

Experts recommend universal diabetes testing for pregnant women at first prenatal visit

November 5 2013

The Endocrine Society today issued a Clinical Practice Guideline (CPG) to help health care professionals provide the best care to pregnant women who have diabetes.

The CPG, entitled "Diabetes and Pregnancy: An Endocrine Society Clinical Practice Guideline" appeared in the November 2013 issue of the *Journal of Clinical Endocrinology and Metabolism (JCEM)*, a publication of The Endocrine Society.

Experts acknowledge that cases of diabetes in pregnant women are being missed by traditional screening methods, said Ian Blumer, MD, of the Charles H. Best Diabetes Centre in Whitby, Ontario, Canada, and chair of the task force that authored the guideline. The Endocrine Society CPG recommends that all pregnant women who have not been previously diagnosed with diabetes be tested for the condition at their first prenatal visit. The test should be done before 13 weeks' gestation or as soon as possible thereafter.

"Many women have type 2 diabetes but may not know it," Blumer said. "Because untreated diabetes can harm both the pregnant woman and the fetus, it is important that testing for diabetes be done early on in pregnancy so that if diabetes is found appropriate steps can be immediately undertaken to keep both the woman and her fetus healthy."

As many as one in five women may develop gestational diabetes – a form of diabetes that has its onset during pregnancy. Traditional testing strategies only identify about a quarter of these cases. This means that many women go undiagnosed and are at increased risk of having an overly large baby, which can complicate delivery.

"To address this problem, the CPG advocates for using lower [blood glucose levels](#) to diagnose gestational diabetes," Blumer said. "Using these lower levels will allow for the detection of gestational diabetes in many women when it would otherwise go undetected using the older diagnostic thresholds. Once the diagnosis is made, treatment can be given to help the fetus grow normally."

"Thanks to important new studies of the interplay between diabetes and pregnancy, diabetes specialists and obstetricians have identified best practices for caring for pregnant women with this condition," Blumer added. "The guideline synthesizes evidence-based strategies to support women who have diabetes during pregnancy."

Other recommendations from the CPG include:

- All [pregnant women](#) who have not previously been diagnosed with diabetes should be tested for gestational diabetes by having an oral glucose tolerance test performed at 24-28 weeks' gestation;
- Weight loss is recommended prior to pregnancy for women with diabetes who are overweight or obese;
- Initial treatment of gestational diabetes should be medical nutrition therapy and daily moderate exercise lasting at least 30 minutes;
- If lifestyle therapy is not sufficient to control gestational diabetes, blood glucose-lowering medication should be added;
- Women with gestational diabetes should have an oral glucose

tolerance test six to 12 weeks after delivery to rule out prediabetes or diabetes;

- Women who have had [gestational diabetes](#) with a previous pregnancy need to be tested for diabetes regularly, especially before any future pregnancies; and
- Women who have type 1 or [type 2 diabetes](#) should undergo a detailed eye exam to check for diabetic retinopathy, and, if damage to the retina is found, have treatment before conceiving.

The Hormone Health Network has published a fact sheet on [gestational diabetes](#). The resource is available at <http://www.hormone.org/questions-and-answers/2012/gestational-diabetes>.

Provided by The Endocrine Society

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