and eclampsia?*

- \* 1st pregnancy
- \* Multiple gestations
- \* Maternal age > 35 y/o
- \* HTN; DM; obesity
- \* Family Hx.

4. *What are the main clinical signs of severe preeclampsia—and how do they differ from eclampsia?*

SBP > 160 mmHg  
DBP > 110 mmHg

- \* RUQ abd. pain \*
- \* Proteinuria
- \* Severe H/A
- \* Visual disturbances

Development of seizures!

5. *Why is delivery ultimately considered the only "cure" for preeclampsia and eclampsia, and what are the key considerations involved?*

Problems stem from placental dysfunction

Gestational age of fetus  
Severity of disease

- \* Onset of sx's after delivery  
↳ Manage sx's  
↳ should subside on their own
- \* Supplemental O<sub>2</sub>
- \* Medications to manage seizures

Can lead to hemorrhagic stroke +/- placental abruption