News and Views

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NEWS

The Negative Impact of Hypertensive disorders during pregnancy

Hypertension is one of the common medical problems encountered in 10% of all pregnancies. Hypertensive disorders of pregnancy include pre-eclampsia, eclampsia, chronic hypertension and gestational hypertension. Of these disorders, Pre-Eclampsia (PE) accounts for 70% of the hypertensive disorders in pregnancy with a major negative impact on pregnancy outcome as well as maternal and fetal morbidity and mortality. Though anti-hypertensive drugs are used in the management of pregnancy-induced hypertension, termination of pregnancy alone offers a complete cure. In developing countries, like India the incidence of preeclampsia ranges from 1.8% to 16.7% which is 7 times higher than the worldwide incidence which is 3% to 8%. Poor knowledge about the medical care available for pregnant women and poverty have been attributed to the high incidence of the disease. Preeclampsia is one of the important health problems in pregnant women with potential fetal complications such as growth retardation, prematurity, low birth weight and death. Maternal complications such as HELLP (Haemolysis, Elevated Liver enzymes, Low Platelets) syndrome, cerebral edema accompanied by seizures, renal failure and death. Hence optimizing healthcare for expectant mothers is crucial for achieving sustainable development goals and improving the prevention and treatment of these dangerous hypertensive disorders.

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VIEWS

Effects of Slow Pranayama on Hypertensive Disorders of Pregnancy

Pranayama (Slow, deep breathing techniques) have emerged as a safe, low-cost intervention to help manage high blood pressure during pregnancy. The underlying mechanism relates to the stimulation of the parasympathetic nervous system to promote relaxation and reduce stress. This counters the sympathetic activation that leads to vasoconstriction and increased blood pressure.

Studies have shown that practising pranayama for 30-60 min daily can significantly reduce both systolic and diastolic blood pressure in pregnant women with hypertensive disorders. The optimal breathing rate is about 6 breaths per minute, with equal inhalation and exhalation periods.



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Beyond lowering blood pressure, pranayama may also alleviate maternal stress and anxiety, improve sleep quality, and enhance fetal oxygenation through increased uterine blood flow. This leads to better neonatal health outcomes like higher APGAR scores and birth weights.

Given its safety and ease of implementation, pranayama is recommended as an adjunct therapy for optimizing blood pressure among pregnant women with hypertension. It may help reduce medication needs and complications when performed under medical guidance and supervision.