

# BÖLÜM 6

## Gebelikte Hipertansiyon



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### Giriş

Gebelikte hipertansif hastalıklar 4 grupta karşımıza çıkarlar. Preeklampsi, gestasyonel hipertansiyon, kronik hipertansiyon ve süperempoze preeklampsi olarak yapılan bu sınıflandırmaya ve tanımlara hakim olmak, hızlı tanı ve tedaviye olanak sağlayarak maternal prognozu önemli derece etkilemektedir. Bu bölümde, özellikle preeklampsi üzerinde durulacak olup gebelikteki hipertansif hastalıklara genel bir yaklaşım sağlamayı amaçlanmaktadır.

### Preeklampsi

Preeklampsi hipertansiyon zemininde gelişen end organ disfonksiyonuyla sonuçlanabilen bir hastalıktır. Gebeliğin 20. haftasından sonra, proteinüriyle birlikte veya proteinüri olmadan çeşitli sistem tutulumlarıyla birlikte görülür. Preeklampsi ilerleyicidir fakat doğumla birlikte veya doğumdan sonra sıklıkla 2-3 gün içerisinde semptomlar geriler, biyokimyasal değerler normal seviyeye döner, tansiyon normale döner. Gebeliğe özgü olan bu hastalık maternal morbidite ve mortalitenin nedenleri arasında özellikle gelişmekte olan ülkelerde önemli bir yer kaplar, önlenemez anne ölümleri nedenleri arasında yer alır. Kronik hipertansiyon zemininde gelişmesi durumunda süperempoze preeklampsi adını alır ve komplikasyonları daha ağır seyrederek.

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Kronik hipertansiyonu olan gebelerde %13 ile %40 arasında bir oranla süperem-poze preeklampsi gelişme ihtimali vardır (87). Bu oran şiddetli hipertansiyonda %78'e kadar çıkabilir (88). Kronik hipertansiyon, süperem-pozeden preeklampside bağımsız olarak artmış perinatal mortalite ve gelişme geriliği ile ilişkilidir (87).

## Gestasyonel Hipertansiyon

Gebeliğin 20. haftasından sonra preeklampsi bulguları olmadan tansiyon yük-sekliği saptanmasıdır. Sağlıklı nullipar kadınlarda %6-17, multiparlarda ise %2-4 oranında görülür(89). Gestasyonel hipertansiyon tanısı almış gebelerin pre-eklampsi tanı kriterleri açısından ayrıntılı incelenmeleri gerekir, bu gebelerin %15-46'sında preeklampsi gelişecektir (90). Preeklampsi görülme ihtimali, ges-tasyonel hipertansiyon tanısının koyulduğu gebelik haftasıyla ters ilişkilidir.

## Süperem-pozeden Preeklampsi

Bilinen kronik hipertansiyonu olan bir gebede preeklampsi, her iki durumun da tek başına olduğundan daha yüksek maternal ve fetal komplikasyon oranına sa-hiptir (5). Kronik hipertansiyonu olan bir hastada preeklampsi teşhisi zor olabi-lir çünkü hastanın kan basıncı zaten yükselmiştir ve kronik hipertansiyon zaten proteinüriye neden olmuş olabilir. Tansiyon yükselirse, tansiyon tedaviye dirençli hale gelirse veya proteinüri düzeyi yükselirse süperem-pozeden preeklampsi açısın-dan hasta mutlaka değerlendirilmelidir (91).

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