

Gestational diabetes Information and quiz

What is gestational diabetes?

Gestational diabetes is a disease characterized by high blood sugar during pregnancy. In general, it goes away once the woman delivers the baby.

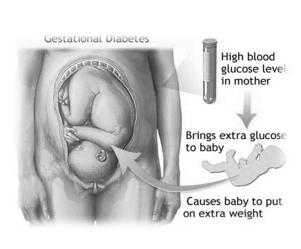
It is caused by hormones produced by the placenta which block the body's use of insulin. If insulin is blocked, glucose (sugar) cannot move from the blood into the cells and accumulates in the blood.

Most women don't have symptoms. As the pregnancy progresses, the placenta grows, making more hormones. This makes it harder and harder for insulin to work.

The baby shares the mother's blood. The baby is able to take the glucose normally from the blood into the cells. When her mother has diabetes, the baby takes too much glucose.

You can reduce these risks by following meal plans, exercising, taking your blood test as shown by your health-care provider and taking your medication as directed.





How do I know if I have gestational diabetes?

Your health-care provider will test your blood sugar between the 24th and 28th weeks for the first baby or before, if you already had gestational diabetes during a previous pregnancy.



Your health-care provider will check your blood glucose level to see if you have gestational diabetes.

How does diabetes affect my baby?

There are some potential risks:

- ✓ The baby may be born bigger (extra fat). The delivery may be more risky and may require a caesarean section.
- ✓ The baby's blood sugar may be too low. You must breast-feed right away. The baby may need to get more sugar through a tube into the bloodstream.
- ✓ The baby may have problems breathing.
- ✓ The baby's skin may turn yellowish: jaundice. This is easily treated.
- ✓ Low mineral levels in the blood may also be observed. The baby must receive mineral supplements.

Talk with your health-care provider about any concerns you have about diabetes and pregnancy.



How does diabetes affect the mother?

Most women with gestational diabetes show no symptoms, but some women do. Here are some symptoms:

- Fatigue,
- Extreme thirst,
- Increased volume of urine.

Risks:

- High blood pressure during pregnancy,
- Increased risk of having a bigger baby and needing a caesarian section,
- Increased amount of liquid in the belly (amniotic fluid) and risk of premature delivery,
- Increased risk of contracting an infection and having a miscarriage.

But the good news is: **You can breast-feed!**



How can I control my gestational diabetes?

Generally, a personalized diet, training plan and medication are enough to ensure good control of blood glucose. But if blood glucose is too high, you may need insulin injections. Keeping a record of your blood sugar levels by checking regularly (before breakfast is the most important) and sharing with your health-care provider is an excellent habit.





I check my blood glucose at least four times a day. The results show whether I need to change my meal or my training plan to keep my blood glucose on target.



Questions you can share over radio or during a community activity

Question 1

When you have diabetes, which substance is too concentrated in the body?

**Answer:*

Sugar (also known as glucose; both answers are good).

Question 2

How do I know if I have gestational diabetes?

Answer:

You have to go to the clinic and get tested.

Question 3

How does diabetes affect the baby?

Possible answers:

Bigger baby, blood sugar too low, problem breathing, yellow baby, low mineral levels in the blood.

Question 4

Name two things a pregnant woman should avoid and two things good for her health.

Possible answers:

Unhealthy choices: Alcohol, candies, cigarettes, cake, chips, cookies, pop.

Healthy choices: Bannock, blueberries, caribou, chicken, pork, mussel soup, fish soup, fruits (but in limited amounts), Labrador tea, vegetables.

Question 5

Even if a woman has gestational diabetes, what can she do that is very good for the health of the baby?

Answer:

She can breast-feed.