



PREGNANCY AND DIABETES

National Indigenous Diabetes Association

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CONTENTS

1. What is Diabetes ?
2. Types of Diabetes
3. Prevalence in Canada
4. Causes of diabetes during pregnancy
5. Symptoms of diabetes during pregnancy
6. Associated risk for diabetes during pregnancy
7. Issues of diabetes during pregnancy
8. Prevention of diabetes during pregnancy
9. Nutritional tips for pregnancy
10. Community resources



An illustration on a dark blue background showing a hand in a light blue sleeve using a blue glucose meter. A drop of red blood is being placed into the meter's test strip. The meter's screen displays the number '104'. The background is decorated with white plus signs and red-and-white capsules.

WHAT IS DIABETES?

Diabetes is a long-lasting health condition where a individual's body cannot use insulin (hormone required for energy metabolism) or cannot produce insulin, affecting how an individual's body uses food for energy.



TYPES OF DIABETES

TYPE 1

Autoimmune disease and insulin dependent.
The body cannot produce insulin and often develops during childhood or adolescences

TYPE 2

The body produces insufficient insulin or cannot use insulin properly . It commonly develops in adulthood




GESTATIONAL

Temporary development of diabetes during pregnancy

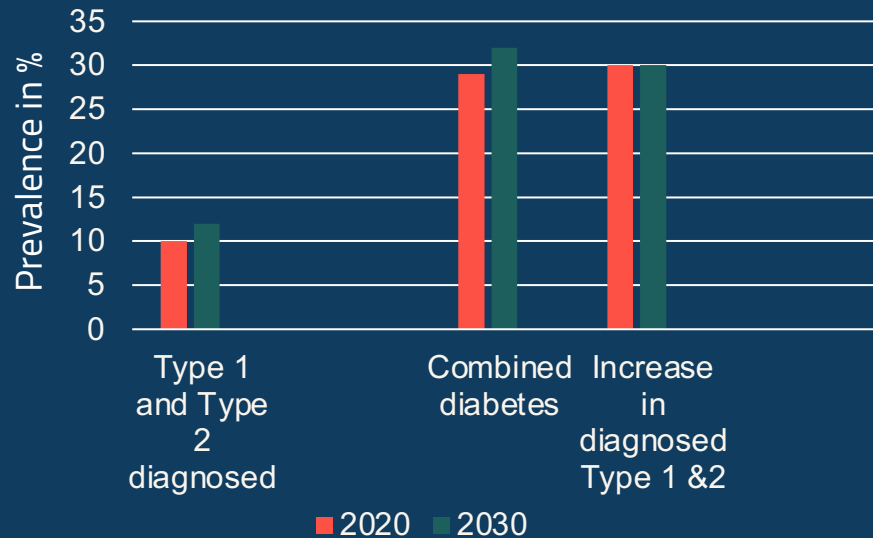


PREDIABETES

Condition where the blood glucose level is higher than normal, but is ineligible to diagnose as Type 2 diabetes



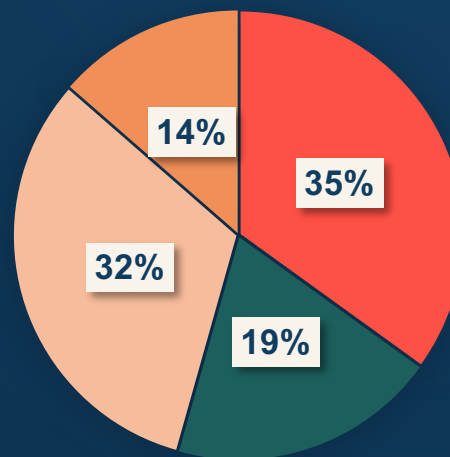
PREVALENCE IN CANADA



- Combined diabetes: Type 1+ Type 2+ undiagnosed Type 2+ prediabetes
- Estimated increase in Type 1&2 is 30% in 2030

Comparison between First Nations and Canadians

(both age 50)



- First Nations High Blood Pressure
- First Nations Diabetes
- Canadian High Blood Pressure
- Canadian Diabetes



CAUSES OF DIABETES DURING PREGNANCY



- In gestational diabetes, the pancreas supplies insufficient insulin to make energy available for body use
- Due to varying hormone levels that introduce many changes physiologically and psychologically, the body cells begin to use insulin inefficiently, which leads to insulin resistance
- Insulin resistance causes the blood glucose level to raise and increase need for further insulin
- Insulin resistance is common in late pregnancy, but women who enter their pregnancy with a higher insulin need are more likely to develop gestational diabetes





SYMPTOMS



Gestational diabetes does not have significant differing signs or symptoms. Some possible symptoms are:

- Increased thirst
- Increased urination
- Increased hunger

It is recommended to get tested to understand your risk of having gestational diabetes.



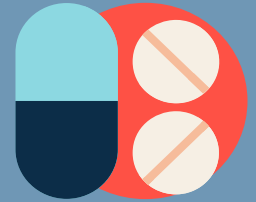


ASSOCIATED RISK FACTORS



Factors that will increase the risk of gestational diabetes are:

- Previous history of prediabetes
- Family history with diabetes
- Having Polycystic Ovary Syndrome (PCOS) or other diseases associated with insulin resistance
- High blood pressure, high cholesterol, or cardiovascular disease
- Previous delivering large baby (weighting greater than 9 pounds)
- Physically inactive
- Having gestational diabetes in previous pregnancy
- Overweight or obese





ISSUES OF DIABETES DURING PREGNANCY



COMPLICATIONS FOR MOTHER

High blood pressure

Preeclampsia – serious pregnancy complication that puts both mother and baby at danger

Increased chances of C- section surgical delivery

Increased chances of future Type 2 diabetes

COMPLICATIONS FOR BABY

Large birth weight

Still birth

Early birth (preterm)

Respiratory issues

Low blood pressure

Increased chances of chronic illness like obesity and Type 2 diabetes





PREVENTION OF DIABETES DURING PREGNANCY



Have nutritious balanced meals by consuming adequate fruits, vegetable, fibre, whole grains, low fat, etc

Being physically active by aiming to exercise for 30 minutes of moderate activity for 3-5 days

Start pregnancy at healthy weight

Monitor blood glucose levels frequently





NUTRITIONAL TIPS FOR PREGNANCY



- Establish healthy eating habits by consuming a variety of nutritious foods that contains low sodium, low sugar, replace saturated fats with healthy fats (Omega-3 fatty acids).
- No skipping of meals and snacks. Consume 3 small- moderate-sized along with one or more snacks each day. Maintain consistent amount and types of food (carbohydrates, fats, and proteins) to keep your blood sugar stable.
- Consume fish that are low in mercury , choose healthy snacks (mixed fruit, granola) and drinks (water, milk, fortified plant-based milks)
- Consume daily multivitamin, especially 0.4mg folic acid everyday. During pregnancy, consume 16-20 mg iron as part of daily multivitamin

NUTRITION TIPS CONTINUES.. **IRON**



IMPORTANCE IN PREGNANCY

- Required for red blood cell production
- Body's requirement for iron increases as the baby develops
- Increased blood production for supplying oxygen and nutrients to baby

SYMPTOMS OF LOW IRON

- Headaches
- Dizziness
- Fatigue
- Shortness of breath
- Pale skin
- Weakness

MAINTAIN IRON LEVELS

- Eat iron rich foods
- To increase iron absorption, consume Vit A&C together with iron-rich foods. Limit cheese, coffee, and tea
- Use prenatal vitamins

SOURCES

Animal (Heme iron): steak, salmon, eggs
Plant (Non-Heme iron): lentils, almonds, kale





**GET
INVOLVED**

COMMUNITY RESOURCES

- Healthy Baby Programs. For more information, visit <https://healthyparentingwinnipeg.ca/community-resources-for-families/>
- Healthy Start for Mom and Me. Contacted by [204-949-5350](tel:204-949-5350) or email at hsmm@hsmm.ca.
- Healthy Parenting Winnipeg. For more information, visit <https://healthyparentingwinnipeg.ca/finding-a-health-care-provider/>
- Dial-a-Dietitian at [t 204-788-8248](tel:204-788-8248) in Winnipeg or [1-877-830-2892](tel:1-877-830-2892).
- Health Links-Info Santé at [204-788-8209](tel:204-788-8209) (in Winnipeg); toll free [1-888-315-9257](tel:1-888-315-9257) (outside Winnipeg)
- Dad Central Canada



THANKS!



Do you have any questions?

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