

What is GDM?

- Gestational diabetes is when mom has higher than normal blood sugar levels during pregnancy.
- Having high blood sugars during pregnancy can cause harm to both mom and baby.
- Following a healthy diet and exercise plan can help to lower blood sugars.
- If a healthy lifestyle is not enough, your doctor may prescribe medication or insulin to protect you and your baby.

Complications of GDM

Short Term	
For baby	For mom
<p>Miscarriage and still birth: High blood sugars are associated with damage to the placenta, which makes it hard for the baby to get enough oxygen.</p> <p>Preterm (early) birth: Babies born too early can experience breathing and other problems.</p> <p>Low blood sugars: The baby's body makes extra insulin when mom's blood sugar is high, which is associated with low blood sugars soon after birth.</p>	<p>High blood pressure: High blood sugars are associated with high blood pressure in mom, which can lead to delivery complications.</p> <p>Excessive birth weight: Mom's blood sugars are used by the baby for energy. If sugars are too high, the baby might grow too big. This is associated with problems during delivery, including injury or need for a C-section.</p>
Long Term	
<p>Obesity & diabetes later in life: Babies that are born more than 8lbs are at higher risk of developing obesity and type 2 diabetes later in life.</p>	<p>Diabetes later in life: Having GDM is associated with a higher risk of developing pre-diabetes and type 2 diabetes after delivery.</p>

Good news!

Complications can be prevented with good blood sugar control. The risk of complications in moms with well-controlled GDM is no higher than in moms without GDM.

How can I have a healthy pregnancy?

- ✓ Test your blood sugars daily
- ✓ Eat balanced meals and snacks
- ✓ Get regular physically activity
- ✓ Prevent excessive weight gain
- ✓ Stay in touch with your Diabetes Education Team to make sure that you and baby are on track



How much should I eat?

- Many pregnant women think they should be eating for two, but this is a myth.
- You generally need 350-450 additional calories by the second and third trimesters.
- Preventing too much weight gain during pregnancy is key to preventing GDM complications.

Extra Calories Required by Trimester	
Second Trimester (weeks 13-26)	Third Trimester (weeks 27+)
350 calories (2 snacks) 1 medium apple + 1 tbsp natural peanut butter 1 medium pear + 12 almonds	450 calories (3 snacks) ½ cup plain 2% yogurt + 1 cup blueberries ¾ cup edamame (boiled) 2 Ryvita crackers + 1 tbsp peanut butter

What should I eat?

- Aim for 3 meals and 2-3 snacks per day.
- A balanced meal should include ½ vegetables, ¼ carbohydrates/starches, and ¼ lean protein.
- Choose high fibre carbohydrates and starches.
- Choose water to quench your thirst. Avoid sugary beverages like juice, chocolate milk, and soda.
- If you are using an artificial sweetener, talk to your Diabetes Educator to find out which brands are approved for pregnancy.



Choose	Avoid
✓ Whole grain bread	× White bread
✓ Long grain or parboiled rice	× Instant rice
✓ Hot cereal	× Cold cereal
✓ Whole baked potato with skin	× Mashed potatoes
✓ Whole fruit with skin	× Fruit juice
✓ Ryvita crackers	× Rice cakes

What nutrients may I need more of during pregnancy?

- ✓ Folic acid (1.0 mg/day)
- ✓ Calcium (1000 mg/day)
- ✓ Vitamin D (1000 IU/day)
- ✓ Iron (27 mg/day)*

All women with GDM should take a daily multivitamin with 1 mg of folic acid and 16-20 mg of iron. Your doctor may recommend a supplement suitable for you.

*Prenatal vitamins and iron supplements can interfere with thyroid medications. If you are taking thyroid medications, do not take prenatal vitamins within 2 hours of your thyroid medication.

Physical activity and pregnancy

- Speak to your doctor before starting any activity, especially if you were not active before pregnancy
- Staying physically active during pregnancy has many benefits, including supporting appropriate weight gain, improving blood sugar control, decreasing back pain, and maintaining fitness
- Even light activity, like walking for 10 minutes after each meal, can improve blood sugars
- Be sure to check your blood sugar more often when doing any kind of activity, especially if you are taking insulin. Insulin doses may need to be reduced in order to prevent low blood sugars.

Blood sugar testing

Following your GDM diagnosis, it is important to start testing your blood sugars 4-7 times a day. This may seem like a lot, but these readings give you and your doctor important information about how your diet, physical activity levels, and insulin doses are protecting your baby.

	Fasting Blood Sugar	Blood Sugar 1 hour after eating	Blood Sugar 2 hours after eating
Blood Sugar Targets	less than 5.3 mmol/L	less than 7.8 mmol/L	less than 6.7 mmol/L

The best times to test are:

- first thing in the morning
- before meals
- 1 or 2 hours after meals

The option of using a continuous glucose monitor (CGM) to support with blood sugar monitoring is available during your pregnancy. Talk to your diabetes educator for more information..

Important: Reach out to your Diabetes Educator if your blood sugars are above target more than three times within the same week.