

My Diabetes



My Diabetes Project – Diabetes information and services in Europe for women and their families is coordinated by:

European Institute of Women's Health

www.eurohealth.ie

Gestational diabetes

Although women are resistant to insulin in the later stages of pregnancy, sometimes their pancreas cannot produce enough insulin to overcome this resistance. If this happens, a woman is diagnosed as having gestational diabetes.

Women who are overweight or gain much weight during pregnancy are at higher risk of developing gestational diabetes.

Gestational diabetes will often go away after a baby is born, but the woman will remain more likely to develop Type 2 diabetes later in life. Their babies are more likely to become obese or diagnosed with Type 2 diabetes.

It is important that women are tested for gestational diabetes at the right time during their pregnancy because most of the time they do not show any symptoms.

Gestational Diabetes screening / testing.

Your doctor will usually evaluate your risks for gestational diabetes early in your pregnancy. e.g.,

- Your body mass index (BMI) before pregnancy was high (30 or more) or
- Your mother, father, sibling or child has diabetes.

Testing means drinking a glucose solution syrup followed an hour later with a blood sugar level test. If your blood sugar level is higher than normal, then you have a higher risk of gestational diabetes. You will need to take glucose tolerance test to determine if you have the condition.

If you have an average risk of getting gestational diabetes, you will probably be screened in your second trimester — between 24 and 28 weeks of pregnancy.

If you test positive for gestational diabetes, your doctor will recommend frequent checkups, especially in the last three months of pregnancy. During these exams, your doctor will monitor your blood sugar. Your doctor may also ask you to do a daily sugar check of your blood sugar as part of your treatment.