



Feelings Faces



Angry



Confident



Confused



Fearful



Guilty



Happy



Pleased



Peaceful



Relieved



Sad



Satisfied



Shocked



Stressed



Surprised



Thoughtful



Worried





Gestational Diabetes — How to Have a Healthy Baby



(See separately packaged visuals.)



Native Americans and Gestational Diabetes

by Cindy L. Bochenski, (Sault Ste. Marie Tribe of Chippewa) RN, CDE

Susie Ellenwood, a Maternal-Child Health Nurse for the Nez Perce Tribe, had gestational diabetes, and now has diabetes. She urges pregnant women to get medical care right away when they find out they are pregnant.



■ What is gestational diabetes?

Gestational means pregnancy. Gestational diabetes is diabetes that only occurs when a woman is pregnant. It usually goes away once the baby is born. Women who develop gestational diabetes have a 90 percent chance of it happening with the next pregnancy.

■ What are some signs or symptoms I can look for?

There are no signs or symptoms of gestational diabetes. It is diagnosed by a blood sugar test. All Native

American women should be tested for gestational diabetes at their first prenatal visit. A blood sugar test should also be done again between 24 and 28 weeks of pregnancy and more often if needed.

■ What causes gestational diabetes?

The exact cause of gestational diabetes is unknown. It is believed that the extra weight gain during pregnancy and the hormones produced by the placenta (the organ that feeds the baby) may cause gestational diabetes.

Gestational diabetes develops when the woman's pancreas is unable to make enough insulin for her body and her baby's needs. Without enough insulin, too much sugar builds up in the blood and causes high blood sugar during pregnancy.

■ Why should I be concerned about gestational diabetes?

High blood sugar during pregnancy can cause problems for the mom and the baby. High blood sugar can cause the baby

to grow too big. A baby weighing over nine pounds is considered big. If the baby is too big for a vaginal delivery, then the mom may require a cesarean delivery.

■ **How can it affect my baby?**

During pregnancy, high blood sugar from gestational diabetes can cause the baby to be born with hypoglycemia (low blood sugar). Hypoglycemia, if not treated, can cause problems for the newborn. Other problems that may develop for the baby are jaundice and breathing difficulties.

■ **Besides my unborn baby, can gestational diabetes affect me?**

High blood sugar during pregnancy can cause problems for the woman. The most common problems are urinary tract infections and pre-eclampsia, which is high blood pressure and swelling of the feet, lower legs and hands. This condition is not good for the mom or the baby.

■ **Will controlling blood sugar help prevent problems?**

Controlling blood sugar during pregnancy can help prevent problems for the mom and baby. Most women can control their blood sugar by changing their diet and being more active. Healthy eating includes avoiding high-sugar foods and drinks; eating small, frequent meals; eating at regular times, and eating well balanced meals.

■ **Will I need to take insulin shots?**

Some women with gestational diabetes may need to take insulin shots to control their blood sugar. Insulin cannot be taken in a pill. Insulin shots will not harm the baby or the mother. Balancing food, exercise and insulin can help keep the blood sugar in a normal range.

■ **Is there any activity I can do while I am pregnant?**

Walking is a safe way to exercise during pregnancy. Walking 20 or 30 minutes a day will help the woman's insulin work better and lower blood sugar levels.

■ **Will gestational diabetes go away after my baby is born?**

Over half the women who develop gestational diabetes will develop type 2 diabetes later in life. Women who have developed gestational diabetes should get a yearly blood sugar test. Women can lessen their risk for developing gestational diabetes by maintaining a healthy weight before pregnancy, eating good foods before and during pregnancy, walking daily and getting prenatal care early.

Susie Ellenwood looks at a photo of daughter Likesa.





Diagnosing Gestational Diabetes



**You had a blood test to find out if you have gestational diabetes.
Your test results are:**

Normal Test Results

Your Results

Fasting blood sugar
less than 95

Blood sugar at 1 hour
less than 180

Blood sugar at 2 hours
less than 155

Blood sugar at 3 hours
less than 140

You have:

- Gestational Diabetes:** 2 or more blood sugar numbers are higher than normal

- Impaired Glucose Tolerance of Pregnancy (also called Gestational Carbohydrate Intolerance):** 1 blood sugar number is higher than normal

- Normal Test Results**





Target Blood Sugar Goals for Pregnancy



Fasting	60-90 mg/dl
1 Hour After a Meal	100-140 mg/dl
2 Hours After a Meal	100-120 mg/dl

Blood sugar goals are for whole blood glucose.





Victoria Dawahoya (Pima) had diabetes when she was pregnant with Erica. She took care of herself and had a healthy baby.

So Many Blessings

by **Victoria Dawahoya (Pima)**

I stand in my kitchen, surrounded by my three children. I am making baked fry bread. The children help me stir the pot of low-fat beans. My eldest son sets out bowls of shredded chicken, lettuce and tomato. I stop and think for a moment. I have three children! Three happy, healthy children! For many women, having children is a blessing, and a blessing you can count on. But when you have gestational diabetes, you may be worried and scared. Gestational diabetes means having diabetes when you are pregnant.

I had gestational diabetes when I was pregnant with my second child. After the birth, I was told I had diabetes. Then I became pregnant with my third child. These two pregnancies were filled with emotional ups and downs. I was thrilled to be pregnant, yet scared of insulin shots. I was looking forward to my babies' births, yet didn't know what the future had in store.

Those were scary times. I wanted to have joyful pregnancies. Instead I found myself worried about everything. Now my children are older. They are 10, 6 and 2. They are so healthy! I did it! I had healthy pregnancies. I want to help other women who have diabetes and plan to get pregnant. I want to share my story so others can have healthy babies. Maybe my story will take away a little worry, and replace it with joy.

An early warning

Like many people from my tribe, the Pima, I was at high risk for diabetes. My father, mother, aunts, and uncles have diabetes. I thought that I might get diabetes, but didn't worry too much. My first child, Ruben, was born ten years ago. I didn't have gestational diabetes with my first pregnancy.

Four years later, I became pregnant again. During my third trimester, I was told that I had gestational diabetes. I had two feelings—shock and denial. I was surprised, but I thought it wasn't very serious. I didn't know much about gestational diabetes. I only knew that I could give birth to a big baby.

I learned how to keep my blood sugar under control. I changed my diet. I cut back on portion sizes. I cut out sugary pop. I walked three to four times a week. I checked my blood sugar four to six times a day.

Fears about insulin

Next came another shock. I was told I had to take insulin. Right away I thought about my grandmother. She took insulin. She was blind, got ulcers on her legs, and was on dialysis. I thought that if I took insulin, I would have the same problems. I thought insulin led to blindness or dialysis! I thought insulin was a bad thing, and would cause the end of my life!

My health care provider helped calm my fears. I learned that insulin is a good thing. It would bring my blood sugars down to normal levels quickly. It

would stay in my body only for a while. Insulin would be healthier for my baby, and I didn't have to fear that a part of my body wasn't working.

I was scared to give myself the shots. I was afraid I would hit a vein. I thought I might give myself too much or too little insulin. But, I learned to give myself the shots. Some people say that they don't hurt, but for me, they hurt! I kept telling myself, "I am doing this for my baby."

And it worked! I gave birth to a seven-pound, eight-ounce baby boy! I was so happy!

Old habits return

Right after my baby was born, I quit being active and eating right. I knew that having gestational diabetes meant I was at greater risk for developing diabetes later in my life. Maybe if

I had kept up my good habits, my story with diabetes would have ended with the birth of my son. But my unborn baby was the only reason I made those good changes. Once he was born, my reason for taking good care of myself disappeared. When I was pregnant and taking good care of myself, I kept saying, "I'm doing this for my baby." I should have said, "I'm doing this for my baby and for myself."

Three years later, I began having irregular menstrual cycles. I also kept getting urinary tract infections and yeast infections that I couldn't get rid of. At age 33, with two children, I found out I had type 2 diabetes.

Back on track

I was so mad at myself! I knew I should have kept up the good habits! So, I started

Victoria Dawahoya learned new eating habits while she was pregnant. She passed them on to her whole family — her husband Ruben and children Ruben, Erica and Nathaniel.



again. I stopped eating fried food. I ate less sweet food. I started eating my big meal at lunch and a smaller meal in the evening. I did aerobics twice a week and weight training three times a week. I was making changes for myself to control my blood sugar.

Two months later, I had a big shock. I was pregnant! I had diabetes and I was scared. I knew I would have to take insulin during my pregnancy. My emotions were mixed up. I was so happy to be pregnant. Yet I knew that being pregnant with diabetes is very serious. That is why it was so important to have my blood sugar in control. I was determined to keep my healthy habits, this time for my baby and for myself.

Helping each other

My husband gave great support. He went with me to my medical appointments. He learned how to give me insulin shots. When I wasn't feeling well, he gave me the shots. His support brought us closer.

With this pregnancy, I was more confident. I carefully watched what I ate. I knew that what I put in my mouth was connected to my baby. I took my blood sugar readings four times every day. I had good blood sugar levels: 60-90 in the morning, before eating, 100-120 after lunch and dinner.

Reflecting on the good

On August 3, 1999, I gave birth to a six-pound, three-ounce, healthy girl! I was thrilled that

I had a healthy pregnancy, even with diabetes. And, I was determined to keep my new habits. I decided to do it for me first, then for my children. I want to give my children memories of a healthy mother. I want to live a long time.

Sometimes it is a struggle to stay on track. It is different when I don't have a baby inside of me. I am changing my lifestyle little by little. I prepare low-fat and low-sugar food for my family. I try to be active every day. Even though I had two difficult pregnancies, I learned a lot. I developed new habits that I am keeping. My children are learning about good habits. Maybe they will not get diabetes. That thought makes my struggle worth it!





Changes I Can Make



I am:

- Thinking about it
- Ready to start
- Doing it now
- Doing it for 6 months

My long-term goal is:

My short-term goal is: (Be specific about what, when, how and where)

I will ask (Who?) _____ for support by helping me in this way:
(Be specific about what they can do to help you)

I will check regularly to see if I reach my goal by:

When I reach my short-term goal my reward will be:

Signature

Date

