Hypertensive disorders of pregnancy

Hypertensive disorders of pregnancy (HDP) appear in approximately 10% of pregnant women. These women have higher cardiovascular morbidity and mortality later in life in compared to parous normotensive controls. Several studies have demonstrated that women with preeclampsia present in a state of segmental impaired myocardial function, biventricular chamber dysfunction, adverse biventricular remodeling, and hypertrophy, a compromised hemodynamic state and indirect echocardiographic signs of localized myocardial ischemia and fibrosis. These cardiac functional and geometric changes are known to have strong predictive value for cardiovascular disease in non-pregnant subjects.

Every effort to identify novel biomarkers that will help clarify the pathophysiology of preeclampsia and which may be used as predictive biomarkers is of paramount importance as it may provide innovations that have not been considered to date. In the present issue, Okechukwu Ugwu et al evaluated differences in serum relaxin levels between pregnant women with preeclampsia and normotensive controls and observed that with pre-eclampsia have significantly lower levels of serum relaxin than normotensive pregnant women.

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