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There is a hormone in the body called insulin that regulates our blood sugar level. It is produced from a gland called pancreas located close to the stomach.

Insulin transfers glucose from the blood to the cells of the body. If the pancreas does not produce insulin, glucose builds up in the blood and causes damage.

WHAT IS DIABETES?

Diabetes is a condition in which the blood sugar level becomes too high. This can be due to either a lack of insulin production or resistance to insulin's action in the body.

There are two main types of diabetes:

- Type 1 Diabetes occurs when the body produces little or no insulin. Sugar then builds up in the blood and causes damage to the blood vessels, kidneys, and other parts of the body.
- Type 2 Diabetes usually develops slowly and is caused by resistance to insulin's action in the body.

Sometimes, women who do not have a history of diabetes may develop diabetes when they are pregnant; this is called Gestational Diabetes.

Women who have diabetes and are already receiving treatment also need extra care when they get pregnant.

The main symptoms of diabetes are:

- Intense thirst or dry mouth.
- More frequent urge to urinate than usual.
- Increasing tiredness or weakness.
- Weight loss.
- Blurred vision.

Gestational diabetes can cause serious birth problems, especially if it is not detected and controlled. If you have any of these symptoms, see a doctor immediately.

WHAT CAUSES DIABETES DURING PREGNANCY?

Factors that may increase your risk of developing diabetes during pregnancy include:

- Family history of diabetes.
- Being overweight or obese.
- Previous delivery of a large baby, weighing 4.5 kg or more.
- A history of gestational diabetes in a previous pregnancy.
- Short time interval between pregnancies.
- Previous unexplained stillbirth.
- Belonging to certain race such as African, Afro-Caribbean or South-Asian.
- Smoking.

EFFECTS OF DIABETES ON PREGNANCY

Problems that may arise if you do not control your diabetes during pregnancy include:

- Increased risk of miscarriage.
- Increased risk of infections.
- High birth weight babies.
- Premature birth.
- Difficult labour and delivery.
- Stillbirth.

WHEN SHOULD I SEE A DOCTOR?

You should see a doctor as soon as possible if you are pregnant or planning to get pregnant and have:

- One or more of the above risk factors.
- One or more of the diabetic symptoms listed in this leaflet.
- A previous history of diabetes.

WHAT YOUR DOCTOR WILL DO

To find out if you have diabetes, your doctor will ask questions about your symptoms and whether you have any family history of diabetes.

Your doctor will also examine you and order some tests to confirm the diagnosis. These tests may include:

- A random blood sugar test or finger prick test: This is a quick test to check for how much sugar is present in the blood.
- A urine test: To examine the levels of sugar and ketones in your urine. Ketones are chemicals produced by the body when it uses fat as fuel instead of sugar.
- Glucose tolerance test (GTT): Your doctor may order this test when you are between 24 and 28 weeks pregnant.

After the diagnosis is confirmed, the doctor may start treatment immediately or refer you to the hospital for specialist treatment.

To be diagnosed with diabetes during pregnancy can be a frightening or overwhelming experience.

If you have questions about why it developed, what it means for your long-term health or how it will affect your baby, please speak to your doctor.



TREATMENTS FOR DIABETES DURING PREGNANCY

The main goal of treatment is to keep the blood sugar levels within the normal range. There are two ways to achieve this goal:

Lifestyle Advice. Your doctor will start treatment by recommending lifestyle changes such as:

- Eating healthy balanced diets. To control your weight and ability to produce and respond to insulin. The doctor may refer you to a dietitian for counselling.
- Regular exercise to improve your body's response to insulin.

Oral medicines. Doctors may prescribe medications if lifestyle changes alone do not keep your blood sugar level under control.

Insulin injections. Your doctor may prescribe insulin injections if lifestyle changes, and oral medicines cannot control your blood glucose level.

You will need regular check-ups during pregnancy to check your diabetes control and your baby's wellbeing.

Blood sugar monitoring. Your healthcare provider will explain how to measure your blood sugar, and how often to do it. You will need to carefully plan your meals and activity levels to achieve excellent control of your blood sugar.

Monitoring of your baby. The doctor may ask you to do extra ultrasound scans to monitor your baby's growth more closely.

GENERAL ADVICE

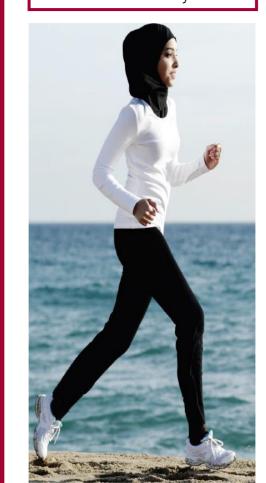
You can help control your diabetes during pregnancy by keeping to the following advice:

- Take your medications as instructed.
- Do not double your dose if you miss a tablet or injection.:
- Ensure you eat healthy diets based on the advice of the dietitian.
- Stop smoking if you smoke, as this can worsen your diabetes.
- Maintain a healthy weight.
- Exercise regularly for at least two and a half hours every week.

If you take too much diabetes medicine, you can develop low blood sugar. Symptoms of low blood sugar include:

- Sweating.
- Shivering.
- Feeling anxious or confused.
- Dizziness.

You can quickly treat at home by taking sugar or sweet drinks, and then see a doctor immediately.



IMPORTANT TIP: Try to keep a home diary of your blood sugar readings. This will help you to monitor your progress.

FOLLOW UP

Once you start treatment to control your diabetes, you should see your doctor regularly for check-ups throughout your pregnancy period.

Gestational diabetes usually gets better after birth. You are likely to be advised to stop all diabetes medicines after delivery of your baby. Before you get discharged home, your doctor will check your blood sugar level to make sure that it has returned to normal.

You should have a test to check your blood sugar at about 6–8 weeks after birth. If your blood glucose levels are still high, your doctor may refer you to a diabetes specialist.

IMPORTANT TIP: During your pregnancy, your doctors should give you information about:

• Plans for your childbirth such as timing and types of birth. Ideally you should have your baby between 38 - 40 weeks of pregnancy, depending on your condition.

ADDITIONAL INFORMATION

Additional information on Diabetes in pregnancy can be found in the National Clinical Guideline published by The Ministry of Public Health (MOPH) Oatar.

The guideline is available to the public from the MOPH website:

www.moph.gov.qa