Pregnancy and diabetes

For women with type 1 or type 2 diabetes, the best preparation for a healthy pregnancy starts with getting the right information and advice before you fall pregnant.

Why plan?
Having diabetes during pregnancy can increase the risk of birth defects and miscarriage. The risk is higher when blood glucose levels before and during early pregnancy have not been within the target range. There is also an increased risk of other complications during pregnancy, such as developing high blood pressure and pre-eclampsia, as well as having a large baby.

Contraception for women with diabetes
It is possible to fall pregnant as soon as you stop using contraception, so it’s important to continue using contraception until you are ready to start trying for a baby.

Some methods of contraception are more reliable than others – and all have benefits and side effects. The most effective are long-acting reversible methods of contraception, including implants and intrauterine devices.

The oral contraceptive pill is another form of contraception often used by women with diabetes. To be reliable, the pill must be taken as prescribed. If you have high blood pressure or diabetes complications, it may not be a suitable option for you.

Talk to your doctor about the best contraception for you.
Planning for a healthy pregnancy

If your blood glucose levels are mostly within the target range, this reduces the risk of birth defects in your developing baby and the chances of an early miscarriage. For this reason, it’s important to plan your pregnancy and become pregnant at a time when your diabetes is well managed.

Make an appointment with your diabetes health professionals as soon as you start thinking about having a baby. It’s recommended that you have a review of your diabetes and general health at least three to six months before you start trying for a baby.

If you have any other health problems, make sure you also discuss these with your health professionals before you start planning your pregnancy.

To plan and prepare for pregnancy, talk to your health professionals about the following:

Contraception

It’s important to use effective contraception until you are ready to start trying for a baby. Ask your doctor about the best type of contraception for you.

Pregnancy advice

When planning to have a baby, there are a number of general health checks that all women need. Your GP can advise you about blood tests, vaccinations and the nutrient supplements you need to take before pregnancy.

Diabetes in pregnancy specialists

When planning your pregnancy you will benefit from the support of a team of health professionals, including your doctor and diabetes health professionals. If you are not already seeing these health professionals, ask your GP for a referral.

Managing your diabetes

Your diabetes health professionals can help you manage your diabetes to prepare for pregnancy. Make an appointment three to six months before you start trying for a baby.

Blood glucose levels

If your blood glucose levels are well managed before you fall pregnant, and during the early stages of pregnancy, you will reduce the risk of complications for yourself and your baby.

Your haemoglobin A1c (HbA1c) should be in the recommended range before you start trying for a baby:

- If you have type 1 diabetes, aim for an HbA1c of less than 53mmol/mol (7%).
- If you have type 2 diabetes, aim for an HbA1c of 42mmol/mol (6%) or less.

Discuss your individual blood glucose targets with your diabetes health professionals, including how you can reduce your risk of hypoglycaemia (hypos).
Looking after your diabetes is important throughout your pregnancy. Well-managed diabetes can help reduce the risk of complications during pregnancy, including high blood pressure and the chance of your baby growing too big.

There are a number of ways that pregnancy will affect your body and your diabetes. These changes will affect your blood glucose levels and insulin requirements. You may also experience more hypoglycaemia (hypos) in early pregnancy and your hypo symptoms may change. You will need to have your diabetes management reviewed more often during pregnancy.

Pregnancy when you have diabetes can sometimes be challenging. It’s important to seek the support you need from your health professionals, partner, family and friends during this time.

If you find you have an unplanned pregnancy, contact your doctor and diabetes team as soon as possible. They will be able to help you with your diabetes management and can discuss any concerns you may have.

You may be unsure about what you want to do, so you need to gather as much information as you can. Having diabetes does not mean your pregnancy shouldn’t continue or that you won’t have a healthy baby. Early contact with your health professionals is vital and can help improve the chances of a healthy pregnancy.

For more information go to www.pregnancyanddiabetes.com.au
Pregnancy planning checklist

Start planning and preparing for pregnancy at least three to six months before you start trying for a baby.

Use this checklist as a guide to discuss with your health professionals.

What you need to do BEFORE you fall pregnant:

- Use contraception until you are ready to start trying for a baby *(ask your doctor if this is the most reliable contraception suitable for you)*
- Talk to your doctor for general pregnancy planning advice
- Make an appointment with health professionals who specialise in pregnancy and diabetes
- Aim for an HbA1c of less than 53mmol/mol (7%) if you have type 1 diabetes, or 42mmol/mol (6%) or less if you have type 2 diabetes
- Review your diabetes management with your diabetes health professionals
- Have all of your medications checked to see if they are safe to take during pregnancy
- Start taking a high-dose (2.5mg – 5mg) folic acid supplement each day
- Have a full diabetes complications screening and your blood pressure checked
- Aim to be a healthy weight before you fall pregnant.