

Manage your gestational diabetes

You can reduce the risk of developing gestational diabetes by having a healthy pre-pregnancy weight, diet and exercise regimen.

But if you do get it, control it by changing your diet.

Gestational diabetes is controlled via diet and rarely, with insulin, said Dr Tan Kai Lit, an obstetrician and gynaecologist at Thomson Women's Clinic (Toa Payoh).

Here are his tips:

- Eat less carbohydrates – such as rice, bread and noodles – and more protein and fibre. Also, aim for no sugar in beverages.
- Avoid fast food.
- Exercise regularly. For instance, aim to do so two to three times a week and for about half an hour each time.
- Walk for about 20 minutes after each meal to help control post-meal blood sugar levels.
- Avoid excessive weight gain in pregnancy.

In September last year, the National University Hospital (NUH) started the Smart-GDM trial to test the efficacy of an

app in preventing excessive weight gain among women with gestational diabetes.

As of last week, it has recruited 240 patients for the trial, said Dr Yew Tong Wei, a consultant at NUH's endocrinology division.

The app provides patient education, helps track the weight and blood glucose levels of pregnant women with gestational diabetes, and has an interactive messaging platform.

Gestational diabetes that is managed with diet changes, or controlled with blood glucose-lowering therapy, usually is resolved with the delivery of the child, said Dr Tan.

But for blood glucose-lowering therapy, women should discontinue the medication immediately after birth, he said.

“Continuing the medication could cause low blood sugar levels, which may be harmful to the mother.”

He advises mothers with gestational diabetes to get a fasting blood sugar level test done between six and 13 weeks after delivery to make sure the condition has resolved.

Joyce Teo