Gestational diabetes

What is gestational diabetes?
Gestational diabetes is high blood sugar that develops during pregnancy in pregnant women who have never had high blood sugar before. Blood sugar usually returns to normal after the baby is born.

What causes gestational diabetes?
When you eat, some of your food is broken down into sugar (also called glucose). Sugar travels in your blood to all of your body’s cells. Insulin helps sugar move from your blood into your cells. Insulin is a hormone that is made by the beta cells in your pancreas.

Your cells need sugar for energy. Sugar from food makes your blood sugar levels go up. Sugar from food can be sugar itself, or it can be from carbohydrates that the body turns into sugar. Natural insulin lowers your blood sugar levels by helping sugar move from your blood into your cells.

When you have gestational diabetes, pregnancy hormones that help the baby to develop can cause a resistance to insulin in your body. Your body tries to produce more insulin to handle the extra sugar, but it is still not enough. So the sugar stays in your blood instead of moving into your cells. That’s why the sugar levels in your blood get too high.

What are the risks of gestational diabetes?
If blood sugar levels are not managed during pregnancy, this can cause problems for both you and your baby. Your baby gets nutrients, including sugar, from your blood. If your blood sugar levels are high, your baby will get too much sugar. Too much sugar is not good for your baby. He or she will store the extra sugar as fat. The baby may gain too much weight and become too large.

When you have gestational diabetes, your baby is at a higher risk for:
- Injuries during delivery
- Low blood sugar after birth
- Breathing problems
- Jaundice
- Developmental problems (This is not common and is usually related to premature birth)
- The possibility of type 2 diabetes later in life

Gestational diabetes may increase your own risk for:
- Type 2 diabetes
- High blood pressure during your pregnancy
- Caesarean section
- Gestational diabetes if you become pregnant again

But these problems don’t have to happen! Managing your blood sugar levels can help to reduce the risk.
Managing gestational diabetes

Your goal in managing gestational diabetes is to keep your blood sugar levels as close to normal as possible. Your diabetes care team will help you make a care plan to meet that goal. To help manage your blood sugar, you may need to:

- Eat your meals and snacks according to your meal plan
- Get regular physical activity
- Take your medicine as prescribed by your doctor
- Check your blood sugar often, according to your care plan

What to expect after delivery

Your doctor will check your blood sugar 6 to 12 weeks after the baby is born to make sure that it’s normal. Because of gestational diabetes, you’ll be at greater risk of developing diabetes later in life. So your doctor may recommend that you continue to have your blood sugar checked. You can reduce your risk of developing gestational diabetes or type 2 diabetes by:

- Continuing to eat a healthy diet
- Getting regular physical activity
- Managing your weight

Talk with your doctor about what you can do to stay healthy, for yourself and your baby!

For more information, visit Cornerstones4Care.com