

MIDWIFERY CARE MANAGEMENT OF THIRD TRIMESTER PREGNANT WOMEN WITH HYPERTENSION: A CASE STUDY OF MRS. S

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ABSTRACT

Background: Background: Hypertension during pregnancy is one of the leading causes of maternal and perinatal morbidity and mortality worldwide. The condition is commonly identified during the third trimester and may progress to severe complications such as preeclampsia, eclampsia, placental abruption, and fetal growth restriction if not detected and managed early. **Objectives:** This study aimed to describe the implementation of comprehensive midwifery care management for a third-trimester pregnant woman with hypertension using Helen Varney's Midwifery Management Process. **Methods:** This study employed a descriptive case study design involving one third-trimester pregnant woman (Mrs. S) diagnosed with hypertension. Data were collected through interviews, observation, physical examination, and medical record review. Midwifery care was provided according to Helen Varney's seven-step management process, including assessment, diagnosis, identification of potential problems, immediate actions, planning, implementation, and evaluation. **Results:** The assessment revealed elevated blood pressure during the third trimester without severe maternal or fetal complications. Comprehensive midwifery care, including routine blood pressure monitoring, fetal well-being assessment, nutritional counseling, health education, and scheduled antenatal care, was successfully implemented. The evaluation demonstrated stable maternal and fetal conditions, improved maternal understanding of hypertension management, and no progression to severe hypertensive disorders. **Conclusions:** Comprehensive and continuous midwifery care plays an important role in the early detection and management of hypertension during pregnancy. Appropriate antenatal care, patient education, and regular monitoring contribute to preventing maternal and fetal complications and improving pregnancy outcomes.

Keywords: Hypertension; Third Trimester Pregnancy; Midwifery Care; Antenatal Care; Preeclampsia

INTRODUCTION

Pregnancy is a physiological process that begins with fertilization and ends with childbirth. Although pregnancy is considered a normal condition, various complications may occur during the gestational period and threaten the health and safety of both mother and fetus. One of the most common complications is hypertension during pregnancy.(Nayak *et al.*, 2025)

Hypertension during pregnancy is one of the complications that needs to be detected early through antenatal examinations. In standard antenatal care services, the mother's blood pressure should be measured at every visit. Normal blood pressure in pregnant women is approximately 120/80 mmHg, while a blood pressure of $\geq 140/90$ mmHg indicates a risk of hypertension during pregnancy. Routine blood pressure monitoring is very important to prevent more severe complications such as preeclampsia and eclampsia. In addition, urine examinations are also performed to detect early signs of preeclampsia.(Simarmata, 2020).

Hypertensive disorders during pregnancy account for approximately 10–14% of maternal deaths worldwide. In Indonesia, hypertension is one of the leading causes of maternal mortality, alongside hemorrhage and infection. Hypertensive disorders in pregnancy include chronic hypertension, gestational hypertension, preeclampsia, and eclampsia

The third trimester is a critical period because fetal oxygen and nutritional requirements increase significantly, accompanied by a substantial increase in maternal cardiovascular workload. In hypertensive pregnancies, impaired uteroplacental blood flow may occur, resulting in restricted fetal growth and development(Seely and Ecker, 2014)

High-quality antenatal care (ANC) is one of the primary strategies for the early detection of hypertension and the prevention of severe complications. Antenatal examinations focus not only on maternal health but also on fetal well-being through monitoring fetal heart rate, fundal height, and fetal growth.(Febriana and Lestari, 2026)

Therefore, understanding the examination and management of third-trimester pregnant women with hypertension is essential for improving the quality of midwifery services and reducing maternal and neonatal mortality rates(Weitz *et al.*, 1987)

It is important to note that pregnant women who experience gestational hypertension generally do not have a history of high blood pressure prior to pregnancy. This condition complicates approximately 5% to 15% of pregnancies, a relatively high proportion that requires intensive attention from healthcare professionals.(I.Y Siregar *et al.*, 2026)

Hypertension is a condition characterized by persistently elevated blood pressure that may lead to various health complications if not properly managed (Ervira Seprina *et al.*, 2024).(Ervira Seprina, Adelina Sembiring and Nur Azizah, 2024)

Several risk factors contribute to the development of hypertension, making prevention and early detection essential components of healthcare management (Tinambunan *et al.*, 2024).(Tinambunan, Atina and Kaban, 2024)

Lifestyle modification, including a healthy diet and regular health check-ups, plays an important role in controlling blood pressure and preventing complications (Wahyuni *et al.*, 2024).(Wahyuni Wahyuni, Zulkarnain Batubara and Rosmega Rosmega, 2024)

Continuous monitoring during the third trimester of pregnancy is necessary to identify potential maternal and fetal complications at an early stage (Basaria.M., 2025).

Comprehensive midwifery care includes health education, maternal and fetal monitoring, and counseling to promote positive pregnancy outcomes (Fatimah & Nuryaningsih, 2018).(Fatimah and Nuryaningsih, 2018)

Regular blood pressure monitoring and ongoing health education can improve patient adherence and support effective hypertension management (Simanjuntak et al., 2024).

Health promotion activities can increase public awareness and encourage individuals to adopt healthier behaviors for disease prevention (Yuttama & Widadi, 2025).

METHODS

This study used a descriptive case study design. The subject of the study was a third-trimester pregnant woman diagnosed with hypertension (Mrs. S). Data were collected through interviews, observation, physical examination, and review of medical records.(Park *et al.*, 2013)

The midwifery management process was conducted according to Helen Varney's seven-step approach, including assessment, diagnosis, identification of potential problems, immediate actions, planning, implementation, and evaluation. Data analysis was performed descriptively to explain the client's condition and the midwifery interventions provided.(Aisyiyah *et al.*, 2025)

The method applied in the multivariate analysis was the Backward Likelihood Ratio (Backward LR) method.(Amanak, Sevil and Karacam, 2019)

RESULT

The case involved Mrs. S, a pregnant woman in her third trimester who attended antenatal care services. During a routine examination, elevated blood pressure was detected, indicating hypertension during pregnancy. A comprehensive assessment was conducted to evaluate both maternal and fetal conditions and to determine the appropriate management plan.

Table 1. Summary of Midwifery Care Management

Midwifery Management Step	Findings
Assessment	Elevated blood pressure during third trimester
Diagnosis	Third trimester pregnancy with hypertension
Potential Problems	Preeclampsia, eclampsia, IUGR

Immediate Actions	Monitoring and early detection
Planning	ANC, education, nutrition management
Implementation	Continuous maternal and fetal monitoring
Evaluation	Stable maternal and fetal condition

DISCUSSION

Hypertension during pregnancy is a serious obstetric condition associated with increased maternal and fetal morbidity and mortality. The condition is closely related to abnormal placental implantation and endothelial dysfunction, leading to systemic vasoconstriction and elevated blood pressure. The findings of this case study are consistent with previous studies demonstrating that maternal age, obesity, chronic hypertension, diabetes mellitus, family history of hypertension, and multiple pregnancy are important risk factors for hypertensive disorders during pregnancy. Abnormal placental development results in reduced uteroplacental blood flow and placental hypoxia, which trigger endothelial injury and widespread vasoconstriction. Routine antenatal care is essential for detecting hypertension and preventing progression to severe complications. Blood pressure monitoring, urinalysis, fetal heart rate assessment, fundal height measurement, and nutritional evaluation are important components of antenatal examinations. Uncontrolled hypertension can progress to severe preeclampsia, eclampsia, HELLP syndrome, renal failure, pulmonary edema, and placental abruption. In fetuses, hypertension may cause intrauterine growth restriction, chronic hypoxia, low birth weight, prematurity, and perinatal mortality. Comprehensive midwifery care involving regular monitoring, health education, nutritional counseling, stress management, and appropriate referral systems contributes significantly to reducing maternal and fetal complications. Collaboration among healthcare providers is also necessary to ensure optimal pregnancy outcomes. (Simanjuntak, 2019)

Hypertension is known as a silent killer because it often presents without symptoms but can lead to serious complications such as stroke, heart failure, heart attack, and kidney damage. (Linawati Linawati et al., 2024)

Hypertension is a chronic disease influenced by genetic, behavioral, and environmental factors, with a particularly high prevalence among the elderly.

The nursing assessment revealed that the patient's hypertension was associated with stress-related thought patterns, accompanied by neck pain, sleep disturbances, and activity limitations. (Sihombing et al., 2025)

Hypertension in older adults is associated with physiological changes related to aging and is a major risk factor for complications such as stroke, heart disease, kidney failure, and decreased quality of life.

Gerontic nursing care based on the service excellence approach emphasizes holistic, professional, empathetic, and patient-centered care. (Grace et al., 2025)

Proper management of hypertension can help reduce the risk of maternal and fetal complications.

Early detection and appropriate management of hypertension are essential to prevent the progression to preeclampsia. (Surbakti et al., 2025)

CONCLUSIONS

Hypertension during the third trimester of pregnancy is a significant health problem that may lead to severe maternal and fetal complications. Early detection through routine antenatal care is essential to prevent disease progression and improve pregnancy outcomes. The case study of Mrs. S demonstrated that comprehensive midwifery care using Helen Varney's management approach effectively identified risk factors, monitored maternal and fetal conditions, and prevented complications. Continuous monitoring, health education, nutritional management, and collaboration with healthcare professionals are important components of successful management.

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CONFLICT OF INTEREST AND FUNDING DISCLOSURE

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