

Gestational Diabetes (GDM) After Delivery



Does GDM Go Away After Delivery?

Sometimes, glucose values return to normal. Sometimes, they appear normal for a while but then increase again later. Sometimes, they don't ever completely return to normal.

- Up to one in every three women with GDM (30%) will have prediabetes during the first year after delivery.
- Up to one in every two women with GDM (50%) will have Type 2 diabetes within 10 years.

What Do I Need To Do After a Pregnancy With GDM?

- Before leaving the hospital, ask your health care provider whether you should continue fingerstick glucose testing or continue any diabetes medicines.
- Make an appointment to see your OB provider for routine care and a follow-up visit, including screening for depression and discussing contraception (birth control) options.
- Make an appointment for a glucose tolerance test (GTT) between four to 12 weeks after delivery to determine if you have prediabetes or diabetes. Arrive at the lab after fasting for at least eight hours (water only). Two blood samples will be taken. The first sample is taken while you are fasting. Then you will have a glucose drink, and then blood is drawn again two hours later.

How Can I Decrease My Chances of Getting Diabetes In Future Years?

- **Lifestyle choices** have health benefits for all people who have just delivered a baby, whether or not you have prediabetes:
 - Breastfeed — This helps your body use extra calories stored during pregnancy, which helps you lose weight.
 - Aim for a healthy weight — You usually lose 10 to 15 pounds with childbirth. After that, aim for 1 pound per week.
 - Exercise — Aim for 30 minutes, five days per week. Walking outdoors is an excellent form of exercise. Do the best you can!
 - Eat healthful foods (see the Balanced Diet section below).
- **If you have prediabetes**
 - Lifestyle choices listed above will delay or prevent the progression from prediabetes to diabetes.
 - Referral — We will refer you to a primary care provider to develop a plan to lower the chance you will get diabetes in future years. We recommend that you get checked for diabetes yearly.
 - Medicine — Certain oral medications may provide additional benefits in preventing the development of diabetes. They are taken by mouth, not an injection like insulin. Your primary care doctor may start you on oral medicine.
- **A balanced diet and healthy hints**
 - Eating well means eating healthy foods that give you the nutrition you need in the right amounts.
 - You don't have to give up your favorite foods completely.
 - Have a balance of proteins, fats and carbohydrates.
 - Get tips, ideas and a personalized plan using the Choose My Plate program from the U.S. Department of Agriculture (ChooseMyPlate.gov).
 - Plan meals ahead of time and stick to the plan.
 - Add lemon slices to water instead of drinking juice and sugary drinks.
 - Use smaller containers for food and drinks.
 - Keep fruit and cut vegetables handy for snacks.
 - Use the stairs instead of the elevator.
 - Park farther away from building entrances and walk the extra distance.
 - Don't go to the grocery store hungry.

Before Your Next Pregnancy

- Wait at least 18 months before you get pregnant again. Shorter intervals may have an increased risk of miscarriage or preterm birth. Use a reliable method of contraception (birth control).
- Take a prenatal vitamin daily. Folic acid in these vitamins helps prevent some types of birth defects.
- Ask your doctor if you should have an A1C test or repeat GTT before you become pregnant.
- If you have prediabetes or Type 2 diabetes, you can decrease the risk of miscarriage or birth defects by having your blood glucose in good control before you get pregnant. Ask about our preconception diabetes care program.

Life-Long Health

People who have had GDM have higher chances of developing health problems, such as high blood pressure, heart disease or stroke, sometimes years or decades after pregnancy. To reduce the likelihood of these problems:

- Maintain a healthy weight
- Exercise regularly
- Eat healthful food
- Blood pressure should be checked at least once a year. If you get high blood pressure, follow your provider's treatment advice and check your blood pressure more often.
- Tell your primary care provider that you have had gestational diabetes and ask if you should be tested yearly to check A1C, cholesterol and triglycerides.

Additional Resources:

National Diabetes Education Program
niddk.nih.gov/health-information/diabetes/overview/what-is-diabetes/gestational/after-your-baby-is-born

