

RESEARCH ON NATURAL APPROACH TO PREVENTION OF GESTATIONAL DIABETES (IN PREGNANT WOMEN'S) AND IDENTIFY, NEW REMEDIES, REASONS,RISK FACTORS, OBSERVING, MONITORING BY INVOLVING DOCTORS OF PHARMACY

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Abstract

Gestational diabetes is usually defined as diabetes that develops or is first diagnosed during pregnancy. However, it can also be defined as “insulin resistance” or “carbohydrate intolerance” during pregnancy. Some natural remedies may help protect against gestational diabetes, a type of diabetes that starts or is first diagnosed during pregnancy. Occurring in three to eight out of every 100 pregnant women in the Indian. gestational diabetes can increase your risk of having a large baby and needing a cesarean section at delivery (as well as raise your risk of developing type 2 diabetes later in life).. In a 2016 study of 67 women with gestational diabetes and 260 without a gestational diabetes diagnosis, as researchers found that low vitamin C levels were linked to an increased risk of the disease. It is not known whether supplementing with vitamin C may help lower gestational diabetes risks and .Running low on vitamin D may raise your risk of gestational diabetes, according to a 2016 study of 171 pregnant women (including 57 with gestational diabetes). Among those who developed gestational diabetes. Because gestational diabetes may cause a number of serious complications (such as increased risk of high blood pressure during pregnancy and low blood sugar or illness in the newborn). Gestational diabetes usually has no symptoms. The recommended test for glucose is after 24 weeks of pregnancy. The glucose test is not a direct indicator of gestational diabetes. Here are some tips on how to treat gestational diabetes naturally at home that will help pregnant mothers deal with this disease:. 1. Scheduling Your Diet2. Eating Simple Breakfast3. Doing Exercise4. Eating Protein, Vitamin D, Vitamin C Foods5. Implementing A Sugar-Free Diet6. Practicing A High-Fiber Diet7. Using Astragalus . and A 10 year study of over 14,000 women and 20,136 eligible pregnancies, tracked the health status of each woman’s lifestyle.Of those 20,136 pregnancies, there were 823 cases of gestational diabetes. The study found the single highest risk factor for gestational diabetes was being overweight (a pre-pregnancy BMI of 25 or over). These women had an almost four times higher risk of developing gestational diabetes than women with healthy BMIs. The study also found an increased risk of gestational diabetes for those at the higher end of the normal BMI range (23 – 24.9).so my aim is to prevent and by not taking drugs and depends on life style modifications challenges under process in Vijaya krishna Hospital and kaminani Hospital by the help of physicians.

Keywords:

INSULIN RESISTANCE, GESTATIONAL DIABETES, COMPLICATIONS, BMI NATURAL TREATMENTS.

INTRODUCTION

Gestational diabetes is usually defined as diabetes that develops or is first diagnosed during pregnancy. However, it can also be defined as “insulin resistance” or “carbohydrate intolerance” during pregnancy.. I prefer to rely on the latter description because, at the end of the day, gestational diabetes is the result of insulin resistance, which means a woman is unable to tolerate large amounts of carbohydrates without experiencing high blood sugar. Technically all women experience some degree of insulin resistance during pregnancy as it's a natural metabolic shift that serves to shunt glucose and nutrients to a growing baby.[1] This means, even if you haven't been diagnosed with gestational diabetes, it's helpful to understand how and why your metabolism changes during pregnancy (and how certain dietary changes can help ensure the health of your baby).



DISCUSSIONS ABOUT GESTATIONAL DIABETES IN PREGNANT WOMEN PATIENTS

*23 /4/15 HB =9GMS, HBS AG, VDRL Negative, sliuf - 8, cervix =3.1gms, eoq - 2/12/15

*21/5/15 SLIUF 12 +6, CERVIX =3.1CM, EOQ =27/11/15

*8/6/15 TYPHOID O+1:160

H +1 ;80, AH AND BH NEGATIVE

*20/7/15 HG =10.9%,ALBUMIN +, PC 10 - 12 EC, 3-5, FBS 85 Mg /dl, PLBS =135 Mg/dl, BT =3MIN, CT =5,45 MIN

*21/8/15 HB =11. 5 GMS, TSH =1.65, UIU/ML

*19/9/15 HB - 9.8 GMS, RBS 120MG /DL

CLINICAL STUDY OF PATIENTS ABOUT GESTATIONAL DIABETES

*29sep 2015

Bp 110/80 mg, temp (n), height 14.8 cm, weight 60 kgs

Lmp 19/2/15, eod - 26/11/15, pog 31±5

*a 25 yrs old -g4p14a2 at 31+5 of gestational with previous lscs came for 1st time for anc check up, she had regular anc check up at for our hospital, hyderabad.

1st pregnant 2010 - ft/lscs/male 5yrs /alive and healthy /birth wt 2.7 an and pn.

2nd pregnant 2011 - induced abortion at 2months of gestational unwanted area, d and e done, h/o t insertion, following 2nd pregnant for 2 1/2 yrs.

3rd pregnant induced 2014 abortion at 3monyhs un wanted area d and e done

4th pregnancy conceived spontaneously preg confumed upt and scan.

1st tri - h/o vomiting relieved by medication, no history of spotting p/v, tablet folic acid taken.

2nd trimester - quickening at 5th month, injection taken, t. Iron and calcium, taking daily

3rd trimester - she was diagnosis as having anemia at 28 was of gestational

Advanced injection orfer 5iv pt did not take it Mih - regular, 3-4days, normal flow, no dysmonnorhia, Past history - no dm, htn, tb, asthma. A febrile condition, no pallor.

*13 oct 2o15

Bp 100 /70 mm/hg

Complaints - - g4p14a2 at 33which 33+5 previous issues anaemia

For follow up decreases the fetal movements since 3 - 4 days, burning micturation, pain at suture site since 2-3days.

Examination - a febrile, pallor, - pr 80min, bp 110/80 mmhg,

Treatment - t. Orfer xt, t. Calcimar 500 mg

*14 october 2015

Bp 100/70 mmhg, weight 60kg,

Examination - fbs 115, 1st hr 228, 2nd hr 205, 3hr - 193

Treatment - diabetology consultation, diabetic diet, continue iron, calcium,, d protein in powder with milk, tablet taxim 200 mg after food taken, tab rantac before foods.

*24 october 2015

Bp 80/60 temp(n), weight 61 kg

Compliants - follow up the previous day, fetal movement good, no compliants,

Examination - a febrile, pallor -, pr 80 min,

Temperature tab orfer, tab calcimar.

*30 october 2015

Bp 100 /60 mm hg, mild anaemia, fetal movements good, no other complaints,

Examination - a febrile, pallor, pr 88/min

Treatment - tab orfer, tb shelcar, dfmc

*6 november 2015

Bp 100 /80 temperature(n)

Weight 60 kg

Compliants - backache since morning 5am

Treatment - t. Orfer xt, t. Calcimax,

*7 november 2015

Compliants - back pain, pain at scar site, decreases the fetal movement,

Examination - a febrile, no pallor, bp 90/70 mm /hg
 Treatment - inj busciopan

*10 november 2015

Bp 100/70, temperature(n)
 Chief compliants - tight ness, a febrile,
 Treatment - orfer xt, shelcal

*19 november 2015

Bp 110/70
 No complaints
 Treatment - orofer xt, calcimax

*26 december 2015

No history itching foul smelling, no burning micturation
 Complaints - a febrile,, pr 82 /min
 P/a soft transverse scar +
 P/s drawn up vagina +
 Treatment - tab orfer xt, tab shelcal, physical activity,

CLINICAL LABORATORY DATA IDENTIFY NEW APPROACHES

CLINICAL HEMATOLOGY REPORT				
SPECIMEN :Blood (EDTA)		COMPLETE BLOOD PICTURE		
TEST DESCRIPTION	RESULT	UNIT	BIOLOGICAL REFERENCE	MEET
HAEMOGLOBIN	12.2	gm/dl	INTERVALS (M) 14.0-18.0 (F) 12.0-16.0 (CHILD) 11.0-13.0 New Born 17.0-22.0	Color
PCV	36.6	VOL%	(M) 40-52 (CHILD) 31-43 (F) 37-46 (M) 47-61	Calc
RBC Count	4.39	mill./Cu mm	(CHILD) 4.6-4.8 (F) 4.2-5.4	Imp
TOTAL COUNT	12900	Cells/Cu.mm	4000 - 10000	Imp
DIFFERENTIAL COUNT:				
NEUTROPHILS	86	%	40-75 %	Ligh
LYMPHOCYTES	13	%	20-45%	Ligh
EOSINOPHILS	01	%	01-06%	Ligh
MONOCYTES	0	%	02-10%	Ligh
BASOPHILS	0	%	00-01%	Ligh
PLATELETS	1.5	laks/cu.mm	1.5 - 4.0	Imp

In This Report Neutropils Report Is Abnormal

Time	Wt	Sugar	...	...	...
25 = 1	88	107	...	...	...
45 = 1	80	108	...	...	...
20 = 1	89	124	...	...	...
45 = 1	85	120	...	...	...
10 = 1	88	108	...	...	...
30 = 1	105	104	...	...	...
30 = 1	89	104	...	...	...
10 = 1	85	97	...	...	...
42 = 1	88	90	...	...	...

CLINICAL BIOCHEMISTRY REPORT

GLUCOSE TOLERANCE TEST (EXTENDED)

SPECIMEN PLASMA & URINE, TEST DESCRIPTION	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL	METHOD
FASTING PLASMA GLUCOSE	115	mg/dL	60 - 100	GGT FGD
FASTING URINE SUGAR	NL			
AFTER INTAKE OF 75/100 gms OF GLUCOSE				
1 HOUR PLASMA GLUCOSE	228	mg/dL	LESS THAN 180	
CORRESPONDING URINE SUGAR	++			
2 HOUR PLASMA GLUCOSE	205	mg/dL	LESS THAN 135	
CORRESPONDING URINE SUGAR	+++			
3 HOUR PLASMA GLUCOSE	231	mg/dL	LESS THAN 140	
CORRESPONDING URINE SUGAR	+++			

Daily diabetic chart and glucose tolerance examination.

FBS < 100 RBS < 180

Date	FBS	RBS O	FBS L	RBS L	FBS D	RBS D
15-05-15	104	164				
16-05-15	107			139		
17-05-15	112					
18-05-15	92/94	145/164				
19-05-15	91	156		130		
20-05-15	96	154				144
21-05-15	80	104				122

FBS < 100

DIABETIC CHART
BLOOD GLUCOSE-INSULIN CHART

NAME: A. RAJENDRAN

Date	FBS	RBS	FBS L	RBS L	FBS D	RBS D	Notes
15-05-15	104	164					
16-05-15	107			139			
17-05-15	112					145	
18-05-15	94	145					
19-05-15	91			130			
20-05-15	96					144	
21-05-15	80	104					
22-05-15	81			136			
23-05-15	85					122	

DEPARTMENT OF OBSTETRICS AND GYNAECOLOGY
NONSTRESS TEST

NAME OF THE PATIENT : Rajeshwari
AGE : 25
GRAVIDA : 2
PARA : 1
PERIOD OF GESTATION : 37 + 2
LMP : 19/2/15
EDD : 26/11/15
RISK FACTORS : -
DURATION OF NST : 20 min

NST PARAMETERS		NORMAL VALUES
BASELINE FETAL HEART RATE:	150	110-150bpm
BEAT-TO-BEAT VARIABILITY :	>5	05-25bpm
NO.OF ACCELERATIONS :	>2	> 2 in 20min
NO.OF DECELERATIONS :	NIL	NIL
IMPRESSION :		
FURTHER ADVICE :		

Daily foods chart for gestational diabetes. Patients

CLINICAL HEMATOLOGY REPORT COMPLETE BLOOD PICTURE				
SPECIMEN :Blood (EDTA)				
TEST DESCRIPTION	RESULT	UNIT	BIOLOGICAL REFERENCE	METHOD
HAEMOGLOBIN	10.6	gm/dl	INTERVALS (M) 14.0-18.0 (F) 12.0-16.0 (CHILD) 11.0-13.0 New Born 17.0-22.0	Colorimetric
PCV	30.7	VOL%	(M) 40-52 (CHILD) 31-43 (F) 37-46	Calculation
RBC Count	3.74	mill./Cu.mm	(M) 4.7-6.1 (CHILD) 4.6-4.8 (F) 4.2-5.4	Impedance
TOTAL COUNT	10200	Cells/Cu.mm	4000 - 10000	Impedance
DIFFERENTIAL COUNT:				
NEUTROPHILS	78	%	40-75 %	Light Microscopy
LYMPHOCYTES	18	%	20-45%	Light Microscopy
EOSINOPHILS	04	%	01-06%	Light Microscopy
MONOCYTES	0	%	02-10%	Light Microscopy
BASOPHILS	0	%	00-01%	Light Microscopy
PLATELETS	1.60	lakhs/cu.mm	1.5 - 4.0	Impedance

DATE	FBS	POST B	PRE L	POST L	PRE D	POST D
06-0-15	83	Chaplin-1 120	115	115	115	2-pulse
09-0-15	81	120	Rice, Dal		115	2-pulse, 91
05-11-15	75	91				
06-11-15	91					
07-11-15	86	Idly-3	Rice, Dal	126	115	2-pulse
08-11-15	77	Chaplin-1 120	115		115	119
09-11-15	80	106	115	115	115	
10-11-15	86	120	115		115	
11-11-15	81					
12-11-15						

NATURAL APPROACH TO GESTATIONAL DIABETES

Remedies For Gestational Diabetes

Some natural remedies may help protect against gestational diabetes, a type of diabetes that starts or is first diagnosed during pregnancy. Occurring in three to eight out of every 100 pregnant women in the Indian, gestational diabetes can increase your risk of having a large baby and needing a cesarean section at delivery (as well as raise your risk of developing type 2 diabetes later in life).

In addition to receiving regular prenatal care, you may be able to boost your defense against gestational diabetes by using certain natural remedies.

Natural Remedies for Gestational Diabetes

While no type of natural remedy has been proven effective against gestational diabetes, there's some evidence that the following treatments may offer some protection against the condition. Make sure to talk to your doctor before you begin using any type of alternative medicine during pregnancy.

Vitamin D

Running low on vitamin D may raise your risk of gestational diabetes, according to a 2016 study of 171 pregnant women (including 57 with gestational diabetes). Among those who developed gestational diabetes, vitamin D levels were significantly lower (compared to study members who were free of gestational diabetes). However, the use of vitamin D supplementation as a means of reducing gestational diabetes risk has yet to be proven effective.

Vitamin C

In a 2016 study of 67 women with gestational diabetes and 260 without a gestational diabetes diagnosis, as researchers found that low vitamin C levels were linked to an increased risk of the disease. It is not known whether supplementing with vitamin C may help lower gestational diabetes risk



Astragalus

Preliminary research suggests that the herb astragalus may hold promise in the treatment of gestational diabetes. In a 2016 study of 84 pregnant women with gestational diabetes, those who received treatment with both insulin and astragalus showed greater improvements in blood sugar control and levels of blood fats (compared to those who only received insulin). However, since the use of herbs may lead to adverse effects during pregnancy, it's crucial to consult your physician before using any type of herbal supplement in treatment or prevention of gestational diabetes.

Caveat

It's important to keep in mind that supplements haven't been tested for safety and dietary supplements are largely unregulated. In some cases, the product may deliver doses that differ from the specified amount for each herb. In other cases, the product may be contaminated with other substances such as metals. Also, the safety of supplements in pregnant women, nursing mothers, children, and those with medical conditions or who are taking medications has not been without consequence. There are several factors in the development.

Gestational Diabetes: Recommended Foods



WHAT HAPPENS WHEN THE PATIENT USING Natural Remedies for Gestational Diabetes

If you're considering the use of any type of natural remedy or alternative therapy to manage or prevent gestational diabetes, talk to your doctor about choosing a treatment that suits your health needs. Because gestational diabetes may cause a number of serious complications (such as increased risk of high blood pressure during pregnancy and low blood sugar or illness in the newborn), it's important to work closely with your doctor in managing this condition. Your treatment program will focus on keeping your blood sugar in check during pregnancy and ensuring that the fetus is healthy, which will most likely include making changes to your diet, exercising regularly, and—in some cases—using prescribed diabetes medicine or insulin therapy.

OBSERVING AND MONITORING BY PHYSICIAN AND DOCTOR OF PHARMACY

The most important step in fighting gestational diabetes is beginning your prenatal care early and seeing your doctor for regular prenatal visits. You should also be aware of risk factors for gestational diabetes (including African or Hispanic ancestry, family history of diabetes, obesity, and being older than 25 when pregnant), and watch out for gestational diabetes symptoms (including fatigue, blurred visions, frequent infections, and increased thirst).

Diabetes (diabetes mellitus) whether there was before pregnancy or appeared just then, is a condition associated with multiple complications for pregnant woman and fetus. This disease can increase perinatal mortality and morbidity, but maternal mortality is much higher.



Organic Facts
www.orginfacts.net

Home Remedies for Gestational Diabetes

- » Regular exercise helps to prevent gestational diabetes
- » Protein rich diet helps in regulating metabolic processes
- » Intake of food at regular intervals is a good home remedy
- » Astragalus is an effective remedy for gestational diabetes
- » Vitamin C rich foods help in preventing gestational diabetes
- » High fiber diet helps to provide relief from gestational diabetes
- » Sugar free diet reduces risk of obesity and gestational diabetes
- » Intake of fruits, fresh vegetables and lentils help to reduce risk of gestational diabetes
- » Consumption of vitamin D aids in absorption of nutrients and vitamins during pregnancy

Caution: Consult with doctor before making any dietary changes

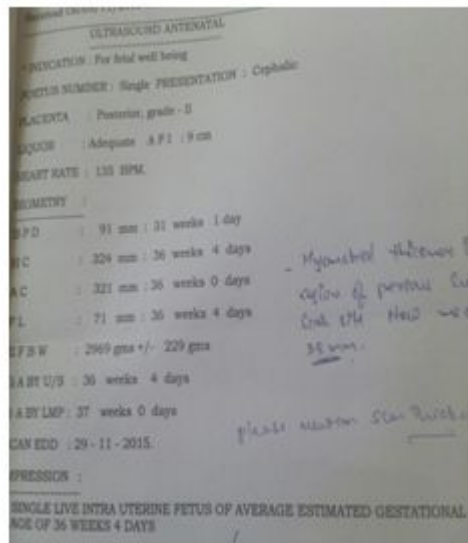
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WHY PREGNANT WOMEN'S REQUIRES REGULAR VISIT TO DOCTOR

When you are diagnosed with diabetes, your pancreas works overtime to produce insulin, but the insulin does not lower your blood glucose levels. Although insulin does not cross the placenta, glucose and other nutrients do. In this way blood glucose goes through the placenta, giving the baby high blood glucose levels and can harm you and the baby. This causes the baby's pancreas to make extra insulin get rid of the blood glucose. The baby is getting more energy than it needs to grow and develop inside the uterus. The extra energy is stored as fat. That's why it requires regular visits to the doctor. According to the classification, there are four types of diabetes in pregnancy:

– Diabetes type 1, Diabetes type 2, Gestational diabetes (Type 3), Secondary diabetes (occurs most often due to endocrine disorders)

Be aware that when you are under medical supervision, you are less worried and you will devote more to your health and the baby's health. Changing your lifestyle can change your unborn child health.





HOW TO IDENTIFY GESTATIONAL DIABETES?

Gestational diabetes usually has no symptoms. The recommended test for glucose is after 24 weeks of pregnancy. The glucose test is not a direct indicator of gestational diabetes. But doctors can refer you to additional tests that can figure do you have gestational diabetes. It is necessary for women with gestational diabetes during pregnancy to make a regular control of blood glucose levels, after 6 weeks of childbirth.we

What are factors that can increase the risk of gestational diabetes?

– If you had gestational diabetes in earlier pregnancy, Diabetes in the family, High blood pressure, You are older than 35 years



HOW CAN I HELP MYSELF AND MY UNBORN IF I'M DIAGNOSED WITH GESTATIONAL DIABETES ?

Prenatal checks will be common to the doctor if you have been diagnosed with gestational diabetes. He can watch all the changes in the child's development. Pregnant women should regularly check the movements of the child and immediately contact a doctor if they notice that a child's activity decreased. Be sure to do an ultrasound just before giving a birth to find if the child is due to increased levels of sugar has risen too much and in this case, the smartest and safest for both is to give birth by Caesarean section.

HOW TO TREAT GESTATIONAL DIABETES NATURALLY

Gestational diabetes is a type of diabetes that occurs during pregnancy and affects pregnancy women. This is a common condition where the glucose level in the blood is high. Insulin which transports glucose from the blood stream into parts of the body for energy is one of the hormone responses for lowering blood glucose level. While there is no treatment for gestational diabetes, pregnancy mothers can control the levels of their blood sugar to have healthy pregnancy.

How To Treat Gestational Diabetes Then Also Who Will Get

In pregnancy, the babies grow and develop thanks to placenta which produces hormones. The action of mother's insulin is decreased by these hormones. So the demand for using insulin in pregnancy is 2 or 3 times higher than normal. If the mother's body cannot produce more insulin to response her needs, gestational diabetes increases. About three to eight percent of women pregnancy gets gestational diabetes. These women who:

Are over 30 years old.

Are overweight or obese (the mass index is higher than 30).

Have type 2 diabetes in her history family.

Have previously had a greater than 4.5 kg baby.

Take antipsychotic or steroid treatments.

Have had diabetes in pregnancy before.

Have sugar in their urine.

However, some pregnant women without any factors above also get risk of developing gestational diabetes. You need to begin treatment gestational diabetes immediately because it can hurt you and your baby and even lead to several complications

LIFE STYLE MODIFICATIONS AND CHALLENGES

Here are some tips on how to treat gestational diabetes naturally at home that will help pregnant mothers deal with this disease:

1. Scheduling Your Diet
2. Eating Simple Breakfast
3. Doing Exercise
4. Eating Protein, Vitamin D, Vitamin C Foods
5. Implementing A Sugar-Free Diet
6. Practicing A High-Fiber Diet
7. Using Astragalus

Scheduling Your Diet

how to treat gestational diabetes - scheduling your diet

Eating irregularly schedule is the main cause of all forms of diabetes. Your body is taught to get influxes of sugar and calories with long periods without nutrients. Putting you on a schedule of nutritional intake is one of the best ways to begin preventing gestational diabetes. According to some scientists, you should eat small meals each 2 hours to prevent high blood sugar levels because your body becomes used to ordinary processing and absorption of nutrients. Here are typical eating times you should apply:

Breakfast – 8:00 a.m.

Snack – 10:00 a.m.

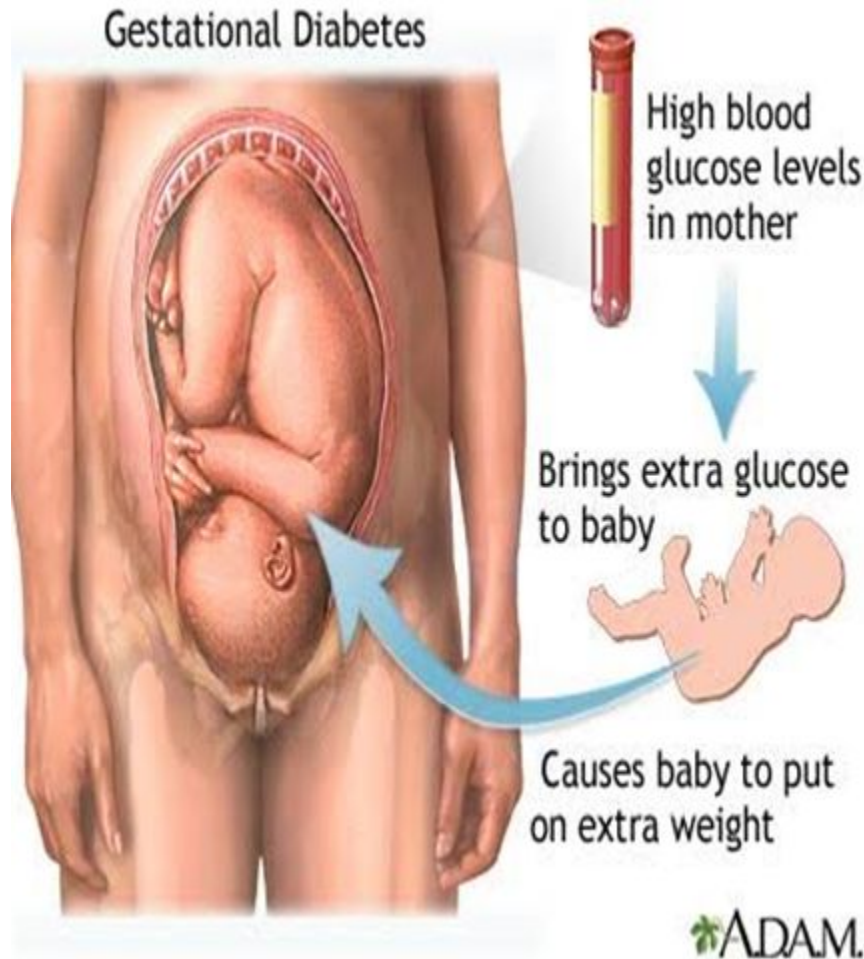
Lunch – between 12:00 p.m & 12:30 p.m.

Snack – 2:00 p.m.

Dinner – between 4:30 p.m & 5:00 p.m.

Snack – between 7:00 p.m. & 7:30 p.m.

Snack – between 9:30 p.m. & 6:00 a.m.



This is the very first tip on how to treat gestational diabetes naturally at home that I would like to introduce in this entire article and want you and my other readers to learn and try as soon as possible to prevent diabetes pregnancy.

Eating Simple Breakfast:

how to treat gestational diabetes - eating simple breakfast

You should have simple breakfast with a few variations. Here's formula

- 1 cup of organic whole milk
- 2 T whey protein
- 1 T nut butter (without sugar)
- 1 tea spoon coconut oil

The blood sugar naturally grows up in the morning. You should avoid fruit and high glycemic vegetables because it can increase your blood sugar.

Breakfast is actually an essential meal of the day and it is also very important for diabetics.

Doing Exercise

how to treat gestational diabetes - doing exercise

To prevent an inactive life and unhealthy weight gain, pregnant women should do soft regular exercise. Although weight gain is expected during pregnancy, your weight should be controlled in a good way. Doing exercise about 30

minutes at least 2 times a day will help your heart rate up, increase the metabolism and avoid the growing of gestational diabetes. However, the doctors do not recommend the strenuous exercise. Instead of jogging, you should swimming or do stationary exercise machines or walking around the park in a few minutes with a few times a day. This is actually one out of the most useful and best ways on how to treat gestational diabetes naturally that pregnant women should learn and make use to decrease the symptoms of this condition without using any type of drugs, pills, or medications.

Eating Protein, Vitamin D, Vitamin C Foods

how to treat gestational diabetes - eating protein, vitamin d, vitamin c foods

Another tip on how to treat gestational diabetes is eating foods which contain much protein, vitamin C, vitamin D. The function of protein is support your body to break down carbon into more manageable and useful molecules. Therefore, if you eat a number of small meals a day, do not forget to choose protein food. There are a lot of foods with the highest protein like: fish (tuna, salmon, and halibut), chicken (breast chicken), lean beef and veal (non-fat)... It is necessary for growth and development of your baby inside you. Moreover, vitamin D also plays a significant ways on how to treat gestational diabetes naturally. Vitamin D stimulates the increase of beneficial bacterial in the gut. You should eat some rich vitamin D foods such as: salmon, mushroom, tofu.... to ensure your nutrient you intake all day. Besides, Vitamin C is an essential part which helps you control the increasing of gestational diabetes symptoms. Unlike vitamin D, vitamin C pays a lot of attention of people. Some foods that have more vitamin C are bell peppers, dark leafy green, peas... Vitamin C deficiency has related directly to gestational diabetes. Research has shown that pregnant women take enough Vitamin C tends to likely to get serious symptoms and have a lower chance of developing type 2 diabetes later in their life. Therefore, this is actually a very simple thing to do that people who are dealing with diabetes concern should learn and apply every day without worrying about the harmful side effects!



Implementing A Sugar-Free Diet

how to treat gestational diabetes - implementing a sugar-free diet

Another one out on the list of the best tips on how to treat gestational diabetes naturally that I want to introduce in this entire article and I want pregnant mothers to apply is 'Implement A Sugar-Free Diet'. It is so important to get control the diabetes. Sugar and obesity is the 2 main reasons which lead to diabetes, especially gestational diabetes because of its relation to insulin receptors. Therefore, to protect yourself from diabetes pregnancy is to cut sugar from your daily meals entirely. It seems to be very difficult for the sugar addict people. However, instead of eating food which contains sugar, you can use stevia and agave nectar or whole fruit (no fruit juice or fruit concentrate). Both of them are natural sweeteners good for your body without any effects on preventing diabetes.

Practicing A High-Fiber Diet

how to treat gestational diabetes - practicing a high-fiber diet

The most useful suggestion on how to treat gestational diabetes naturally at home that my reader should know is increase your fiber intake. Fiber motivates the action of insulin receptors and can also prevent the liberation of overflow insulin into the bloodstream, supporting to the stability of levels on insulin and avoid the beginning of diabetes. Therefore fiber should be an important part of pregnant mother's meals. You can buy flaxseed and other forms of fiber in the market or mini mart everywhere. Whole grains are also one of the much fiber source that helps you prevent gestational diabetes.

Using Astragalus

how to treat gestational diabetes - using astragalus

This is the last but also very important one out of the best tips on how to treat diabetes naturally that I would like to introduce in this article and want you and my other readers, especially pregnant women to know more and apply to reduce the symptoms of your disease. With the advance of medicine and pharmacy, the herbal remedies are researched widespread. They found out the astragalus contributing on how to treat gestational diabetes naturally. Astragalus is one of the herbal which have strongest effects on diabetes pregnancy. It is demonstrate that pregnant women who use astragalus along with their natural treatment have better blood sugar control and have fewer symptoms of gestational diabetes. However, you should ask the doctors before using astragalus in your daily meals because herbals can have complex reactions effects, particularly when your pregnancy is on delicate period.

Most women escape from getting diabetes after the baby is born. The mother's blood glucose level also returns to normal. However, the risk of getting diabetes in the pregnancy in the future is high. You should immediately treat this disease to give you a healthy pregnancy and birth and support your baby prevent poor health in the future. One more thing that my readers might do after reading my writing today and learning about the best tips on how to treat gestational diabetes naturally at home is that you should read this writing which show you the best ways to control blood sugar – the List Of 20 Ways To Control Blood Sugar Levels related directly to gestational diabetes article. The remedies and treatment tips revealed in this entire article are based on nature 100% so people should not concern anything about them!

The writing How To Treat Gestational Diabetes Naturally today is an entire gathering the top best ways on how to treatment tips and home remedies in this article are 100% naturally without using any type of drugs, pills, or medications and safe to apply so everyone might not wonder about it. I hope that you will spend time to read this article and start doing these ways above to have a good life, especially a healthy pregnancy. If you have any question, do not hesitate

Diet, Exercise Reduces Gestational Diabetes Risk By Up To 83%,

Diet, Exercise Reduces Gestational Diabetes Risk By Up To 83%

A study on gestational diabetes published by the British Medical Journal has shown some optimistic results to help reduce the growing number of cases of gestational diabetes. Researchers found pregnant women were able to reduce the incidence of gestational diabetes by half. Women who were trying to conceive were able to reduce their risk by even more. Gestational diabetes is a common pregnancy condition, where the mother-to-be develops diabetes during pregnancy. Unlike other forms of diabetes, it resolves after giving birth. Around 8% of pregnancies in Australia are affected by gestational diabetes, although it's believed the number is increasing. In INDIA gestational diabetes affects up to 10% of all pregnancies.

WHAT RISKS DOES GESTATIONAL DIABETES POSE FOR MOTHER AND BABY?

Gestational diabetes can have both short and long term health implications for both mother and baby. Women who suffer from gestational diabetes have an increased risk of gestational hypertension, pre-eclampsia and may suffer from type 2 diabetes later in life. Gestational diabetes increases the likelihood of having a large (macrosomic) baby, and some doctors will insist on an induction of labour (which increases the risk of c-section) before the estimated due date. Babies have an increased risk of suffering from jaundice, low blood sugar levels after the birth, and developing type 2 diabetes in later life. If a c-section becomes necessary, there are surgical complications to add to the list too.

17. Study FINDINGS AND PREVALENCE ABOUT GESTATIONAL DIABETES IDENTIFY THAT DUE TO BMI GETTING RISK FACTORS AND GESTATIONAL DIABETES.

A 10 year study of over 14,000 women and 20,136 eligible pregnancies, tracked the health status of each woman's lifestyle.

Of those 20,136 pregnancies, there were 823 cases of gestational diabetes. The study found the single highest risk factor for gestational diabetes was being overweight (a pre-pregnancy BMI of 25 or over). These women had an almost four times higher risk of developing gestational diabetes than women with healthy BMIs. The study also found an increased risk of gestational diabetes for those at the higher end of the normal BMI range (23 – 24.9).

PREVENTION OF GESTATIONAL DIABETES IN PREGNANT WOMEN

Not all women with gestational diabetes have preexisting issues with glucose tolerance or insulin resistance, but research does show that wise preconception practices may prevent some cases of gestational diabetes. One study found that the combination of not smoking, exercising 150 minutes or more per week, and healthy eating reduced the risk of gestational diabetes by 41%. [5] Another showed that women who regularly exercised prior to conception and through 20 weeks gestation had a 49-78% reduced risk of developing gestational diabetes. [6] Adequate protein consumption during the first trimester may also protect against the later development of gestational diabetes.

WHAT'S THE PROBLEM WITH HIGH BLOOD SUGAR DURING PREGNANCY

Some people argue that since all women have some degree of insulin resistance during pregnancy, we shouldn't make such a big deal out of gestational diabetes. However, there are significant risks to a baby exposed to high blood sugar during development, including: Various birth defects (high blood glucose is a teratogen)
Macrosomia (being born large at birth)

Shoulder dystocia (Shoulders of large babies can dislocate or become stuck during vaginal delivery. This may lead to a broken clavicle or neurological damage to the infant or a medical emergency for the mom.)

Hypoglycemia (baby's blood sugar is too low at birth, which can be life threatening)

Jaundice Permanent changes to a child's metabolism

HOW IS GESTATIONAL DIABETES MANAGED?

The primary treatment for gestational diabetes is diet and exercise. When those two aren't enough to bring the blood sugar levels down to normal, a woman may need insulin or medication..

REASONS

1.I wish that I had known all of this twenty years ago. I had GD with both of my children, fortunately they were both born healthy. Diet and exercise worked the first time but needed insulin with the second. The only good thing about having GD was that I ate healthier and exercised more. Now I know that the "healthy" diet the nutritionist recommended was horrible. I have been gluten free for several years and I feel that I should have been gluten free when I was pregnant.

I wasn't the typical GD; the Diabetes center was always telling me that I needed to gain more weight throughout my pregnancy. Thankfully my OB/GYN called them and told them I (and my baby) were healthy and to stop causing me unnecessary stress. My fasting levels are checked every year or so because of my high risk of developing Type 2 diabetes. I'm fine for now and I know that my real food diet makes the world of difference.

2.moms with gestational diabetes who keep their blood sugar levels at normal levels have no higher risk of complications." Then they don't really have gestational diabetes if their level are normal, do they? I thought that was amusing.

Dr. Brewer's Pregnancy Diet is an excellent resource that eliminates many pregnancy complications. His requirement is to eat 80g-100g of protein a day for the growing baby in addition to all his required servings of fruit, vegetables, salt, fats, and carbs. You're to have a minimum of 4 servings of carbs. But, let me tell you, with all that protein you're consuming as the building blocks of life, you won't have much room for more than 4 servings of carbs anyway.

RESULTS

The study analysed the diets, amount of physical activity, and smoking status of the participants, finding that each factor was associated with an increased risk of developing gestational diabetes..These associations were considered to be significant, even after the results were adjusted for other risk factors such as family history and maternal age.The study found the cumulative effect of lifestyle factors helped to decrease the risk of developing gestational diabetes. Women who ate a healthy diet (as set out in the study), exercised for 150 minutes each week, had a BMI of less than 25, and did not smoke, were 83% less likely to develop gestational diabetes than women who did not meet any of the healthy lifestyle criteria.

CONCLUSION

As the researchers concluded that as many as half of all cases of gestational diabetes could be avoided if women maintained a healthy lifestyle before pregnancy. For women already pregnant, making healthy changes to their lifestyle also lowered their risk of developing gestational diabetes. For these women, eating a healthy diet, exercising and not smoking reduced their risk.and prevention, managing the gestational diabetes in pregnant women's

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