

# Newsletter

## GESTATIONAL DIABETES MELLITUS (GDM) / DIABETES OF PREGNANCY

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Diabetes is a condition that affects the way your body uses sugar. Upon eating a meal, it is digested, and its components absorbed and transported in blood to various tissues. Insulin is a hormone that helps the sugar in blood enter cells. In Diabetes there is either reduced production of insulin, or reduced response of your cells to insulin leading to high blood sugar. GDM typically occurs in the second and third trimester of pregnancy.

GDM may lead to a big baby which increases the risk of birth complications and the likelihood of a caesarean birth. Babies born to mothers with untreated GDM may also have low blood sugar at birth. The mother is also at an increased risk of Hypertension of pregnancy (Preeclampsia).

Risk factors include:

- **Previous GDM - Family history of diabetes**
- **Being overweight prior to, or gaining too much weight during the pregnancy**
- **Maternal age older than 35 years**
- **Being Black**

It is recommended that all pregnant women should be screened for GDM. This is done by giving the pregnant woman a sweet drink and monitoring the blood sugar one and two hours later.

GDM is managed by dietary changes and exercise but may require medication. It usually resolves after the pregnancy however, women who develop GDM are at a higher risk of developing overt diabetes and therefore require follow-up. Discuss GDM with your doctor if you are pregnant or planning to have a baby.

