

# Postnatal care for women with gestational diabetes

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**Maternity**

**Patient Information Leaflet**

## **Introduction**

Women who have gestational diabetes are at greater risk of developing type 2 diabetes in the future. It is important that we review your blood glucose levels post-delivery. After your baby is born your glucose levels generally return to normal. If you were treated with medication this is likely to have been discontinued.

## **Risks of developing type 2 diabetes**

Certain groups of the population have an increased risk. Women who:

- are aged 40 or above
- are overweight (BMI>27)
- are of Asian, African or African-Caribbean descent
- have had gestational diabetes
- have a family history of diabetes
- have polycystic ovarian syndrome

## **Symptoms of diabetes to look out for after pregnancy:**

- increased thirst
- passing urine more frequently
- excessive tiredness
- repeated infections

## **Postnatal Testing**

There are three tests we may perform to look for type 1 diabetes postnatally. These are:

- 24 hour blood glucose monitoring
- fasting plasma blood glucose
- HbA1c (test showing average level over past three months)

## **24 hours blood glucose testing**

Following delivery we ask that you continue to monitor for 24 hours prior to discharge home. This will inform us if you require further diabetes review. During this period we would expect your fasting results to be less than 7.0mmol/l and your one hour post-meal results to be less than 11.1mmol/l.

## **Postnatal blood results**

### **Fasting plasma blood glucose level below 6.0mmol/l or HbA1c level below 42mmol/mol:**

- You have a low probability of having diabetes at present.
- You should continue to follow the lifestyle advice given (including weight control, diet and exercise).
- You will need an annual test to check that your blood glucose levels are normal.

### **Fasting plasma glucose between 6.0 and 6.9mmol/l or HbA1c level between 42 and 47mmol/mol:**

- You are at high risk of developing type 2 diabetes.

### **Fasting plasma glucose level of 7.0 mmol/l or above, a HbA1c level of 48mmol/mol or above, or a 2 hour Glucose Tolerance Test result above 11.0mmol/l:**

- You are likely to have type 2 diabetes, but you may need another diagnostic test to confirm this.

All postnatal blood results will be reviewed by your GP.

## **Will I have diabetes in my next pregnancy?**

Diabetes may reoccur in your next pregnancy. Inform your midwife as soon as you become pregnant or contact the Diabetes Specialist Midwife directly so a glucose tolerance test can be arranged as soon as possible. A repeat test will be performed at 26 weeks if your initial test is negative.

## **How can I reduce the risk of getting it again?**

Being the right weight for your height (BMI less than 26) may reduce your risk of getting gestational diabetes in a subsequent pregnancy. It is important to continue with a healthy diet, as advised by the dietitian during pregnancy. Exercise is good for keeping you fit and healthy. It is recommended that you have 30 minutes of 'moderate activity' five times a week, but any amount of exercise will reduce your risk.

## **I am worried that I may have developed diabetes.**

Your GP has been informed you that you have had gestational diabetes and will be following you up. It is recommended that you have an annual fasting

blood glucose test or HbA1c which you can arrange with your practice nurse around the time of your baby's birthday.

If you have any symptoms, make an appointment to see the GP or practice nurse.

## In summary

- Continue monitoring your blood glucose levels for 24 hours after the birth of your baby.
- It is important that you have a follow-up blood test 6-12 weeks following your baby's birth.
- Regardless of the outcome of this test it is important that you continue a healthy diet and active lifestyle to help with weight control.
- Have an annual follow up with your GP or practice nurse and contact them if you have any diabetic concerns or symptoms.
- Notify your Community Midwifery team or contact your Diabetes Lead Midwife early in your next pregnancy.

## Useful Contacts

**Diabetes Team Lancaster:** 01524 518575

**Diabetes Team Furness:** 01229 404445 (Kathleen Mclatchie – Diabetes)

**Midwife Tel:** 07773595454

**Email:** [kathleen.mclatchie@mbht.nhs.uk](mailto:kathleen.mclatchie@mbht.nhs.uk)

## Leaflet Details

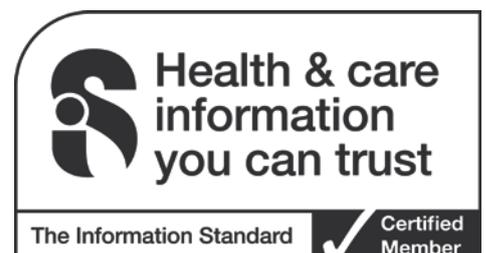
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## **Other formats**

If you would like to receive this information in an alternative format, then please contact : 01539 795497.

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For the best way to plan your journey visit our website:

<http://www.UHMB.nhs.uk/> or contact Patient Advice and Liaison Service (PALS): 01539 795497.

## **Useful Contact Details**

NHS 111 (for 24 hour urgent health advice): telephone 111

## **Your Information**

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## **Evidence**

Details of the evidence used in writing this leaflet are available on request from: Patient Information Officer at 01524 512476.

## **Feedback**

We appreciate and encourage feedback. If you need advice or are concerned about any aspect of care or treatment, please speak to a member of staff or contact PALS on 01539 795497.

UHMBT is a no smoking Trust. Smoking is not permitted on any of the hospital sites. You can contact the NHS North Lancashire Stop Smoking services on the number below:

NHS Quit Squad - **0800 328 6297**

If you live in Cumbria, please call **0300 013 3000** to find a local pharmacy who are offers 1-2-1 support and nicotine replacement therapy.

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