

LOW-DOSE ASA IN PREGNANCY:

Indications from international guidelines

This document outlines the recommended indications for low-dose acetylsalicylic acid (LDA) for preeclampsia prevention in pregnancy from the SOGC, NICE and ACOG guidelines. It is recommended to select ONE of these guidelines and consistently apply it when screening clients in early pregnancy. For more information about preeclampsia prevention see the AOM CPG No. 15 Hypertensive Disorders of Pregnancy.

SOGC

Any ONE of:

- Prior preeclampsia
- Pre-pregnancy BMI >30kg/m²
- Chronic hypertension
- Pre-gestational diabetes mellitus
- Chronic kidney disease
- Systemic lupus erythematosus/ antiphospholipid antibody syndrome
- Assisted reproductive therapy



- Prior placental abruption
- Prior stillbirth
- Prior fetal growth restriction
- Client age > 40 y
- Nulliparity
- Multifetal pregnancy

NICE

Any ONE of:

- HDP during a previous pregnancy
- Chronic kidney disease
- Autoimmune disease such as systemic lupus erythematosus or antiphospholipid syndrome
- Type 1 or Type 2 diabetes
- Chronic hypertension

TWO or more of:

- Nulliparity
- Age 40 years or older
- Pregnancy interval of more than 10 years
- BMI of 35 kg/m² or more at first visit
- Family history of pre-eclampsia
- Multi-fetal pregnancy

ACOG

Any ONE of:

- History of preeclampsia, especially when accompanied by an adverse outcome
- Multifetal gestation
- Chronic hypertension
- Type 1 or 2 diabetes
- Renal disease
- Autoimmune disease (systemic lupus erythematosus, antiphospholipid syndrome)

TWO or more of:

- Nulliparity
- BMI $> 30 \text{ kg/m}^2$
- Family history of preeclampsia (parent or sibling)
- Sociodemographic characteristics (African American race, low socioeconomic status)
- Age 35 years or older
- Personal history factors (e.g., low birthweight or small for gestational age, previous adverse pregnancy outcome, more than 10-year pregnancy interval)

A NOTE ON LANGUAGE: The text above has been edited from the respective practice guidelines to remove gendered language. The use of inclusive language is an important component of informed choice discussions and the provision of safe, respectful and inclusive healthcare. For more information, see the AOM's statement on gender inclusivity and human rights.

A NOTE ON RACE AS A RISK FACTOR: The ACOG guideline includes "African American race" as a risk under sociodemographic characteristics. Race is a socially defined construct, with no biological or scientific basis. **Racism** is a social determinant of health that creates disparities in health outcomes. For more information, see the AOM's racial equity toolkit.