What you need to know about Gestational Diabetes



Gestational Diabetes

What is gestational (jess-TAY-shuhn-uhl) diabetes?

Gestational diabetes is a type of diabetes that only happens during pregnancy. Some women develop diabetes for the first time during pregnancy.

During pregnancy, higher levels of pregnancy hormones can interfere with insulin. So in gestational diabetes, your body does not make enough insulin or does not use it well. Insulin helps your body turn the sugar and starch in food into energy.

If you have gestational diabetes, too much sugar stays in your blood. This may cause problems for you or your baby. You may hear your healthcare provider refer to diabetes as high blood glucose.

Sometimes, gestational diabetes can be managed with eating healthy foods and exercising regularly. Other times, a woman with gestational diabetes may also need to take medications.





How can gestational diabetes affect you?

It may increase your chance of:

- Type 2 diabetes later in life
- High blood pressure during your pregnancy
- Cesarean (C-section) delivery
- Gestational diabetes if you become pregnant again

How can gestational diabetes affect your baby?

Your baby may have a higher chance of:

- Breathing problems
- Jaundice
- Low blood sugar after birth
- Increased birth weight

Am I at risk for gestational diabetes?

Certain things can increase your chances of developing gestational diabetes. Check the "Yes" or "No" box by each question to learn about your risks of getting gestational diabetes.

Have you been told that you are overweight?	☐ Yes ☐ No
Have you had gestational diabetes before?	☐ Yes ☐ No
Have you given birth to a baby weighing more than 9 pounds in a previous pregnancy?	☐ Yes ☐ No
Do you have a parent, brother, or sister with type 2 diabetes?	☐ Yes ☐ No
Have you been told that you have prediabetes (higher than normal blood sugar)?	☐ Yes ☐ No
Are you African American, Native American, Asian American, Hispanic/Latina, or Pacific Islander American?	☐ Yes ☐ No
Have you been diagnosed with a hormonal disorder called polycystic ovary syndrome, also known as PCOS?	☐ Yes ☐ No
Are you 35 years of age or older?	☐ Yes ☐ No



If you answered "Yes" to one or more questions, you may be at higher risk. Talk to your healthcare provider about your chances for developing gestational diabetes.

How do I get tested for gestational diabetes?

Your doctor will test you for gestational diabetes. This test is usually done during the 24th–28th week of pregnancy. You may be tested earlier depending on your other health conditions.

You may have the glucose challenge screening test, the oral glucose tolerance test (OGTT), or both. Your healthcare provider may give you the glucose challenge test first. In this test, your blood is drawn one hour after you drink a sweet liquid containing glucose (sugar). If your blood sugar is too high—140 or more—you may need to return for an OGTT.

The OGTT is done in the morning, and you typically do not eat or drink anything but water for at least 8 hours before the test. Your healthcare provider will give you instructions.

For this test, you drink a sugary liquid. Then your blood is drawn several times to measure your blood sugar.







What can I do to manage gestational diabetes?

Tips for managing gestational diabetes

Consult your healthcare provider before making any changes to your routine. Tips to consider asking about at your next appointment may include:

- Making healthy food choices
- Exercising regularly, if allowed by your healthcare provider
- Checking blood sugar often
- Taking medications, as prescribed by your healthcare provider
- Going to all of your prenatal visits
- Getting tested for diabetes after your delivery

Will I need to check my blood sugar levels during my pregnancy?

Your healthcare provider may ask you to check your blood sugar levels at home. You do this with a device called a blood glucose meter. You may be asked to check your levels several times a day.

Keep a record of your blood sugar levels.

Each time you check your blood sugar, write down the results in a record book or on your cell phone. Always bring your blood glucose monitor and your record book to your checkups so you can talk with your healthcare team about your blood sugar levels.

What are my blood sugar target levels?

Your target levels are your goals. They are the blood sugar levels you should aim for. Ask your healthcare provider about the targets that are best for you.

Blood Sugar Target Levels (mg/dL) for Women with Gestational Diabetes

Time of Day	Blood Sugar Goals (mg/dL)	Your Target Levels
Before meals and when you wake up	Less than 95	
1 hour after eating	Less than 140	
2 hours after eating	Less than 120	

Ask your doctor for your blood sugar target levels. Write the numbers in the spaces above.



Will I have diabetes after I deliver my baby?

After your baby is delivered, your body should be better able to use the insulin it makes. However, if you have gestational diabetes, you have a higher-than-normal chance of developing type 2 diabetes later in life. Type 2 diabetes, like gestational diabetes, happens when the body doesn't use insulin properly.

What can I do to lower my chances of getting Type 2 diabetes in the future?

- Get tested for diabetes 6-12 weeks after you give birth. Then get tested every 1-3 years
- Reach a healthy weight and try to maintain it
- Be physically active most days of the week.
 Talk to your healthcare provider about an exercise regimen
- Follow a healthy eating plan
- Ask your healthcare team about ways you may help prevent type 2 diabetes



Additional resources for more information:

The American Diabetes Association

- https://www.diabetes.org/diabetes/ gestational-diabetes
- 1-800-DIABETES (1-800-342-2383)

Center For Disease Control: Gestational Diabetes and Pregnancy

- https://www.cdc.gov/pregnancy/diabetesgestational.html
- 1-800-CDC-INFO (1-800-232-4636)

