What can you do to reduce your risk of developing diabetes?

Irrespective of your follow-up results, you should:

**Exercise more**

- Be physically active 30 minutes a day, at least 5 days a week, enough to make you breathless.
- Choose an activity you enjoy. This could be swimming, yoga, walking or jogging.

**Eat more healthily**

- Make healthy food choices and eat smaller portions.
- Increase fibre intake.
- Choose more fruits and vegetables, beans and whole grains.
- Cut down on sugar, fatty and fried foods.
- Eat at least 5 portions of fruit and vegetables a day.

**Achieving Healthy Weight**

- After the pregnancy you should try to be the right weight for your height (BMI - normal body mass index).
- It is important to remember that you do need extra energy for breastfeeding, so you must consider this if you do decide to try to lose weight.
- You can get help and advice about losing weight and healthy eating from your health visitor/GP/ practice nurse/dietitian.

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Post Natal Care for Gestational diabetes (GDM)

- Once your baby is born, all diabetes treatment will be stopped.
- Your blood glucose levels will be monitored in hospital to make sure they have returned to normal.
- If your glucose levels remain high, your health care team will discuss this with you before going home.
- Your baby will be monitored in hospital for at least 24 hours after birth. This is to make sure your baby is feeding well and his/her blood glucose levels are stable.
- Feed your baby as soon as possible after birth. Breastfeeding provides the best nutrition for your baby; gives extra protection against infection and promotes bonding.

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Leaflets can be viewed and printed from www.preg.info

With acknowledgment to Diabetes in Pregnancy Advisory Group

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What is your future risk of Diabetes?

- For most women gestational diabetes goes away after they have had the baby.
- However, the chance of developing diabetes later in life remains high and therefore it is important to adopt a healthy lifestyle to prevent diabetes occurring and, if it occurs, to prevent complications later in life.
- If you become pregnant, it is likely that you will have diabetes again. Therefore, **PLAN your pregnancy** and tell your GP/practice nurse or midwife as soon as you are thinking about stopping contraception.

As soon as you find out you are pregnant, contact your midwife or diabetes/antenatal team, as you will be offered either home blood glucose monitoring or an oral glucose tolerance test.

Follow up

You should be offered a test to check if you still have diabetes – usually 6-13 weeks after the birth of your baby.

Ask your health care team how this is arranged.

Is this is normal; you should have a test for diabetes every 12 months. This can be arranged at your GP surgery.

Be aware of the signs and symptoms of diabetes e.g.

- Passing more urine than normal
- Increased thirst
- Tiredness
- Unexplained weight loss
- Frequent infections
- Vaginal thrush
- Blurred vision

If you are worried that you develop any of these symptoms, please contact your surgery for advice from your GP/practice nurse.

These symptoms occur because some or all of the glucose stays in the blood, and isn’t being used as fuel for energy. The body tries to reduce blood glucose levels by flushing the excess glucose out of the body in the urine. Frequent infections are common because high sugar levels increase the chance of germs/bacteria building up.

Early diagnosis, treatment and good blood glucose control are important to benefit your health and reduce the chances of developing serious complications. Untreated diabetes affects many major organs in your body, including your heart, blood vessels, nerves, eyes and kidneys. Being diagnosed early and controlling your blood sugar levels can help prevent these complications.