RCOG 2022 WORLD CONGRESS

Poster ID: 791

How is IDF-MENA Region Guideline Different From Other Guidelines For Hyperglycemia in Pregnancy (HIP)?

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INTRODUCTION

Hyperglycemia in Pregnancy (HIP) is a medical disorder that needs serious attention for the implementation of guidelines at Regional levels so that the screening, diagnosis, and management of diabetes is uniformly instituted, to reduce maternal morbidity and perinatal mortality and transmission of disease in future generations. Among the seven IDF regions, MENA region has the highest (12.2%) age-adjusted prevalence of diabetes where one in six live births are affected by HIP. More than 50% of the women in MENA region are likely to become pregnant with either undiagnosed diabetes or improperly screened. It is because of different blood glucose (BG) screening strategies and diagnostic criteria, that confusion and disagreement over uniform screening strategies and diagnostic criteria continue globally.

OBJECTIVES

The IDF-MENA Region guidelines (GL) are meant to standardize clinical practice of BG screening, diagnosis and management of HIP across the Region.

METHODS

The HIP guideline committee was nominated by the Chair IDF-MENA region for the development of the HIP guideline. Recommendations were made after reviewing different guidelines, reviews papers, consensus, and meta-analyses. There were about 28 Zoom meetings every weekend lasting 2-3 hours of discussions. The duration of the guideline preparation was from September 2020 to May 2021 and published in J. of Diabetology in July 2022.

RESULT

Guidelines on HIP were developed by 29 authors from MENA Region. In order to ensure its practical utilization, a mobile-based GDM Registry software has been designed to observe the applicability of GL and know the prevalence and practices in the clinical practice. The software has been pilot tested in three university- hospitals in Pakistan.

Figure 1: Pictorial guide for Lifestyle and Exercises During Pregnancy

Table 1: Links to educational videos to help promote and support breastfeeding

Considering the value of breastfeeding for both mother and newborn, all women should be encouraged and supported to attempt breastfeeding.

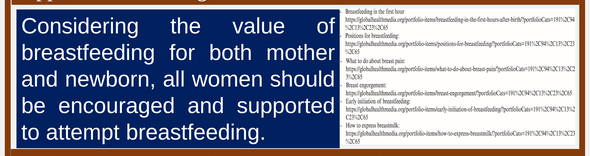


Table 2: Recommendation: BG Screening

Early Universal Screening on First Antenatal Booking Visit	
1) OGTT	2) 8 hrs - Fasting Blood Glucose
3) DIPSI	4) HbA1c

Table 3: Details Nutritional Recommendations:

Recommendations for calorie Intake and weight gain during pregnancy according to BMI
Daily Requirement Index (DRI) For Pregnant Women
Recommendation for type and sources of oils and fats
Food Groups for daily meal planning

Figure 2: MENA-region Guidelines Concept Map

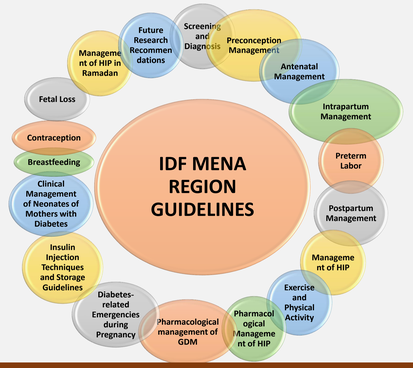
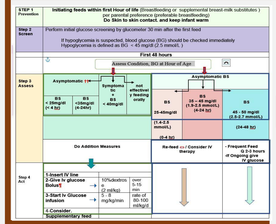
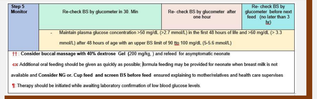


Figure 3: In-depth neonatal management of babies born of mothers with HIP





Clinical neonatal management

Hypoglycemia in neonates may be asymptomatic or may show clinical signs.

Advise women with diabetes to give birth in hospitals where advanced neonatal resuscitation skills are available 24 h a day.

Evaluate newborns for major congenital malformations.

Figure 4: Contraception Management in HIP

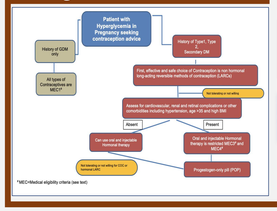


Figure 5: Pctorial depiction of Insulin injection site

DISCUSSION

The overall aim of this guideline was to provide a pragmatic approach to the clinical management of pregnant women with diabetes.

Recommendations for women with HIP who insist to fast against advice during Ramadan

Women with HIP are advised against fasting during Ramadan, but insist to fast must follow the recommendations:

- Adjustment of doses and use of different types of insulin during Ramadan fasting.
- Nutritional care and meal planning.
- Advice about when to break the fast during pregnancy.
- Myths dispelled e.g that SMBG will break the fast.

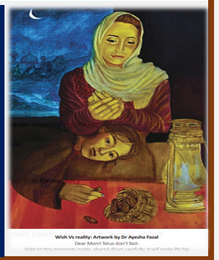
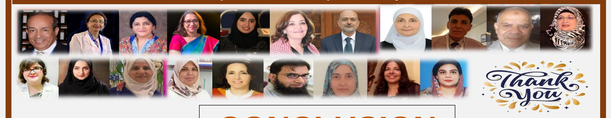


Figure 5: Mode of insulin storage

Thank you, authors, for the passion, inspiration and insane amount of time to craft these guidelines



CONCLUSION

HIP guidelines are meant to standardize clinical practice at all health care levels across the MENA Region countries.

REFERENCE

Masood SN, Shegem N, Baqai S, Suliman M, Alromaihi D, Ahmed Bilal, *et. al.* (2021) IDF-MENA region guidelines for the management of hyperglycemia in pregnancy. J. Diabetology.