

Key notes on: **Caring for women with diabetes**

- Diabetes in pregnancy may be related to Type I, Type II or gestational – with different pathophysiologies
- Routine Glucose Tolerance Testing is recommended for all pregnant women (~ 28 wks)
- Maternal glucose crosses the placenta but maternal insulin does not
- Women with IDDM may experience hypoglycaemic episodes in the first trimester and then have increasing insulin requirements through the second half of pregnancy
- Good collaborative medical and midwifery care can result in very good outcomes for mothers and babies

Key resources/recommended reading

Diabetes Australia website – www.diabetesaustralia.com.au

Diagnosis of gestational diabetes mellitus (GDM) in Australia – www.ranzcog.edu.au/news/Diagnosis-GDM-Australia

Forster, D. et al (2017) Advising women with diabetes in pregnancy to express breastmilk in late pregnancy (Diabetes and Antenatal Milk Expressing [DAME]): a multicentre, unblinded, randomised controlled trial

McElduff, A. et al (2005) The Australian Diabetes in Pregnancy Society consensus guidelines for the management of type 1 and type 2 diabetes in relation to pregnancy.

Nankervis, A. et al - ADIPS consensus guidelines for the testing and diagnosis of gestational diabetes mellitus in Australia

RACGP – Gestational diabetes mellitus clinical guideline – www.racgp.org.au

Santamaria A, Alibrandi A, Di Benedetto A, Pintaudi B, Corrado F, Facchinetti F, et al. Clinical and metabolic outcomes in pregnant women at risk for gestational diabetes mellitus supplemented with myo-inositol: a secondary analysis from 3 RCTs. *American Journal of Obstetrics & Gynecology*. 2018.

Helle EIT, Biegley P, Knowles JW, Leader JB, Pendergrass S, Yang W, et al. First Trimester Plasma Glucose Values in Women without Diabetes are Associated with Risk for Congenital Heart Disease in Offspring. *The Journal of Pediatrics*. 2018;195:275-8.

Taylor C, McCance DR, Chappell L, Nelson-Piercy C, Thorne SA, Ismail KMK, et al. Implementation of guidelines for multidisciplinary team management of pregnancy in women with pre-existing diabetes or cardiac conditions: results from a UK national survey. *BMC Pregnancy and Childbirth*. 2017;17(1):434.

Zheng ASY, Morris G, Moses RG. The prevalence of gestational diabetes mellitus: The accuracy of the NSW perinatal data collection based on a private hospital experience. *Australian and New Zealand Journal of Obstetrics and Gynaecology*. 2016;56(4):349-51.

Padmanabhan S, Jiang S, McLean M, Cheung NW. Effect of pregnancy on insulin requirements differs between type 1 and type 2 diabetes: A cohort study of 222 pregnancies. *Australian and New Zealand Journal of Obstetrics and Gynaecology*. 2016:n/a-n/a.