Physical Activity During Pregnancy Prevents Gestational Diabetes

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Exercise before and during pregnancy is beneficial for mother and baby and, as such, is recommended by the American Congress of Obstetricians and Gynecologists. However, about 40 percent of pregnant women do not perform any exercise during pregnancy and only about a quarter of pregnant women achieve the recommended level of exercise during pregnancy (at least 30 minutes a day on most days of the week). One of the benefits of exercise during pregnancy is a reduction in risk for gestational diabetes, a complication characterized by glucose intolerance with onset during pregnancy. Gestational diabetes affects between five and nine percent of pregnant women and increases the risk of development of type 2 diabetes for both mother and child. Overweight and obese women, as well as women who gain more weight during pregnancy than is recommended, are at a higher risk of developing gestational diabetes.

In our study, published in the June 2016 issue of MSSE, we assessed whether maternal physical activity before and during early pregnancy was associated with risk of gestational diabetes. Subjects were participants in the Omega study, which was conducted among a population of pregnant women in Seattle and Tacoma, Washington. Participants completed an interview during early pregnancy in which they recalled frequency and duration of activities in the year before pregnancy and in early pregnancy. Average physical activity duration and energy expenditure per week were calculated using this information. Participants were screened for gestational diabetes between 24 and 28 weeks gestation, as is recommended by the American Diabetes Association. In our study, we found that women who exercised in the year before pregnancy and during early pregnancy had the greatest reduction in their risk for gestational diabetes. Women who exercised during one of these time periods, but not both, had smaller reductions in their risk for gestational diabetes. We also found that exercise before or during pregnancy reduced the risk of gestational diabetes in women with and without risk factors for gestational diabetes, including normal weight, overweight and obese women, and women with weight gain during pregnancy within and above the recommended amount.

Clinicians and exercise professionals play an important role in promoting exercise among women who are of reproductive age as well as those who are pregnant. This is particularly true given that physical activity before and during pregnancy can help to prevent gestational diabetes. Yet, only a small proportion of pregnant women currently meet physical activity guidelines. Considering that this finding holds in those at high risk of developing gestational diabetes, the potential for prevention of gestational diabetes is even greater. Clinicians and exercise professionals have an opportunity to promote twice the beneficial impact when counseling pregnant women, given the health benefits of preventing gestational diabetes for both the mother and child. With recent increases in the incidence of gestational diabetes, it is even more critical that professionals in our field address this modifiable risk factor.

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