

What Is Gestational Diabetes?

Note to the Health Care Provider: Topics in this handout are discussed in Chapters 2, 3, and 10 of the *American Dietetic Association Guide to Gestational Diabetes Mellitus* (1-3).

Counseling considerations for the initial visit after a diagnosis of gestational diabetes mellitus (GDM) include the following:

- Explain how changes in eating habits may be necessary to achieve euglycemia.
- Explain that self-management is the key to achieving and maintaining blood glucose control. Self-management includes medical nutrition therapy, self-monitoring of blood glucose levels, physical activity, and medication, if necessary.
- Explain that medications may need to be added if medical nutrition therapy cannot maintain normal blood glucose levels.
- Assure the woman that in most cases blood glucose levels return to normal after delivery.

References

1. Thomas AM, Gutierrez YM. Pathophysiology of gestational diabetes mellitus. In: *American Dietetic Association Guide to Gestational Diabetes Mellitus*. Chicago, IL: American Dietetic Association; 2005:9-16.
2. Thomas AM, Gutierrez YM. Classification, screening, and diagnosis. In: *American Dietetic Association Guide to Gestational Diabetes Mellitus*. Chicago, IL: American Dietetic Association; 2005:17-25.
3. Thomas AM, Gutierrez YM. Postpartum considerations. In: *American Dietetic Association Guide to Gestational Diabetes Mellitus*. Chicago, IL: American Dietetic Association; 2005:101-113.

What Is Gestational Diabetes?



Gestational diabetes is diabetes that occurs in a woman who is pregnant. If you have gestational diabetes, you have too much glucose in your blood. This can harm your baby.

The good news is that, in most cases, gestational diabetes will go away after the baby is born.

Why Is Your Blood Glucose Level High?

When you eat, your body breaks down the food into glucose. Your body uses the glucose to feed your cells so they have energy.

Glucose cannot get into a cell by itself. Your body makes insulin to move the glucose through your blood into your cells.

If you have gestational diabetes, your body cannot make enough insulin. Glucose builds up in your bloodstream. Your blood glucose levels go up.

How Does Gestational Diabetes Affect Your Baby?

Unborn babies need some glucose to grow. They just shouldn't get too much.

If you have gestational diabetes and your blood glucose level is high, the extra glucose in your blood goes to the baby. This makes the baby's blood glucose rise, too.

When your baby gets too much glucose from your blood, the baby can grow too large. During birth, a large baby may cause problems for both you and the baby.

During pregnancy, your baby makes its own insulin to move the glucose it gets from your blood to its cells. If your blood glucose levels are high just before delivery, the baby's body will make a lot of insulin. After birth, this extra insulin could cause the baby's blood glucose level to drop too low. The baby would have **hypoglycemia** (low blood glucose levels). This can harm the baby and must be treated right away.

Who Gets Gestational Diabetes?

Some women are more likely to have gestational diabetes than others. Your risk is higher if:

- You were overweight before getting pregnant.
- You had gestational diabetes in another pregnancy.
- You are older than 25.
- You had a baby who died at birth or shortly after being born.
- You had a baby who weighed more than 9 pounds at birth.
- You have a close family member with diabetes, such as a parent, brother, sister, or grandparent.
- You are African American, Asian American, Latino, or Native American.



How Is Gestational Diabetes Treated?

Treatment for gestational diabetes works to keep your blood glucose at normal levels. There are several parts to this treatment:

- **Your food plan:** A registered dietitian (RD) will help you create a food plan. This food plan will provide all of the calories (energy) and other nutrients that you and your baby need.
- **Being active:** Physical activity and exercise help lower blood glucose levels.
- **Medication:** In addition to following your food plan, you may need to take medicine or insulin to keep your blood glucose level normal.
- **Checking your blood glucose:** You probably will need to check your blood each day to make sure your glucose level stays normal. Your doctor or diabetes educator will tell you when to check.

After the Baby Is Born

Your blood glucose level probably will return to normal after the baby is born. You will need to have your blood tested after delivery to make sure the diabetes is gone. This test is usually done 6 to 12 weeks after the birth of the baby.

Women who had gestational diabetes once are more likely to have it again in another pregnancy. After your baby is born, here are some things you can do to lower your risk of getting gestational diabetes again:

- Eat healthy foods.
- Get regular exercise.
- Get to a healthy weight.
- Have your blood glucose level checked once a year.

Do your best to follow the plans and advice that you get from your doctor, RD, or diabetes educator. Doing so will help you to have a healthy baby and a healthy life!

