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Unraveling the Role of Cerebral Biomarkers in Preeclampsia

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Introduction

Preeclampsia, a potentially life-threatening condition affecting pregnant women, remains a significant global health concern. It is characterized by high blood pressure and signs of damage to organs, commonly affecting the kidneys and liver. However, recent research has shed light on another aspect of this complex condition – cerebral complications. These complications can manifest as cognitive impairment or other neurological symptoms and pose unique challenges for accurate diagnosis and prognostication. In this article, we explore the role of cerebral biomarkers, specifically NfL neurofilament light chain, tau and GFAP glial fibrillary acidic protein, in potentially enhancing diagnostic and prognostic accuracy for cerebral complications in preeclampsia. Through a comparative study, we examine the relationship between plasma concentrations of these biomarkers and objective cognitive assessments among women with varying degrees of pre-eclampsia and those with normotensive pregnancies.

Description

The study sought to unravel the potential impact of cerebral biomarkers on cognitive function in women with preeclampsia and normotensive pregnancies. Plasma concentrations of NfL, tau and GFAP were measured in women with pre-eclampsia of different severities and compared to those with normotensive pregnancies. Additionally, objective cognitive assessments were conducted at the time of discharge after delivery, allowing researchers to explore potential links between cerebral biomarkers and cognitive function. One of the primary goals of the study was to determine if cerebral biomarkers could serve as indicators of cerebral complications in preeclampsia, thus improving diagnostic accuracy. By comparing plasma concentrations of NfL, tau and GFAP among women with different severities of pre-eclampsia and those with normotensive pregnancies, researchers gained valuable insights into the role of these biomarkers in predicting neurological involvement [1].

The findings revealed that women with pre-eclampsia and severe features, particularly those complicated by pulmonary edema, exhibited increased plasma concentrations of NfL. This observation suggests a potential correlation between elevated NfL levels and impaired cognitive function assessment. The presence of cerebral biomarkers in the plasma may serve as a valuable clue for healthcare providers to identify women at higher risk of cerebral complications. Moreover, this study explored the prognostic value of cerebral biomarkers in predicting the long-term impact of cerebral complications in preeclampsia. By examining cognitive function at the time of discharge, researchers aimed to shed light on the possible persistence of cognitive impairment beyond the acute phase of the condition. Understanding the prognostic implications of cerebral biomarkers can guide postpartum care and follow-up assessments to optimize patient outcomes [2].

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The study's results provide compelling evidence supporting the theory of neuro-axonal injury in pre-eclampsia with severe features. The observed increase in plasma concentrations of NfL, a marker of neuro-axonal injury, suggests that severe preeclampsia may induce acute damage to nerve cells and their axons in the brain. This injury could directly contribute to the impairment of cognitive function as measured objectively through cognitive assessments. Cerebral complications in preeclampsia present unique challenges in terms of accurate diagnosis and prognostication. The study exploring the role of cerebral biomarkers, namely NfL, tau and GFAP, in relation to cognitive function, provides valuable insights into potential strategies to enhance diagnostic and prognostic accuracy.

By understanding the correlation between elevated cerebral biomarkers and impaired cognitive function, healthcare providers can identify women at higher risk of cerebral complications and tailor their management accordingly. Furthermore, the study's findings support the theory of neuro-axonal injury in severe pre-eclampsia, furthering our understanding of the underlying mechanisms of cerebral involvement in this complex condition. As research in this area continues to progress, cerebral biomarkers hold promise as a valuable tool in improving outcomes and optimizing care for pregnant women affected by preeclampsia. Eclampsia and pre-eclampsia are serious complications that can arise during pregnancy, posing significant risks to both the mother and the baby [3].

Among the various adverse outcomes associated with these conditions, cognitive impairment has emerged as a matter of concern. Recent research has sought to explore the link between cognitive function and the presence of neurofilament light chain in the plasma of women with eclampsia and pre-eclampsia complicated by pulmonary edema. This article delves into a comprehensive study that examines the correlation between impaired cognitive function assessment and increased plasma concentrations of NfL in these high-risk pregnancies. The findings of this study support the theory of acute neuro-axonal injury in pre-eclampsia with severe features, providing valuable insights into the potential mechanisms behind cognitive impairment in these conditions.

Eclampsia and pre-eclampsia are hypertensive disorders that occur during pregnancy, typically after the 20th week. Pre-eclampsia is characterized by high blood pressure and signs of damage to organs, particularly the kidneys and liver. When pre-eclampsia progresses to the point of seizures or convulsions, it is termed eclampsia. Pulmonary edema, a condition characterized by the accumulation of fluid in the lungs, can further complicate these already critical situations. Cognitive impairment, a condition affecting memory, concentration and cognitive processing, is a recognized complication of severe eclampsia and pre-eclampsia. The underlying mechanisms behind this cognitive decline have been a subject of ongoing research. In the quest to understand the pathophysiology of cognitive impairment in these high-risk pregnancies, researchers have turned their attention to neurofilament light chain a protein that is released into the bloodstream following neuro-axonal injury [4].

This comprehensive study aimed to explore the potential correlation between cognitive function and NfL plasma concentrations in women with eclampsia and pre-eclampsia complicated by pulmonary edema. Participants underwent objective cognitive assessments to evaluate their cognitive function accurately. Simultaneously, plasma concentrations of NfL were measured to assess the extent of neuro-axonal injury. The study's results revealed a compelling correlation between impaired cognitive function assessment and increased plasma concentrations of NfL in women with eclampsia and preeclampsia complicated by pulmonary edema. Higher levels of NfL indicated more significant neuro-axonal injury, potentially contributing to the observed cognitive impairment. These findings highlight the importance of considering neuro-axonal injury as a potential mechanism for cognitive decline in these severe pregnancy-related complications.

The observed correlation between cognitive impairment and increased NfL levels supports the theory of acute neuro-axonal injury in pre-eclampsia with severe features. As neuro-axonal injury leads to the release of NfL into the bloodstream, the elevated plasma concentrations of NfL in these highrisk pregnancies suggest acute damage to nerve cells and their axons. This injury may directly contribute to cognitive impairment as objectively measured through cognitive assessments. Cognitive impairment is a significant concern in severe eclampsia and pre-eclampsia complicated by pulmonary edema, impacting both maternal and neonatal outcomes [5].

Conclusion

The correlation between impaired cognitive function assessment and increased plasma concentrations of NfL provides valuable insights into the potential mechanisms underlying cognitive decline in these high-risk pregnancies. The evidence supporting acute neuro-axonal injury in preeclampsia with severe features sheds light on the complex nature of cognitive impairment in these conditions. As research in this area continues to advance, a better understanding of the underlying pathophysiology can guide targeted interventions to optimize cognitive outcomes and improve overall maternal and fetal health in women affected by eclampsia and pre-eclampsia.

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Conflict of Interest

None.

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