NIDDK and ORWH Team Up For Mother's Day and National Women's Health Week to Raise Awareness of Gestational Diabetes and Steps to Reduce Risks for Women and Their Children

Most women with gestational diabetes know that taking steps to manage the disease during pregnancy is critical for the health of both mother and child. What many women don't realize is that those steps need to continue even after the baby is born.

Women who have had gestational diabetes are at increased risk for developing diabetes in the future, and their child is also at increased risk for obesity and type 2 diabetes. The National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) and the Office of Research on Women's Health (ORWH) at the National Institutes of Health are teaming up this May to raise awareness of these risks as part of the National Diabetes Education Program's (NDEP's) "It's Never Too Early…to Prevent Diabetes" campaign.

"As we celebrate Mother's Day and National Women's Health Week May 9 through 15, we want all mothers with a history of gestational diabetes to be aware of their long-term health risks, the health risks faced by their children, and steps they can take to keep themselves and their families healthy," said Griffin P. Rodgers, M.D., director of the NIDDK.

Gestational diabetes occurs during pregnancy and affects about 7 percent of all U.S. pregnancies, or about 200,000 pregnancies each year. Women who have had gestational diabetes should be re-tested for diabetes six to 12 weeks after the baby is born, and at least every three years after that.

"Many women think that if the follow-up test after the baby is born shows no signs of diabetes, they are in the clear, but that's not the case," said Vivian Pinn, M.D., director of the ORWH. "What many of these moms don't know is that they have a 40 percent to 60 percent chance of developing diabetes as early as five to 10 years after their baby is born. These women need to know this information and they need to take steps to lower their risk for developing diabetes."

Women with a history of gestational diabetes can do a lot to prevent or delay the risk of developing diabetes. In addition to screening for diabetes, it is important for women to reach and maintain a healthy weight by making healthy food choices and being active for at least 30 minutes, 5 days a week. These action steps are good for the entire family and help mom and baby manage their risks for developing diabetes. Breastfeeding also helps protect against childhood obesity, which is a risk factor for type 2 diabetes. For mom, breastfeeding can also promote an earlier return to pre-pregnancy weight.

Gestational diabetes occurs more frequently among women with a family history of diabetes; overweight and obese women; and Hispanic/Latina, African-American,

American Indian, Asian, Pacific Islander and Alaska Native women. Women who have had gestational diabetes should be screened regularly for diabetes and pre-diabetes, a condition where blood glucose levels are higher than normal, but not high enough to be diagnosed as diabetes. Follow-up screening usually consists of a simple blood test.

It is important that women talk to their doctors about their history of gestational diabetes. Women with a history of gestational diabetes should also talk to their obstetricians about earlier screening for gestational diabetes in future pregnancies. Because the children of women who had gestational diabetes are also at increased risk for obesity and type 2 diabetes, it's a good idea for mothers who had gestational diabetes to tell their child's pediatrician.

For a free tip sheet on gestational diabetes, including steps to reduce the risk of developing diabetes, call the National Diabetes Education Program at 1-888-693-NDEP (6337) or visit www.YourDiabetesInfo.org. In addition, Women's Health Resources (http://womenshealthresources.nlm.nih.gov), a Web Portal developed by the National Library of Medicine and ORWH, will highlight NDEP materials and NIH research on gestational diabetes during National Women's Health Week, May 9 through 15.

The NIDDK, part of the NIH, conducts and supports basic and clinical research and research training on some of the most common, severe and disabling conditions affecting Americans. The Institute's research interests include diabetes and other endocrine and metabolic diseases; digestive diseases, nutrition, and obesity; and kidney, urologic and hematologic diseases. For more information, visit www.niddk.nih.gov.

The NIH's Office of Research on Women's Health serves as the focal point for women's health research at the NIH. For more information about NIH's Office of Research on Women's Health, visit http://orwh.od.nih.gov.

The National Diabetes Education Program, jointly sponsored by the NIH, the Centers for Disease Control and Prevention, and 200 partner organizations, provides diabetes education to improve the treatment and outcomes for people with diabetes, promote early diagnosis, and prevent or delay the onset of diabetes. For more information, visit www.YourDiabetesInfo.org.

The National Institutes of Health (NIH) – The Nation's Medical Research Agency – includes 27 Institutes and Centers and is a component of the U.S. Department of Health and Human Services. It is the primary federal agency for conducting and supporting basic, clinical and translational medical research, and it investigates the causes, treatments, and cures for both common and rare diseases. For more information about NIH and its programs, visit www.nih.gov.