Health inequalities for women following a diagnosis of gestational diabetes

E. Vounzoulaki1, J.K. Miksza1, F. Zaccardi1, B.K. Tan2, M.J. Davies3, K. Khunti1 * & C.L. Gillies1 * (*Joint senior author)
1. Leicester Real World Evidence Unit, Leicester Diabetes Centre, Leicester General Hospital, Gwendolen Rd, LE5 4PW, Leicester, UK
2. 2. Department of Cardiovascular Sciences, University of Leicester, Leicester, UK
3. National Institute for Health and Care Research (NIHR) Leicester Biomedical Research Centre (BRC), Leicester General Hospital, Leicester, LE5 4PW, UK

Background

Gestational diabetes: A type of diabetes that first develops in pregnancy and disappears after giving birth, estimated to affect 1 in 20 pregnancies in the UK.

Burden on health: A diagnosis of gestational diabetes increases the risk of further physical and mental health related morbidity following pregnancy.

The issue: limited contemporary research on impact of gestational diabetes on long-term health, no evidence on health disparities and disease burden

Aim and Methods

To investigate differences by ethnicity and socioeconomic status in risk of recurrent gestational diabetes, type 2 diabetes, hypertension, and depression, in women with prior gestational diabetes mellitus.

Data: Previously collected UK patient data

Results

A total of 10,868 women with a history of gestational diabetes were included in the study.

Conclusions

What did we find?

• Risk of health complications following pregnancy complicated by gestational diabetes differs by ethnicity and socioeconomic status.

• We need to reconsider perceptions: Gestational diabetes- not a temporary condition, has a long-term impact on health.

What happens next?

› Need for further action to transform healthcare systems in order to reduce healthcare inequalities among this population.

› Findings can be actively disseminated with clinicians and policy makers and inform strategies to tackle health inequalities.