

WILL Training page - Aug 2020

Welcome to the first WILL training page.

Information on this page will help you with any discussions you have with women and doctors/midwives caring for them about WILL. We will feature a different topic each month.

Complications of Chronic and Gestational Hypertension

Did you know that women with chronic or gestational hypertension are at high risk of the following complications?

Pre-eclampsia

Will occur in up to:

- ≈25% of women with **chronic hypertension**
- ≈35% of those with **gestational hypertension** when it develops before term

Serious health problems

Will occur in ≈2% of women, including:

- * Blood transfusion
- * Fits (eclampsia)
- * Stroke
- * Long-term, double the risk of heart disease

Care in a neonatal unit

≈25% of these women will have babies admitted to a neonatal unit



Severe hypertension

Will occur in up to ≈40% of women

Stillbirth

- Risk is increased by 36 weeks (to 1/1000)
- This is the same risk as in low-risk women at 41+ weeks when labour induction is recommended

Birth by Caesarean

Around 45% of women with chronic or gestational hypertension will need to have a Caesarean birth

Remember: Severe hypertension and pre-eclampsia can develop quickly, and without symptoms, which is why these women need to be closely monitored during expectant care.

True or False?

Q: To be eligible for the WILL trial, women need to have an elevated blood pressure or be on antihypertensive medication at the time of consent?

A: False. Women are eligible for WILL if they have a *diagnosis* of chronic or gestational hypertension. Blood pressure can typically change during pregnancy, so please still consider these women for the trial.

Let us know if you found this page useful and if there are any topics you would like us to cover.

