Information for women who have had Gestational Diabetes Mellitus

What will happen longer term?

If you have had gestational diabetes that was treated with insulin or tablets, the medication will stop once you have given birth to your baby.

Before discharge from hospital, you would have had glucose tests to make sure your blood glucose levels have returned to normal ranges without the help of medications.

N.B: If your blood glucose remained high, a treatment and monitoring plan would be started in the hospital before discharge home.

We will invite you for a Blood test (HbA1C) at approximately 13 weeks after delivery.

For most women, gestational diabetes goes away after they have had their baby, however a few women will need to continue treatment.

What happens after pregnancy?

If you become pregnant again, it is likely you will develop gestational diabetes during your pregnancy. Therefore, we recommend that you have a Glucose Tolerance Test at 16 weeks and, if this is normal, a repeat test between 26-28 weeks.

Because you have had gestational diabetes, the chance of developing diabetes later in life remains high, at approximately 50% chance. Therefore we recommend that you have diabetes screening blood test (HbA1C) yearly.

Also, look out for any symptoms of diabetes and arrange to see the GP/Nurse if you are concerned. These may include: passing urine more often, especially at night, extreme tiredness, increased thirst, unexplained weight loss, slow healing of cuts and wounds.

Detecting diabetes or pre-diabetes early can help prevent complications developing and means that you can receive early treatment if needed.

What can I do to reduce the risk of developing diabetes in the future?

Some lifestyle changes will help reduce your chances of developing diabetes later in life:

Weight:

Try to keep a healthy weight for your height (Within your Body Mass Index)

Exercise:

Do some physical activity for 30 minutes a day, on at least 5 days a week, at an intensity high enough to make you breathless.

Healthy diet choices:

Eating at least five portions of fruit and green leafy vegetables a day and cutting down on fatty, sugary and fried foods.

Research also suggests that breastfeeding your baby reduces the risk of developing Type 2 diabetes or may delay the onset of diabetes in the future.

Questions or concerns

If you have any questions or concerns or need any further information, please contact

Clarence Medical Centre via;

Tel; 01745 350680

Email; cmcenquiries.w91003@wales.nhs.uk

Or by using the eConsult function on the practice website.

Further information can also be found at;

https://www.nhs.uk/conditions/gestational-diabetes/

https://www.diabetes.org.uk/preventing-type-2-diabetes/can-diabetesbe-prevented

Reference/Source;

National Health Service. (2015). *Postnatal information for women who have had gestational diabetes* [leaflet]. Oxford university hospitals NHS Trust. -Katy Bartlett, Lead Diabetic Specialist Midwife, Oxford University Hospitals NHS Trust.