



Vol. 1, No. 2, 2022

DOI : 10.55299/ijcs.v1i2.174

Early Detection of Hypertension Symptoms in **Pregnancy**

Fitriani¹, Sukri², Suradi Efendi³, Nour Sriyanah⁴

^{1,3,4} Sekolah Tinggi Ilmu Kesehatan Makassar ² Akademi Keperawatan Fatima Pare-Pare

ABSTRACT

Hypertension in pregnant women occurs in about 10% of pregnancies worldwide and is one of the main causes of morbidity and mortality in mothers and their babies. The incidence of hypertension during pregnancy can be triggered by stress experienced by the mother, stress is a condition or condition of the body that is disturbed due to psychological pressure or psychological disease, the age of pregnant women if less than 20 years or more than 35 years can also increase the risk of hypertension. Various kinds of risk factors that cause preeclampsia, one of which is a history of hypertension and nutritional status of pregnant women, pregnant women with a history of hypertension will have a greater risk of experiencing preeclampsia. The counseling method was in the form of direct presentation of lecture material and measurement of blood pressure in pregnant women, amounting to 27 people . Submission of material on early detection of symptoms of hypertension in pregnant women with the effectiveness of the counseling pregnant women can gain knowledge about early detection of symptoms of hypertension in pregnant women.

Keywords: Symptoms of Hypertension, Pregnancy, Pregnant Women

Received:	Revised:	Accepted:	Available online:
25.10.2022	15.11.2022	21.11.2022	20.12.2022

Suggested citations:

Fitriani & Sukri & et al. (2022). Early Detection of Hypertension Symptoms in Pregnancy. *International Journal of Community Service*, 1 (2), 142-147. DOI: 10.55299/ijcs.v1i2.174

Open Access | URLs:

https://ejournal.ipinternasional.com/index.php/ijcs/OpenAccessPolicy

INTRODUCTION

Currently, technological developments are developing very quickly, the application of technology has been widely applied in various fields, namely the field of education and the health sector (Rizky & Hakim, 2020). Hypertension in pregnant women occurs in about 10% of pregnancies worldwide and is one of the main causes of morbidity and mortality in mothers and their babies (*Riskesdas Data Analysis*, 2015). The consequences of hypertension in pregnancy in mothers can lead to eclampsia, homoragic, ischemic stroke, liver damage and liver failure while the impact on the fetus can cause preterm, birth induction, impaired fetal growth and fetal death (Aryani et al., 2021). One of the causes of maternal death is hypertension in pregnancy, this hypertension occurs because various factors such as age, education level, family support, stress, and weight gain (Basri et al., 2018).

The incidence of hypertension during pregnancy can be triggered by stress experienced by the mother, stress is a condition or condition of the body that is disturbed due to psychological pressure or psychological disease, the age of pregnant women if less than 20 years or more than 35 years can also increase the risk of hypertension. The impact of less age than 20 years can cause complications during pregnancy. Every primigravida teenager has a greater risk in pregnancy, while pregnant women who are 35 years of age have started to decline physically and their immune system is no longer optimal and susceptible to disease complications, so it will be more risky to get pregnant . can cause hypertension due to degenerative processes in peripheral blood vessels that make pregnant women more vulnerable to risk of hypertension (Putri & Lydia, 2022) (Naibaho F et al., 2021) .

Preeclampsia occurs in 5-7% of all pregnancies and is the leading cause of maternal death in developing countries (Setiawati et al., 2020). Predisposing factors for hypertensive disorders in pregnancy throughout the world such as: family history of preeclampsia, and preeclampsia in previous pregnancies so that they can be the main cause of maternal death during childbirth (Marlina et al., 2021). Services for pregnant women must meet the minimum frequency of visits in each trimester, namely at least once in the first trimester (0-12 weeks gestation), at least once in the second trimester (12-24 weeks gestation), and at least twice in the second trimester. third trimester (gestational age of 24 weeks until the time of birth) (Aryani et al., 2021).

Various kinds of risk factors that cause preeclampsia , including the nutritional status of pregnant women and history of hypertension . The nutritional status of pregnant women To predict pregnancy *outcomes* are pre-pregnancy weight and maternal weight gain during pregnancy , overweight and obesity in pregnancy are high-risk obstetric conditions that can increase the risk of hypertension and gestational diabetes during pregnancy (*Dwiana* Ocviyanti , Maya Dorothea, 2018) . Pregnant women with a history of hypertension will have a greater risk of experiencing preeclampsia (Utami et al., 2020) . Preeclampsia is a certain gestational hypertension syndrome with multisystem conditions with multifactorial causes from maternal and fetal blood vessels and the placenta (Yuniarti et al., 2018) . The incidence can be reduced through prevention efforts, early observation and therapy, perinatal mortality

prevention efforts can be reduced if factors that have predictive value can be identified

Hypertension in pregnant women can be experienced by all pregnant women so that knowledge about the management of preeclampsia must be properly understood by all medical and non-medical personnel both at the center and in the regions (Harumi & Armadani, 2019).

Measures to prevent high blood pressure during pregnancy among pregnant women, by undergoing regular *antenatal care*, *can* detect early complications that may occur to the mother and fetus.

METHOD

The method of this community service is the counseling method in the form of direct presentation of lecture material and measuring blood pressure in pregnant women, totaling 27 people using leaflet and browsur media.

RESULTS AND DISCUSSION

Community service activities carried out in the form of counseling with the aim of increasing knowledge about the early symptoms of hypertension in pregnant women. This outreach activity uses the lecture method, namely the delivery of material explaining hypertension in pregnant women and measuring blood pressure.

Knowledge Category	Pre-Test		Post Test		
Category	n	%	n	%	
Not enough	20	72	5	12	
Well	7	28	22	88	
Amount	27	100	27	100	

Table 1. Above Shows that Before the Education Was Carried Out

The table above shows that before the education was carried out, there were 20 people (72%) lacking knowledge of pregnant women, while 7 people (28%). So counseling about early detection of symptoms of hypertension in pregnant women is very important and after the counseling, the results of the knowledge of pregnant women are still lacking as many as 5 people (12%) while pregnant women who have good knowledge increase are 22 people (88%) . So it can be concluded that there is an increase in knowledge obtained by pregnant women after counseling about early detection of symptoms of hypertension in pregnant women is given.

Table 2. People Who Have Hypertension

History Hypertension	•		
	n	% •	
Hypertension	18	72	
No Hypertension	9	28	
Amount	27	100	

In the table above, there are 18 people who have hypertension and 9 people who don't have hypertension, so it is important to do a health check in order to avoid the risk of developing hypertension during pregnancy. With this community service, pregnant women can control their health so as to minimize the increase in hypertension in pregnant women.

Mother pregnant women who had hypertension in a previous pregnancy will risk of increasing and getting hypertension in subsequent pregnancies. By because Therefore , what pregnant women need to do in minimizing the incidence of hypertension in the next pregnancy if they already have a history of hypertension are: by routinely conducting *antenatal check - ups* (ANC) regularly to health workers at health facilities to find out the danger signs of pregnancy, so that pregnant women who have a previous history of hypertension can pay attention to the food they eat for the health of the mother and the fetus they contain .

The core activity in this community service is giving lectures/counseling about the importance of education and examination of hypertension in pregnant women. Submission of material on early detection of symptoms of hypertension in pregnant women with the effectiveness of the counseling pregnant women can gain knowledge about early detection of symptoms of hypertension in pregnant women.

In this outreach activity, there were 27 people consisting of pregnant women who met the criteria. It can be seen that pregnant women who were present at the time the counseling was held on average did not know the early detection of hypertension symptoms and the impact on pregnant women. In this counseling, leaflets are given about early detection of hypertension symptoms in pregnant women to be studied at home, print media is media that is easy to read by people during the discussion. The evaluation of this counseling is that pregnant women are enthusiastic to find out early detection of hypertension symptoms and check their blood pressure.

The importance of disseminating information about early detection of hypertension symptoms in pregnant women as a screening for knowing hypertension as *early detection* for pregnant women who have a risk of hypertensive disorders in pregnancy. Also monitoring condition pregnancy mother with To do inspection *Antenatal Care* (ANC) regularly so that could conducted monitoring and evaluation of the prevention of hypertension in pregnant women so that mothers who give birth can avoid pain and Dead mother .

CONCLUSION

This community service as a whole is very effective, so that an increase in knowledge is obtained after counseling on early detection of hypertension symptoms in pregnant women and blood pressure checks. on mother pregnant.

Thank-you note

The servant would like to thank Allah SWT for His grace so that we can carry out this useful activity to increase knowledge for pregnant women, thank you also to pregnant women who are involved in community service for their support in the implementation of this community service.

REFERENCES

- Aryani, NP, Afrida, BR, Idyawati, S., & Info, A. (2021). Case Study of Hypertension in Pregnancy. *Journal Of Fundus*, 1 (1), 22–29.
- Basri, H., Akbar, R., & Dwinata, I. (2018). Factors Associated with Hypertension in Pregnant Women in Makassar City. *Journal of Medicine and Health*, 14.
- Dwiana O, Maya D. (2018) *Problems and Management Like Obesity in Pregnancy* . J. Indon Med Assoc . ; 68(6).
- Dewi Aminasty Siregar. (2022). Counseling On Oxytocin Massage in Promoting Breast Milk For Breastfeeding Mothers in Bintuju Sub-District. *International Journal of Community Service (IJCS)*, 1(1), 72–76. https://doi.org/10.55299/ijcs.v1i1.124
- Dewi Mulfiyanti, Fitrah Ramadani, Andi Satriana, & Andi Bintang. (2022). Patient Safety in Primary Care Socialization and Discussion. *International Journal of Community Service (IJCS)*, 1(1), 105–110. https://doi.org/10.55299/ijcs.v1i1.182
- Fitrah Ramadani, Dewi Mulfiyanti, Irfan Madamang, Andi Bintang, & Andi Satriana. (2021). Increasing Perception and Knowledge of Breast Milk Adequacy in Breastfeeding Mothers. *International Journal of Community Service (IJCS)*, 2(2), 13–21. https://doi.org/10.55299/ijcs.v2i2.202
- Risk factors for hypertension in pregnant women in Indonesia (riskesdas data analysis 2013) . (2015). April .
- Harumi, M., & Armadani, DK (2019). The relationship of primigravida with the incidence of preeclampsia in pregnant women at the Jagir Public Health Center, Surabaya *. *Midwifery Journal*, 4 (2), 79–82.
- Mother, P., Di, H., & Years, RC (2020). Factors Associated with the Incidence of Preeclampsia. *Pomegranate Health Scientific Journal*, 4 (1), 75–82.
- Marlina, Y., Santoso, H., & Sirait, A. (2021). Factors associated with hypertension in pregnant women. *Journal of Healthcare Technology and Medicine*, 7 (2), 1512–1525.
- Naibaho, F., P (2021). Factors Associated with the Incidence of Hypertension in Pregnant Women at the Nunpene Health Center, North Central Timor Regency in 2018. INTELLECTIVE: JOURNAL OF ECONOMICS, SOCIAL & HUMANIORA, VOL.2 NO. 12 JULY 2021. E-ISSN 2686 5661
- Oktafiana Manurung. (2020). Relationship of Competency of Midwife with Management Management of Newbirth Asphysia in the RegionService Work Health Deli Serdang. *International Journal of Community Service (IJCS)*, 1(2), 91–102. https://doi.org/10.55299/ijcs.v1i2.168
- Putri, & Lydia, D. (2022). Determinants of hypertension in second and third trimesters of pregnant women in the Tanah sareal public medical center area, bogor city. *Health Magazine*, 9, 86–91.
- Rizky, R., & Hakim, Z. (2020). Expert System Determines Hypertension in Pregnant Women at Adjidarmo Rangkas Bitung Hospital, Banten Province . 09, 30–34.
- Setiawati, I., Lailiyah, SR, Ngudia, S., & Madura, H. (2020). Early Detection of Preeclampsia in Pregnant Women With Weight Weighing And Blood Pressure Measurement. *Journal of Paradigms*, 2 (April).
- Siregar, Rahmah & Yusuf, Susi & Fernaldy, Devrich. (2022). The Relationship between Physical Conditions of the House and the Incidence of Tuberculosis. International Journal of Public Health Excellence (IJPHE). 1. 01-05. 10.55299/ijphe.v1i1.2.

- Siregar, Rahmah. (2022). Factors Which Influence Incident Hypertension on Pre-Elderly. International Journal of Public Health Excellence (IJPHE). 1. 117-121. 10.55299/ijphe.v1i2.66.
- Utami, BS, Utami, T., & Siwi, AS (2020). Relationship History with the Incidence of Preeclampsia in Pregnant Women: Literature Review. *Journal of Maternity Nursing Science*, 3 (100). https://doi.org/10.32584/jikm.v3i2.703
- Yuniarti, F., Wijayati, W., & Ivantarina, D. (2018). Analysis of Health Behavior and Risk Factors for Preeclampsia Incidence in Pregnant Women. *Journal Of Issues In Midwifery*, 1–17.
- Willhelmina Wahara. (2022). Covid 19 Prevention Education to Pregnant Mothers In The Sub-District of Medan Sunggal, Medan City in 2o22. *International Journal of Community Service (IJCS)*, 1(1), 66–71. https://doi.org/10.55299/ijcs.v1i1.123

Copyright and License



This is an open access article distributed under the terms of the Creative Commons Attribution 4.0 International License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

© 2022 Fitriani 1, Sukri 2, Suradi Efendi 3, Nour Sriyanah 4

Published by IPI Global Press in collaboration with the Inovasi Pratama Internasional Ltd