WHAT CARE TO EXPECT IF YOU HAVE GESTATIONAL DIABETES



About this leaflet

If you've been diagnosed with gestational diabetes, you should get certain checks and tests with your healthcare team to help you manage your condition well and have a healthy pregnancy.

This leaflet will help you to:

- Understand what help you should be able to get when you need it.
- Know what checks you should have regularly.
- Make a checklist of what you've already had and still need.
- Make notes about what you want to discuss with your healthcare team that you can bring to your appointments.

MAKING THE MOST OF YOUR APPOINTMENTS

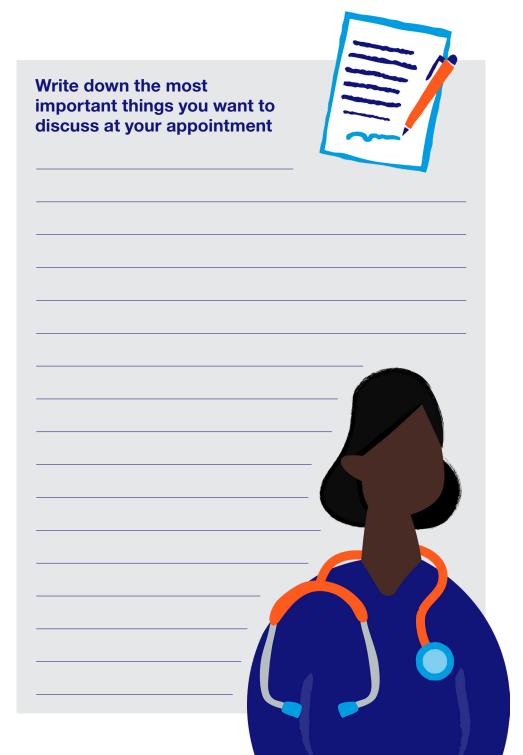
Everybody with gestational diabetes should be able to have good quality conversations with their healthcare teams, where you can discuss your individual needs and progress.

Before you go, think about:

- Which areas of your diabetes care you would like to focus on. Perhaps take a list of three bullet points with you that you want to discuss.
- Is there anything that's worrying you about your diabetes?
- Whether your diabetes is affecting your general wellbeing and what help you might need.
- Whether you've read, or seen anything online that you want to discuss, like new research or a particular type of diabetes tech.

During the appointment:

- Remember that your healthcare team should always be led by your needs.
- If your questions aren't being answered, don't be afraid to ask again and bring the conversation back to what you want to discuss.
- If the appointment feels like it's all about your diabetes numbers, try asking if you can discuss how diabetes is affecting your life and not just your blood sugars.
- At the end of your appointment, agree a clear plan of action, including how long it should be until your next appointment.



CARE TO EXPECT DURING YOUR PREGNANCY

Everyone with gestational diabetes should have the following checks and conversations during their pregnancy. Tick off what you've already had and ask your hoalthears team about anything that's missing

and a	sk your nealthoare tearn about anything that's missing.
	An oral glucose tolerance test (OGTT) to confirm the diagnosis, which is usually done at the 24^{th} to 28^{th} week of pregnancy or sooner if you have symptoms of diabetes. If you have had gestational diabetes in a previous pregnancy, this test should be done as soon as possible after booking in with your midwife.
	A blood glucose, or blood sugar, monitor given to you by your healthcare team. You should also be taught how to use it to check blood sugar levels at home.
	A discussion about whether continuous glucose monitoring would work for you, if you live in England and take insulin, and have severe

- hypos, or struggle to keep your blood sugar levels in target.
- Contact with both a diabetes and a pregnancy care team, in a joint clinic if possible. You should have contact with someone from the diabetes or pregnancy care team at least every two weeks.
- A referral to a dietitian, with regular reviews throughout your pregnancy. This should include discussion about your diet and how it affects your blood sugar levels and weight during pregnancy.
- Information on how to manage high and low blood sugars, also called hypers and hypos.
- Details of healthcare professionals you can contact outside normal working hours if you need extra support or are worried about your baby's movements.

Regular reviews and changes, if needed, to your medication. This may include a prescription for folic acid 5mg, if you have been diagnosed with GDM before 13 weeks.
Advice about physical activity and how this affects your blood sugar levels during pregnancy.
ould get help to have a healthy pregnancy, and support for your nal wellbeing, including:
Information about the medical exemption form for free prescriptions i you live in England. You don't need this in Northern Ireland, Scotland and Wales as prescriptions are free for everyone.
Being offered home blood pressure monitoring if needed.
The chance to meet and get support from other people living with gestational diabetes.
Emotional and psychological support from your healthcare team and access to specialist mental health support if you need it.
Being offered vaccines for flu, Covid-19 and whooping cough if you have not already had them.
Being offered any other vaccines you or your healthcare team think you may have missed.
A discussion with your maternity team before you have your baby about safe, effective contraception after delivery.



CARE TO EXPECT AFTER YOUR PREGNANCY

After your pregnancy, you will stop seeing diabetes specialists and be referred back to your GP, where you should have the following checks and conversations. This is because having gestational diabetes significantly increases your risk of developing type 2 diabetes in the future. Tick off what you've already had and ask your GP about anything that's missing:

-	
	A discussion about your risk of type 2 diabetes at your 6-8 week check.
	A fasting glucose test 6-13 weeks after your pregnancy or an HbA1c test after 13 weeks. Then an annual HbA1c test. An HbA1c checks your average blood glucose levels over the last three months.
	Referral or self-referral onto a diabetes prevention programme like the Healthier You NHS Diabetes Prevention Programme if you live in England.
	A discussion about planning future pregnancies before you stop contraception again if you're planning to have another baby.
	An OGTT or early blood glucose monitoring at the beginning of any future pregnancies.

Write down anything you need to do or find out more about after seeing your GP. Ask for



nything you' need more	informatio	n on.	

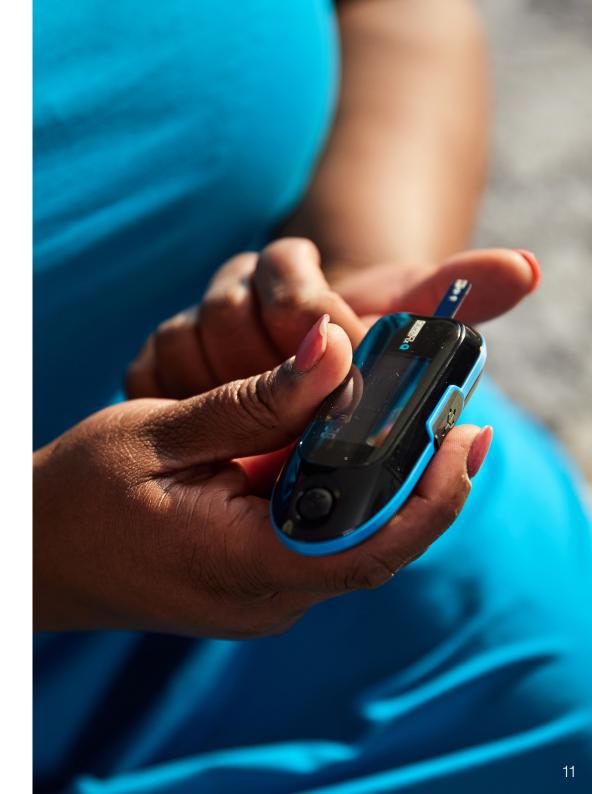
WHAT IF I'M NOT GETTING THE CARE I NEED?

Sometimes it can be difficult to get the standard of care you should expect. If you don't think you are getting the checks you should be, speak to your healthcare team. You could take this leaflet with you and use it to help you ask about specific checks or types of support.

If that does not help you, you may want to make a complaint. You can find out more at **diabetes.org.uk/care-complaints**

If you're still not happy with the care you're getting, you can ask for your diabetes care to happen at a different clinic or hospital. You can find out more by speaking to your GP or calling our helpline on **0345 123 2399**.





GET IN TOUCH

Call 0345 123 2399 Email helpline@diabetes.org.uk Visit diabetes.org.uk

Search Diabetes UK on Facebook, X, YouTube, Instagram and TikTok











We welcome your feedback. If any information in this guide has been particularly helpful or if you would like to suggest any improvements, please send your comments to: helpline@diabetes.org.uk or write to us at: Diabetes UK Helpline, Wells Lawrence House, 126 Back Church Lane, London E1 1FH

The British Diabetic Association operating as Diabetes UK, a charity registered in England and Wales (no. 215199) and in Scotland (no. SC039136). A company limited by guarantee registered in England and Wales with no. 00339181 and registered office at Wells Lawrence House, 126 Back Church Lane London E1 1FH © Diabetes UK 2023.

Published April 2023. Next review date: April 2026. Product code: 102051EINT.