

Diet May Impact Pregnancy Complications Among Latinas

Latinas who consumed more solid fats, grains and cheese were more likely to develop high blood pressure during pregnancy.

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New findings announced by [EurekAlert](#) suggest that diet may play a role in the development of harmful [high blood pressure](#) in late pregnancy among some Latinas.

Latina women are at higher risk of developing blood [pressure disorders during pregnancy](#), including gestational hypertension (high blood pressure developed for the first time after the 20th week of pregnancy) and preeclampsia, a serious and sometimes fatal late-pregnancy complication that raises blood pressure and can damage the liver and kidneys.

Researchers studied possible connections between what women typically ate in the third trimester of pregnancy and the diagnosis of hypertensive disorders of pregnancy.

The study analyzed 464 pregnant women participating in research through the [Maternal and Developmental Risks from Environmental and Social Stressors \(MADRES\) Center](#), an ongoing pregnancy cohort of mostly low-income Latina women in Los Angeles. The study included women diagnosed with hypertension prior to pregnancy as well as women with normal blood pressure prior.

Scores were calculated for each woman according to which foods and beverages they said they'd consumed in the previous 24 hours.

The analysis found that 21.6% of the women developed at least one hypertensive disorder of pregnancy, 6.7% developed gestational hypertension and 12.1% developed preeclampsia.

“Our study findings suggest that a diet with relatively higher intakes of non-starchy vegetables, oils and fruit may lower the likelihood of developing a high blood pressure disorder during pregnancy, among our study group of predominantly low-income Hispanic/Latina women,” said lead author of the study, Luis E. Maldonado, PhD, MPH, [according to the American Heart Association](#). “Conversely a diet with relatively higher intakes of solid fat, refined grains and cheese may increase the likelihood of a diagnosis of...preeclampsia.”

The study was limited by the fact that dietary data was self-reported and relied on participant memory. Furthermore, Maldonado noted, these results may not be generalized to all populations because study participants were predominantly low-income and of Latin descent and likely consumed foods that other population groups might not.

“Additionally, the women’s diets were assessed only at one point in time, and mostly in the third trimester of pregnancy, which may have been either before or after a hypertensive disorder of pregnancy was diagnosed,” Maldonado said. “The timing is important because individuals may change their diet and other health behaviors as a result of any other serious health-related diagnosis such as gestational diabetes or high blood pressure. Therefore, future studies that capture diet earlier in pregnancy and before a hypertensive disorder of pregnancy diagnosis is made are needed to verify our findings.”

To learn more about hypertension, read [“5 Surprising Facts About High Blood Pressure.”](#)

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