

## **In pregnancy, Type 2 diabetes may pose less risk than Type 1: Women with more common type may have better outcomes**

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Pregnant women with Type 2 diabetes have a better chance at good outcomes than those with Type 1, particularly if they receive proper care before and during their pregnancy, according to a University of Rochester Medical Center (URMC) study published in the *Journal of Reproductive Medicine* (Nov. 2012).

"With the rapid rise of Type 2 diabetes in reproductive-age women, it is important to look at it separate from Type 1 so we know how best to support and care for Type 2 diabetics to promote the best possible

outcomes in pregnancy," said Eva K. Pressman, M.D., professor of [obstetrics and gynecology](#) and head of the division of [maternal fetal medicine](#) at UPMC. Historically, research on diabetes in pregnancy did not differentiate between the two types, according to Pressman.

The UPMC study revealed that Type 1 diabetics had a higher incidence of complications and of poor outcomes than the Type 2 and non-diabetic women. For example, 20 percent of the Type 1 diabetics had preeclampsia, a condition marked by elevated blood pressure and protein in the urine, compared with 14 percent of Type 2 and 1 percent of non-diabetics. Type 1 mothers who had never had a cesarean delivery had a 50 percent cesarean-section rate, compared with 27 percent for Type 2 and 13 percent for non-diabetics.

Babies of Type 2 diabetics in the study had a higher incidence of being large for their gestational age, at 38 percent, versus 23 percent for Type 1 moms and just 3 percent for non-diabetic moms. Eighty-five percent of babies born to Type 1 moms required admission to the [neonatal intensive care](#) unit, compared with 71 percent born to Type 2 moms and 11 percent of non-diabetic moms.

Pressman, who co-authored the study with UPMC colleagues Lorelei L. Thornburg, M.D., and Kristin M. Knight, M.D., reviewed medical records from a six-year period ending in 2006, comparing pregnancies and outcomes of 64 women with Type 1 and 64 women with Type 2, to those of 256 non-diabetic women. Not surprisingly, on the whole, non-diabetic mothers and their babies fared better than diabetics in terms of outcomes from childbirth.

"Further studies that distinguish Type 1 and Type 2 diabetes, using comparisons with non-diabetic control groups, will become increasingly important as we seek to improve outcomes for women and their babies in light of the rising prevalence of [Type 2 diabetes](#)," Pressman said.

Provided by University of Rochester Medical Center

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