Diabetes focus

**“Practice nurses should know about diabetes in pregnancy”**

Obesity in the UK is rising to epidemic levels, with reports suggesting that, by 2025, four out of 10 people in the UK will be obese. Rising obesity is linked with an increase in adults with type 2 diabetes.

There has been a notable rise in obesity in women of childbearing age and certain minority ethnic groups, including people of Afro-Caribbean, South Asian, Middle Eastern and Chinese origin.

The National Institute for Health and Clinical Excellence has noted that there are 650,000 births in England and Wales each year, and 2-5% of pregnancies involve women with diabetes, of which 0.4% is type 2 diabetes (NICE, 2008).

Women with type 2 diabetes have higher risks of adverse pregnancy outcomes, including congenital abnormality, and maternal hypertension than the general population; they are more likely to have a Caesarean section and instrument-assisted birth. Their offspring are more likely to be admitted to neonatal or special care, and become obese as a child and adult, putting them at risk of developing type 2 diabetes.

Care for people with type 2 diabetes, including women of childbearing age, is predominately provided by GPs and practice nurses. This care may need to be adjusted in those at the start of a pregnancy to reduce or prevent adverse outcomes. Women with type 2 diabetes should be offered preconceptual care and counselling similar to that given to those with type 1 diabetes so they can start pregnancy in optimal health with their diabetes well controlled.

Nurses should advise women with type 2 diabetes on how pregnancy may affect their condition and vice versa. Treatment regimens may need to be adjusted to meet the requirements of pregnancy. For example, if their condition is controlled by diet and oral medication, they may need insulin.

Early referral to specialist care for assessment is essential so conditions that require the expertise of the combined diabetes, obstetric, nursing and midwifery multidisciplinary team can be identified.

Nurses working in primary care have an opportunity to identify women with type 2 diabetes who may be contemplating or who are in the early stages of pregnancy, and to tailor their care. As well as helping prevent adverse pregnancy outcomes and reducing maternal and neonatal mortality and morbidity, nurses can play a crucial role in promoting the future health and wellbeing of mothers and their children.

Primary care nurses should be given the chance to develop and improve their skills in caring for this specific group of women. This will not only improve their care, but also enable them to have a positive pregnancy and birthing experience.

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