

# After Delivery

Note to the Health Care Provider: Topics in this handout are discussed in Chapter 10 of the *American Dietetic Association Guide to Gestational Diabetes Mellitus* (1).

**When counseling women with gestational diabetes mellitus about postpartum issues, consider the following strategies:**

- Encourage the woman to have a 75-gram oral glucose tolerance test (OGTT) performed at 6 to 12 weeks' postpartum to determine whether the diabetes remained after delivery or whether she is at risk of developing diabetes in the future.
- Assist the woman in establishing realistic goals for postpartum weight management. Discuss the need to avoid fad diets and eating plans that promote rapid weight loss of more than 2 to 4 pounds (1 to 2 kg) per month. Breastfeeding women should avoid rapid weight loss, which may interfere with milk production (see the *Breastfeeding* handout).
- Encourage the woman to eat a heart-healthy food plan by incorporating more nutrient-dense foods such as fruits, vegetables, and whole grains. Adequate calcium intake should also be stressed. Monounsaturated fats should be used in place of other fats, and saturated fats should be limited. Lean meats, vegetarian dishes, and fish high in omega-3 fatty acids should be selected instead of high-fat deep-fried items.
- Encourage regular physical activity, and advise the woman on how to incorporate physical activity into her lifestyle.
- Explain the importance of preconception counseling if the woman desires to have additional children. The health care provider should screen for diabetes or impaired glucose tolerance prior to conception. Explain that the first 12 weeks of gestation is the period of organogenesis and that optimal glycemic control during this time is critical.
- Review the MyPyramid Web site ([www.mypyramid.gov](http://www.mypyramid.gov)) with the client. Emphasize the key messages for each food group and help the client understand the eating plan for her calorie level.

## Reference

1. Thomas AM, Gutierrez YM. Postpartum considerations. In: *American Dietetic Association Guide to Gestational Diabetes Mellitus*. Chicago, IL: American Dietetic Association; 2005:101-113.

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Most women with gestational diabetes will have normal blood glucose levels right after giving birth. If your blood glucose has returned to normal, great!



After your baby is born, your doctor may tell you to stop testing your blood glucose. Or the doctor may have you check it less often than when you were pregnant.

You may want to follow your pregnancy food plan until your next visit with your registered dietitian (RD). At that visit, the RD will change your plan to help you lose the weight you gained in pregnancy in a healthy way.

## Your After-Delivery Checkup

The after-delivery checkup with your doctor is very important. Be sure to keep it!

The doctor will check your blood glucose again at this visit. The test is like the test you took while you were pregnant to find out if you had gestational diabetes.

This test may show that your blood glucose is normal. Or, it may show that you have type 2 diabetes or prediabetes. You should have this test, even if your blood glucose levels were normal after the baby was born.

If you have diabetes or prediabetes, your doctor will start you on a plan to keep your blood glucose level normal for the rest of your life.

## What Is Type 2 Diabetes?

Type 2 diabetes occurs when a person's body cannot properly use the insulin it makes. The body also may not make enough insulin. This will cause the blood glucose to be higher than normal.

Serious problems can develop when people do not manage their diabetes. You could have problems with your heart, kidneys, eyesight, feet, or legs. The good news is people can learn to manage their diabetes and lower their chances of having problems.

## What Is Prediabetes?

Prediabetes occurs when a person's blood glucose levels are higher than normal but not high enough to have type 2 diabetes. Prediabetes means you have a greater chance of getting type 2 diabetes in the future.

The Glucose Levels chart shows how doctors use results from glucose tests to find out whether an adult has type 2 diabetes or prediabetes.

Glucose Levels: What Do They Mean?			
	Normal	Prediabetes	Type 2 Diabetes
<b>Fasting glucose level</b>	Less than 100 mg/dL	100–125 mg/dL	More than 125 mg/dL
<b>Glucose level 2 hours after eating</b>	Less than 140 mg/dL	140–199 mg/dL	200 mg/dL or higher

## Which Women Are More Likely to Get Type 2 Diabetes?

Women who had gestational diabetes have a greater risk for getting type 2 diabetes than other people. Your risk goes up if:

- You are older than 35.
- You are overweight.
- You have relatives (especially parents, brothers or sisters, or grandparents) with type 2 diabetes.
- Your blood glucose level was very high when you were tested for gestational diabetes.
- You had gestational diabetes before your sixth month of pregnancy.

**Even if the points in this list do not apply to you, be sure to keep your after-delivery checkup!**

## Ways to Lower Your Risk for Diabetes

More than half of the women who had gestational diabetes will either have it again in another pregnancy or develop type 2 diabetes within the next ten years. This is true even for women with normal blood glucose tests after delivery.



You can lower your chances of getting diabetes by:

- Making healthy food choices
- Becoming more active
- Getting to a healthy weight, and staying there
- Having your fasting blood glucose tested once a year

## Making Healthy Food Choices

You can choose healthy foods by following the advice in MyPyramid, a nutrition Web site from the U.S. government. MyPyramid is found at [www.mypyramid.gov](http://www.mypyramid.gov). It includes eating plans for several different calorie levels and information for breastfeeding moms. Ask your RD how many calories are best for you to eat each day.

Here are some hints for healthy eating after delivery:

- Eat a variety of foods from the different MyPyramid food groups. These groups are grains, vegetables, fruits, milk, and meat and beans.
- Choose lower-fat and high-fiber foods more often. Have higher-fat and low-fiber foods less often.
- Choose whole grain products for at least half of your servings of grains. Grains are bread, rice, pasta, and cereal.
- Eat plenty of fruits and vegetables. Fresh and frozen vegetables have less salt than canned. You may drain and rinse canned vegetables to remove salt, or buy “no added salt” canned vegetables.
- Choose many different colored fruits and vegetables. This helps you get all the nutrients that your body needs.
- Drink juice only once in a while.

- Choose lean meats. Trim fat from meat. Take the skin off chicken and other poultry before eating.
- To get less fat, bake, grill, or roast meat, poultry, and fish instead of frying them.
- Choose low-fat or fat-free milk or yogurt and low-fat or part-skim cheese. These have fewer calories than whole milk and full-fat dairy foods.
- Avoid drinks made with sugar, such as regular soda.



## Becoming More Active

Being active helps keep your blood glucose level normal. It is also good for your heart and blood pressure. It can help you lose weight and give you more energy, too. **To be safe, talk to your doctor about the type of activity you plan to do before you start.**

Try to be active for at least 30 minutes every day. This may seem like a lot of time, but you can break your activity into 10 to 15-minute periods.

Great ways to keep fit include:

- Walking
- Swimming
- Bowling
- Riding a bicycle
- Yard work
- Gardening
- Pushing your baby in a stroller
- Walking the dog

## Losing Weight and Keeping It Off



- Breastfeeding is one of the best ways to lose weight after delivery.
- After the baby arrives, focus on eating healthy, safe exercise, and losing the weight slowly.
- Do not try to lose weight too quickly. You may just gain it back.
- Always talk to your doctor or RD before you try any weight-loss program, diet, pills, or supplements.