



## ***Pre-eclampsia screening***

***Identifies pregnancies at high risk  
of a serious complication, months  
before symptoms emerge***

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**Pre-eclampsia** In the third trimester of pregnancy about 2% of women are affected. They have high blood pressure, protein in the urine and oedema (swelling).

**Maternal complications** Liver, kidney and lung problems, or a blood clotting disorder are common. One in 6000 get eclampsia, a type of seizure (convulsion) which may be life-threatening.

**Fetal complications** Growth tends to be restricted and there is an increased chance of stillbirth. To avoid maternal and/or fetal threat, it may be necessary to deliver prematurely.

**Causes** Blood vessels in the placenta do not develop properly. This affects the flow of nutrients and oxygen from the mother to the baby.

**Screening** This is carried out by measuring markers in maternal blood and by ultrasound measurement of placental blood flow.

**Gestation** Screening is best done at the end of the first trimester of pregnancy.

**Results** The maternal blood and ultrasound marker levels are used together with information on other risk factors, such as family history, to calculate the risk of developing pre-eclampsia.

If there is a high risk result, careful monitoring of the mother and fetus throughout pregnancy is recommended, and possibly medication.