

Researchers urge better support for women diagnosed with gestational diabetes

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University of South Australia researchers are appealing for greater support mechanisms to help women diagnosed with gestational diabetes return to or maintain a healthy weight post pregnancy.

The call comes after new research shows [women](#) are struggling to prioritise their personal health after gestational [diabetes](#), despite understanding their increased risk of type 2 diabetes.

Gestational diabetes is the fastest growing type of diabetes in Australia, affecting more than 38,000 [pregnant women](#) each year. Women with gestational diabetes are one of the highest risk groups for type 2 diabetes in Australia.

UniSA lead researcher and Ph.D. candidate Kristy Gray says it's important to understand the barriers to [weight](#) loss for women who have had gestational diabetes if we are to help reduce the growing incidence of type 2 diabetes.

"In Australia, 1.3 million people are living with diabetes with 280 new diagnoses are made every day," Gray says

"Women who have been diagnosed with gestational diabetes have seven times the risk of developing type 2 diabetes, making them one of the most at-risk groups.

"Of course, gestational diabetes doesn't only occur in women who are overweight, but for those who have had gestational diabetes and are also overweight, the risk for developing type 2 diabetes is increased.

"Weight loss and healthy eating can significantly reduce the risk of developing type 2 diabetes, but losing weight after pregnancy can be challenging, especially with the demands of motherhood.

"Many women do not naturally lose weight after pregnancy, retaining on average between 0.5—4.0 kilograms 12 months after pregnancy.

"This research shows that despite women being well informed about the

right foods to eat and the need to exercise (including the range of diet and exercise programs and trackers), women identify their primary barrier to weight loss as '[family responsibilities](#),' with 62 percent prioritising this over their personal health."

Assessing 429 women (aged 30-44) previously diagnosed with gestational diabetes the research explored their knowledge of their risk of type 2 diabetes, barriers and enablers to losing weight after having children, and potential diet strategies that could assist with weight loss.

Gray says the research highlights the need for women with previous [gestational diabetes](#) and a high risk of type 2 diabetes to be able to access more individualised support services and professional guidance to lose weight.

"Barriers to weight loss and effective diet strategies can greatly vary between individuals—there is no one solution for everyone," Gray says.

"Two-thirds of the women interviewed said that individual appointments with a dietitian or nutritionist would help them to lose weight, but unfortunately, these appointments are not affordable for everyone."

Gray says the Medicare rebates for dietitian or nutritionist appointments are excellent for people diagnosed with diabetes, but further rebates would help women in a high risk category to access such services before they are diagnosed with diabetes.

"As a nation, we need to start thinking differently about preventative services," Gray says.

"If we are to effectively tackle type 2 diabetes, it's imperative we look beyond diagnosis and find ways to prevent chronic disease, not just treat it."

Provided by University of South Australia

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