

USPSTF recommends BP screening for preeclampsia

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preeclampsia were considered no greater than small, with few harms anticipated from blood pressure screening measurements. The USPSTF concluded with moderate certainty that there was substantial net benefit for preeclampsia screening with blood pressure measurements through pregnancy. These findings form the basis of a draft recommendation statement, which is available for comment from Sept. 27 to Oct. 24.

"If a patient has [high blood pressure](#) during a visit, she should receive further testing and evaluation," Task Force member William R. Phillips, M.D., M.P.H., said in a statement. "Multiple elevated blood pressure measurements are needed to diagnose preeclampsia."

More information: [Draft Recommendation Statement](#)
[Evidence Review](#)
[Comment on Recommendation](#)

(HealthDay)—The U.S. Preventive Services Task Force (USPSTF) concludes that there is a net benefit for preeclampsia screening with blood pressure measurements throughout pregnancy (B recommendation). These findings form the basis of a draft recommendation statement published online Sept. 27 by the USPSTF.

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Noting that the USPSTF previously established that there is adequate evidence on the accuracy of blood pressure measurements for preeclampsia screening, researchers from the USPSTF conducted a systematic review to examine the direct evidence of benefits and harms of preeclampsia screening on health outcomes.

The researchers found that testing for proteinuria with a dipstick test had low diagnostic accuracy for detection of proteinuria in pregnancy. Furthermore there was inadequate evidence on the effectiveness of risk prediction for identifying women at high preeclampsia risk. The potential harms of screening for and treatment of

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