



Gestational Diabetes

What is diabetes?

People with diabetes have too much glucose (sugar) in their blood and not enough glucose in cells where it is needed to help their body work. The hormone insulin moves glucose from your blood into the cells where it is needed to help your body work. Type 1 diabetes happens when your body is not able to make enough of the hormone insulin. Type 2 diabetes happens when the insulin that is made by your body doesn't work well enough.

What is gestational diabetes?

Gestational diabetes (GDM) is diabetes that is first diagnosed during pregnancy. During pregnancy, the placenta makes hormones that make it harder for insulin to move glucose out of blood and into cells. This helps make sure the baby gets enough glucose. In some women who have GDM, this causes them to have too much glucose in their blood.

Why is GDM a problem for pregnant women and their babies?

When a woman has GDM, her baby has higher levels of glucose. The extra glucose in the baby's body turns into fat. This increases the baby's chance of having obesity, high blood pressure, heart disease, and type 2 diabetes later in life. A baby whose mother has GDM may have trouble being born because they are too big. The baby can also need extra medical care right after birth to help get their blood glucose levels normal.

Am I at risk for diabetes during my pregnancy?

Some women have a higher chance of getting GDM than others. Your chance of getting GDM is higher if you:

- Are older than 25 years old
- Were overweight before you got pregnant
- Had GDM during a prior pregnancy
- Have had a stillborn baby or a baby with birth defects
- Have had a baby who weighed more than 9 pounds at birth
- Have had a baby whose shoulders were hard to get out at birth (shoulder dystocia)
- Have high blood pressure or heart disease
- Have a mother, father, sister, or brother with diabetes
- Had glucose in your urine at your first prenatal visit
- Have polycystic ovary syndrome (PCOS)
- Take the medication metformin (Glucophage)
- Are Hispanic, Latina, Black, Native American, Asian American, or from the Pacific Islands. Women in these groups seem to have a higher chance of GDM than white women. This may be due to a difference in weight before pregnancy.

Should I have a blood test to screen for diabetes during my pregnancy?

Most women have some risk factors for GDM. This is why health care providers usually offer a blood test for GDM to all pregnant women. Your health care provider will offer you a screening test for GDM either early in your pregnancy or when you are 24 to 28 weeks pregnant, depending on your chance of getting GDM.



How is testing for GDM done?

There are 2 different ways to have tests to see if you have GDM:

- The 2-step: If your health care provider uses this way to test for GDM, you will be given a sugary drink that has a known amount of sugar in it. One hour later, you will have your blood drawn and checked for the amount of glucose in it. If your blood glucose is high, you will come back in the morning for a longer test. In the morning, your blood glucose level will be checked when you have not eaten for several hours. Then you will be given a sugary drink. After that, your blood glucose levels will be checked once an hour 3 times.
- The 1-step: If your health care provider uses this way to test for GDM, you will have your blood glucose level checked at a time when you have not eaten for several hours. Then you will be given a sugary drink. Your blood glucose level will be checked again 2 hours later.

How is GDM treated?

Most women with GDM are able to be treated by eating healthy foods and doing more physical activity. Eating meals at regular times and avoiding sugary foods will keep your blood glucose levels normal. Exercise will also lower your blood glucose levels. Some women who have GDM need to take a pill or insulin shot to control their blood glucose levels.

How do I check my blood glucose levels?

If you have GDM, you will be asked to check your blood glucose levels at home. You will meet with a diabetes educator or nurse who will teach you how to use a machine to check your blood glucose levels. You will also learn when to check them before or after meals. You and your health care provider will use your blood glucose levels to choose the best GDM treatment for you.

What happens after pregnancy if I have GDM?

Women who get GDM have a high chance of getting type 2 diabetes later in life. You need to have a blood test 4 to 12 weeks after giving birth to be sure you no longer have diabetes after your baby is born. Healthy eating and regular exercise are important to help keep you from getting diabetes in the future. Breastfeeding may help you lose weight and help your baby have a healthy weight.

For More Information

American College of Obstetricians and Gynecologists

<https://www.acog.org/womens-health/faqs/gestational-diabetes>

American Diabetes Association

<https://www.diabetes.org/diabetes/gestational-diabetes>

Centers for Disease Control and Prevention

<https://www.cdc.gov/pregnancy/diabetes-gestational.html>

March of Dimes

<https://www.marchofdimes.org/complications/gestational-diabetes.aspx>

UpToDate

<https://www.uptodate.com/contents/gestational-diabetes-beyond-the-basics>

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