

Patient information factsheet

Gestational diabetes (diabetes during pregnancy) and GDM tests

What is gestational diabetes?

Gestational diabetes (GDM) is a type of diabetes that affects women during pregnancy. Insulin is the hormone which controls your blood glucose (sugar) levels. Hormonal changes in pregnancy affect your body's ability to make and use insulin effectively, causing your blood glucose levels to become higher than normal.

Gestational diabetes can affect the wellbeing of you and your baby during pregnancy, labour and birth. However, the risks can be reduced if gestational diabetes is detected and well managed.

Gestational diabetes doesn't usually cause any symptoms until your blood glucose levels are very high. In the majority of cases it is identified through a glucose tolerance test (GTT). During the COVID-19 pandemic, you may be offered a random blood glucose (RBS) test and a glycosylated haemoglobin test (a test that measures your average blood glucose over several weeks, also called HbA1c) instead of a GTT. All of these blood tests are called 'GDM tests'.

Why has your midwife or doctor recommended a GTT or GDM tests?

You will be offered a GDM test (GTT, or RBS and HbA1c) if the likelihood of you developing gestational diabetes is increased at your booking appointment. The GTT is usually carried out between 26 and 28 weeks of pregnancy. Having these tests (GTT, or RBS and HbA1c) soon after your booking appointment may be recommended. Any pregnant woman can develop gestational diabetes, but your likelihood is increased if:

- your previous baby weighed 4.5kg or more
- one of your parents or siblings has diabetes
- you have a body mass index (BMI) of 30 or above at your booking appointment
- you had gestational diabetes in a previous pregnancy
- you have polycystic ovary disease
- your ethnic origin is Black Caribbean, South Asian or Middle Eastern
- your urine showed glucose levels of 1+ on two or more occasions, or 2+ on one occasion (before 34 weeks of pregnancy)
- you are taking medication for your mental health and wellbeing

Gestational diabetes affects around 6% of pregnant women in Southampton.

How is the GTT done?

The GTT is done at the Princess Anne Hospital or at an alternative venue, depending on where you live. If you are being offered a RBS and HbA1c, this will be included in the blood tests taken at your booking appointment and repeated when you are 26 to 28 weeks pregnant.

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The GTT is done in the morning. Please make sure that you have a good evening meal the night before your test, including rice, pasta, potatoes or bread.

After midnight (and until your test is over), please:

- do not eat anything including chewing gum (you may still drink water as normal)
- do not smoke
- do not take any indigestion remedies or vitamins

You can take essential medication such as thyroxine and blood pressure tablets as usual.

We will take a blood sample to measure your fasting blood glucose level. We will then give you a sugary drink (usually called Polycal) with a glass of water. **Please drink both of these slowly over five minutes.** They are both measured amounts so you will need to drink it all. After two hours we will take another blood sample. Between blood tests you are free to go home or stay nearby. Both samples will be sent for analysis to see how your body deals with the sugar.

Can I eat and drink during the test?

You can drink water, but you cannot eat anything until after the second blood sample has been taken. You may wish to bring something to eat for after the test.

When will I get the results of my GDM tests?

Contact your own midwife two to three days after your GDM tests and ask them to check your results.

What happens if my GDM tests are normal?

This means you do not have gestational diabetes at the moment. Your midwife will discuss your results with you at your next routine antenatal appointment, as we may need to repeat the tests later in your pregnancy. Your midwife will also discuss your diet and lifestyle, as there are steps you can take to keep you and your baby healthy, and prevent diabetes from occurring.

What happens if my GDM tests show gestational diabetes?

If the results of your GDM tests show you have gestational diabetes, the diabetes team will contact you, usually within three working days of the GDM tests. We will offer you:

- online information which will prepare you for your clinic appointments
- a consultation with the diabetes midwifery team (this is likely to be by telephone)
- an appointment with the obstetric diabetes clinic to discuss the implications for you and your pregnancy (this is likely to be by telephone)

Useful links

Diabetes UK

Website: www.diabetes.org.uk/diabetes-the-basics/gestational-diabetes

NHS

Website: www.nhs.uk/Video/Pages/gestational-diabetes.aspx

Website: www.nhs.uk/conditions/gestational-diabetes

Royal College of Obstetricians and Gynaecologists (RCOG)

Website: www.rcog.org.uk/globalassets/documents/patients/patient-information-leaflets/pregnancy/pi-gestational-diabetes.pdf

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Please visit these websites as soon as you know you have gestational diabetes. They provide more information on gestational diabetes, including how to measure your blood glucose levels (equipment will be provided), how to increase your daily exercise, and how to modify your diet to reduce the amount of carbohydrate and sugar you eat. You can start changing your diet and taking more exercise as soon as you know that you have gestational diabetes.

Please use your clinic appointment as an opportunity to make sure you understand the implications of gestational diabetes and you are aware of the support available to you.

Useful contacts

Maternity day assessment unit at Princess Anne Hospital
Telephone: **023 8120 4463**

Day unit at Bitterne Health Centre
Telephone: **023 8042 6338**

New Forest Birth Centre
Telephone: **023 8074 7690**

For a translation of this document, or a version in another format such as easy read, large print, Braille or audio, please telephone **023 8120 4688**.

For help preparing for your visit, arranging an interpreter or accessing the hospital, please visit **www.uhs.nhs.uk/additionalneeds**