

# Postpartum care for gestational diabetes: Managing health after pregnancy

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**Received:** 16-Feb-2024, Manuscript No. FMDM-24-136081; **Editor assigned:** 19-Feb-2024, PreQC No. FMDM-24-136081 (PQ); **Reviewed:** 04-Mar-2024, QC No. FMDM-24-136081; **Revised:** 11-Mar-2024, Manuscript No. FMDM-24-136081 (R); **Published:** 18-Mar-2024, DOI: 10.37532/1758-1907.2024.14(2).592-593.

## Description

Gestational Diabetes Mellitus (GDM) is a form of diabetes that occurs during pregnancy. While it typically resolves after childbirth, it requires careful management to prevent complications for both the mother and the baby.

Gestational diabetes is a condition characterized by high blood sugar levels (hyperglycemia) that develop during pregnancy. It usually occurs around the 24<sup>th</sup> to 28<sup>th</sup> week of pregnancy when the body's need for insulin exceeds its capacity to produce enough of it. Insulin, a hormone produced by the pancreas, regulates blood sugar levels. During pregnancy, various hormonal changes can interfere with insulin function, leading to gestational diabetes.

### ■ Risk factors for gestational diabetes

Several factors may increase the risk of developing gestational diabetes.

**Obesity:** Women with a Body Mass Index (BMI) of 30 or higher are at a higher risk.

**Age:** Women over the age of 25, particularly those over 35, are more likely to develop gestational diabetes.

**Family history:** A family history of diabetes increases the risk.

**Previous gestational diabetes:** Women who had gestational diabetes in a previous pregnancy are more likely to develop it in subsequent pregnancies.

**Poly Cystic Ovary Syndrome (PCOS):** Women with PCOS have a higher risk of gestational diabetes.

**Ethnicity:** Certain ethnic groups, including African Americans, Hispanic/Latino Americans, American Indians, and Asian Americans, have a higher prevalence of gestational diabetes.

### ■ Diagnosis of gestational diabetes

Gestational diabetes is typically diagnosed through prenatal screening. The American College of Obstetricians and Gynecologists (ACOG) recommends screening for gestational diabetes between 24 and 28 weeks of pregnancy. Screening usually involves a Glucose Challenge Test (GCT), followed by a Glucose Tolerance Test (GTT) if the GCT results are elevated. Managing gestational diabetes is crucial to prevent complications for both the mother and the baby.

### ■ Treatment strategies

**Dietary modifications:** Following a healthy eating plan, focusing on complex carbohydrates, fiber-rich foods, lean proteins, and healthy fats can help regulate blood sugar levels.

**Regular physical activity:** Engaging in moderate exercise, such as walking or swimming, can help control blood sugar levels and improve overall health.

**Monitoring blood sugar levels:** Regular monitoring of blood sugar levels helps ensure they stay within the target range. This may



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involve self-monitoring with a glucometer or continuous glucose monitoring devices.

**Insulin therapy:** If blood sugar levels remain elevated despite dietary changes and exercise, insulin therapy may be necessary to control them. Insulin is safe for both the mother and the baby during pregnancy.

**Frequent prenatal check-ups:** Regular prenatal visits allow healthcare providers to monitor both the mother's and the baby's health closely.

#### ■ Complications of gestational diabetes

**Macrosomia:** Infants born to mothers with gestational diabetes may have macrosomia, a condition characterized by excessive birth weight, which increases the risk of birth injuries and cesarean delivery.

**Hypoglycemia:** Newborns may experience low blood sugar levels shortly after birth if their mother had gestational diabetes, as their insulin production increases in response to high glucose levels in the womb.

**Preterm birth:** Gestational diabetes increases the risk of preterm birth (before 37 weeks of gestation) and may necessitate early delivery.

**Preeclampsia:** Women with gestational diabetes are at an increased risk of developing preeclampsia, a serious condition characterized by high blood pressure and organ damage.

**Type 2 diabetes:** Women who had gestational diabetes are at a higher risk of developing type 2 diabetes later in life.

While some risk factors for gestational diabetes, such as age and family history, cannot be modified, there are steps women can take to reduce their risk.

- Achieving and maintaining a healthy weight before pregnancy can reduce the risk of gestational diabetes.
- Following a balanced diet rich in fruits, vegetables, whole grains, and lean proteins can help prevent gestational diabetes.
- Engaging in regular physical activity before and during pregnancy can help improve insulin sensitivity and reduce the risk of gestational diabetes.
- Women with preexisting medical conditions, such as obesity or PCOS, should seek preconception counseling to optimize their health before becoming pregnant.

Gestational diabetes is a common condition that requires careful management to ensure the health and well-being of both the mother and the baby. By understanding the risk factors, early detection through screening, and adopting lifestyle modifications, women can reduce their risk of developing gestational diabetes and its associated complications.