



Diabetes and Pregnancy

Gestational Diabetes



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention



What is gestational diabetes?

Gestational (jes-stay-shuh-nal) diabetes is diabetes that a woman can develop during pregnancy.



When you have diabetes, your body cannot use the sugars and starches (carbohydrates) it takes in as food to make energy. As a result, your body collects extra sugar in your blood.

We don't know all the causes of gestational diabetes. Some—but not all—women with gestational diabetes are overweight before getting pregnant or have diabetes in the family. From 1 in 50 to 1 in 20 pregnant women has gestational diabetes. It is more common in Native American, Alaskan Native, Hispanic, Asian, and Black women, but it is found in White women, too.

Gestational diabetes can be controlled.

Work with your doctor to make a plan to keep your blood sugar in control. (See pages 7 and 8 for upper and lower levels.) Following this plan can help you have a healthy pregnancy and baby. It also can help you and your baby stay healthy after birth.

Gestational diabetes can affect your baby.

Gestational diabetes that is not controlled can cause your baby to

- Grow very large (weigh more than 9 pounds), which in turn can lead to problems with the delivery of your baby. A large baby born through the birth canal can injure nerves in his shoulder; break her collarbone; or, rarely, have brain damage from lack of oxygen.
- Have quickly changing blood sugar after delivery. Your baby's doctor will watch for low blood sugar after birth and treat it if needed.
- Be more likely to become overweight or obese during childhood or adolescence. Obesity can lead to type 2 diabetes.*



* Type 2 diabetes is a condition in which the body either makes too little insulin or can't use the insulin it makes to use blood sugar for energy. Often, type 2 diabetes can be controlled through eating a proper diet, exercising regularly, and keeping a healthy weight. Some people with type 2 diabetes have to take diabetes pills or insulin, or both.

Gestational diabetes can affect you.

Gestational diabetes that is not controlled can cause you to

- Have problems during delivery.
- Have a very large baby and need to have a cesarean section (C-section) (an operation to get your baby out through your abdomen).
- Take longer to recover from childbirth if your baby is delivered by C-section.

Other problems that sometimes happen with gestational diabetes

- Women with gestational diabetes also can develop preeclampsia* (pree-e-klamp-see-uh).
- Sometimes, diabetes does not go away after delivery or comes back later after pregnancy. When this happens, the diabetes then is called type 2 diabetes.

Work with your doctor before, during, and after pregnancy to prevent problems.

* **Preeclampsia** is a problem that happens among some women during pregnancy. Women with preeclampsia have high blood pressure; protein in their urine; and, often, swollen feet, legs, fingers, and hands. Preeclampsia can harm you by causing seizures or a stroke. It might also cause your baby to be born early.

Now is the time to keep you and your baby healthy.

It is important during your pregnancy to keep your blood sugar under control. Here's how:

1

See your doctor regularly

- Ask your doctor if you need to see him or her more often because of your diabetes.
- Work with your doctor and, together, you will be able to catch problems early, or even prevent them entirely.

2

Eat healthy foods and stay active

- Work with a dietitian or diabetes educator to develop a diabetes meal plan for yourself. Learn what to eat to keep your blood sugar under control.
- Stay active to help keep your blood sugar under control. Exercise regularly—before, during, and after pregnancy. Moderate exercise, such as a brisk walk, 30 minutes a day, 5 days a week is a good goal if it is okay with your doctor.

3

Take your medicines

- Follow your doctor's advice.
- Take your medicines as directed.

4

Monitor your blood sugar often

- Be aware that your blood sugar can change very quickly, becoming too high or too low. What you eat, how much you exercise, and your growing baby will change your blood sugar many times during the day.
- Check your blood sugar often—as directed by your doctor, and any time you have symptoms.
- Know what blood sugar levels mean. Learn how to adjust what you eat; how much you exercise; and, if prescribed, how much insulin* to take depending on your blood sugar tests.

5

Control and treat low blood sugar quickly

- Check your blood sugar right away if you have symptoms. (See page 9.)
- Treat low blood sugar quickly. Always carry with you a quick source of sugar, like hard candy or glucose tablets.
- Wear a medical alert diabetes bracelet.

* Insulin is usually made in the body and helps change sugars and starches into energy. If the body doesn't make enough insulin or can't use the insulin it makes, extra insulin is given in a shot.

Stay healthy after the birth of your baby.

Gestational diabetes goes away after pregnancy, but sometimes diabetes stays. It's important to be checked for diabetes after your baby is born. About half of all women who have gestational diabetes get type 2 diabetes later in life.

After pregnancy and in the future

- ✓ Make sure to ask your doctor about testing for diabetes soon after delivery and again 6 weeks after delivery.
- ✓ Continue to eat healthy foods and exercise regularly.
- ✓ Have regular checkups and get your blood sugar checked by your doctor every 1 to 3 years.
- ✓ Talk with your doctor about your plans for more children before your next pregnancy.
- ✓ Watch your weight. Six to twelve months after your baby is born, your weight should be back down to what you weighed before you got pregnant. If you still weigh too much, work to lose 5% to 7% (10 to 14 pounds if you weigh 200 pounds) of your body weight.
- ✓ Plan to lose weight slowly. This will help you keep it off.



Eating healthy, losing weight and exercising regularly can help you delay or prevent type 2 diabetes in the future. Talk with your doctor to learn more.

Monitoring Your Blood Sugar

The American College of Obstetricians and Gynecologists (ACOG) says you should try to keep your blood sugar below these levels:

	ACOG Recommendations	The levels my doctor recommends
Before meals	95 mg/dL or lower	_____
1 hour after eating	130 mg/dL or lower	_____
2 hours after eating	120 mg/dL or lower	_____

Blood sugar is measured in milligrams/deciliter (mg/dL)

Your doctor might recommend different blood sugar levels. Ask your doctor to write in the chart above the levels you should have.

High blood sugar

Your blood sugar is high when the numbers are 130 mg/dL or higher. High blood sugar can

- Make you thirsty
- Cause headaches
- Make you go to the bathroom often to urinate (pee)
- Make it hard to pay attention
- Blur your vision
- Make you feel weak or tired
- Cause yeast infections

Talk with your doctor if you notice any of these signs or symptoms. Call your doctor if your blood sugar is greater than _____. (Ask your doctor to write the levels).

My doctor's name: _____

Phone number: _____

Low blood sugar

Your blood sugar is low when the numbers are 70 milligrams/deciliter or less. Low blood sugar is also called hypoglycemia (hi-poh-gli-see-me-ah). Low blood sugar can

- Make you feel hungry
- Cause headaches
- Make you feel dizzy or shaky
- Cause you to feel confused
- Make you look pale
- Make you sweat
- Cause weakness
- Make you feel anxious or cranky
- Make your heart feel like it's beating too fast

If you notice any of these signs or symptoms, check your blood sugar. If it is low, eat or drink a source of quick sugar—like a piece of hard candy or 4 ounces of a fruit juice, skim milk, or a soft drink (not diet). Check your blood sugar again in 15 minutes. If it's not better, eat or drink a source of quick sugar again. When you feel better, have a protein snack like cheese and crackers or half a peanut butter sandwich. Talk with your doctor if you have two or more low blood sugars during 1 week.

Call your doctor if _____
(Ask your doctor to fill in.)

Remember!

- ✓ See your doctor regularly
- ✓ Check your blood sugar as directed
- ✓ Take your medicine as directed
- ✓ Eat a healthy diet
- ✓ Exercise and be active

Diabetes Logbook: Week of _____

Circle blood sugar result each time you're above or below your target. Add comments on diet, exercise, illness, or stress. Copy the chart as many times as you need it to keep track of your blood sugar.

Date	Breakfast		Lunch		Dinner		Bedtime	Other	Medicines you take
	Before	After	Before	After	Before	After			
Time									
Blood sugar readings									
Comments*									
Date	Breakfast		Lunch		Dinner		Bedtime	Other	Medicines you take
Time	Before	After	Before	After	Before	After			
Blood sugar readings									
Comments*									

* Comments: Report anything that might have made a change in your blood sugar, for example: meals and comments about certain foods (1/2 cup of rice = ↑ blood sugar); exercise (walked fast x 30 min); illness (fever and sore throat); or stress (concern about husband getting laid off).



<http://www.cdc.gov/ncbddd/bd/diabetespregnancy.htm>
800-CDC-INFO (800-232-4636)
flo@cdc.gov

Order Number: 21-1095
<http://www2.cdc.gov/ncbddd/faorder/orderform.htm>