

Gestational Diabetes

Gestational Diabetes is diagnosed following an OGTT (oral glucose tolerance test) with a fasting blood sugar 5.1mmol/l or above and/or a 2 hour post reading of 8.5mmol/l or above. During pregnancy you are more insulin resistant therefore it is important to make changes to your diet and lifestyle.

Dietary Information

Most women will manage their Gestational Diabetes with reasonable dietary and lifestyle changes.

The aim is to reduce your intake of carbohydrates by avoiding/reducing sugary foods and drinks e.g. full sugar fizzy drinks, biscuits, cakes, chocolate, sweets, desserts etc. Quantities of snacks like crisps and crackers should be kept to a minimum as these are broken down into glucose. Starchy carbohydrates such as bread, pasta, rice, cereals and potatoes are broken down into glucose and will increase your blood glucose levels, therefore these should be limited to about a quarter of your plate or a fist sized portion. Avoid double carbohydrate portions e.g. spaghetti and garlic bread, potatoes and Yorkshire pudding or bun and chips. Where possible, opt for wholegrain starchy carbohydrates rather than white varieties eg wholegrain rice, pasta and seeded wholegrain bread as they release glucose slower into the blood stream and keep you feeling fuller for longer. Low sugar/wholegrain cereals within recommended portion sizes e.g bran flakes, weetabix and porridge should be taken instead of sugar/honey coated cereals e.g granola/coco pops/sugar puffs/crunchy nut cornflakes/frosties.

Bulk out your meals with more vegetables and salad – try to fill half your plate with these.

Aim for a quarter plate of lean protein foods such as chicken, fish, meat, eggs and pulses.

Fruit contains a natural sugar called fructose. Limit fruit to 2-3 portions per day but limit to 1 portion at a time and space intake throughout the day. 1 portion of fruit is a handful e.g. x1 apple, x1 small banana, handful of berries. Avoid fresh fruit juice and smoothies as these contain a large amount of fruit and the natural sugars rapidly increase blood glucose levels. Dried fruit should be avoided as much as possible as it is concentrated in natural sugar and will equally cause a rapid rise in blood glucose levels.

Dairy products – milk and yoghurt – contains a natural sugar called lactose. Avoid milky, sugary drinks like lattes and hot chocolates as these will likely cause blood glucose levels to rise above target level. Choose lower sugar yoghurts e.g. natural/greek or diet flavoured yogurts which are sweetened with sweetener rather than sugar e.g. muller light, weight watchers etc.

Fluids - you should still aim for a good intake to keep well hydrated, 8-10 cups per day, choose fluids like water, no added sugar squash/diluting juice, diet drinks (avoid too much caffeine), limit the amount of tea and coffee in a day (decaf options are available).

Aim for a regular meal pattern e.g. breakfast, lunch and evening meal and small healthy low carbohydrate snacks.

Snack Ideas

- Small piece of fruit
- Handful of unsalted nuts
- Natural/diet yoghurt
- X2 round oatcakes and small piece of cheese
- Vegetable sticks and hummus/soft cheese dip
- Handful of plain popcorn (avoid sweet versions)

Helpful websites:

<https://www.diabetes.org.uk/diabetes-the-basics/food-and-diabetes/i-have-gestational-diabetes>

<https://www.nhs.uk/live-well/eat-well/the-eatwell-guide>

Physical Activity

Being more active can help lower blood glucose levels. Try going for a walk after meals or being more active around the house and garden.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/829894/5-physical-activity-for-pregnant-women.pdf

Please remember that your diabetes will likely resolve itself once baby is delivered therefore these dietary changes are short term until the end of your pregnancy. However evidence suggests you are at higher risk of developing Type 2 Diabetes if you have gestational diabetes in pregnancy. Following a healthy balanced diet post pregnancy and reducing to/maintaining a healthy weight will help to reduce this risk.

Blood Glucose Monitoring

You will need to test your blood glucose levels x6/day – before meals and 2 hours after. Target levels you are trying to achieve are 5.5 mmol/l or less before meals and 7.0 mmol/l or less 2 hours after meals. After 35 weeks, blood glucose levels can go up to 8.0 mmol/l or less after meals.

A Contour blood glucose monitor will be available to you. There are instructions inside the box on how to use it.

The below links to videos on how to test may be useful:

<https://www.youtube.com/watch?v=uRcUB1mosN4>

<https://www.diabetes.org.uk/guide-to-diabetes/managing-your-diabetes/testing#Howtotest>

If you wish to call to discuss anything before your review, the number for Antenatal Clinic is 01224 553882.

Alternatively Triage number on 01224 558855 can help out of clinic hours.

A letter will be sent to your GP to enable you to get more testing strips and lancets (finger prick needles) on prescription. You will need to continue testing your blood glucose until the end of pregnancy, however you will be advised at a review if the number of tests per day can be reduced.

For some women medication is required to help manage their diabetes but this will be discussed with you as we continue to review you and your pregnancy.

Please do not hesitate to get in touch if you have any queries on the numbers supplied.

For more information re Gestational diabetes please go to our Grampian diabetes website:

<https://www.nhsgrampdiabetes.scot.nhs.uk/https-www-diabetes-org-uk-diabetes-the-basics-gestational-diabetes/>