

Gestational diabetes

Between 3 – 20% of pregnant women develop GDM, depending on their risk factors.

Risk Factors for GDM

Being:

- 35 years of age or older
- From a high-risk group (African, Arab, Asian, Hispanic, Indigenous, or South Asian)

Using:

Corticosteroid medication

Having:

- Obesity (BMI of 30 kg/m² or greater)
- Prediabetes
- GDM in a previous pregnancy
- Given birth to a baby that weighed more than 4 kg (9 lbs)
- A parent, brother or sister with type 2 diabetes
- Polycystic ovary syndrome (PCOS) or acanthosis nigricans (darkened patches of skin)

All pregnant women should be screened for GDM between 24 to 28 weeks of pregnancy. Women who are at high risk for undiagnosed type 2 diabetes should be screened at less than 20 weeks of pregnancy.

What is Gestational Diabetes Mellitus (GDM)?

GDM is a type of diabetes that occurs during pregnancy. Your body cannot produce enough insulin to handle the effects of a growing baby and changing hormone levels. Insulin helps your body to control the level of glucose (sugar) in your blood. If your body cannot produce enough insulin, your blood sugar levels will rise.

The good news

- Your baby will not be born with diabetes.
- GDM can be managed and you can expect to have a happy, healthy baby

What does GDM mean for me?

A diagnosis of GDM means you will be working closely with your health-care team to manage your blood sugar levels and keep them in the target range. This will help you avoid complications in labor and delivery. After your baby is born, blood sugar levels will usually return to normal. However, you are at greater risk for GDM in your next pregnancy and of developing type 2 diabetes in the future. Achieving a healthy weight in the normal BMI range can help reduce this risk.

What does GDM mean for my baby?

If left undiagnosed or untreated, GDM can lead to high blood sugar levels. This increases the risk that your baby will weigh more than 4 kg (9lbs) and will have a difficult delivery. GDM can also increase the risk of your baby becoming overweight and developing type 2 diabetes in the future.

GDM and breastfeeding

It is important to breastfeed immediately after birth for at least 4 months to help avoid low blood sugar in your newborn, and to reduce the risk of obesity and diabetes for your baby.



After your pregnancy, it is important to be screened for type 2 diabetes:

- within 6 weeks to 6 months of giving birth
- before planning another pregnancy
- every 3 years (or more often depending on your risk factors)

Early diagnosis and management of type 2 diabetes IS IMPORTANT because:

- undiagnosed or poorly controlled type 2 diabetes in a pregnant woman increases her risk of miscarriage, the baby being born with a malformation, or having a stillborn baby
- it will improve your chances of having healthy pregnancies and healthy babies in the future

For a healthy tomorrow, take good care of your GDM today by

Choosing a healthy diet:

Ask your doctor to refer you to a registered dietitian to learn about healthy eating during pregnancy. Try eating low-glycemic index foods (e.g. whole grains, legumes), spread over 3 meals and 2 snacks to help manage your blood sugar.

Achieving a normal pregnancy weight gain:

The amount of weight you gain will vary depending on your weight before your pregnancy. Weight loss is not recommended. Talk to your health-care provider about appropriate weight gain for you.

Being physically active:

Regular physical activity can help control your blood sugar levels. It can also help you:

- Boost your energy
- Sleep better
- Reduce stress
- · Reduce pregnancy discomfort
- Prepare for childbirth
- · Get your body back faster after childbirth

Talk to your health-care provider about the right type and amount of activity for you.

Checking your blood sugar at home:

Checking and tracking your blood sugar with a blood glucose meter will help you and your health-care team manage your GDM.

Taking medication, if needed:

Sometimes healthy eating and physical activity are not enough to manage blood sugar levels and your health-care provider may recommend insulin injections or pills for the duration of your pregnancy. Medication will help keep your blood sugar level within your target range. This will help to keep you and your baby in good health.

Your health-care team can answer your questions and support you through this important time in your life. Your team may include your doctor, nurse and dietitian, but remember: The most important member of your health-care team is you!

Related article: As you take your baby in your arms, take your health in your hands, and Type 2 diabetes: the basics

DIABETES CANADA

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