

U.S. Preventive Services Task Force Recommends Low-Dose Aspirin for Women at High Risk for Preeclampsia

WASHINGTON, D.C. – September 9, 2014 – The U.S. Preventive Services Task Force (Task Force) today published a final recommendation statement recommending that women at high risk for preeclampsia use low-dose aspirin (81 mg/day) after 12 weeks of pregnancy to prevent the condition and its related health problems. This is a B recommendation. This recommendation applies to pregnant women who are at high risk for preeclampsia, who do not show signs or symptoms of the condition, and who can safely take aspirin.

Preeclampsia is a complex condition that occurs in pregnant women and is characterized by a rise in blood pressure and excess protein in the urine after 20 weeks of pregnancy. It is one of the leading causes of health complications for expectant mothers and their babies, affecting about 4 percent of all deliveries (approximately 160,000 each year) in the United States.

“Preeclampsia can cause serious health problems for both expectant mothers and their babies,” says Task Force member Jessica Herzstein, M.D., M.P.H. “The good news is that pregnant women who are at high risk for developing preeclampsia can take a low daily dose of aspirin to help prevent the condition. This can result in better health outcomes for both the mother and baby.”

For women at high risk, low-dose aspirin has been found to reduce the risk for preeclampsia by 24%, premature birth by 14%, and intrauterine growth restriction—when a baby grows slower than expected in the mother’s uterus—by 20%.

“Most women are not at high risk for preeclampsia,” says Task Force chair Michael L. LeFevre, M.D., M.S.P.H. “Before taking aspirin, pregnant women should talk to their doctor or nurse to determine their risk level and discuss if taking aspirin is right for them.”

The Task Force’s recommendation has been published online in the *Annals of Internal Medicine*, as well as on the Task Force Web site at www.uspreventiveservicestaskforce.org. A fact sheet that explains the recommendation statement in plain language is also available. A draft version of this recommendation was available for public comment from April 8 to May 5, 2014.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

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