

# Hypertension in pregnancy: chronic hypertension - pre-pregnancy advice

Refer to a specialist in hypertensive disorders of pregnancy.

## Antihypertensive treatment

- Advise that angiotensin-converting enzyme (ACE) inhibitors or angiotensin II receptor blockers (ARBs) increase risk of congenital abnormalities.
- Discuss alternative treatment if ACE inhibitors or ARBs are being taken for other conditions such as renal disease.
- Advise that thiazide or thiazide-like diuretics may increase risk of congenital abnormalities and neonatal complications.
- Discuss alternative antihypertensive treatment for planned pregnancy.
- Advise that other antihypertensive treatments have not shown an increased risk of congenital malformation (but limited evidence).

## Lifestyle advice

- Offer pregnant women with chronic hypertension advice on:
  - weight management
  - exercise
  - healthy eating
  - lowering the amount of salt in their diet.
- Provide this advice in line with the NICE guideline on hypertension in adults: diagnosis and treatment.



In 2014, the MHRA issued a drug safety update on [‘ACE inhibitors and angiotensin II receptor antagonists: not for use in pregnancy’](#) that states ‘Use in women who are planning pregnancy should be avoided unless absolutely necessary, in which case the potential risks and benefits should be discussed’.