

DIABETES IN PREGNANCY- GESTATIONAL DIABETES

Gestational diabetes is a particular type of diabetes which some women develop during pregnancy. It usually disappears after the birth, and does not mean that baby will be born with diabetes.

Who is affected?

Although it happens to women from all communities, it is especially common among women of Asian, Middle Eastern, Philippino, Pacific Island origin, and it is increasing.

What causes gestational diabetes?

Gestational diabetes is caused by hormonal changes in pregnancy which can change the body's ability to use a substance called insulin. Insulin is important because it helps keep blood sugar at a healthy level. While all women undergo hormonal changes, only some women develop gestational diabetes.

Why is it a problem if a woman gets gestational diabetes?

Although gestational diabetes usually goes away after the birth, when hormone levels return to normal, it still needs to be taken seriously.

- The main concerns are that it can increase the baby's weight, have other effects on the unborn baby.
- If the baby becomes very large, (4 kilos or more) it may be necessary for the woman to have caesarian delivery, or for the doctor to induce the birth little earlier, before the baby grows too big. But this can usually be avoided.
- Women who develop gestational diabetes have greater risk of developing type 2 diabetes later on.
- Type 2 diabetes, which is increasingly common in people over the age of 40, is a chronic disease which has to be carefully managed with healthy eating and regular physical activity. Sometimes long term medication is also needed, such as taking tablets or insulin injections. If type 2 diabetes is not well controlled it can cause serious health problems including heart and kidney disease, and eye problems.

What do pregnant women need to do?

During pregnancy women need a number of health checks, including a blood test to check a blood sugar around 26 and 34 weeks of the pregnancy. If you are not sure, if you have had this test or not, ask your doctor or midwife.

Tell your doctor:

- If you have had gestational diabetes in a previous pregnancy
- If you have a family history of gestational diabetes or diabetes
- If you have given a birth to a baby weighing four kilos or over.

What if a pregnant woman is found to have gestational diabetes?

It can be managed by:

- Changes to the diet
- Eating regular meals. Hospital dietitian can advise on which foods to eat and which foods to avoid, and how often to eat. (Interpreters can be arranged if necessary.)
- Regular blood sugars checks – It's important for a woman to regular check her blood sugar herself at home, to make sure it stays at a normal level. The hospital will give her a blood sugar monitor to use during her pregnancy.
- Use of insulin injections when the blood glucose levels are higher than recommended. This is stopped after the birth of the baby
- Ongoing regular checking of blood sugar level- although the problem disappears after birth, women who have had gestational diabetes need to have their blood sugar levels checked six to eight weeks after the delivery and than regular intervals every 2 years.

Can you reduce the risk of developing gestational diabetes?

People who stay at healthy weight and are physically active are less likely to develop both gestational diabetes and type 2 diabetes