

Essential information from **Accu-Chek®**
for pregnant women with diabetes

Roche

***Gestational
diabetes***



Diabetes matters

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The big picture

Gestational diabetes develops during pregnancy and, as with other types of diabetes, affects how your cells use glucose.¹ Gestational diabetes causes high blood glucose that can affect your pregnancy and your baby's health.¹ Blood glucose usually returns to normal soon after delivery, but if you've had gestational diabetes, you're at risk for Type 2 diabetes.¹

Suffering from complications during pregnancy is concerning to say the least, but there's good news. Expectant women can help control gestational diabetes by eating healthy foods, exercising and, if necessary, taking medication.¹ Managing your blood glucose can prevent a difficult birth and keep you and your baby healthy.¹



Symptoms

For most women, gestational diabetes doesn't cause noticeable signs or symptoms.^{1,2}



When should I see a doctor?

- In short, as soon as possible, preferably when you first think about getting pregnant. This will allow your doctor to evaluate your risk of gestational diabetes as part of your overall wellness plan.
- After falling pregnant, your doctor will check for gestational diabetes as part of your prenatal care. If diagnosed, you may need more frequent check-ups which will take place during the last three months of pregnancy. This is when your doctor will monitor your blood glucose level and your baby's health.^{1,2}
- You may be referred by your doctor to other healthcare professionals who specialise in diabetes - an endocrinologist, a registered dietitian or a diabetes educator. They can assist you to learn how to manage your blood glucose levels during your pregnancy.

- Right after delivery and again after six weeks, your health care team will check your blood glucose to make sure your blood glucose level has returned to normal. Once you've had gestational diabetes, it's a good idea to have your blood glucose level tested on a regular basis.^{1,2}



What are the causes?¹

It's not fully understood why some women develop gestational diabetes.

When pregnant, the placenta, which connects your baby to your blood supply, produces high levels of other hormones. Almost all of them impair the action of insulin in your cells, which raises your blood sugar. Modest elevation of blood sugar after meals is normal during pregnancy.

As your pregnancy advances, the placenta produces increasing amounts of insulin-counteracting hormones. With gestational diabetes, the placental hormones provoke a rise in blood sugar to a level that can affect the growth and welfare of your baby. Gestational diabetes typically develops during the second and third trimesters of pregnancy but it can occur at any time during pregnancy.



What about the risks?^{1,2}

Although any woman can develop gestational diabetes, some women are at greater risk. Risk factors for gestational diabetes include:

-  **Being of an older age.**
-  **Family or personal health history.** If you have prediabetes, a slightly elevated blood glucose that may be a precursor to Type 2 diabetes, or if a close family member, like a parent or sibling, has Type 2 diabetes, your risk of developing gestational diabetes increases. You're also more likely to develop gestational diabetes if you had it during a previous pregnancy, if you delivered a baby who weighed more than 4.1 kgs, or if you had an unexplained stillbirth.
-  **Excess weight.** There's an increasing likelihood of developing gestational diabetes if you're gaining excessive weight during your pregnancy.
-  **Being overweight.** If you are overweight when you fall pregnant, you are at increased risk of developing gestational diabetes
-  **Continued glycosuria** (glucose in your urine during pregnancy).



Complications²

While most women who have gestational diabetes deliver healthy babies, it must be carefully managed. If left unmanaged, it can lead to uncontrolled blood glucose levels and cause problems for you and your baby, including an increased likelihood of needing a C-section to deliver.

» Complications that may affect your baby



If you have gestational diabetes, your baby may be at increased risk of:

- **Excessive weight at birth.** When extra glucose in your bloodstream crosses the placenta, it triggers your baby's pancreas to make extra insulin. This can cause your baby to grow too large. This is known as macrosomia. Very large babies - those that weigh 4 kilogrammes or more - are more likely to become wedged in the birth canal, sustain birth injuries or require a C-section birth.
- **Early (pre-term) birth.** The risk of early labour and delivering her baby before the baby's due date may be elevated by the mother's high blood glucose. Alternatively, her doctor may recommend early delivery because the baby is large.
- **Respiratory distress syndrome.** Babies who are born early may experience respiratory distress syndrome, a condition that makes breathing difficult. They may need help breathing until their lungs mature and become stronger. Babies whose mothers have gestational diabetes may experience respiratory distress syndrome even if they're not born early.
- **Low blood glucose (hypoglycaemia).** It can happen that babies whose mothers have gestational diabetes develop low blood glucose (hypoglycaemia) shortly after birth. This is because their own insulin production is high. Severe episodes of hypoglycaemia may provoke seizures in the baby. Prompt feedings and sometimes an intravenous glucose solution can return the baby's blood glucose level to normal.
- **Developing Type 2 diabetes later in life.** There is a higher risk later in life for babies of mothers who have gestational diabetes, of developing obesity and Type 2 diabetes.

» How complications may affect you «

Gestational diabetes may also increase the mother's risk of:

- > **High blood pressure and pre-eclampsia.** Gestational diabetes raises your risk of high blood pressure, as well as pre-eclampsia, a serious complication that causes high blood pressure and other symptoms that can threaten the lives of both mother and baby.
- > **Diabetes in the future.** If you have gestational diabetes, you're more likely to get it again during a future pregnancy and you're also more likely to develop Type 2 diabetes as you age. Making healthy lifestyle choices, such as eating healthy foods and exercising, can help reduce the risk of future Type 2 diabetes.





Prevention³

The healthier the habits you can adopt before pregnancy, the better. If you've had gestational diabetes, these healthy choices may also reduce your risk of having it in future pregnancies or developing Type 2 diabetes down the road.



Choose to eat healthy foods. Concentrate on foods high in fibre and low in fat and calories, particularly fruits, vegetables and whole grains. Strive for variety to help you achieve your goals without compromising taste or nutrition. And finally, watch portion sizes.



Move! Exercising before and during pregnancy is a great way to prevent yourself from developing gestational diabetes. Aim for 30 minutes of moderate activity on most days of the week. Take a brisk daily walk or ride your bike. Do something you enjoy.



Drop some weight before pregnancy. Although doctors don't recommend weight loss during pregnancy, if you're planning to get pregnant, losing extra weight beforehand may help you have a healthier pregnancy.



Re-look your eating habits. Keep yourself motivated by focusing on the long-term benefits of losing weight, such as a healthier heart, more energy and improved self-esteem.



Treatment^{1,2}

▶ In all likelihood, your doctor will advise frequent check-ups, especially during your last three months of pregnancy. During these examinations, your doctor will monitor your blood glucose and may also ask you to monitor your own blood glucose daily as part of your treatment plan.

- ▶ If you find that controlling your blood glucose is problematic, you may need to take medication, as prescribed by your doctor. You may also need additional tests to evaluate your baby's health if you have other pregnancy complications.

Testing your blood glucose after you give birth^{1,2}



- ▶ Straight after delivery, and again after 6 to 12 weeks, your doctor will check your blood glucose to make sure that your level has returned to normal.
- ▶ If future tests indicate diabetes or prediabetes, chat to your doctor about starting a diabetes management plan or increasing your prevention efforts.



Coping and Support

Knowing that you have a condition that can affect the health of your unborn baby can be stressful. You can take control of the situation and your blood glucose level by eating healthy foods and exercising regularly. This may help relieve stress and nourish your baby and help prevent Type 2 diabetes in the future. At the end of the day, exercise and good nutrition are powerful tools for a healthy pregnancy as well as a healthy life for you and your baby.

For peace of mind, learn as much as you can about gestational diabetes. Chat to your healthcare team. Read as much as you can about the condition. Join a support group and remember, the more you know, the more in control you'll feel.



What to ask your doctor

Take some time out to make a list of questions you would like to ask your doctor. Some basic questions about gestational diabetes may include:

- What, if anything, can I do to help control my condition?
- When it comes to planning my meals or constructing a workout programme, can you recommend a dietitian or relevant healthcare individual?
- How will I know whether I need medication to control my blood sugar?
- What symptoms should I be looking for in order to seek medical attention?
- What websites, brochures or other printed materials do you recommend?

References

1. International Diabetes Federation (IDF) (2017) Atlas, 8th Edition, Online available at: <https://diabetesatlas.org/resources/2017-atlas.html>
2. SEMDSA, (2017) 'Guidelines for the Management of Type 2 Diabetes Mellitus', *Journal of Endocrinology, Metabolism and Diabetes*, 22 (1), Supplement 1), pp S1 – S196.
3. Baker LC. (2018) Healthline: Can you prevent gestational diabetes? Online available at: <https://www.healthline.com/health/pregnancy/preventing-gestational-diabetes>





Visit www.accu-check.co.za for more information

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