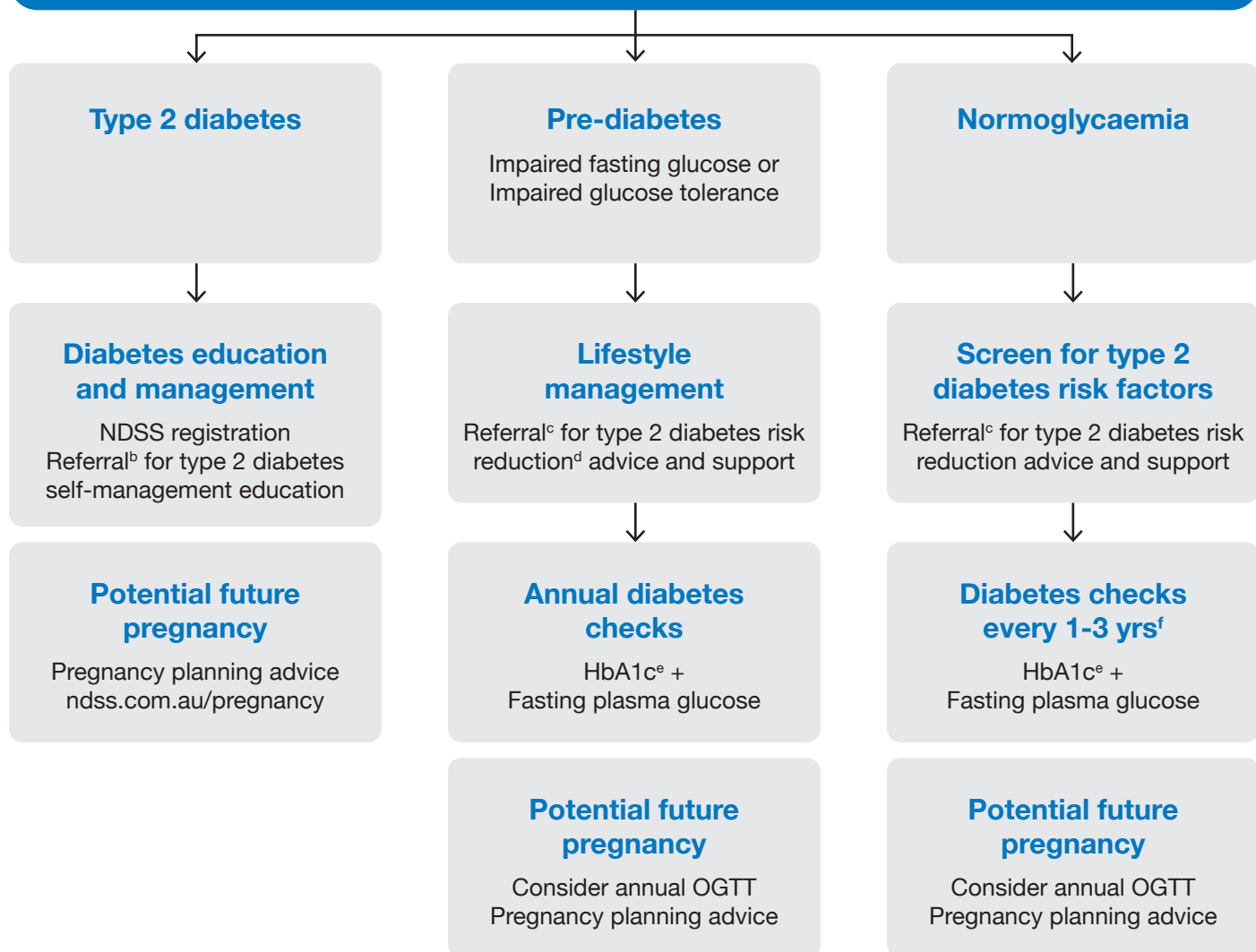


Gestational diabetes follow-up

6-12 weeks after birth of the baby

Advice on contraception
Type 2 diabetes risk reduction information
Postnatal oral glucose tolerance test (OGTT)^a



Notes:

- OGTT is the preferred postpartum test due to the low sensitivity of HbA1c to detect impaired glucose tolerance. HbA1c is not a suitable test in the first 3-4 months post-gestational diabetes pregnancy as blood glucose levels during pregnancy and postpartum blood loss may influence results.
- Referral to a Credentialed Diabetes Educator, Accredited Practising Dietitian, local diabetes education service or an NDSS type 2 diabetes education program.
- Referral to Accredited Practising Dietitian, Accredited Exercise Physiologist or a local/state-based diabetes prevention program.
- Pharmacotherapy with metformin has also been shown to be effective in reducing the progression to type 2 diabetes in those with pre-diabetes; noting metformin does not have Therapeutic Goods Administration or Pharmaceutical Benefits Scheme approval for this indication in Australia. (Prediabetes: a position statement from the Australian Diabetes Society and Australian Diabetes Educators Association. *Med J Aust* 2007; 186 (9): 461-465. || doi: 10.5694/j.1326-5377.2007.tb00998.x; Published online: 7 May 2007)
- HbA1c is a continuous variable. As it increases so does the risk of type 2 diabetes. An HbA1c above 5.5% (36 mmol/mol) is above the normal range and indicates increased risk of both diabetes and heart disease. An OGTT may be considered for high risk women where abnormal glucose tolerance or type 2 diabetes is suspected.
- The frequency and nature of this testing depends on the perceived risk of converting to type 2 diabetes (e.g. HbA1c high end of normal or increasing, obesity, polycystic ovary syndrome, family history).