

**Harvard Medical School Department of
Continuing Education and the Renal Division
of Brigham and Women's Hospital**



Nephrology Rounds
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Pregnancy and the Kidney

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Objectives

To understand:

- the physiological changes in the kidney and vascular system during pregnancy
- the clinical manifestations of preeclampsia and their pathophysiologic underpinnings
- the role of endothelial growth factors in the pathogenesis of preeclampsia and the implications of this knowledge for the diagnosis, prevention, and treatment of preeclampsia

Questions:

1. Normal pregnancy is associated with a decreased glomerular filtration rate.
True False
2. Serum sodium is commonly decreased during normal pregnancy by 4-5 mEq/liter below non-pregnant states.
True False
3. Preeclampsia is more common in mothers with multiple gestations.
True False
4. The chief cause of hypertension in preeclampsia is increased peripheral vascular resistance.
True False
5. A key feature of severe preeclampsia is a reduction in plasma urate concentrations.
True False
6. The clinical symptoms of preeclampsia usually resolve after the delivery of the placenta.
True False

7. Renal biopsy in preeclampsia is characterized by immune complexes within the glomeruli.
True False
8. Preeclampsia is characterized by abnormally low circulating levels of bioactive vascular endothelial growth factor (VEGF).
True False
9. A role of VEGF in the glomerulus is to maintain glomerular endothelial health and the integrity of the endothelial fenestrae.
True False
10. Patients with a history of preeclampsia do not have an increased incidence of cardiovascular diseases in the long-term.
True False

To receive AMA category 1 credit, you must correctly answer 60% of the test questions.

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This program was issued in November 2005. All tests must be returned by February 28, 2006.

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Box 825, Boston, MA 02117-825.

Please keep a copy of your test before submission. A certificate will be sent upon successful completion of the test along with the answer key after the deadline date indicated.

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