

Better support needed for mums with gestational diabetes

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Improvements are needed in gestational diabetes education and healthcare services to help prevent women with the condition from developing type 2 diabetes later in life, according to a new University of Adelaide study.

Recent University of Adelaide Robinson Research Institute PhD graduate, Dr Emer Van Ryswyk, conducted a review of more than 40 studies from Australia, the United States, Canada, Europe, Brazil and Asia, which examined what influenced women when it comes to taking up healthcare relating to their gestational diabetes.

Speaking in the lead up to World Diabetes Day (Saturday 14 November), Dr Van Ryswyk says the study found that women would benefit from improved education as well as more positive and proactive [healthcare services](#) from diagnosis until well after the birth of their baby.

The study, co-authored by Professor Caroline Crowther, Dr Philippa Middleton and Professor Bill Hague, was published in the journal *Diabetes Research and Clinical Practice*.

"5-8% of women develop gestational diabetes when they are pregnant, and for these women, the risk of developing type 2 diabetes within 10 years of pregnancy is 20-50%," says Dr Van Ryswyk.

"Previous studies have found that there is a low uptake of post-birth healthcare by women who have experienced gestational diabetes. In

particular, studies have found that women often do not have a vital type 2 diabetes screening test after they give birth," she says.

Dr Van Ryswyk says that the care provided to a woman from when she is first diagnosed with gestational diabetes may influence the likelihood of her seeking and participating in care after giving birth.

"It is important to recognise that a diagnosis of gestational diabetes can be highly emotional for a mother. It can be associated with the loss of a 'normal' or 'perfect' pregnancy experience, so adequate information and counselling should be made available," says Dr Van Ryswyk.

"Women valued positive interactions with clinical staff, and responded well to constructive advice. Criticisms and assumptions relating to dietary and lifestyle choices were viewed as counter-productive, and they discouraged women from seeking advice in the future.

"Furthermore, this review identified a need for proactive services. After giving birth, women settle into life as a new mother, or with an extra child, and this can contribute to women neglecting their own health for the sake of their children.

"Women expressed the view that they would benefit from being directly approached about diabetes screening tests and being proactively offered advice and follow-up appointments to support them in prevention of type 2 diabetes," she says.

Dr Van Ryswyk says she hopes these findings will lead to improved services for women.

"The aim of putting the findings of the studies together into a systematic review was to find out what could be improved, from the perspective of women who have had [gestational diabetes](#)," says Dr Van Ryswyk.

"Now that we have done this, we can communicate the findings to healthcare providers to promote more acceptable, and therefore more effective, services for [women](#)," she says.

Provided by University of Adelaide

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