Dear Dr. _____:

It has been a pleasure caring for Ms. _____, DOB, _____ during her pregnancy. As you recall, she was followed in the Diabetes and Pregnancy Program for Gestational Diabetes. Because all women with GDM have an increased lifetime risk for developing overt diabetes (type 2 DM) or prediabetes, we recommend the following:

- After delivery, she should continue to check her blood sugars for 1-2 weeks as she did during her pregnancy. If she has more than 3 fasting blood sugars > 99 in a week or 6 postprandial blood sugars > 139 in a week, she should be evaluated for continued glucose intolerance.

- Within 6-12 weeks postpartum, she should have a 2 hour-75 gm OGTT which includes a FBS and 2 hour post glucose load. **If the test is normal (FBS < 100 mg/dl <u>and</u> 2 hour < 140 mg/dl), she should be tested again at 12 months postpartum with a 2 hour 75gm OGTT and Lipid Panel. If these test results remain normal, they should be repeated every three years.**[1]

- If either part of the OGTT test is **abnormal**, she should be **referred for further follow-up** with her internist. Women diagnosed with **pre-diabetes (See Table A)** should be referred for diet, exercise and sometimes metformin, as this insulin sensitizer has been found to be effective in preventing type 2 diabetes in women with previous GDM.[2] For women with abnormal OGTT result, she should be followed up **every year with 2hr OGTT and a lipid panel** while still in the childbearing stage of life. Her risk for developing GDM in a subsequent pregnancy is ~65%.[3] She should be tested for diabetes at her first prenatal visit whenever pregnant.

We have provided Ms._____ with a lab slip for the **<u>75 gram 2 hour OGTT to be obtained by her 6 week postpartum check up.</u>** If you have questions, please call us.

Sincerely,

Table A: Diagnostic testing for overt diabetes and prediabetes outside of pregnancy

Category	A1c	FBS	2h	Follow-up
Normal	**≤ 5.6%**	**≤ 99 mg/dL**	**≤ 139 mg/dL**	Repeat OGTT with lipid panel at one year, then every 3 years
Prediabetes	**100 – 125mg/dL** (IFG) Impaired fasting glucose **<u>and/ or</u>** **2hr value:140- 199mg/dL** (IGT) Impaired glucose tolerance **or** **A1c 5.7-6.4%***			Refer to Internist / Diabetes Services Repeat OGTT and lipids every year *Not Valid with hemoglobinopathies, not tested for validity in the first 3months postpartum
Diabetes	**≥ 6.5%***	**≥ 126 mg/dL**	**≥ 200 mg/dL**	Refer to Internist / Diabetes Services

Table adapted from ADA Diagnosis and Classification of Diabetes. Diabetes Care. 2010;31(Suppl 1).

References:

1. *ACOG Committee Opinion Number 435*: Postpartum Screening for Abnormal Glucose Tolerance, June 2009.
2. Ratner R. Prevention of Type 2 Diabetes in Women with Previous Gestational Diabetes. Diabetes Care. 2007;30(Suppl 2).
3. Spong CY; Guillermo L; Kuboshige J; Cabalum T. Recurrence of gestational diabetes mellitus: identification of risk factors. Am J Perinatol. 1998;15(1): 29-33.

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