

Diabetes Mellitus and pregnancy outcomes in low income settings

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ABSTRACT

Gestational Diabetes Mellitus (GDM) has been defined as any degree of glucose intolerance with onset or first recognition during pregnancy. The incidence of GDM is increasing with an increase in the prevalence of overweight and obesity in women of childbearing age. Maternal risk factors for pregnancies affected by GDM are excessive weight gain, preeclampsia and caesarean deliveries. Infants born to mothers with GDM are at risk of macrosomia, neonatal hypoglycemia, hypocalcemia, respiratory distress syndrome, hyperbilirubinemia and subsequent obesity and type 2 Diabetes. The diagnosis and management of GDM is therefore very important and remains a challenge. The present study was conducted on 100 pregnant women from lower socio-economic strata in their second or third trimesters to observe the effects GDM on pregnancy outcomes. Women with poor glycemic control reported statistically significant differences in gestational period, type of delivery and neonatal birth weights ($P < 0.001$). Women with elevated blood glucose levels through the period of pregnancy reported a shorter period of gestation or delivery through c-section. Higher mean birth weight i.e. macrosomia was reported in mothers with higher blood glucose levels. The APGAR scores of all the infants were reported to be normal. GDM, therefore was found to have some adverse effects on pregnancy outcomes in this study sample.

BIOGRAPHY

Leena Raje is working in the field of nutrition and healthcare for the past 35 years. The wide range of research projects conducted by her and research publications exhibit her keen interest in the field of food and nutrition. She is actively engaged in guiding Ph.D and Masters research scholars for the past 10 years. As the leader of a multi-faculty educational institution, she has been instrumental in health-promotion programmes and activities for adolescent girls and young adults.

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