

## Low-Dose Aspirin for Preeclampsia Prevention

### What is preeclampsia?

Preeclampsia (formerly called toxemia) is a serious multisystem disorder that can occur in the last half of pregnancy or postpartum. It is characterized by a new onset of high blood pressure, protein in the urine and or other signs of kidney or liver dysfunction. It can cause potentially serious health complications for the mother (including stroke or seizures) as well as to the developing baby (including growth restriction, low amniotic fluid, placental separation, and still birth). If preeclampsia develops, often the baby will need to be delivered (in some cases preterm) to avoid these complications. About 3-4 percent of women develop preeclampsia in the United States.

Low-dose aspirin (81 mg) is the only supplement that is known to decrease the risk of developing preeclampsia. For certain women at increased risk it can be used as a preventative medicine (taken before the condition actually occurs) and may decrease the risk of complications from preeclampsia by 10-25%.

### Who should take low-dose aspirin in pregnancy?

Women are considered **high risk** for developing preeclampsia if they have any *one* of the following conditions. These women should take low dose aspirin as directed:

- History of preeclampsia (especially with an adverse outcome)
- A current twin pregnancy
- Preexisting high blood pressure
- Diabetes (type 1 or 2)
- Kidney disease
- Certain autoimmune disorders (such as lupus or antiphospholipid syndrome)

Women are considered to be at **moderate risk** for developing preeclampsia if they have any *two* of the following situations. These women should consider taking low dose aspirin as directed:

- First time pregnancy
- BMI (body mass index) greater than 30
- A family history of preeclampsia (in a mother or sister)
- Age 35 or older
- Personal history of giving birth to a baby that was low birth weight or still born
- Having had a previous pregnancy more than 10 years ago
- Are African American

Women who are **low risk** (have a history of a healthy uncomplicated full term delivery) should not take low dose aspirin in pregnancy.

### How does it work?

Although the mechanism of action is not completely understood, it is thought that aspirin has a mild anti-inflammatory effect and may prevent platelets (which help promote clotting) from sticking together in the blood.

### How is it taken?

One 81mg tablet of aspirin (sometimes referred to as baby aspirin) is taken by mouth daily starting between the 12<sup>th</sup>-13<sup>th</sup> week of pregnancy (although it can be started up to 20 weeks, more benefit is seen with an early start). The tablet can be prescribed by your healthcare provider or obtained over the counter and often comes in a chewable form. It is taken until the last week or two of pregnancy. *Please note that a full dose tablet (325mg) CANNOT be used instead.*

### Are there any risks to taking low-dose aspirin in pregnancy?

No known risks have been established for use in the second and third trimester

### Additional resources

[Preeclampsia.org/aspirin](https://preeclampsia.org/aspirin)

[USpreventiveservicestaskforce.org](https://USpreventiveservicestaskforce.org)