

Gestational diabetes – IADPSG vs NICE diagnostic dilemmas

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Introduction:

Gestational diabetes is testing the resources and service capacity of DGH around the UK. Despite the clear evidence that glucose intolerance in pregnancy has both short and long term consequences for both mother and baby there is still a lack of overall consensus for diagnosis.² Our service uses the outcome based IADPSG criteria.³

Methods:

We performed a retrospective audit of women diagnosed with gestational diabetes (n= 383, mean age 32.5yr) attending antenatal services within our Trust in Northern Ireland. This was mainly a white Caucasian population. Data was collected on baseline characteristics and outcomes including delivery, birth weight and neonatal complications. We also identified the subgroup of our patients diagnosed as GDM with IADPSG criteria who would have been 'non-diagnostic' by NICE diagnostic criteria i.e. fasting plasma glucose <5.6 mmol/l +/- 2-hour glucose <7.8mmol/l.¹

Results:

Of our total 383 patients 181 would have missed detection with NICE criteria (47%). These patients were significantly heavier at booking (almost 7kg), which was sustained until delivery. Of this subgroup 80 women required metformin and 26 treatment with insulin (+/- metformin) to achieve NICE targets. This was comparable to the subgroup classified as GDM by NICE. There was no significant difference between outcomes in both.

Conclusion:

Although comparable outcomes were achieved with our subgroups of patients with GDM it was notable that >50% of those 'NICE non-diagnostic' women required medication to achieve blood glucose control.

References:

1. National Institute for Health and Care Excellence (2015) Diabetes in Pregnancy: management from preconception to the postnatal period. NICE guideline (NG3)
2. Duran, A. Saenz, S, Torrejon, M. Bordiu, E. Del Valle, L. Gallindo, M. et al. 'Introduction of IADPSG Criteria for the Screening and Diagnosis of Gestational Diabetes Mellitus Results in Improved Pregnancy Outcomes at a Lower Cost in a Large Cohort of Pregnant Women: The St. Carlos Gestational Diabetes Study. *Diabetes Care* 2014 Sept; 37(9): 2442-2450.
3. Metzger BE, Gabbe SG, Persson B, et al, International Association of Diabetes and Pregnancy Study Groups Consensus Panel. International association of diabetes and pregnancy study groups recommendations on the diagnosis and classification of hyperglycaemia in pregnancy. *Diabetes Care* 2010; 33:676-682.