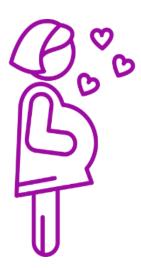




# **Gestational Diabetes Mellitus**

### What is Gestational diabetes (GDM)?

It is the condition in which diabetes is diagnosed for the first time during pregnancy, occurred when the placenta secretes some of the hormones that resist the work of the insulin hormone in the body of pregnant women, which causes a high blood sugar level that can affect the health and growth of the fetus.



Any pregnant woman can get gestational diabetes, but some women are more at risk than others. You are at greater risk if you:

1- Overweight (BMI greater than or equal to 25)



2- Your age over 30



3- Have a family history of diabetes



4- Had gestational diabetes in previous pregnancy



5- Had a baby who weighed more than 4 kg



6- Had a baby born with birth defects of unknown cause



7- Have Polycystic Ovary Syndrome

Women with one or more of these risks the doctor will ask them to do oral glucose tolerance test (OGTT) at the first trimester of pregnancy if the result is normal, the test will be repeated in the twenty-fourth week, while other women the test will be done for them between the 24th to the 28th weeks of pregnancy.



### The normal blood sugar level of a pregnant woman is:

30

Two hours after the

Less than 125 mg / d

fasting From 70 to 95 mg / dl

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200
190
180
170
160 High blood sugar
150
140
130
120
110 Two hours after the meal
normal
100
90
80 Before eating (fasting) normal
70
60
50
40 Low blood sugar
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## The complications of the GDM (for the mother and fetus):



These complications occur when the blood sugar level is uncontrolled during pregnancy, they include:

- 1- Premature birth.
- 2- Fetal abnormalities.
- 3- High blood pressure.
- 4- Jaundice; yellowing of the skin and eye of the fetus.
- 5-Abortion or stillbirth (when a fetus dies before birth).
- 6-a rapid drop in the blood sugar of the fetus right after birth.
- 7-Caesarean Section.
- 8- An increased baby weight which can increase

the risk of birth injuries to both mother and baby.

9- Breathing problems in the fetus.

### How is gestational diabetes treated?

Treatment depends on keeping the blood sugar in the normal level, so that the fetus grows naturally, through:

- Regularly measure your blood glucose level at home, helps pregnant women to control their sugar level and thus helps the doctor to decide the right treatment plan for her.
- Follow a balanced diet, a balanced diet, low in carbohydrates contributes to:
- Keeping the blood sugar in the normal level.
- Providing essential nutrients for fetus growth.



- Achieve proper weight gain during pregnancy.
- Regular physical activity
   such as walking, can reduce the body's
   resistance to insulin, and therefore helps
   control the level of sugar in the blood.

Consult your doctor before starting any physical activity.

What happens to gestational diabetes after giving birth?

Gestational diabetes usually disappears after the baby is born.

- It is essential that you do an oral glucose tolerance test after six weeks to three months after your child-birth, to be sure that you are not getting type II diabetes.

- Women who have gestational diabetes are more likely than others to develop diabetes type II later in life, therefore, women who had gestational diabetes are advised to check their OGTT:
- Every two to three years.
- When planning for pregnancy.

### How can I prevent type II diabetes?

To protect yourself from type 2 diabetes, make sure to:

- Follow a healthy diet rich in vegetables, fruits and whole grains while reducing your intake of high-fat foods
- Maintain normal weight

 Maintain regular physical activity for at least half an hour a day, consult your doctor before starting any exercise.



