### CORRESPONDENCE



# Preeclampsia and COVID-19 in Afghanistan: additional burden on Afghan pregnant women's health

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Preeclampsia, a pregnancy-induced hypertensive disorder that occurs after 20 weeks of gestation, is a significant cause of morbidity and mortality in Afghanistan, with the condition being responsible for many maternal deaths [1, 2]. Unfortunately, the COVID-19 pandemic worsened the situation, exacerbating the already-existing challenges in diagnosing and managing preeclampsia in Afghanistan. This was due to the inadequate healthcare system, limited access to quality healthcare, and cultural beliefs that hinder women from receiving antenatal care [2, 3].

Preeclampsia is a pathological pregnancy condition characterized by hypertension (defined as blood pressure  $\geq$ 140/90 mmHg after 19 weeks of gestation) and proteinuria (excretion of >0.3 g of protein in a 24-h urine collection), which can lead to end-organ damage. This condition is associated with increased maternal and perinatal morbidity and mortality. Timely detection and management of preeclampsia are crucial to saving the lives of both the mother and fetus. Thus, antenatal care visits play a pivotal role in the early identification and prevention of preeclampsia [1].

The Afghanistan Mortality Survey indicates that hypertensive disorders of pregnancy, including preeclampsia and eclampsia, account for 20% of deaths among pregnant Afghan women. Poor quality healthcare measures and practices and inadequate attention to antenatal care contribute to the failure to diagnose preeclampsia promptly in this population [2].

Sayed Hamid Mousavi dr.mousavi@kateb.edu.af Since the first COVID-19 case was detected in Herat in February 2020, over 206,273 confirmed cases and 7835 deaths in Afghanistan were reported [4]. At the same time, the healthcare system struggled to cope with the pandemic's impact, and pregnant women were among the most brutal hit, making timely detection and management of preeclampsia even more challenging [5]. A study found that the co-occurrence of COVID-19 and preeclampsia significantly increased the risk of severe maternal and perinatal complications, including preterm birth, severe perinatal morbidity and mortality, and adverse maternal outcomes [6].

The COVID-19 pandemic underscored the importance of investing in healthcare systems and ensuring pregnant women receive adequate care [7]. In Afghanistan, addressing the impediments to accessing quality reproductive healthcare services is of utmost significance to improve maternal health outcomes and alleviate the burden of preeclampsia. Such an endeavor requires a concerted and collaborative effort from various stakeholders, including the government, healthcare providers, and the community. Enhancing maternal health outcomes is pivotal to building Afghanistan's healthier and more prosperous future [8].

Afghanistan continues to grapple with a high maternal mortality rate, with preeclampsia being a leading preventable and manageable cause through timely diagnosis and appropriate interventions [8]. The COVID-19 pandemic has further complicated the situation, resulting in limited access to medical care for pregnant women and increased maternal morbidity and mortality in Afghanistan [7]. To mitigate the incidence of preeclampsia and its associated consequences, pregnant women in Afghanistan must have access to quality healthcare services, improved competency of skilled birth attendants, and increased antenatal visits [8].

To enhance maternal health outcomes and alleviate the burden of preeclampsia in Afghanistan, it is imperative to enhance awareness and initiate measures to improve access to quality reproductive healthcare services. This requires the

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## **Graphical Opinion**



government to invest in healthcare infrastructure, provide appropriate training to healthcare workers, and enhance the availability and accessibility of essential medicines and equipment. During a pandemic, this becomes even more crucial, and it is necessary to ensure that pregnant women have access to skilled healthcare providers and antenatal care services. Achieving this goal will require both international aid and concerted national efforts [8, 9].

### **Compliance with ethical standards**

Conflict of interest The authors declare no competing interests.

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