

# Interventions lower diabetes risk in women who had gestational diabetes

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Women with a history of gestational diabetes face a heightened risk of developing Type 2 diabetes for years after giving birth, but intensive lifestyle intervention or a medication regimen can have a protective effect in this population, according to a new study published in the Endocrine Society's *Journal of Clinical Endocrinology & Metabolism*.

Gestational diabetes is a form of diabetes that occurs during pregnancy, typically in the second trimester. The condition causes glucose levels in the bloodstream to rise above normal levels. Gestational diabetes occurs during as many as 9.2 percent of pregnant women, according to the U.S. Centers for Disease Control and Prevention.

"Our long-term follow-up study found the elevated risk of developing Type 2 diabetes persisted for years in women who had been diagnosed with [gestational diabetes](#), and this long-term risk can be reduced with either intensive [lifestyle intervention](#) or the medication metformin," said one of the study's authors, Vanita Aroda, MD, of the MedStar Health Research Institute in Hyattsville, MD.

The Diabetes Prevention Program Outcomes Study (DPPOS) analyzed long-term metabolic health in 288 women who had a previous diagnosis of gestational diabetes and 1,226 mothers who did not have a history of the condition. The women all participated in the initial Diabetes Prevention Program study, a randomized clinical trial where they were assigned to intensive lifestyle intervention, the diabetes medication metformin or a placebo. The intensive lifestyle intervention was aimed at

reducing body weight by 7 percent and participating in moderate cardio exercise for 150 minutes a week.

During the DPPOS, the women continued to have their blood glucose levels measured twice a year for six years. The study looked at long-term health outcomes in Diabetes Prevention Program participants for about a decade after the women first enrolled in the study.

Women with a history of gestational diabetes who were assigned to take the medication metformin or undergo the intensive lifestyle intervention were less likely to develop Type 2 diabetes than women who received the placebo. When they were assigned the placebo, women who had a history of gestational diabetes had a 48 percent higher risk of developing diabetes compared to women who were never diagnosed with the condition.

Women who had been diagnosed with gestational diabetes and underwent intensive lifestyle intervention had a 35.2 percent reduction in their risk of developing Type 2 diabetes. The risk was reduced by 40.4 percent among women with a history of the condition who were assigned to take metformin.

"Medical and lifestyle interventions were remarkably effective at slowing the progression of Type 2 diabetes in this at-risk population in both the short and long term," Aroda said.

**More information:** [www.cdc.gov/pcd/issues/2014/13\\_0415.htm](http://www.cdc.gov/pcd/issues/2014/13_0415.htm)

Provided by The Endocrine Society

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