If your blood sugar level is high, then you might have gestational diabetes. Your doctor or nurse may want you to take another blood test if your blood sugar level is high. Your doctor or nurse will tell you more about the test before you take it.

You may have to follow a special diet for a few days or fast (not eat or drink anything but water) for a few hours before you take the test. Ask your doctor or nurse if you have to follow any special instructions before you get tested.

What if I don't get treated for gestational diabetes?

Most women with gestational diabetes have healthy

pregnancies and healthy babies because they control their condition. Without treatment, mothers with this condition could have very large babies. These mothers may have a harder time with labor and natural delivery (through the vagina). Some mothers need surgery



to deliver their bigger babies, which can increase the mother's risk of infection. Mothers who have their babies by surgery also take a longer time to recover.

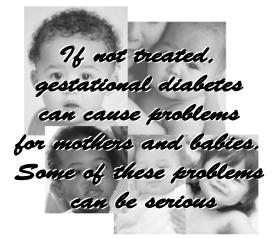
Children whose mothers had gestational diabetes are at higher risk for certain health problems:

- As babies, they are at higher risk for Respiratory Distress Syndrome (RDS), a disease that makes it hard for the baby to breathe.
- They are more likely to be obese (very overweight) as children or adults, which can lead to other health problems.
- They are at higher risk for getting diabetes, or high blood sugar, as they get older.

What should I do if I have gestational diabetes?

If your doctor or nurse tells you that you have gestational diabetes, you will need to follow a treatment plan to keep the condition under control. Most treatment plans include testing your blood sugar level, eating a healthy diet, and getting regular physical activity. Some women also need to take insulin as part of their treatment plan.

More and more women with gestational diabetes have healthy pregnancies and healthy babies because they follow their treatment plan and control their blood sugar level.



Information contained in this booklet is meant for informational purposes only and should not substitute the visit to your doctor nor his/her advice for your health care.

Accuracy of the content is current to the date of printing.

January 2009



Gestational Diabetes





DR. RAYMOND MANSOOR

B Sc, MB BS, DM (O&G), FACOG OBSTETRICIAN & GYNAECOLOGIST

TANNER ST. & CORN ALLEY
P.O. BOX W1361
ST. JOHN'S
ANTIGUA
TEL: (268) 463 2232/3
info@mansoormedical.org
www.mansoormedical.org



What is

Gestational Diabetes?

estational diabetes is a type of diabetes, or high blood sugar, that only pregnant women get. In fact, the word gestational means pregnant. If a woman gets high blood sugar when she's pregnant, but she never had high blood sugar before, she has gestational diabetes. Nearly 135,000 pregnant women get the condition every year, making it one of the top health con-

If not treated, gestational diabetes can cause problems for mothers and babies. Some of these problems can be serious.

cerns related to pregnancy.

But there is some good news

- Most of the time, gestational diabetes goes away after the baby is born. The changes in your body that cause gestational diabetes normally occur only when you are pregnant. After the baby is born, your body goes back to normal and the condition goes away.
- Gestational diabetes is treatable, especially if you find out about it early in your pregnancy. The best way to control gestational diabetes is to find out you have it early and start treatment quickly.
- Treating gestational diabetes greatly lowers the baby's chances of having problems.

Average Risk

Lower Risk

Why do some women get gestational diabetes?

Usually, the body breaks down much of the food you eat into a type of sugar, called glucose. Because glucose moves from the stomach into the blood, some people use the term blood sugar, instead of glucose. Your body makes a hormone called insulin that moves glucose out of the blood and into the cells of the body. In women with gestational diabetes, the glucose can't get into the cells, so the amount of glucose in the blood gets higher and higher. This is called high blood sugar or diabetes.

How do I know if I'm at risk?

Answer the questions below to learn your risk level for gestational diabetes.		
Are you a member of a high-risk ethnic group (Hispanic, African American, Native American, South or East Asian, Pacific Islander, or Indigenous Australian)?		
Are you overweight or very overweight?		
Are you related to anyone who has diabetes now or had diabetes in their lifetime?		
Are you older than 25?		
Did you have gestational diabetes with a past pregnancy?		
Have you had a stillbirth or a very large baby with a past pregnancy?		
 ♀ If you answered YES to TWO or more of these questions, you are at HIGH RISK for gestational diabetes. ♀ If you answered YES to ONLY ONE of these questions, you are at AVERAGE RISK for gestational diabetes. ♀ If you answered NO to ALL of these questions, you are at LOW RISK for gestational diabetes. 		
If you are at	You should	
High Risk	Get tested as soon as you know you are pregnant.	
If your first test is negative, get tested again when you are between 24 and 28 weeks pregnant.		

Get tested when you are between 24 and 28 weeks pregnant.

Don't get tested unless your doctor or nurse tells you that you should.

Keep in mind that every pregnancy is different. Even if you didn't have gestational diabetes when you were pregnant before, you might get it during your current pregnancy. Or, if you had gestational diabetes before, you may not get it with this pregnancy. Follow your doctor's or nurse's advice about



your risk level and getting tested.

What is involved in getting tested?

Tests for gestational diabetes have two parts. First, you drink about one full glass of a sugar drink. Then, after a certain amount of time, a doctor, nurse, or other healthcare worker takes a sample of your blood and tests the blood to see how much sugar is in it (called a blood sugar test).

If the level of sugar in your blood is normal, then you probably don't have gestational diabetes.

