

DIABETES & PREGNANCY – THE ROLE OF PRIMARY CARE

Roger Gadsby - GP

Nuneaton & Medical Advisor to Warwick Diabetes Care

Primary Care at present may not think it has much of a role to play in giving pre-conception advice to women with diabetes.

However attendance at formal secondary care pre-conception clinics is low, and a number of women with type 1 diabetes and type 2 diabetes may have defaulted from or have never attended secondary care.

Research suggests that the division just into planned and unplanned pregnancy is unhelpful. Journeys to becoming pregnant can vary enormously even for individual women. Every opportunity therefore needs to be taken to communicate messages about the importance of good diabetes control around conception and into pregnancy. Women with diabetes may attend primary care for contraception services, repeat prescription reviews and for inter-current illness. All these may be opportunities to communicate the important messages about diabetes and pregnancy and primary care needs to realise this and be skilled and equipped to do this work.

In addition the development of a DSN/Midwife role which would be the focus of pre-conception counselling and information for all women with diabetes and which could function to pro-actively approach women of childbearing age should be considered.

REFERENCES

NICE Guideline Diabetes and Pregnancy: Management of diabetes and its complications from pre-conception to the post natal period. NICE London March 2008

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