## Reducing your risk of diabetes

There is a lot you can do for you and your family to reduce the chances of developing diabetes.

#### Exercise more

- Be physically active 30 minutes a day, at least 5 days a week.
- You can exercise safely in pregnancy without risk to you or the baby e.g. swimming, yoga, walking and aqua natal classes.

### Eat healthy

- Make healthy food choices and eat smaller portions.
- Increase fibre intake.
- Choose more fruits and vegetables, beans and whole grains.
- Cut down on sugar and fatty or fried foods.
- Eat at least 5 portions of fruit and vegetables a day.
- Ask your dietitian, midwife or doctor for advice on avoiding excessive weight gain during pregnancy. If you are overweight at the beginning of pregnancy, ask for advice about losing weight after you have had your baby.

Date/time of test	
Location	

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Leaflets can be viewed and printed from www.preg.info

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# Oral Glucose Tolerance Test (OGTT)



# What is an Oral Glucose Tolerance Test (OGTT)?

A test carried out during pregnancy to find out if you have developed gestational diabetes (GDM). This is usually a temporary form of diabetes with high blood glucose levels, especially after food. The test is usually carried out between 24 and 28 weeks of pregnancy. It may be done earlier in pregnancy; this will depend on your individual circumstances.

# Facts you need to know before having an OGTT

- Gestational diabetes (GDM) in some women will respond to changes in diet and exercise
- A large number of women will need diabetes medication and/or insulin injections if changes in your diet and exercise do not control you blood glucose levels
- If GDM is not detected and controlled, there is an increased risk of birth complications for you and your baby
- If you are found to have GDM, this will lead to increased monitoring, and may lead to increased interventions, during pregnancy, labour and birth

# You are at higher risk of developing diabetes during pregnancy if any of the following affect you:

- Previous pregnancy affected by gestational diabetes (GDM).
- A family history of diabetes (brother, sister, parents).
- Previously had a big baby; over 4.5 kg (10 lbs) or above 90<sup>th</sup> centile.
- Your family origin e.g. South Asian, Middle Eastern, African or African Caribbean.
- Have a Body Mass Index (BMI) over 30.
- Polycystic ovarian syndrome.
- Previous stillbirth or recurrent miscarriages.

If you had GDM in your previous pregnancy/pregnancies, you will be offered a test for diabetes again in early pregnancy. If the result is normal, the test will be repeated around 24-28 weeks of your pregnancy.

If you develop any of the following during your pregnancy, you **may** be offered a test to check if you have developed diabetes:

- Glucose detected in your urine this depends on how much glucose is found and on how many occasions.
- Extra fluid around the baby (polyhydramnios)
- The baby's growth is accelerated/excessive on scan

#### What does the test involve?

- Do not eat or drink anything other than plain water for 10 − 12 hours before the test (your healthcare team will advise you on this).
- Do not eat any breakfast or drink anything other than plain water on the morning of the test.
- Do not smoke or use chewing gum until the test is completed
- On arrival to the department where the test is being done, the first blood sample will be taken from you.
- You will then be asked to drink a glucose drink. You will need to drink this within 5 minutes.
- You will then need to sit for 2 hours in this department. Do not eat, drink or smoke during these 2 hours.
- After the 2 hours is completed, the final blood sample is taken. The test is now complete and you can go home.
- You can eat and drink normally after the test is completed.

#### **Test results**

The level of glucose in your blood before and after the glucose drink will confirm whether you have gestational diabetes or not.

You will be contacted by the specialist diabetes/antenatal team if your test result is abnormal with advice on what will happen next.

For further information, please visit: -

www.rcog.org.uk/en/patients/patient-leaflet www.diabetes.org.uk