**Gestational diabetes mellitus (GDM)-妊娠糖尿病診斷及治療流程**

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If not met target, Lifestyle modifications + Medications Treatment (insulin\* as first line, metformin or glyburide can be considered)

Lifestyle modifications

Target:

* FG < 95 mg/dL
* PG 1-hr < 140 mg/dL
* PG 2-hr < 120 mg/dL

Non-diabetic pregnant woman

Gestational diabetes mellitus

All normal values

≥ 1 abnormal values:

* FG ≥ 92 mg/dL
* 1-hr ≥ 180 mg/dL
* 2-hr ≥ 153 mg/dL

All pregnant women

Fasting glucose and HbA1c

(first visit to prenatal care at 1st trimester)

FG<126 mg/dL or HbA1c<6.5%

rule out preexisting diabetes mellitus

FG <100 mg/dL or HbA1c <6 %

75g GTT (24 - 28 weeks)

FG <100 mg/dL or

PG 2-hr< 140 mg/dL

Accept screen of DM

per 1-3 years

Confirmed diabetes mellitus

Pre-diabetes mellitus

FG≥ 126 mg/dL or

PG 2-hr≥ 200 mg/dL

FG 100-125 mg/dL or

PG 2-hr≥ 140-199 mg/dL

Normal

Lifestyle modifications and accept screen of DM annunally

Treatment as diabetes mellitus

75g GTT after 6-12 weeks

Postpartum woman with GDM

\*FDA Pregnancy Risk Categories of Insulin:

|  |  |  |
| --- | --- | --- |
|  | Prandial insulin | Basal insulin |
| Human | Regular insulin(RI) [B] | Neutral protamine Hagedorn (NPH) [B] |
| Analogue | Insulin aspart [B]  Insulin lispro [B]  Insulin glulisine [C] | Insulin detemir [B]  Insulin glargine [C] |