

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?*

Spiral arteries become fibrous and narrow = less blood to placenta
Releases pro-inflammatory proteins -> endothelial cell dysfunction -> vasoconstriction & kidneys retain more salt

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

After 20wk gestation
6wks after delivery

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

First pregnancy, multiple gestations, mothers >35, HTN, Diabetes, obesity, family hx

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

HTN, proteinuria, oliguria, blurred vision, flashing lights, scotoma, elevated liver enzymes, RUQ pain
formation of thrombi -> hemolysis, generalized edema of legs, face, hands, pulmonary edema, cerebral edema, HA, confusion
Seizures = Eclampsia

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

Depends on GA, severity