# 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 (Aboriginal, Hispanic, South Asian, Asian and African)
- obese (BMI of 30 kg/m2 or higher)
- Giving birth to a baby that weighed more than 4 kg (9 lbs)

#### Using:

· Corticosteroid medication

### Having:

- Prediabetes
- · GDM in a previous pregnancy
- 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 within 28 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 glucose 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 my baby?

If left undiagnosed or untreated, GDM can lead to high blood glucose 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.

#### What does GDM mean for me?

A diagnosis of GDM means you will be working closely with your healthcare team to manage your blood glucose levels and keep them in the target range. This will help you avoid complications in labor and delivery. After your baby is born, blood glucose 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.

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

- within six weeks to six months of giving birth
- before planning another pregnancy
- every three 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 women increases her risk of miscarrying or having a baby born with a malformation
- 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

### How is GDM managed?

### Choose a healthy diet:

Enjoy foods from all four of the food groups and spread out your foods by eating smaller meals and snacks. This will help you manage your blood glucose levels and provide the best nutrition for you and your growing baby.

### Achieve 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 healthcare provider about appropriate weight gain for you.

### Be physically active:

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

- 1. Boost your energy
- 2. Sleep better
- 3. Reduce stress
- 4. Reduce pregnancy discomfort
- 5. Prepare for childbirth
- 6. Get your body back faster after childbirth

Talk to your healthcare provider about the right type and amount of activity for you.

### Check your blood glucose at home:

Checking your blood glucose with a blood glucose meter will help you and your healthcare team manage your GDM.

### Take insulin, if needed:

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

Your healthcare 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 healthcare team is you!

Across the country, the Canadian Diabetes Association is leading the fight against diabetes by helping people with diabetes live healthy lives while we work to find a cure. Our community-based network of supporters help us provide education and services to people living with diabetes, advocate for our cause, break ground towards a cure and translate research into practical applications.



\*This document reflects the 2013 Canadian Diabetes Association Clinical Practice Guidelines. ©2013 Copyright