



# BRISBANE ENDOCRINE AND METABOLIC SPECIALISTS

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## Preparing your body for pregnancy while living with diabetes

You've made the exciting decision to start planning for a baby. Preparing your body for pregnancy means managing your blood glucose levels. Your baby's organs are developing sometimes before you know you are pregnant. That is why we recommend you start planning and preparing your body for pregnancy at least 3 – 6 months before you start trying for a baby.

Having well managed blood glucose levels (BGLs) reduces your risk of miscarriage and improves your chances of having a healthy baby. High glucose levels can be associated with potential risks for you and your baby's development and birth. Your doctor will discuss the potential risks associated with not managing your glucose levels before falling pregnant, and during pregnancy. They will work closely with you to help achieve the goals of diabetes management. It is best to be using contraception until your glucose levels are well managed.

Work with your doctor for the following:

### Targets

- HbA1c less than 6.5%, while avoiding hypoglycaemia (low BGLs less than 4.0mmol/L)
- If using continuous glucose monitoring (CGM) to help improve your glucose levels, aim for pregnancy-specific 'Time in Range' (i.e. between 3.5 – 7.8 mmol/L) on CGM of 70% or higher
- Pre-meal BGL 4.0 – 6.0 mmol/L (ideally under 5.5 mmol/L)
- 1 hour post-meal BGL 5 – 8.5 mmol/L (ideally under 8.0 mmol/L)
- Blood pressure under 130/80 mmHg.

Work with your doctor for the following:

### Diabetes Screening

Make sure your diabetes screening is up to date (within the last 6 months before pregnancy):

- Eye review with your optometrist or ophthalmologist for diabetic retinopathy (bleeding on the back layer of the eye or leaking fluid)
- Urine test for protein/albumin and blood tests to check on kidney and liver health
- Blood test screening for thyroid and coeliac disease (other autoimmune conditions that can be associated with Type 1 Diabetes)
- Foot screening - consider podiatry review if you have any issues with your feet.





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## Medications

Check with your doctor which medications you should be on and which are safe for pregnancy:

- ACE inhibitor and Angiotensin receptor blockers (blood pressure lowering medications) should be switched to medications safe for pregnancy either before pregnancy or at first positive pregnancy test.
- Stop statin (cholesterol lowering medications).
- Some diabetes medications, other than insulin and metformin, are not safe for pregnancy and need to be stopped at least 2 months before pregnancy.
- Start pregnancy multivitamin (which includes iodine). Ideally this should be started 3 months before pregnancy.
- Start folic acid (folate) 2.5 – 5mg daily (this dose is higher than what is available in pregnancy multivitamins). Ideally this should be started 3 months before pregnancy and continued until 12 weeks of pregnancy.
- Aspirin 150mg at night will be recommended to start from the end of first trimester up until 36 weeks of pregnancy.
- If you are on an insulin pump, check with your doctor that the settings are correct for pregnancy.

## Other general advice to consider before pregnancy

- Regular exercise (30 minutes of low to moderate intensity physical activity on most days of the week).
- Choosing a healthy, well-balanced diet.
- Check with your GP if your vaccines are up to date.
- Quit smoking and vaping.
- Avoid alcohol in pregnancy.

This document has been adapted from the DDHHS Diabetes and Pregnancy fact sheet. All information contained in this sheet has been supplied by appropriately qualified professionals. It is a guideline for care only. Seek medical advice, as appropriate, for concerns regarding your health.

