



HIGH BLOOD PRESSURE

There are two kinds of blood pressure: essential hypertension, high blood pressure that pre-exists pregnancy; and pregnancy-induced hypertension (PIH), which usually shows up after twenty weeks' gestation. The general criteria for the diagnosis of any hypertension is a blood pressure of 140/90 or above, or any rise to systolic pressure (the top number) of 30 points or more and/or a rise in diastolic pressure (the bottom number) of 15 points or more. The rise must be seen in two readings at least six hours apart to be considered conclusive because blood pressure is variable throughout the day and can change according to your mood, environment and interactions. Therefore, any singular incidents of high blood pressure can be disregarded if you generally have a blood pressure within a normal range.

What I look for in pregnant women is a steadily rising blood pressure over the course of two or more prenatal visits to indicate that the woman is developing what may be problematic hypertension. Of course, physicians, hospitals, and midwives may see women whose health history they do not know and must determine whether those women are at risk for problems associated with high blood pressure. For example, a woman who shows up at the hospital in labor, or a woman who chooses a midwife very late in pregnancy, can have a blood pressure of 130/80. This can be considered within the normal 140/90 range, but if her blood pressure is normally 100/60, it may be hypertension. The optimal situation, if you are planning to use a care provider for your pregnancy and birth, is that you do so early in the pregnancy to establish your "baseline" vital signs. Only in seeing the whole picture can deviations from your normal pattern become apparent.

Many health care providers fear high blood pressure in pregnant women because it is one symptom of pre-eclampsia (toxemia), which has other symptoms: not feeling well; slow growth of the baby; swelling of the ankles, face, and hands; visual disturbance; upper abdominal pain; headaches; kidney, heart, or thyroid problems; and the presence of protein in the urine. While pre-eclampsia is very serious and needs both thoughtful prevention and careful treatment, not all high blood pressure results in complications. Treatments such as the use of aspirin, diuretics, medications, salt restriction, along with a lack of attention to lifestyle and diet, leave any true imbalances unresolved and predispose pregnant women to other problems such as hemorrhage and kidney problems. This does not mean that medical treatments should be avoided—it does mean that you should fully explore other approaches beforehand, or that you should use them only in emergencies. Hypertension can be a symptom of kidney infection, kidney disease, and rarely, tumors, vascular disturbances, nervous-system disorders, hydatidiform moles, and liver disease, all requiring medical diagnosis and treatment (with the exception of a urinary tract infection, which can usually be treated quite successfully with natural therapies). If you are attempting to treat hypertension naturally, it is important to rule out more serious causes which require medical attention. Consult with a midwife or physician to help you determine whether it is safe for you to try a natural approach.

The greatest contributors to high blood pressure are stress, poor nutrition, and lack of exercise. Improvement in these areas will almost always reduce blood pressure if it is high. If the mother has elevated blood pressure but seems otherwise in excellent health, I simply keep tabs on her blood pressure for a few weeks or more (depending upon how far along she is in her pregnancy), and I provide clear instructions on eating well, getting more exercise, and reducing stress. I might suggest herbs that can assist in the reduction of blood pressure. I don't make a big fuss about high blood pressure unless it becomes consistently elevated and doesn't respond to any of my suggestions. In this case a home birth becomes contraindicated. I've not had this happen, perhaps by luck, or perhaps because of the body's wonderful ability to heal itself when it is given support. Of course, if the mother were to develop symptoms of toxemia or any other complications, a medical evaluation is essential.

The general risks of hypertension in pregnancy are lack of adequate oxygen flow to the baby, the potential for low birth weight and possible stillbirth, and, because of the force of the blood behind the placenta, the risk of a

placental abruption, a situation in which the placenta prematurely separates from the uterine wall, a potentially dangerous situation for mother and baby. It is up to you, along with the educated assistance of your care provider, to determine when high blood pressure seems to be problematic, and to decide whether to try to reduce elevation by attempting to normalize circulation, or to use medication to control it. The following suggestions may assist you in preventing high blood pressure if you are prone to it, and for lowering blood pressure.

Foods for Blood Pressure Reduction

- Watermelon and cucumbers (two slices of watermelon or one whole cucumber, preferably slightly overripe) and parsley (a few sprigs with a meal, once daily).
- Buckwheat, the grain, can be eaten for its high rutin content, and vitamin C with bioflavonoids, up to 2,000 mg daily can be taken during pregnancy.
- Raw onions and garlic eaten in large amounts each day. Chop the onions into salads, in pasta dishes, or on sandwiches. To use raw garlic, mince one clove, put it on a teaspoon with honey; and swallow without chewing by chasing it with water. This technique reduces virtually all side effects associated with eating raw garlic such as nausea, headache, and garlic breath. You can also use garlic "perles" (encapsulated garlic extracts) available at natural foods stores.

Beth began experiencing elevated blood pressure from an initial reading of 106/160 to a steady 128/74. She began a program of motherwort and hawthorn extract, as well as reducing her work load and increasing her fluid intake. Her blood pressure did not continue to rise and stabilized at an average of 124/68.

GENERAL AND DIETARY RECOMMENDATIONS

If you are pregnant and have hypertension, you need to evaluate your diet. Keeping a diet diary is the best way to do this (see Chapter 5). After completing it, you can ask your midwife to review it for the content, quality, and quantity of the foods you are eating. If you are working with a physician or other practitioner who is not well versed in the nutritional needs of pregnant women from the standpoint of dietary intake, be sure to read the nutritional information in this book or books in "Further Reading." Highly processed, refined foods with their plethora of chemical additives tax the liver, kidneys, and bowels, placing unnecessary burdens on the whole circulatory system, possibly contributing to hypertension. Preparing homemade foods and salting them to taste and inviting more natural foods into your diet, especially whole grains, high-quality protein from beans, moderate consumption of hard cheeses and yogurt, nuts, seeds, and fish, can help prevent and reduce hypertension.

High salt intake has long been associated with the development of high blood pressure in both pregnant women and the general population. In addition, pregnant women have long been told to reduce their salt intake to prevent water retention. However, a great deal of contemporary research has shown that inadequate salt intake during pregnancy can be dangerous, contributing to the development of both high blood pressure and edema. This is because salt helps keep blood volume adequately expanded, which is essential during pregnancy. Lack of salt causes the blood volume to contract, the heart must work harder to circulate less blood volume, and the blood vessels also constrict, leading to higher blood pressure. You do need adequate amounts of salt during pregnancy. The key is what type of salt you are getting. Regular table salt, which is used in most prepackaged foods, fast foods, and as table salt, is high in chlorine as well as stabilizers. Sometimes even sugar, and can contribute to high blood pressure.

The key is to lightly salt your foods using sea salt, tamari (natural soy sauce), or earth salt, available at health-food stores and in many supermarkets. Cut down on oversalted packaged goods and fast foods, and eat freshly prepared vegetables. In the summertime you may need to replace extra salt lost through perspiration by salting your food to taste and perhaps even drinking an electrolyte replacement such as Recharge or Third Wind if you've been sweating a great deal.

A tasty and nutritious salty condiment that my family has used for years is called "gomasio," a mixture of sesame seeds and salt (goma means "sesame"; sio, "salt"). It is said that the combination makes salt more usable by the body's cells. To prepare it, simply roast about a cup of raw, unhulled sesame seeds in a skillet on low heat until they begin to "pop" and turn light brown. Stir continuously to avoid burning the seeds. Just before they are

done, add 1 tablespoon of sea salt and stir for a minute more. When slightly cool, grind in the blender or in a traditional Japanese mortar and pestle called a "suribachi" (available at many Asian grocery stores) until the mix is mostly ground but not powdered. Gomasio can be sprinkled liberally on grains, beans, cooked vegetables, and salads. It can be kept unrefrigerated for up to two weeks but is best used within a week.

- Be sure you drink enough water throughout the day to help you maintain an expanded blood volume, important for preventing high blood pressure. Frequently women do not drink enough fluids or drink sodas or coffee, which, even though they contain water, do more harm than good. Caffeinated and sugared fruit beverages do not belong in a healthy pregnancy diet. The way I remember to drink enough of the right kind of fluids throughout the day is to place a full half-gallon jug of water on my table each morning, and drink as close to all of it as I can by that evening. You can use the water to make tea as well, and you can include in that half gallon other fluids such as broths and freshly made fruit or vegetable juices.
- Insufficient intake of essential fatty acids (EFAs) in the diet is also associated with hypertension. It may be unproved by using walnut oil and safflower oil added to raw salads and other dishes in place of oils high in saturated fats. EFAs help enlarge blood vessels, thereby reducing high blood pressure. Fatty, deep-water fish such as salmon and tuna are high in EFAs. You can supplement your diet with 1 tablespoon of raw flaxseed oil added to a daily salad (do not cook the oil as heat destroys the EFAs). Or take two 500-milligram capsules of evening primrose or black currant seed oil daily.
- Raw olive oil is associated with low levels of heart disease in Italian women who use it on a daily basis. In Germany, an extract made from the leaves of the olive tree is used to treat essential hypertension. Although the leaves are not indicated during pregnancy; the addition of raw olive oil to the diet on a daily basis may be beneficial for women with high blood pressure (and may work as a preventative). Rather than sautéed vegetables or fried rice, you may want to prepare simple steamed veggies dressed with olive oil and other seasonings, or a rice or pasta salad. One of my favorite meals is a big raw salad with a half cup of garbanzo beans on top, sprinkled with a dash of tamari soy sauce, some olive oil, and Parmesan cheese. You could even add some chopped raw onion or minced raw garlic.

A practical way to use raw garlic is to keep on hand a batch of garlic oil for seasoning your foods. Simply peel and mince a whole bulb and place it in a jar with 1 cup of olive oil. Let stand on your counter or in the refrigerator for a couple of days before beginning to use it once a day, garlic and all. You can put it on top of salad, beans, pasta, or whole wheat bread. A delicious traditional accompaniment to Italian meals is bread spread with olive oil and garlic.

- Daily exercise helps to improve circulatory functioning and therefore is an essential part of any program to reduce high blood pressure. A brisk walk for twenty minutes, working out on a stationary bicycle, swimming, or any exercise that you like that stimulates your circulation is excellent.
- As important as exercise is the time set aside each day for relaxation, stress reduction, meditation, whatever you call it. This is what I alternately call my sacred time, my sanctuary time, my retreat time, or simply tang space. It is a time devoted to unwinding, letting go of worries and worldly concerns, finding a peaceful place within yourself, feeling centered, breathing deeply, and letting go of physical tension. Occasionally, if you are able, include a full body massage from a professional massage therapist, your mate, or a close friend. This deep relaxation experience is particularly effective if it directly follows your exercise time or a yoga session. Your body's restlessness is reduced from the activity you've just done, and your blood circulation and oxygenation are at a peak, which actually promotes deep rest. (Can you remember how well you slept when you played outside all day?) Refer to Chapter 8 for further suggestions on relaxation, creative visualization, and exercise.

- Taking twenty minutes or so to rest on your left side can help reduce blood pressure because it eases the effort on your heart and circulatory system. This is an excellent position during labor if you already have elevated blood pressure.
- Be honest with yourself, your midwife, or other care provider about your anxieties. This is very important, simply because the effort of damping down your anxieties can contribute to high blood pressure.
- Funny movies are great for stress reduction. Whoopie Goldberg always gets me laughing and feeling more relaxed! Internal emotional pressure is reflected in high blood pressure, so do things that you enjoy and find ways to let off steam.

HERBAL RECOMMENDATIONS

- When a rise in blood pressure is related to stress and anxiety, herbs may help. These include teas of lemon balm, chamomile, lavender, hops, oatstraw, lime blossom, skullcap, valerian, passionflower, lady's slipper, and wood betony. Drink a tea of tiny of these herbs alone or in combination twice a day to prevent high blood pressure, or sip up to a quart throughout the day to reduce elevated blood pressure. Many of these herbs can also be used as tinctures although lemon balm and chamomile are best as teas at a general dosage of 10 to 15 drops taken two to four times a day. Use hops only during the last trimester of pregnancy: The unusual smell and taste of valerian makes it best suited for use as a tincture.
- This is an excellent herbal combination for the reduction of tension and hypertension: cramp bark, hawthorn berries, leaves, and dowers), and motherwort. Cramp bark eases physical stress by reducing muscular and nervous tension; hawthorn is a cardiogenic that dilates peripheral blood vessels and improves cardiac output and reduces strain on the heart, thereby reducing blood pressure; motherwort, a gentle antispasmodic and nervine, reduces muscular tension and emotional stress, contains bitter glycosides that have hypotensive properties. They help reduce blood pressure. This combination can be taken as a tincture beginning after the first trimester.

CAUTION: Motherwort has the potential of acting as a uterine tonic and can therefore stimulate contractions. This doesn't usually occur, but it is advisable to wait until after the first trimester to use this herb. Of course, discontinue it if you notice increased contractions before you are due.

If you are showing slightly elevated blood pressure which continues to rise, try 15 drops of cramp bark and 10 drops each of motherwort and hawthorn twice daily. If pregnancy (after thirty-five weeks) you can increase the dosage to four times daily and, if necessary, to 10 drops of cramp bark and 15 to 10 drops of each of the others. You may also take this tincture combination during labor if you have hypertension.

Another herb with a reputation as a hypotensive is black cohosh, which relaxes the nerves and the muscles and dilates the peripheral blood vessels. It should be taken only during the last four to six weeks of pregnancy. It is best taken as a tincture because its properties are best extracted in alcohol. The dose is small, 5 to 10 drops twice a day. You can add it to the above tincture combination.