

# **ASSESSING THE ADEQUACY OF SCREENING FOR GESTATIONAL DIABETES MELLITUS IN ANURADHAPURA DISTRICT**

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## **INTRODUCTION**

Gestational Diabetes Mellitus (GDM) is defined as any degree of glucose intolerance that occurs with pregnancy or is first discovered during pregnancy.

GDM is associated with increased perinatal & maternal morbidity & mortality. Treatment of GDM improves perinatal & maternal outcome. Timely detection of GDM by screening is promoted by good practice guidelines in UK, USA and many other developed countries.

Assessing high risk women at the Ante natal booking visit and blood glucose testing for high risk women at 24-28 weeks of pregnancy is the widely accepted method of screening for GDM.

According to the literature review on previous research done on "screening of GDM" in Sri Lanka, the following conclusions highlight the importance of this study. One study indicated that traditional risk factors didn't predict GDM, hence screening for GDM should be performed to all women at 24-28 weeks of pregnancy using Oral Glucose Challenge Test. Also another study indicates screening methods for GDM practiced in Anuradhapura district are highly unsatisfactory

## **METHODOLOGY**

**Study design:** data collection & analysis.

**Study population:** pregnant mothers with a Period of amenorrhoea (POA) of > 28wks from Anuradhapura District (AD).

**Sampling method:** convenient sampling, (98% of deliveries of AD take place at the teaching hospital Anuradhapura).

**Sample size – 422** (calculated with 95% confidence interval for assumed 50% prevalence of GDM in AD).

Study procedure - Data collection was done by using a data extraction sheet. All the data was collected from antenatal records, of the pregnant mothers who were admitted to Teaching Hospital Anuradhapura (THA) in June 2011.

Analysis of data was done manually.

Ethical clearance was obtained from Ethical Clearance Committee, Faculty of Medicine and Allied Sciences, Rajarata University of Sri Lanka.

Verbal consent was taken.

Outcome measurements:

1. Risk assessment at the Ante natal booking visit
2. Tests done to detect hyperglycaemia.

### RESULTS

The sample size is 422. The median age of the sample is 27yrs and its mean age is 26.9yrs. The percentage of mothers in the 1<sup>st</sup> pregnancy in the sample is 44.8%.

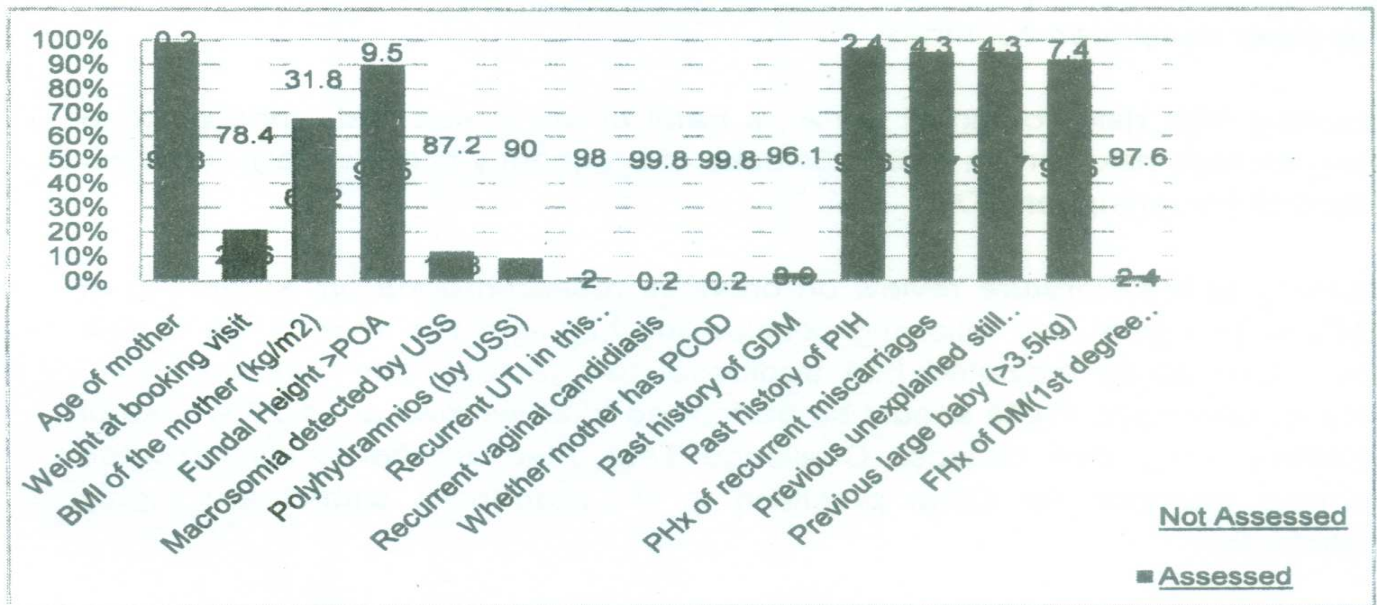


Figure 1 - Risk assessment for GDM

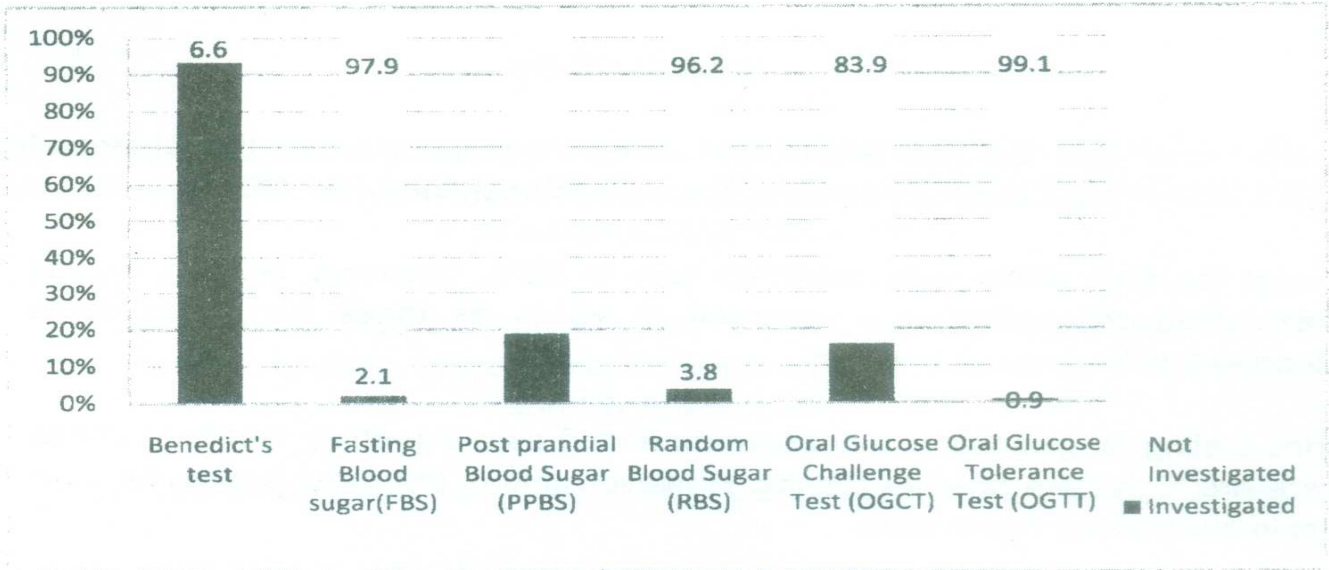


Figure 2 – Investigations to screen GDM

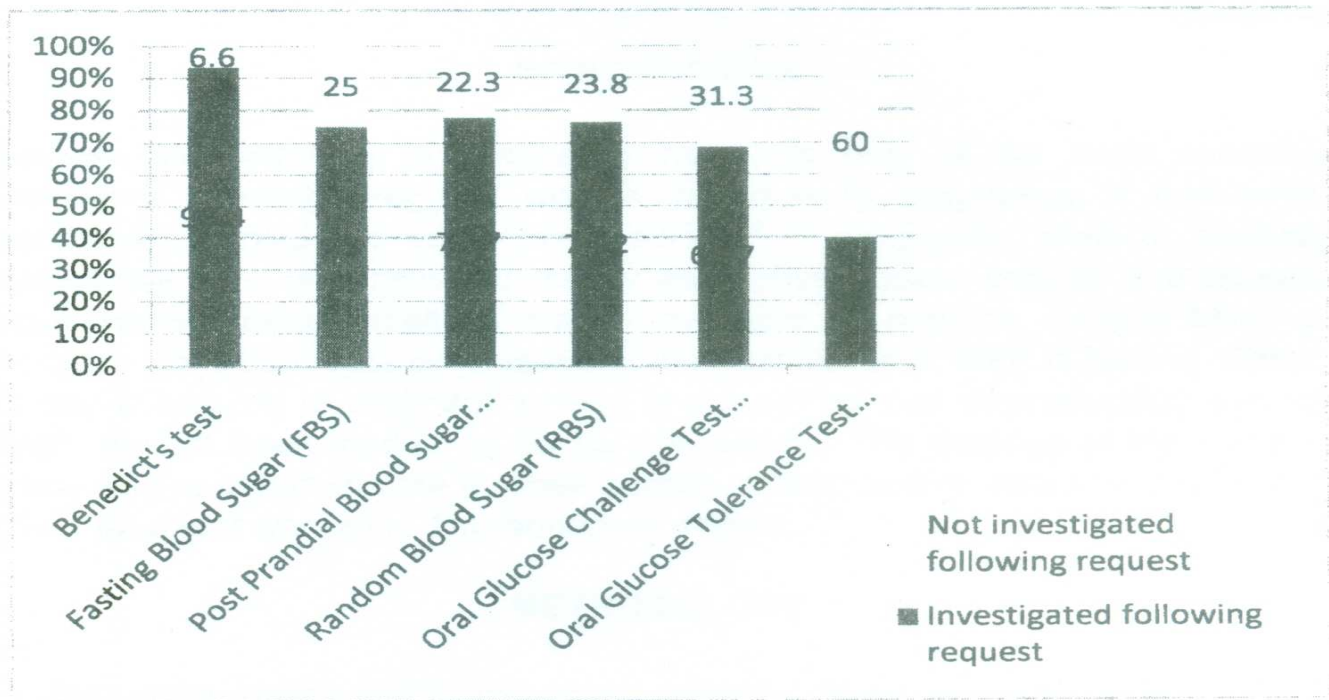


Figure 3 – Investigations carried out following request for investigation