

Gestational Diabetes

This is a rise in blood sugar during pregnancy, which generally returns to normal after giving birth. It affects 3% to 8% of pregnant women and typically starts between week 24 and 28, hence there is routine blood testing for glucose at this stage of pregnancy. The test is a glucose tolerance test where blood is taken before and after consuming a glucose drink.

Risk factors for gestational diabetes include being overweight, being over age 30, having a family history of diabetes and having had gestational diabetes in a prior pregnancy. People of Chinese Polynesian, Vietnamese and Indigenous Australian background are at increased risk.

During pregnancy, hormones from the placenta help the baby grow. However, they can block the effects of maternal insulin leading to insulin resistance. It is estimated that insulin requirements when pregnant can be three times normal. For some people the body doesn't handle the load and thus gestational diabetes develops. When insulin levels drop post-delivery, blood sugars can return to normal.

Gestational diabetes increases your chances of developing Type 2 diabetes later in life, but it is not a given. It does not mean your baby is born diabetic.

Eating a healthy diet, doing regular exercise and maintaining a healthy weight all reduce the risk.

If you have gestational diabetes, it is important to monitor and control sugar levels in the blood stream. This means eating a healthy diet low in sugars and refined carbohydrates. You may benefit from seeing a dietician. Regular exercise helps.

<https://www.diabetesaustralia.com.au/about-diabetes/gestational-diabetes/>

