



Medicines to manage high blood pressure

Patient information

This leaflet provides information about medicines you may be prescribed to manage high blood pressure (hypertension) during pregnancy and after childbirth. If you would like more detailed information, please speak with your doctor, midwife, or pharmacist.

What is high blood pressure?

High blood pressure, also called hypertension, is when your blood pressure is higher than normal.

- Hypertension: blood pressure between 140/90 mmHg (millimetres of mercury) and 159/109 mmHg
- Severe hypertension: blood pressure 160/110 mmHg or higher

Keeping your blood pressure well controlled is important for your health and helps reduce the risk of complications for both you and your baby.



What helps to reduce blood pressure?

Everyone with high blood pressure can benefit from healthy lifestyle changes, including:

- Maintaining a healthy weight before pregnancy
- Keeping active with gentle daily exercise such as walking or swimming
- Eating a balanced diet rich in fruits, vegetables, and whole grains, and reducing salt intake
- Avoiding smoking, alcohol, and illicit drugs
- Managing diabetes or long-standing high blood pressure before pregnancy
- Attending regular antenatal appointments for early detection and monitoring

Medicines may also be required to control blood pressure during pregnancy and after childbirth.

Medicines used during pregnancy and after childbirth

Medicine	Important points
Labetalol	Avoid in asthma or chronic airway disease; may cause tiredness or dizziness, scalp tingling, nipple pain rarely
Nifedipine (controlled release)	Headache, ankle swelling, flushing, palpitations
Methyldopa	Slow onset (up to 24 hours); sedation and dry mouth common; use caution in depression
Hydralazine	Headache, flushing, nausea; usually add-on therapy
Prazosin	Dizziness or a drop in blood pressure when standing, especially after the first dose

Medicines used after childbirth

Medicine	Important points
Metoprolol	Tiredness, cold hands or feet; use caution in asthma
Enalapril	Not used in pregnancy; compatible with breastfeeding
Diltiazem (controlled release)	Constipation, headache, ankle swelling, dizziness, flushing

Taking your blood pressure medicines

- Take your medicine exactly as prescribed, at the same time each day
- Blood pressure medicines work best when taken regularly, not only when your blood pressure is high
- Do not stop your medicine suddenly unless advised by your doctor
- If you miss a dose, take it as soon as you remember unless it is nearly time for your next dose (do not take a double dose)

It is hard to predict how long it will take for your blood pressure to come down. As your blood pressure comes down, the dose of each medicine will be reduced gradually before it is stopped.

Managing side effects

- Stand up slowly to reduce dizziness or light-headedness
- Take medicines with food if nausea occurs (if appropriate for your medicine)
- Tell your doctor or pharmacist if side effects are troublesome or do not go away

When should you see a doctor?

You may be advised to see your general practitioner or midwife within the first week after leaving hospital.

Contact your doctor, midwife, or the hospital immediately if you experience:

- Severe or persistent headache not relieved by simple pain medicines
- Vision changes, flashes of light, or dots
- Swelling of the face, hands, or feet
- Very high blood pressure readings
- Feeling very unwell or concerns about side effects

Having a hypertensive complication of pregnancy increases your risk of developing high blood pressure later in life. Have your blood pressure checked at least each year and maintain a healthy lifestyle.

Where can I get more information?

- Speak with your doctor, pharmacist, or midwife
- Obstetric Medicines Information Service, King Edward Memorial Hospital, Phone: (08) 6458 2723

Useful links



- **MotherToBaby:** <https://mothertobaby.org/fact-sheets/>
- **LactMed:** <https://www.ncbi.nlm.nih.gov/books/NBK501922/>

Your regular blood pressure medicines

Medicine	Breakfast	Lunch	Dinner	Bedtime

The information provided is for information purposes only. If you are a patient using this publication, you should seek assistance from a healthcare professional when interpreting these materials and applying them to your individual circumstances.

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