GDM Screening and diagnosis

**Risk factors for GDM**
- BMI > 30 kg/m² (pre-pregnancy or on entry to care)
- Ethnicity (Asian, Indian subcontinent, Aboriginal, Torres Strait Islander, Pacific Islander, Maori, Middle Eastern, non-white African)
- Previous GDM
- Previous elevated BGL
- Maternal age ≥ 40 years
- Family history DM (1st degree relative or sister with GDM)
- Previous macrosomia (birth weight > 4500 g or > 90th percentile)
- Previous perinatal loss
- Polycystic ovarian syndrome
- Medications (corticosteroids, antipsychotics)
- Multiple pregnancy

**Assess all women for risk factors**

**Post bariatric surgery?**
- Yes
- No

**Risk factors?**
- Yes
- No

**First trimester**
- 2 hour 75 g OGTT (or HbA1c)

**24-28 weeks gestation**
- 2 hour 75 g OGTT

**OGTT (or HbA1c) abnormal?**
- Yes
- No

**OGTT normal?**
- Yes
- No

**GDM diagnosis**
- HbA1c first trimester only
  - ≥ 41 mmol/mol (or 5.9%)
- OGTT one or more of:
  - Fasting ≥ 5.1 mmol/L
  - 1 hour ≥ 10 mmol/L
  - 2 hour ≥ 8.5 mmol/L

**OGTT not suitable**
- First trimester
  - If diabetes history or risk factors: fasting BGL or HbA1c
- Second trimester
  - Fasting and postprandial capillary BGL self monitoring for 1 week between 24–28 weeks or
- Third trimester
  - If clinical suspicion of diabetes e.g. evidence of fetal hyperinsulinaemia on growth USS, repeat testing

**Routine antenatal care**

**GDM care**