



Gestational diabetes



What is gestational diabetes?

Gestational diabetes is a condition in which the body's glucose metabolism is disrupted during pregnancy because the mother's body cannot produce enough extra insulin to meet the increased demands of pregnancy.

Gestational diabetes usually resolves after childbirth when the mother's insulin efficiency returns to normal. Gestational diabetes increases the risk of type 2 diabetes.

How is gestational diabetes diagnosed?

Gestational diabetes is diagnosed using a glucose tolerance test. The glucose tolerance target levels are:

- Oh 5.3
- O 1h 10.0
- O 2h 8.6

If one or more of your levels are the same as or above these target levels, you will be diagnosed with gestational diabetes.

TREATMENT

The main treatment of gestational diabetes is a balanced and regular diet and exercise. If necessary, the maternity hospital's outpatient clinic will begin a course of medication to treat gestational diabetes.



Treatment objectives

- Manage the mother's weight;
- O Control blood glucose levels; and
- Prevent too high a foetal weight and lower the baby's risk of becoming overweight and developing cardiovascular diseases after birth.

Nutrition therapy

A balanced diet and regular eating are important in the treatment of gestational diabetes. A balanced and healthy diet includes:

- Bread and other foods made of grain, and potato
 Choose wholegrain products with high fibre content (bread, rice, pasta).
 As potatoes can increase your blood glucose level quickly, you can swap them for wholegrain rice or pasta.
- Eat half a kilo of fruit and vegetables every day: leafy and root vegetables, berries and fruit (berries and fruit may increase your blood glucose level).
- Consume 0.6–0.8 litres of low-fat milk products every day and use low-fat cheese on bread.
- Eat low-fat meat and fish 2–3 times per week.
- Use non-hydrogenated vegetable margarine for spreading on bread, and vegetable oils or liquid margarine for cooking and baking.
- Leave foods with high fat and sugar content for special occasions and do not consume them every day.
- Drink water when you feel thirsty.

Exercise

Exercise lowers blood glucose and helps with weight management.

Depending on your fitness level, we recommend that you exercise for 20–30 minutes 3–5 times every week.

Monitoring blood glucose levels

- Self-monitoring blood glucose levels:
 - Fasting level on four mornings every other week
 - Fast overnight for 8-10 hours
 - Monitoring your levels seven times a day, on one day only, every other week
 - Measure the level before each meal and an hour after breakfast, lunch and dinner
 - Fast 2,5-3 hours between meals
 - Blood glucose levels are monitored until the end of the pregnancy.

Self-monitoring target levels:

On waking after fasting or before a meal: below 5.5

1 hour after finishing a meal: below 7.8

Using the electronic customer service and contact the child health clinic's diabetes nurse if your blood glucose level after fasting is above 5.5 two times in one week, or your levels after meals are repeatedly above 7.8.

The test strips and lancets for testing blood glucose levels you will get from the maternity health clinic nurse at the first guidance visit. If you should need an insulin pen, you will get it from the Koskela distribution of self-treatment product with a referral from a hospital diabetes midwife.

Call and make an appointment.

KOSKELA DISTRIBUTION OF SELF-TREATMENT PRODUCTS Käpyläntie 11, N house, b staircase, 3rd floor tel. 09 310 55002

Telephone hours: Mon-Fri 10:00 to 14:00

Monitoring gestational diabetes after childbirth

After childbirth, your health care centre will monitor your condition.

If your gestational diabetes did NOT require an insulin or Metforem treatment, please book an appointment with the nurse at your health care centre one year after childbirth. The nurse will refer you to the laboratory for a glucose tolerance and blood lipid tests.

If your gestational diabetes required an insulin or Metforem treatment, the nurse at the child health clinic will refer you for a glucose tolerance test which will be carried out 6–12 weeks after the birth of your baby.

We recommend that you continue eating balanced, healthy and regular meals and keep exercising after your pregnancy. Your weight should return as close to normal as possible after the birth of your baby. Breastfeeding will help you in weight management.

For further information visit http://www.hel.fi/raskausajandiabetes

Self-monitoring of blood glucose levels:

Self-monitoring levels:

On waking after fasting or before a meal: below 5.5

1 hour after finishing a meal: below 7.8

Date	On	1 hour	Refore	1 hour	Before	1 hour	Before
Date	waking	after	lunch	after	dinner	after	evening
	after	breakfast		lunch	diffici	dinner	snack
	fasting	Dicakiast		Turicii		uninei	SHOCK
	Tasting						

