

Recurrence of hypertensive disorders of pregnancy in a strictly controlled multidisciplinary follow-up

Bianca Masturzo¹, Massimo Torreggiani², Giulia Spanu², Giulia Chimenti², Anna Magli², Rossella Attini^{1,*}, Giorgina Barbara Piccoli²

¹Gynecology and Obstetrics Unit, Ospedale degli Infermi, Ponderano, Biella, Italy.

²Department of Nephrology and Dialysis, Le Mans Hospital Center, Le Mans, France.

DOI: 10.36129/jog.2024.S38

Objective. In a 2015 meta-analysis by van Oostwaard of nearly 100,000 patients with a hypertensive disorder of pregnancy (HDP) who had a subsequent pregnancy, the recurrence rate was 20.7% (95%CI 20.4-20.9). However, studies were heterogeneous regarding timing of birth in patients with previous HDP. The aim of our study is to evaluate the prevalence and timing of onset of HDP in a small, strictly followed cohort of patients with previous HDP.

Materials and Methods. The patients were enrolled Le Mans (France) in the period 2019-2023. All patients were prescribed acetylsalicylic acid following a positive pregnancy test and were followed with a multidisciplinary obstetric-nephrological approach.

Delivery was planned if the ACOG criteria for the definition of HDP were met, otherwise a conservative approach was chosen

regardless of the appearance of oedema and weight gain, or increase in sFlt-1/PlGF ratio, in the absence of hypertension.

Results. Seventy-four patients with previous HDP were followed-up and 54% of patients (40/74) developed HDP recurrence (16% PE, 29% pregnancy-induced hypertension, 1% HELLP and 8% IUGR). The median gestational age at delivery increased: in previous complicated pregnancies – 33 weeks; in recurrent HDP – 37 weeks, in non-complicated subsequent pregnancies – 39 weeks. Of note, over 50% of recurrences occurred after 37 weeks.

Conclusions. The incidence of recurrence of HDP was high in this strictly followed series of pregnancies after PE; however, most of the cases occurred after 37 weeks, thus raising the question whether a more aggressive approach towards early delivery may limit the risk of HDP recurrence.