

Gestational Diabetes

What is gestational diabetes?

Gestational diabetes means diabetes in pregnancy. Your body is not able to use glucose (sugar) normally. Glucose is the body's main source of energy. For your body to use sugar, you need to have a hormone called insulin.

In the second half of pregnancy, your body makes more of the hormones that work against insulin. As your pregnancy progresses, extra insulin is needed to overcome this resistance. If your pancreas cannot produce enough extra insulin, blood sugar levels rise and you develop gestational diabetes. About 3–10 percent of all pregnant women will have gestational diabetes.

How does gestational diabetes affect my baby?

Sugar passes from the mother to the baby. If your blood sugar is high, your baby also gets more sugar. In response, your baby will make more insulin. Insulin encourages fat and muscle growth, which increases your baby's size and weight. If your baby is large (over 9 lbs./4 kg) it may be harder to deliver your baby. Your age and weight are also important factors that can affect your baby's weight.

How does gestational diabetes affect me?

Often, there are no symptoms at all. If your blood sugars are higher you may:

- feel tired
- feel sleepy after meals
- be thirstier than normal
- pass water (urine) more often

Who is at risk for developing gestational diabetes?

Risk factors for developing gestational diabetes include:

- being overweight before pregnancy (or gaining more than the normal amount of weight in pregnancy)
- having a family history of diabetes
- being over 35
- having had gestational diabetes before
- having large babies (more than 9 lbs. or 4 kg)
- belonging to some ethnic groups (Aboriginal people, Asian, Hispanic, or African descent—can be up to 20 percent in these groups)

How is gestational diabetes diagnosed?

All pregnant women should be tested by the 28th week of pregnancy. One or two tests are done to make this diagnosis. Speak with your diabetes educator about your results.

How can I take care of myself to keep my baby healthy?

Healthy Eating

Eating too many foods with starch or sugar (carbohydrates) at one time will cause the blood sugar to go too high. Spreading out your food by eating smaller meals and snacks will help. Making sure you are getting the vitamins and minerals you need is also very important.

Activity

Activity or exercise (for example, walking after a meal) can help lower blood sugar. Talk to your healthcare provider about the right type and amount of activity for you.

Blood Testing

You must test your blood sugar levels regularly to check how your diabetes treatments are working. Blood tests are done before breakfast and after meals. Your care provider will teach you how to test your blood sugar and plan a schedule of testing with you.

Urine Testing

If you are having problems with nausea and vomiting, the diabetes team may ask you to test your urine for ketones.

Insulin

Blood sugar can't always be controlled by diet and activity alone. Insulin injections are often needed to help keep your blood sugar levels normal. This insulin helps control the amount of sugar going to the baby. You stop taking the injections when your baby is born. Using insulin in pregnancy does not make you more likely to develop diabetes later in life. *Your body does not become dependant on insulin injections. Insulin does not cross to your baby.*

Will my baby have diabetes?

No, your baby will not be born with diabetes. When a mother has gestational diabetes, there is a greater risk for that child to develop type 2 diabetes later in life. A family history of diabetes will also increase this risk.

How do I look after my health after pregnancy?

Your blood sugar will go back to normal right after you have your baby. However, your family doctor should do a glucose tolerance test 3–6 months after you have had your baby. Healthy eating as you were doing in pregnancy should continue, especially if you are breastfeeding. Regular physical activity will help with weight loss. Remember to decrease your snacks when you stop breastfeeding, as this will also help you lose weight.

Screening for diabetes should be done before you get pregnant again. If you are diagnosed with diabetes before you get pregnant again, you should be seen at the Diabetes in Pregnancy Clinic before you become pregnant.

You are likely to have gestational diabetes in your other pregnancies once you have had it. Once you know you are pregnant again you need to be checked for gestational diabetes.

This material is for information purposes only. It should not be used in place of medical advice, instruction and/or treatment. If you have questions, speak with your doctor or appropriate healthcare provider.