

# **GESTATIONAL DIABETES**

## **What is gestational diabetes?**

Gestational diabetes is a condition in which there's too much sugar in the blood.

When you eat, your body breaks down sugar and starches from food into glucose to use for energy. Your pancreas makes a hormone called insulin that helps your body keep the right amount of glucose in your blood. When you have diabetes, your body doesn't make enough insulin or it can't use insulin properly, so you end up with too much sugar in your blood. This can cause serious health problems, such as heart disease, kidney failure and blindness.

Pregnant people are usually tested for gestational diabetes between 24 and 28 weeks of pregnancy. Most of the time it can be controlled and treated during pregnancy. If it's not treated, gestational diabetes can cause problems for you and your baby. It usually goes away after your baby's born. Once you've had gestational diabetes, you have a higher risk of being diagnosed with diabetes later in life.

## **Who is at risk for gestational diabetes?**

In the United States, 6 out of every 100 pregnant people develop gestational diabetes. You're more likely to have gestational diabetes if you:

- Are older than 25.
- Are overweight or obese and not physically active.
- Have had gestational diabetes or a baby with macrosomia in a past pregnancy.
- Have high blood pressure or you've had heart disease.
- Have polycystic ovarian syndrome (also called polycystic ovary syndrome or PCOS). This is a hormone problem that can affect reproductive and overall health.
- Have prediabetes. This means your blood glucose levels are higher than normal but not high enough to be diagnosed with diabetes.
- Have a parent, brother or sister who has diabetes.
- Are a member of a racial or ethnic group that has a higher prevalence of diabetes that isn't entirely explained by race or ethnicity, such as Black, American Indian or Alaska Native, Asian, Hispanic/Latino or Pacific Islander