

Comment on: Shriram *et al.*, awareness of gestational diabetes mellitus among women in a primary health center in south India

Sir,

I read with great interest the article by Shriram *et al.*, in which the authors observed high proportion of unawareness of gestational diabetes mellitus (GDM) among the antenatal women in South India.^[1] Only 17.5% of women had good knowledge for the disease. In this study, the authors have highlighted 2 very important points of concern. First, the knowledge about the risk factors for GDM and increased risk of future Type 2 diabetes was found to be low. Second, authors found that health-care providers were quoted as a source of information by only a 5th of women. The above two factors culminate into poor post-partum screening and subsequently high conversion rates to diabetes mellitus. Even in best of the scenarios across the world, the post-partum screening rate varied from 14% in usual care to 60% in randomized controlled studies.^[2] In a meta-analysis of 20 studies from January 1960 to January 2009, Bellamy *et al.*, found seven-fold increased risk of developing type 2 diabetes in women with the gestational diabetes as compared to women with normoglycemic pregnancy.^[3] Now, the important question arises, how we can overcome this problem. The authors have interestingly highlighted some of the measures like role of mass media in creating awareness about the condition. The other important step is integration of awareness about GDM with routine health-care education programs organized for antenatal women. The doctors have to educate the health-care workers and both doctors and health-care workers have to play a greater role in creating awareness among antenatal women. Coupled to authors' suggestion in this field, I would like to add, that we should also not miss any opportunity of post-partum screening in women with GDM. Employing Nurse educators during antenatal visits for imparting education on healthy life-style measures during pregnancy and highlighting importance of post-partum screening, postal reminders, telephonic contacts, investigation incentives for poor women, arranging for convenient testing are other parameters seen to increase the rates of postpartum

screening.^[4,5] This gives an additional opportunity to promote health care among these high risk women.

Yashdeep Gupta

Department of Medicine, Government Medical College and Hospital, Chandigarh, India

Corresponding Author: Dr. Yashdeep Gupta,
Kothi No. 132 Phase 1, Mohali, Punjab - 160 055, India.
E-mail: yash_deep_gupta@yahoo.co.in

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