

### What is already known on this topic

Much is known about the effect of cardiovascular risks factors that are shared by men and women, but less on those specific to women

Retrospective studies, based on patient recall, suggest that hypertension in pregnancy may be associated with increased risk of cardiovascular diseases in later life

### What this study adds

Prospective recording of blood pressure and proteinuria shows that women who experienced raised blood pressure in pregnancy have a long term risk of hypertension

Women who experience raise blood pressure in pregnancy have an increased risk of stroke and, to a lesser extent, an increased risk of ischaemic heart disease

Long term cardiovascular risks are greater for women who had pre-eclampsia than those who experienced gestational hypertension (hypertension without proteinuria)

between gestational hypertensive disease and hypertension in later life was seen in the questionnaire and clinical examination data and also in the hospital diagnosis data and the mortality data. We suggest that our observations cannot be explained by chance or bias. The findings have implications for the aetiology and pathogenesis of circulatory disease, both in pregnancy and in later life. They also suggest that interventions that might minimise the risk of such conditions in later life should be identified and evaluated.

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Competing interests: None declared.

Ethical approval: The study protocol was approved by the Joint Grampian Health Board and University of Aberdeen ethics committee, the information and statistics division privacy advisory committee and the Grampian Health Board general practice subcommittee.

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### Corrections and clarifications

*Brain haemorrhage in babies may not indicate violent abuse*

In this news article by Owen Dyer (22 March, p 616), we said that Dr Jennian Geddes of the Royal London Hospital had said that brain stem damage in babies thought to have died from "shaken baby syndrome" could be due to "a range of aetiologies, including common perinatal problems, accidental falls, infection." This was incorrect. We should have said that Dr Geddes said this type of injury could be either accidental or inflicted. Dr Geddes would like to make it clear that she does not consider that this damage could be the result of common perinatal problems or infection.

*Diagnosis and management of scalp ringworm*

Our preference for spelling out abbreviations led to an editing slip in this Clinical Review article by L C Fuller and colleagues (8 March, pp 539-41). We expanded "id reaction" to "identity reaction" in both the text and the legend to figure 3; sadly this made no sense. An id reaction is an immunological response that occurs at some distance from the original infection and may be triggered at the start of treatment.

*German surgeon is investigated about trading of organs*

This title, which we added to a News article by Annette Tuffs about alleged organ trading (15 March, p 568), wrongly suggested that a German surgeon mentioned in the article (Christoph Broelsch) was being legally investigated over such trading. The district attorney in Essen is investigating the alleged trading, but only the recipients, donors, and an agency are being investigated; neither Dr Broelsch nor his surgeon friend Johannes Scheele is being investigated.