GESTATIONAL DIABETES (302)

PARTICIPANT TYPE……PREGNANT WOMEN
HIGH RISK……YES

RISK DESCRIPTION:

Presence of gestational diabetes defined as any degree of glucose/carbohydrate intolerance with onset or first recognition during pregnancy

ASK ABOUT:

- Special diet and medications prescribed to manage blood sugar levels
- Understanding of and compliance with treatment plan
- Access to follow-up medical care
- Physical activity patterns

NUTRITION COUNSELING/EDUCATION TOPICS:

- Gestational diabetes is associated with a higher incidence of maternal and fetal complications.
  - Maternal complications include polycythemia (over production of red blood cells), respiratory distress syndrome and increased rate of stillbirth.
  - Although rarely seen in gestational diabetes, congenital anomalies, neural tube defects, cardiac abnormalities and/or caudal regression (abnormal fetal development of the lower spine) may occur if a woman has gestational diabetes in the early 1st trimester.
- Gestational diabetes imparts lifelong risk for diabetes, mostly type 2.
- Review her weight gain goal and weight gain pattern.
- Review the basics of a healthy pregnancy diet based on MyPyramid. Make appropriate suggestions such as:
  - Eat regularly-spaced meals and snacks throughout the day (don't skip meals).
  - Avoid high-sugar foods (e.g., soft drinks, fruit drinks, candies, frozen pops).
  - Eat a well-balanced diet with plenty of high fiber foods.
  - Discuss how to make the best food choices possible with her WIC checks.
- Remind her of the importance of keeping all prenatal appointments.
- Encourage physical activity for 30 minutes per day for a minimum of three days per week to aid in improving glycemic control.

POSSIBLE REFERRALS:

- If she does not have access to follow-up medical care, refer her to a health care provider, the Optimal Pregnancy Outcome Program (OPOP) (http://www.ndhealth.gov/opop/), or the local public health department.
- If she has concerns or questions about her treatment plan, refer her to her primary care provider and/or the dietitian that initially provided counseling.