We report on a 35-year-old woman with arterial hypertension who was referred to our obstetrical department because of oligohydramnios. She reported to receive treatment with Olmesartanmedoxomil (5mg/day). The condition resolved after changing anti-hypertensive treatment to metoprolol at 26 6/7 weeks of pregnancy. The patient was born at term by C-section and showed the following signs of fetopathy: hyperechogenic multicystic kidneys and hypocalvaria. Renal function was normal, nevertheless arterial hypertension was present but treatment was not required. Discharge from hospital was possible at the age of 9 days. Regularly follow-up visits are necessary to monitor renal function and to evaluate long term effects.

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