

# **Maternal and Fetal Outcomes of Mothers with Gestational Diabetes Mellitus: A Retrospective Study**

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## **Abstract**

### **Introduction**

As per the World Health Organization (WHO), gestational diabetes mellitus (GDM) is defined as any degree of glucose intolerance with onset or first recognized during pregnancy. It is a common problem with prevalence varying from 2% to 22% of all pregnancies due to the use of different criteria for diagnosis. GDM constitutes 90%–95% of all cases of diabetes seen in pregnant women. There were controversies about screening, diagnostic tools, and glucose level threshold used as different organizations use different criteria, therefore we will follow our hospital's criteria for diagnosis in this study.

### **Aims**

The primary aim of the current study was to investigate maternal and fetal outcomes of mothers with gestational diabetes mellitus, and this study must be followed up in the future with more research to increase the awareness about gestational diabetes and its effects on both the mother and the child.

### **Material and Methods**

A descriptive retrospective design was conducted in this project. Data was collected from patients' historical file in hospital and central diabetic clinic in Northern of Palestine, Purposive sample was used, 48 women were enrolled to collect variables by using structured data sheet.

### **Result**

Data revealed that GDM patients are at risk for medical problems. According to the data collected from the sample the highest Maternal complications were “Missing abortion” (6/48(12.5%)) followed by “Oligohydroamnios” (3/48(6.25%)) and “Pregnancy induced HTN” (3/48(6.25%)), and the lowest scores were “Bleeding” (1/48(2.08%)) and “Pre-eclampsia” (2/48(4.17%)). While fetal complications varied from “Hypoglycemia” (6/48(12.50%)) and “Abortion” (6/48(12.50%)), followed by “Congenital anomalies” (5/48(10.42%)). “Neonatal intensive care unit admissions” (3/48(6.42%)), “Macrosomia” (3/48(6.42%)), and “Respiratory distress syndrome” (3/48(6.42%)), and the least frequent variable was “Hyperbilirubinemia” (2/48(4.17%)).

### **Conclusion**

GDM may be a contributing factor in maternal and fetal morbidities, but it's still not clear in this study if GDM is the main cause of the outcome or if there is any other contributing factor. We recommend further prospective studies to identify the relationship between GDM and fetal and maternal morbidities

**Key words**

GDM, Gestational diabetes mellitus, Fetal, Maternal