

Gestational Diabetes

What is gestational diabetes? Gestational diabetes is defined as elevated blood sugars that result from pregnancy. During pregnancy, the placenta produces hormones that cause insulin resistance. This results in diabetes in some patients, especially in women who already have a predisposition to diabetes.

Can I take pills to control my blood sugar? Patients with gestational diabetes can usually control their diabetes with diet alone. In cases where medication is needed, insulin is usually used because most oral medications do not have safety data during pregnancy.

Why is it important to control my diabetes? Elevated blood sugars during pregnancy can have adverse effects on fetal development, so it is very important to control blood sugars during pregnancy. The most common complication of diabetes during pregnancy is excessive fetal growth, which may result in problems during delivery and a need for Caesarean section.

What should I do to control my blood sugar during pregnancy? The first treatment is usually diet, limiting carbohydrate intake. Your doctor will discuss with you how much carbohydrate you should eat, and may recommend that you attend a diabetes class or meet with a nutritionist. It is also recommended that you check your blood sugars in the morning after awakening, and 1-2 hours after meals. You should keep a log of your blood sugars and your meals and bring it with you to your appointments.

Will I still have diabetes after delivery? Most women with gestational diabetes do not have diabetes after delivery. You should return for a glucose tolerance test about 6 weeks after delivery to make sure that you do not still have diabetes. It is important to remember that women who have had gestational diabetes are more likely to develop type 2 diabetes later in life, so attention to diet and exercise can be very helpful at this stage to prevent development of diabetes in the future.