

Task force: Screen for gestational diabetes after 24 weeks of pregnancy

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Practice would provide a substantial benefit with few risks, experts say.

(HealthDay)—All women should be screened for gestational diabetes after 24 weeks of pregnancy regardless of whether they have symptoms of the condition, according to a new draft recommendation statement issued by the U.S. Preventive Services Task Force (USPSTF).

The independent panel of national experts also said there is not enough evidence to weigh the benefits and risks of screening for diabetes that develops during pregnancy before 24 weeks.

"It's important to remember that each case of gestational diabetes affects two people: the expectant mother and the baby," task force member Dr. Wanda Nicholson said in a USPSTF news release. "We now have good evidence that screening expectant mothers for gestational diabetes after 24 weeks provides a substantial benefit, with few to no harms, leading to healthier moms and babies."



Women with gestational diabetes are unable to process <u>starches</u> or sugars into energy during pregnancy. Any woman can develop gestational diabetes—even those who did not have diabetes before they became pregnant.

Although gestational diabetes usually resolves once a woman gives birth, those with the condition are at greater risk for labor and birth complications, preeclampsia (a serious condition in pregnancy characterized by high blood pressure and high levels of protein) and developing diabetes later in life.

Infants born to women with gestational diabetes also may be affected. These babies are at greater risk for increased <u>birth weight</u>, <u>birth injuries</u>, glucose intolerance and obesity during childhood, according to background information in the news release.

New data that has emerged since the last time the task force looked at this issue, in 2008, indicates that there is an overall benefit to screening pregnant women for gestational diabetes, including lowering the risks of preeclampsia, giving birth to overly large babies (macrosomia) and delivery complications caused by large infants becoming stuck in the birth canal (shoulder dystocia).

Although there is not enough research to support gestational diabetes screening before 24 weeks of pregnancy, the task force said future research may shed more light on how to better manage diabetes in early pregnancy.

"It's always better to prevent a disease than to be diagnosed with one," Nicholson said. "Women should have a conversation with their doctor before getting pregnant or in the early stages of pregnancy about steps they can take—such as improving their diet, being physically active or other strategies—to reduce their risk of developing gestational diabetes."



Of the 4 million women who give birth each year, 7 percent have gestational diabetes. The experts said the number of women developing the condition is on the rise as obesity, older maternal age and other risk factors become increasingly common.

Before developing its final recommendation, the task force posted its draft recommendation on its website for public comment. Comments can be submitted from May 28 to June 24.

More information: The American Diabetes Association provides more information on <u>gestational diabetes</u>.

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