

TENTH ANNUAL
HEALTH SCIENCES CENTER
POSTER CONFERENCE 2005

*Obstetrics and Gynecology,
Category: Clinical*

151: Moderated

Screening for gestational diabetes in Kuwait

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Introduction:

Gestational diabetes mellitus (GDM) is defined as any degree of glucose intolerance with onset or first recognition during pregnancy. The prevalence of GDM depends on the population studied and the diagnostic tests employed. Internationally, there is a conflict regarding the selection of subjects, diagnostic tests used, and timing of performance. Kuwait is a country with high prevalence of non-gestational diabetes. Yet, there is no national policy to diagnose GDM. This indicates the importance of devising a policy for screening for GDM on a scientific basis. We carried out this study to estimate the prevalence of GDM among Kuwaiti women and to compare the utility of screening tests before 24 weeks and at or after 24 weeks of pregnancy.

Methods:

Study subjects were recruited between October 1, 2002 to April 30, 2003 from of Sabah Al-Salem antenatal care clinic at the Primary Health setting. All Kuwaiti pregnant women who were not known to have diabetes were enrolled in the study. A 75-gm oral glucose tolerance test (OGTT) was performed before 24 weeks of gestation. Subjects were requested to retest again at or after 24 weeks of gestation. Gestational diabetes was diagnosed according to American Diabetes Association Criteria.

Results:

Of the 107, 104 complied with the testing. Of the 104 subjects, 10 (9.6%) tested positive for GDM. Of these 10 patients, 6 (60%), were diagnosed with GDM before 24 weeks of gestation and 4 (40%) at 24 weeks of gestation or after. Of the 10 diagnosed patients, the fasting level diagnosed only one case. The rest were all diagnosed by OGTT.

Conclusions:

This finding suggests the importance of early screening for GDM among Kuwaiti women using oral 75-gm OGTT. To be cost-effective, larger studies are needed to identify those with a high risk of developing GDM and to establish a policy for screening in Kuwait

Key Words: *Gestational diabetes; Screening; Kuwait;*

Funding Agency: *None*