GESTATIONAL DIABETES

What Is Diabetes?
Diabetes is a health problem that results in too much sugar in the bloodstream and not enough in cells where it can be used for energy. The problem occurs when the body is not able to make the hormone insulin (type 1 diabetes) or the insulin that is made doesn’t work very well (type 2 diabetes). Gestational diabetes (GDM) is diabetes that occurs during pregnancy.

Why Is GDM a Problem for Pregnant Women?
Women with GDM don’t make enough insulin during pregnancy. This results in high levels of sugar in the blood, which is transferred to the baby. The baby turns the extra sugar into fat — mostly around his or her belly. This extra birth fat increases your baby’s chance of having obesity, high blood pressure, heart disease, and type 2 diabetes later in life. In addition, the baby may have difficulty being born if he or she is too big, and can have low blood sugars that require special care right after birth.

Should I Have a Blood Test to Screen for Diabetes During My Pregnancy?
Women who have any risk factor that increases the chance of having GDM should have a screening blood test for GDM at the beginning of the fifth or sixth month (24-28 weeks). Most women have some risk factors for GDM. This is why most health care providers offer the test to all pregnant women. A few women have a high risk for getting GDM during pregnancy. To learn your risk for gestational diabetes, check each box below that applies to you:

- I am over 25 years old
- I was overweight before being pregnant
- I had GDM during a prior pregnancy
- I have a history of several miscarriages, a stillborn baby, a very large baby, a baby with birth defects, or a baby who got “stuck” during delivery
- I have a mother, father, sister, or brother with diabetes
- I had sugar in my urine at the first prenatal visit
- I have a condition called polycystic ovarian syndrome (PCOS)
- I am taking a medication called Glucophage (metformin)
- I am Hispanic, African American, Native American, South or East Asian, or from the Pacific Islands

If you did not check any of the boxes above, you do not need a screening test for diabetes during pregnancy. If you checked any of the boxes above, you have an average or possibly, a high chance of getting gestational diabetes. Your health care provider will offer a screening test early in pregnancy or at 24-28 weeks depending on your level of risk.

What Do I Do If I Have GDM?
If you have GDM, you will be asked to test your blood sugar at home. Most women with GDM are able to have normal blood sugar levels by eating healthy and increasing exercise. If you have GDM, you should meet with a diabetes educator or nurse who can teach you how to check your blood sugar levels and help you learn about how to eat in ways that keep your blood sugar at normal levels. A few women who have GDM need to take medicine or insulin to control blood sugar.

What Happens After Pregnancy If I Have GDM?
Women who get GDM have a high chance of getting type 2 diabetes later in life. Healthy eating and regular exercise are important to help you prevent diabetes in your future. Breastfeeding is very important if you have had GDM. It will help you lose weight and will help your baby maintain a healthy weight too. Believe in yourself and your ability to have a healthy baby. You can!
Diabetes Testing during Pregnancy

Do you need early screening for GDM? (See the flip side for more information.)

- No
  - You may have a blood test to screen for GDM screening when you are 24-28 weeks pregnant.

- Yes
  - You will have a blood test to screen for GDM during one of your early prenatal visits.

Did the result of your SCREENING test show a HIGH level of sugar in your blood?

- No
  - Your urine will be checked for high sugar levels at some of your prenatal visits.

- Yes
  - You will have another DIAGNOSTIC blood test that will tell for sure if you have GDM.

Did the result of your DIAGNOSTIC test show high levels of sugar in your blood over a few hours?

- No
  - Your urine will be checked for high sugar levels at some of your prenatal visits.

- Yes
  - Expect:
    - Your midwife or nurse-practitioner will consult with an obstetrician or doctor who specializes in diabetes during pregnancy
    - Nutrition counseling
    - Exercise counseling
    - Daily blood sugar testing
    - You may need to take medicine or insulin

FOR MORE INFORMATION ABOUT GESTATIONAL DIABETES

National Women’s Health Information Center
Diabetes—http://www.4woman.gov/faq/diabetes.htm

Frequently asked questions about Health Problems in Hispanic/American/Latino Women
http://www.4woman.gov/faq/latina.pdf

Centers for Disease Control and Prevention

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