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Maternal characteristics, neonatal outcome, and the time of diagnosis of gestational diabetes

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Abstract

OBJECTIVE: A study was undertaken to evaluate the yield of early, routine screening for gestational diabetes and to determine whether maternal characteristics and neonatal outcome differ according to the time of diagnosis.

STUDY DESIGN: A total of 2776 women were screened before 24 weeks of gestation, and each was delivered of a singleton infant on the clinic service of Mount Sinai Hospital in New York City between January 1986 and January 1991.

RESULTS: An abnormal glucose tolerance test was diagnosed in 102 women <24 weeks and in 252 patients at 24 weeks of gestation. Logistic regression analysis showed that the group diagnosed early was significantly older and more likely to have hypertensive disorders and low maternal weight gain and to require insulin treatment

hypertensive disorder, and low maternal weight gain and to require insulin treatment, compared with the group diagnosed late. No significant differences were evident in neonatal outcome.

CONCLUSIONS: These data indicate that a sizable proportion of patients with gestational diabetes can be diagnosed early in pregnancy. The differences in maternal characteristics and insulin requirements between the early- and late-diagnosis groups also suggest heterogeneity of gestational diabetes or the possibility of preexisting impaired glucose intolerance in the early-diagnosis group. (AM J OBSTET GYNECOL 1992;167:976-82.)



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Key words

Gestational diabetes; screening; risk factors

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