Gestational diabetes mellitus (GDM) usually goes away after the baby is born. To make sure, your doctor or midwife will order a special glucose test, the oral glucose tolerance test (OGTT), which is performed 6 to 8 weeks after delivery. This test is important to ensure that your blood glucose levels are back to normal.

Useful information

Australasian Diabetes in Pregnancy Society – www.adips.org National Diabetes Services Scheme - www.ndss.com.au You2 Program – www.you2.org.au Diabetes Queensland - www.diabetesgld.org.au Diabetes Australia - www.diabetesaustralia.com.au Australian Dietary Guidelines – www.eatforhealth.gov.au

© State of Queensland (Queensland Health) 2008-2013



http://creativecommons.org/licenses/by-nd/3.0/au/deed.en/

For further information contact Clinical Access and Redesign Unit. Department of Health, email CARU@health.qld.gov.au, phone (07) 3646 9872. For permissions beyond the scope of this licence contact: Intellectual Property Officer, email ip_officer@health.qld.gov.au, phone (07) 3328 9862.

Gestational diabetes mellitus

Important postnatal information







Congratulations on the birth of your baby!

The evidence shows women who have had gestational diabetes mellitus (GDM) are at risk of developing it again in future pregnancies. They also have up to a 50 per cent risk of developing type 2 diabetes later in life.

The good news is you can reduce these risks by continuing a healthy lifestyle after your pregnancy with attention to the following:

Diet

- Continue to follow a healthy well-balanced eating plan.
- Choose foods low in saturated fats trim excess fat on meat, remove the skin from chicken, choose low fat dairy products, e.g. milk, yoghurts, cheese.
- Include sources of unsaturated fat nuts and seeds, unsaturated oils such as olive and canola, oily fish and avocado.
- Eat high fibre carbohydrate foods wholegrain cereals, breads, pasta, nuts and seeds.
- Eat plenty of fruit and vegetables.
- Drink plenty of water avoid soft drinks or fruit juices.

Remember – you are what you eat!

Weight control

 Aim to achieve and maintain a healthy body weight.

Physical activity

Returning to pre-pregnancy fitness levels has many benefits:

- It can reduce your risk of developing type 2 diabetes in later life.
- There is an increased sense of well being.

Examples include:

- Access your local gym many have child-minding facilities.
- Go for a brisk 30–45 minute walk 3 to 4 times a week.
- Pilates and yoga.

Annual testing

It is recommended you have a fasting glucose test or oral glucose tolerance test to make sure your blood glucose levels have remained normal. Your GP can arrange this test every two years.

Future pregnancies

Women who have been diagnosed with GDM are likely to develop it again in future pregnancies.

It is recommended you:

- inform your health care team you had GDM in your previous pregnancy
- receive family planning advice
- discuss pre-conception care with your GP when planning subsequent pregnancies
- seek early antenatal care with your next pregnancy so your doctor or midwife can arrange early testing.

The National Diabetes Services Scheme (NDSS) now operates a recall register for women who have had GDM. You are registered at the time of diagnosis. Your GP is included in any correspondence.