

Client Information Sheet 3: Glucose Screening

Pregnancy can cause a woman who has perfectly normal blood sugars to turn (temporarily) diabetic, otherwise known as having *gestational diabetes*. The hormones from the placenta sometimes interfere with the action of insulin, the hormone responsible for the regulation of blood sugar.

Diabetes and gestational diabetes are conditions that cause high levels of glucose in the blood. Glucose is a sugar that is the body's main source of energy. Health problems can arise when glucose levels are too high.

Gestational diabetes can have no symptoms, yet can complicate a pregnancy. Identifying who has developed diabetes can help protect the fetus from the bad effect of high maternal blood sugars.

Screening is recommended for all pregnant women in the beginning of their third trimester of pregnancy. Many women will not develop diabetes until the third trimester; however, if a woman has high risk factors she may have screening at the first visit.

The reported incidence of gestational diabetes is 1-14% with 2-5% being the most common figure.

How often is the glucose screening performed?

One Hour Glucose Testing.

- This screening test is done at 24-28 weeks gestation. The woman will drink an orange solution of sugar and then have her blood drawn one hour after the time the solution was consumed to check the glucose level. If the blood sugar is over a certain level then she will need to have a three hour test performed.

Three Hour Glucose Testing.

- This test requires the woman to fast (not eat anything prior to 24 hours) and to drink an orange solution of sugar and then have her blood drawn at four different intervals:
 - o Once before drinking the sugary orange solution
 - o Then at 1 hour past consuming the orange sugary solution
 - o Then at 2 hours past consuming the orange sugary solution
 - o And finally at 3 hours past consuming the orange sugary solution

Who is at risk for developing gestational diabetes?

- Risk increases with age
- Overweight women
- Women who are not physically active
- Hypertension (high blood pressure)
- High cholesterol
- Have a family history of diabetes
- Have PCOS (Polycystic Ovarian Syndrome)
- Are Native American, Asian, Hispanic, African American, Pacific Islander
- Have a history of gestational diabetes with a previous pregnancy

What if I am diagnosed with gestational diabetes, what problems may arise?

- Macrosomia (big baby) which could lead to: shoulder dystocia, operative delivery, birth trauma
- Preeclampsia (high blood pressure in pregnancy)
- Polyhydramnios (excessive amount of amniotic fluid)
- Respiratory Distress Syndrome at birth
- Hyperbilirubinemia in infant (high bilirubin levels leading to jaundice)
- Low blood glucose in infant
- Low blood calcium and magnesium
- Stillbirth