

What is gestational diabetes?

Over the course of your pregnancy, your body will undergo many changes in response to new metabolic needs. In order to increase the availability of sugar, which is important for your baby's development, your body produces insulin-impairing hormones. This means a large amount of sugar, or glucose, will circulate in your blood and remain available to the fetus¹.

In some cases, the body can't control this metabolic modification and develops an intolerance. The inability to regulate glucose levels leads to hyperglycemia, an **abnormally high level of sugar in the blood**². This is **gestational diabetes**, a reversible condition which generally occurs during the third trimester of pregnancy³. It is diagnosed with a **specific glycemia test** performed between the **24th** and **28th** weeks of pregnancy. Gestational diabetes can be asymptomatic or cause symptoms such as intense thirst, a frequent need to urinate and significant fatigue. In addition, babies of mothers with gestational diabetes tend to be larger than average, a condition known as macrosomia. This may lead your healthcare professionals to consider a C-section birth. Gestational diabetes can also trigger premature labor and cause glycemia regulation problems in the newborn. It also increases the risk of developing Type 2 diabetes in the mother and baby. It is therefore extremely important to control this disease, especially by **adapting your diet** and getting **regular exercise** to control your blood sugar level. If these measures are insufficient, an insulin treatment will be proposed².

¹ Vambergue A et al., *Physiopathologie du diabète gestationnel*. J Gynecol Obstet Biol Reprod 2002 ; 31 (suppl. au n° 6) : 4S3-4S10.

² https://www.federationdesdiabetiques.org/information/diabete-gestationnel?gclid=EAIaIQobChMIjJ6S2Ya51gIVyrztCh2C1QGhEAAYASAAEgIWh_D_BwE

³ https://www.has-sante.fr/portail/upload/docs/application/pdf/diabete_gestationnel_synth.pdf