

Care following gestational diabetes

Of the approximately 700 000 women who give birth in England each year, around 30 000 have gestational diabetes (GDM). Of these mothers, about 50% will develop type 2 diabetes within 5 years, with an ongoing elevated risk thereafter (NHS England, 2024). This can have major implications for mothers, their families and the NHS.

Postpartum follow-up and support

Following the diagnosis of a pregnancy with GDM, it is recommended that all glucose-lowering medications (including metformin and insulin) are stopped after delivery (NICE, 2020). For most women, GDM should resolve following delivery of their baby and placenta. Nevertheless, postnatal hyperglycaemia should be excluded.

Offer a fasting plasma glucose test 6–13 weeks after the birth to all women who had GDM, or an HbA_{1c} test at 13 weeks (NICE, 2020). Often, HbA_{1c} is preferable, as there is no need to fast (especially when breastfeeding can be thirsty and hungry work). However, HbA_{1c} should not be offered before 13 weeks after delivery, as it may provide an inaccurate result. Each following year, women who previously had GDM should be offered an HbA_{1c} test, owing to their increased risk of developing type 2 diabetes (NICE, 2020).

Lifestyle advice, to include diet, exercise and weight management, should be offered to people who have had GDM to help them to adopt a healthy lifestyle, if they have not done so already. Breastfeeding is encouraged to help reduce the risk of the mother developing type 2 diabetes and the child of developing overweight or obesity (American Diabetes Association, 2025).

Women should be made aware of the symptoms of diabetes, the most common being an increased frequency of passing of urine, greater thirst, losing weight without trying to and being tired more than usual. Recurrent thrush is another common

sign (Diabetes UK, 2023). Should symptoms arise, advise women to seek advice from their GP.

In most areas of the UK, there will be mother and baby groups at local venues. Some of these will organise groups for walking and other physical activities. Encouraging new mums to get out and meet others whilst exercising is a great way for them stay motivated to maintain a healthier lifestyle following the birth of their baby.

Subsequent pregnancies

For women who have had GDM, developing it in subsequent pregnancies is common. An early oral glucose tolerance test or early capillary blood glucose monitoring should, therefore, be offered.

Anyone with a history of GDM, or who has a current diagnosis, is eligible for referral to the NHS Diabetes Prevention Programme (NHS England, 2024). This free programme offers digital one-to-one sessions, face-to-face group sessions and a tailored group-based video conference service. Provided they have not been diagnosed with type 2 diabetes, women with GDM can be referred during pregnancy and the programme will contact them postnatally. The programme also accepts self-referral from people with a history of GDM. More information for healthcare professionals is available from [NHS England](#).

Women with diabetes who are planning a pregnancy should be advised to take folic acid at the higher dose of 5 mg/day through to 12 weeks' gestation to reduce the risk of having a baby with a neural tube defect (NICE, 2020).

Diabetes is associated with an increased risk of miscarriage, large for gestational age babies, stillbirth and some congenital anomalies. Rates of morbidity and mortality for women with pre-existing diabetes remain high, in particular for type 2 diabetes (NHS England, 2023). Referral to local diabetes pre-conception services should be offered to women with pre-diabetes or type 2



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diabetes who are planning pregnancy, so that glucose levels can be optimised prior to pregnancy to help improve outcomes. Early referral to diabetes and pregnancy services (i.e. to be seen <10 weeks’ gestation) is recommended and is audited by the [National Pregnancy in Diabetes Audit](#). ■

American Diabetes Association (2025) *Breastfeeding and Diabetes*. Available at: <https://bit.ly/4jM5qfc> (accessed 06.02.25)

Diabetes UK (2023) *Type 2 diabetes symptoms*. Available at: <https://www.diabetes.org.uk/about-diabetes/type-2-diabetes/symptoms> (accessed 06.02.25)

NHS England (2023) *Saving babies’ lives: version 3. Element 6: Management of pre-existing diabetes in pregnancy*. Available at: <https://bit.ly/4aS0KA8> (accessed 06.02.25)

NHS England (2024) *Healthier You: NHS Diabetes Prevention Programme – gestational diabetes mellitus (GDM) information for healthcare professionals*. Available at: <https://bit.ly/4aNXVQC> (accessed 06.02.25)

NICE (2020) *Diabetes in pregnancy: management from preconception to the postnatal period* (NG3). Available from: <https://bit.ly/40MvYEu> (accessed 06.02.25)