



## Risk groups

Basically: Any pregnant woman can develop gestational diabetes.

Risk groups are:

- Pregnant women who are overweight
- Women who have already been diagnosed with gestational diabetes in previous pregnancies
- Women with polycystic ovary syndrome (PCOS) - irregular or absent menstrual periods and often with obesity or high androgen levels (male hormones)
- Women with a family history of diabetes
- Women who have had more than three miscarriages in a row
- Advanced maternal age
- Women who have already given birth to an overweight child (over 4500 grams)

### For statutory health insurance holders:

GKV benefit

### For private health insurance holders:

Private health insurance will cover the costs according to the valid GOÄ (Medical Fee Schedule for care outside the Statutory Health Insurance Scheme) if there has been no previous exclusion of benefits. If you have any questions about this, your doctor will be happy to advise you.



**IMD Institut für Medizinische Diagnostik Berlin-Potsdam GbR**  
**IMD Berlin MVZ**

Nicolaistraße 22  
12247 Berlin (Steglitz)  
Tel +49 30 77001-322  
Fax +49 30 77001-332  
info@imd-berlin.de · IMD-Berlin.de

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## Gestational diabetes

Diabetes during pregnancy



### What is gestational diabetes?

Gestational diabetes is a type of diabetes. What sets it apart from other forms of diabetes is that it starts during pregnancy. There are no symptoms that indicate gestational diabetes. If recognised and treated at an early stage, the risks for mother and child are significantly reduced.

### The glucose tolerance test

Gestational diabetes can only be unequivocally diagnosed or ruled out with a glucose tolerance test (GGT or oGTT). The costs of glucose screening are covered by all health insurance companies as part of the antenatal care regime. All pregnant women are entitled to this test. The glucose tolerance test is recommended between the 24th and 28th week of pregnancy (in the second half of pregnancy).

### How does the glucose tolerance test) work?

The glucose tolerance test can be carried out at any time - it is not absolutely necessary to abstain from food. The pregnant woman should drink the test solution (200 millilitres of water mixed with 50 grams of glucose) within three to five minutes. It is recommended that the pregnant woman sits during the test, does not eat and does not smoke.

If gestational diabetes is diagnosed, further diagnostic tests will be carried out in consultation with a diabetologist and an individual therapy will be developed. This includes a change in diet, regular blood glucose tests, intensified antenatal care and, if necessary, insulin treatment.

If the 50-gram glucose tolerance test shows abnormal values, the next step is the 75-gram glucose tolerance test. This is divided into three phases: measuring blood glucose before drinking the glucose solution, and then again after 60 and 120 minutes. The following should be noted:

- The pregnant woman must fast for at least 10 to 16 hours before the test
- Pregnant women must sit during the entire test. They may not walk or lie down
- Absolutely no smoking during the entire test



### Gestational diabetes: What are the risks for mother and child?

#### Possible consequences for the mother:

- Permanent diabetes
- High blood pressure
- Complications during labour (increased risk of caesarean section)
- Urinary tract infections
- Pre-eclampsia/eclampsia

#### Possible consequences for the child:

- Risk of premature birth
- Intrauterine foetal death (IUFT) - death of the foetus in the second half of pregnancy, after the 180th day - but before the birth
- Complications during labour
- Macrosomia - overweight but not fully developed newborn baby
- Polyhydramnios - excess amniotic fluid
- Diabetes during puberty
- Hypoglycaemia after birth
- Respiratory distress syndrome in premature babies

