Diabetes in pregnancy

What is diabetes and gestational diabetes?





Diabetes is when there are **high levels of glucose, or sugar,** in your blood.

Your body turns most of what you eat and drink into glucose (sugar). Glucose travels from the bloodstream into your body's cells where it can be used as fuel. To help turn glucose into fuel or energy for your body, your pancreas (a gland in your belly) produces a hormone called insulin. If you have diabetes, this process does not work well and your body does not get all the fuel it needs.

The two most common types of diabetes are:

Type 1 diabetes: The body makes no insulin.

Type 2 diabetes: The body does not make or use insulin properly.

How does gestational diabetes affect your baby?

- Too much sugar in the first three months of pregnancy can cause problems with how your baby is developing.
- Too much sugar in the last half of your pregnancy can cause your baby to grow too large and make delivery difficult.
- Women with diabetes that is not well controlled have a higher chance of needing a C-section and a longer time to recover.
- Diabetes increases the risk of high blood pressure, which can cause problems for the mother and baby.
- A mother's high blood sugar can cause the baby to have low blood sugar after birth.

If you had diabetes before you became pregnant, your primary care provider (PCP) may increase the amount of insulin or medicine you take. That's because your body does not use insulin as well as it did before you became pregnant.

Gestational diabetes is diabetes that happens only when you are pregnant.

It's usually tested for between 24 and 28 weeks of pregnancy. The sugar in your blood also goes to your baby.



Work with your PCP

Your PCP can help you complete the **My Diabetes Take Control Plan** in the middle of this booklet. If you stick with it, you can have a healthier pregnancy and a healthier baby.

Blood sugar

What is your safe blood sugar range?

You can use the chart on page 10 to record your blood sugar results. Ask your PCP to look at them at each visit. If you have any questions about doing the test, ask someone to review the steps with you.

What can you do to help keep your blood sugar levels safe?

Here are a few tips about how to keep your blood sugar levels safe and what to do if they are not.

Low blood sugar

High blood sugar

How you might feel

- Shaky, cold sweat, very hungry, numb lips
- Very tired, irritable, frequent peeing, blurry vision, extreme thirst and hunger

To prevent it

- Take your medicine as prescribed.
- Eat at the same times every day.
- Test blood sugar before and after exercise.
- Take your medicine as prescribed.
- Follow your meal plan.
- Watch portion sizes during meals.
- Tell your PCP if you are sick.
- Keep moving! (if your PCP says exercise is OK)

To treat it

- If you can, test your blood sugar before treating.
- Eat 15 grams of fast-acting carbohydrate food. (See list)
- Test again in 15 minutes. If still low, eat fast-acting carbohydrate food again. Retest in 15 minutes.
- If you have two low results in one day, call your PCP.

- Test your blood sugar every two hours.
- Drink eight ounces of water every hour.
- Talk to your PCP about when to call about high results.



15 g of fast-acting carbohydrate to eat when you have low blood sugar:

- ½ cup (4 oz.) fruit juice
- ½ can (6 oz.) regular soda
- 1 cup (8 oz.) milk
- 2 tablespoons raisins (small box)
- 3-4 hard candies

Eating healthy for you and your baby

Making the best food choices during pregnancy helps you control your blood sugar and weight gain. You can make sure you and your baby get the nutrition you both need to stay healthy. Healthy meals are ones that you make yourself instead of buying.

Making healthy food choices is important:

- 1. To have a healthy baby.
- 2. To gain weight at the right rate, not too fast or too much.
- 3. To keep your blood sugars within the safe range.



Eat from each food group daily to have a healthy baby

Mix it up!

Variety can keep meal time interesting and exciting.

- **Vegetables** Eat plenty of these (fresh or frozen preferred).
- **Fruits** Choose a variety of colors (fresh or frozen preferred).
- **Protein** Lean meats, eggs, fish, lamb, seafood, nuts, nut-butters, dried beans
- Whole grains Whole wheat bread, brown rice, oatmeal, whole grain tortillas
- **Dairy** Milk, yogurt, cheese
- **Healthy fats** Olive oil, canola oil, vegetable oils, avocado



Food affects blood sugar differently

Foods to limit

(Called healthy carbohydrates or carbs) They will raise your blood sugar. Eat these but don't go back for seconds.



Grains like breads, cereals, crackers, pasta, rice, tortillas

Starchy vegetables like potatoes (white and sweet), corn, peas, winter squash

Beans and legumes like beans (pinto, great northern, black, kidney and navy beans), black-eyed peas, lentils

Fruits like fresh, frozen, canned (drained), dried, with no sugar added

Some dairy like cow's milk and plain yogurt

Foods that won't affect your blood sugar Fill half your plate with these.



Proteins like beef, pork, chicken, turkey, fish, seafood, eggs

Non-starchy vegetables like lettuce, celery, carrots, green beans, broccoli, cabbage, cauliflower, peppers, onions, spinach, kale, collard greens, tomatoes

Nuts and seeds like peanuts, almonds, walnuts, cashews, peanut butter and other nut butters, flax seed, chia seed, sesame seed

Fats like oils, butter, salad dressing, mayonnaise, avocados

Low-sugar dairy and dairy substitutes like unsweetened almond milk, cheese, sour cream, cream cheese

Foods to avoid

These will raise your blood sugar.

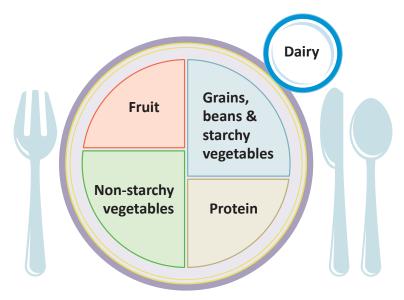


Sweets and desserts like cakes, cookies, pies, candies, pastries, ice cream, jam, jellies, syrup, honey

Unhealthy snacks and sugary drinks like potato chips, soda, juice, punch, sweet tea, lemonade

How much to eat

It's healthy to eat carbohydrate foods every day.
But if you eat too many, your blood sugar will be
too high. An easy way to keep from eating too much
is to use **My Plate** as a guide. Look at the picture below.



Source:

California Department of Public Health website, *MyPlate for Gestational Diabetes*, https://www.cdph.ca.gov/Programs/CFH/DMCAH/CDPH%20Document%20 Library/NUPA/MyPlate-Handout-GestationalDiabetes.pdf.

Limit yourself to one helping of each food at each meal. Remember, the more carbohydrate foods you eat, the more sugar you will have in your blood.

If you do not shop for or cook your own food, please share this information with the person who does.

When to eat

- Eat three meals with three small snacks between them every two to three hours. It helps to eat soon after you get up.
- It's important to eat a snack before bed.
- Eat about the same time every day.



Diabetes medicines

If you had diabetes before you became pregnant and were taking medicines, talk with your PCP about them. Some diabetes pills are not safe to use during pregnancy. Your PCP might change what you are taking.

If you have gestational diabetes, your PCP may give you diabetes pills. Or you may need insulin to keep your blood sugars at a safe level.

Talk with your PCP or pharmacist about how to take your diabetes medications. If your PCP wants you to take diabetes pills or insulin:

- Ask the PCP to show you how to measure and inject insulin.
- Ask when to take your insulin, like at meals or before bed.
- Ask the PCP when to take your diabetes pills.

Benefits of staying active

Exercise is one way of keeping your blood sugar under control. If you have a favorite way to exercise, ask your PCP if it is safe. Generally, if you were in the habit of exercising before you got pregnant, it's safe to continue. Even if you didn't exercise before, walking is a safe activity for most women. Try to exercise every day. Ask your PCP about what kind of exercise is safe for you.

If you are taking glyburide or insulin, be sure to carry a fast-acting carbohydrate food with you in case you have symptoms of low blood sugar.

Being physically active will keep you strong, help improve your mood and lower your blood sugar. Follow your PCP's advice about how often and how long to exercise.

My food and blood sugar record

Date	Fasting blood sugar	Weight	Breakfast	After meal blood sugar	Snack	Lunch	After meal blood sugar	Snack	Supper	After meal blood sugar	Snack
Example	95	130	1 egg, 1 slice whole wheat toast, 8 ounces of milk	115	Celery with peanut butter	Tuna salad sandwich, tomato soup, water	102	Apple, 1 slice of cheese	Baked chicken breast, baked potato, green beans or broccoli, roll, water	98	Fruit with milk
Monday											
Tuesday											
Wednesday											
Thursday											
Friday											
Saturday											
Sunday											

My Diabetes Take Control Plan

My health care	☐ Create a diabetes action plan with my PCP				
services My PCP is	☐ Make and keep my prenatal appointment on:				
my partner	☐ Make and keep my postpartum appointment on:				
	Keep my prescriptions for insulin and diabetes medicines up to date and filled				
Words to know	A1c: a lab test that measures my average blood sugar level over three months				
	Hyperglycemia: high blood sugar level				
	Hypoglycemia: low blood sugar level				
	Dilated eye exam: an eye exam that looks for common vision problems and eye diseases				
	, , , , , , , , , , , , , , , , , , ,				
Questions to ask my PCP	☐ How do I take my insulin and diabetes medicines as directed?				
ask my FCF	☐ How do I use a glucose meter and what supplies do I need to check my blood sugar regularly?				
	☐ How does my blood sugar change after a meal so I can make sure I'm choosing the right foods to eat?				
	☐ What do I do if my blood sugar is too high?				
	☐ What do I do if my blood sugar is too low?				
	☐ How do I manage my blood sugar when I'm sick?				
	☐ How can I exercise safely while I'm pregnant?				
How do I feel about taking	☐ I want to control my diabetes and I feel confident I can.				
action?	☐ I want to know more about how to manage my diabetes so I can have a healthy baby.				
	☐ I know how to manage my diabetes, but it is not really a concern for me right now.				
	☐ I don't know how to manage my diabetes and I am not worried about it.				

My healthy lifestyle plan I will choose one thing to work on now	 □ Be active every day □ Eat healthy – make a plan □ Stop using tobacco – set a quit date □ Drink more fluids □ Other things I can do: 				
My support team People who can help me	My PCP or other health car phone number: My Amerigroup case mana phone number: Family and friends' names	ger's name and			
Blood sugar range	My PCP has advised me that my safe blood sugar range is: Before I eat: between low: and high: After meals: between low: and high:				
Be aware of how I feel	How I feel: Weak, shaky, dizzy or headache Heart beating fast Extreme hunger Peeing more than usual Blurry vision Very tired Very thirsty ACTION: Talk to your PCP about when to call.	How I feel: Chest pain or pressure Shortness of breath or trouble breathing Fruity-smelling breath Stomach pain, nausea or vomiting Confused Seizures ACTION: Go to the emergency room or call 911.			



Healthy ways to cope with stress

Taking care of diabetes when you are pregnant can be stressful. Sometimes you may feel anxious, overwhelmed or even depressed. These feelings can be normal. Think about these things you can do to feel better:

Do something you enjoy. What would you like to do?		
Take time for yourself. When can you take a nice break?		
Ask friends and family for help. Who will you ask?		
	_	

Be physically active. What will you do?

Laugh! What are some of the funny things that happen to you when you are pregnant?

Eat healthy foods. What healthy things would you like to have for a snack?

Keep your blood sugars in a safe range. How does your mood change when your blood sugar changes quickly?

,_____

After delivery

After you deliver, you may get the "baby blues." This is a normal part of having a baby. Talk with your family and friends about how you are feeling. Baby blues usually go away within two weeks. If you still feel down, depressed or have negative thoughts or feelings, talk with your PCP. You may need some help to feel better.

Your postpartum checkup will be scheduled six to eight weeks after you have your baby. Your PCP will check your blood sugar levels to make sure they have returned to normal.

Once you have had gestational diabetes, you are more likely to have it the next time you get pregnant. If you had diabetes before you became pregnant, you will need to see your PCP or diabetes specialist to recheck your blood sugars and adjust your medicine. If you plan to become pregnant again, it is very important your blood sugars are within the safe range.



Breastfeeding, nutrition and diabetes medicine

Breastfeeding helps you and your baby. Your baby will have a lower risk of allergies to foods, lower risk of infections, like ear infections, lower risk of diabetes and other conditions.

Breastfeeding helps your body recover faster and helps lower your own risk of diabetes and breast cancer. It will make it easier for you to lose the weight gained during your pregnancy. If you had gestational diabetes, breastfeeding will help lower the sugar in your blood and decrease your risk of developing Type 2 diabetes.

It is important to keep choosing the same healthy foods you ate while pregnant. Be sure to drink plenty of water.

If you have diabetes and are using insulin, your blood sugar may become too low while breastfeeding. Eat a snack before or during breastfeeding to help prevent low blood sugar. Keep something to eat nearby when nursing to avoid having to stop feeding your baby.

Remember:

- Eat three meals a day.
- Eat a wide variety of healthy foods.
- Don't worry about losing weight during this time.
- Continue to use multivitamins.
- Choose decaffeinated beverages. Avoid coffee, tea and other caffeinated drinks.











What is my risk of developing diabetes?

If you had gestational diabetes when you were pregnant, you are more likely to have it the next time you become pregnant. Plus, you may get regular diabetes after you deliver. You would have up to a 60% chance of developing diabetes within the next 10 years. Talk with your PCP about testing for regular diabetes. Be sure to let the PCP know you have had gestational diabetes.

You will need to have your blood sugar tested in a lab every three years. If you have signs of high blood sugar, get tested earlier.

To reduce your risk of developing diabetes, ask your PCP what is a healthy weight for you. To reach and maintain a healthy weight, eat healthy foods and be physically active. Ask your PCP to suggest a healthy meal plan and to help you choose what type of exercise and how much would be right for you.

Check with your case manager for more programs in your state.

If you already have diabetes, use this list of questions to see where you can make a healthy change.	YES	NO
Am I checking and paying attention to my blood sugar level every day?		
Am I taking my insulin and diabetes medicines as prescribed?		
Am I taking steps to improve my overall health by eating healthy and exercising?		
Am I willing to quit using tobacco and ask others to not use tobacco around me or in my home?		
Have I talked to my PCP about being screened for depression and other health conditions?		

Did you answer no to any of the questions? That's OK. Change can be hard. When you're ready, use one of the questions to help set a goal. And take a few minutes to complete the **My Diabetes Take Control Plan** on page 12 of this booklet.

Want to learn more? Here's where to look:

American Diabetes Association website: www.diabetes.org.

Academy of Nutrition and Dietetics website: www.eatright.org.

CalorieKing Wellness Solutions, Inc. website: www.calorieking.com.

National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases website: National Diabetes Information Clearing House, *What I Need to Know About Gestational Diabetes* (September 2014): www.diabetes.niddk.nih.gov/dm/pubs/gestational/index. aspx. (Accessed January 19, 2016.)

United States Department of Agriculture website: www.choosemyplate.gov.

YMCA website: YMCA's Diabetes Prevention Program: www.ymca.net/diabetes-prevention.

California Department of Public Health website, *MyPlate for Gestational Diabetes:*

https://www.cdph.ca.gov/Programs/CFH/DMCAH/CDPH%20Document% 20Library/NUPA/MyPlate-Handout-GestationalDiabetes.pdf

Sources

American Diabetes Association website: Standards of Medical Care in Diabetes-2016, Volume 39, Supplement 1: http://care.diabetesjournals.org/site/misc/2016-Standards-of-Care.pdf. (Accessed March 28, 2016.)

American Association of Clinical Endocrinologists website: *Management of Pregnancy Complicated by Diabetes*, http://outpatient.aace.com/diabetes-in-pregnancy/pregnancydm-s3-management. (Accessed March 28, 2016.)

Eatright website: Academy of Nutrition and Dietetics, *Nutrition Care Manual:* www.nutritioncaremanual.org. (Accessed March 28, 2016.)

Agency for Healthcare Research and Quality website: National Guideline Clearinghouse, *Diabetes and pregnancy: an Endocrine Society clinical practice guideline*. www.guideline.gov/content.aspx?id=47898. (Accessed March 28, 2016.)

Alyce M. Thomas, RD, and Yolanda M. Gutierrez, MS, PhD, RD, American Dietetic Association Guide to Gestational Diabetes Mellitus, 2005.

American Diabetes Association website: Summary and Recommendations of the Fifth International Workshop-Conference on Gestational Diabetes Mellitus, Diabetes Care, Vol. 30, Supplement 2 (November 2005): http://care.diabetesjournals.org/content/30/Supplement_2/S251.full.pdf+html. (Accessed March 28, 2016.)

Academy of Nutrition and Dietetics website: *Journal of the Academy of Nutrition and Dietetics Vol. 114, No. 7, Nutrition and Lifestyle for a Healthy Pregnancy Outcome* (July 2014):

www.eatrightpro.org/~/media/eatrightpro%20files/practice/position%2and%20 practice%20papers/position%20papers/position_healthy_pregnancy.ashx.

Academy of Nutrition and Dietetics Evidence Analysis Library, July 10, 2013: www.andeal.org/default.cfm.

The information in this document is for educational purposes only. It is not to be used as medical advice.

The websites listed in this booklet are third party sites. Those organizations are solely responsible for the contents and privacy policies on their sites.

Do you need free help with this letter?

If you speak a language other than English, help in your language is available for free. This page tells you how to get help in a language other than English. It also tells you about other help that's available.

Spanish: Español

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-600-4441 (TTY 711).

Kurdish: <u>ىدروك</u>

ئاگاداری: ئهگهر به زمانی کور دی قهسه دهکهیت، خزمه تگوز اربهکانی بارمهتی ز مان، بهخور ایی، بو تو بهر دهسته بهیو هندی به (TTY 711) 1-800-600-4441 بكه.

Arabic: ة ي برعل

ةي وغلل اقد عاسمل اتامدخ ناف ، فغلل اركذا شدحت تنك اذا : فظو حلم 1-800-600-4441 مقرب لصت الماجملاب كل رفاوت (711مكبال و مصل أ فتاه مقر)

Chinese: 繁體中文

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。 請致電1-800-600-4441 (TTY 711)。

Tiếng Việt Vietnamese:

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho ban. Goi số 1-800-600-4441 (TTY 711).

Korean: 한국어

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-600-4441 (TTY 711) 번으로 전화해 주십시오.

French: **Francais**

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-600-4441 (ATS 711).

Amharic: አማርኛ

*ማ*ስታወሻ: የሚናንሩት ቋንቋ ኣማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጀተዋል፡ ወደ ሚከተለው ቁጥር ይደውሉ 1-800-600-4441 (መስጣት ለተሳናቸው: 711).

Gujarati: ગુજરાતી સુયના: જો તમે ગુજરાતી બોલતા હ્યે, તો નૃઃશુિલ્ક ભાષા સહાય સૈવાઓ તમારા માટે ઉપલબધ છે. ક્રોન કરો 1-800-600-4441 (TTY 711).

Laotian: _ | ີ ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານ ພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທຣ 1-800-600-4441 (TTY 711).

German: Deutsch

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-600-4441 (TTY 711).

Tagalog: **Tagalog**

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-600-4441 (TTY 711).

Hindi: हिंदी ध्यान दें: यद आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-600-4441 (TTY 711) पर कॉल करें।

Serbo-Croatian: Srpsko-hrvatski

OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-800-600-4441 (TTY- Telefon za osobe sa oštećenim govorom ili sluhom: 711).

Russian: Русский

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны **бесплатные услуги перевода. Звоните** 1-800-600-4441 (телетайп: 711).

Nepali: नेपाली

ध्यान दिनुहोस्: तपार्इंले नेपाली बोल्नुहुन्छ भने तपार्इंको निमृति भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ । फोन गर्नुहोस् 1-800-600-4441 (टिटिवाइ: 711) ।

Persian: عسراف

ى نابز تالى مست ،دىنكى ىم وگىتفگى ى سراف نابز مب رگا: جوت اب دشاب ىم مهارف امش ى ارب ناگى ار تروصب

ـدىرىگىب سامت (TTY: 711) 1-800-600-4441.

- Do you need help talking with us or reading what we send you?
- Do you have a disability and need help getting care or taking part in one of our programs or services?
- Or do you have more questions about your health care?

Call us for free at 1-800-600-4441. We can connect you with the free help or service you need. (For TTY call: 711)

We obey federal and state civil rights laws. We do not treat people in a different way because of their race, color, birth place, language, age, disability, religion, or sex. Do you think we did not help you or you were treated differently because of your race, color, birth place, language, age, disability, religion, or sex? You can file a complaint by mail, by email, or by phone. Here are three places where you can file a complaint:

TennCare

Office of Civil Rights Compliance 310 Great Circle Road, 3W Nashville, Tennessee 37243

Email: HCFA.Fairtreatment@tn.gov Phone: 855-857-1673 (TRS 711)

You can get a complaint form online at:

https://www.tn.gov/content/dam/tn/tenncare/documents/complaintform.pdf

Amerigroup Nondiscrimination Coordinator

Office of Civil Rights Compliance 22 Century Blvd., Suite 220 Nashville, TN 37214

Email: tn.nondiscrimination@amerigroup.com

Phone: 1-800-600-4441 (TTY 711)

Fax: 1-866-796-4532

U.S. Department of Health & Human Services Office for Civil Rights

200 Independence Ave SW, Rm 509F, HHH Bldg

Washington, DC 20201 Phone: 800-368-1019 (TDD): 800-537-7697

You can get a complaint form online at:

http://www.hhs.gov/ocr/office/file/index.html

Or you can file a complaint online at:

https://ocrportal.hhs.gov/ocr/portal/lobby.jsf