COMPARISON OF PREGNANCY OUTCOMES BETWEEN MOTHERS DIAGNOSED WITH AND WITHOUT GDM IN SRI LANKAN SETTING

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INTRODUCTION AND OBJECTIVE: Gestational diabetes mellitus(GDM) causes short and long term morbidity to mother and offspring. Evaluating the burden of adverse pregnancy outcomes associated with GDM is important for optimizing provision of clinical care for pregnancies complicated by GDM. **DESIGN AND SETTING**: Prospective cohort study among pregnant women with and without GDM diagnosed at field clinics in MOH areas of Gampaha District in Sri Lanka METHOD: Pregnant women with GDM were identified in a community based cross sectional study using fasting 75gOGTT and WHO1999 criteria(n=194). Consecutive women detected with GDM were followed up concurrently with a comparable control group(normal OGTT) from the same community. Pregnancy outcomes of both groups were assessed one month postpartum using interviewer administered questionnaire. RESULTS: GDM= 168(of 194) and Controls = 179(of 194) participated GDM versus. Controls: Maternal outcome - Pregnancy induced hypertension 32(19%) vs. 11(6.1%)(p0.0001, RR3.594 95%Cl 1.747 -7.393); operative delivery 92(26.6%) vs. 72(20.8%)(p=0.007, RR1.175 95%Cl 1.799- 2.755). Fetal outcome- Still birth 4 vs none; congenital heart disease 4 in each group; preterm delivery(37 weeks) 7.5% vs. 5.8%(p=0.269). Birthweight 3.5kg in singleton pregnancy 8.8% vs. 3.8% (p=0.003, RR1.407, 95% CI 2.803 - 5.586); neonatal death 2 vs. 1 (p=0.511). Neonatal complications and SBCU admission rates were similar. CONCLUSION: Sri Lankan women detected with GDM at field clinics have significantly higher incidence of adverse pregnancy outcomes compared to normoglycaemic mothers. Funding: MRI and NirogiMaatha Project funded by WDF