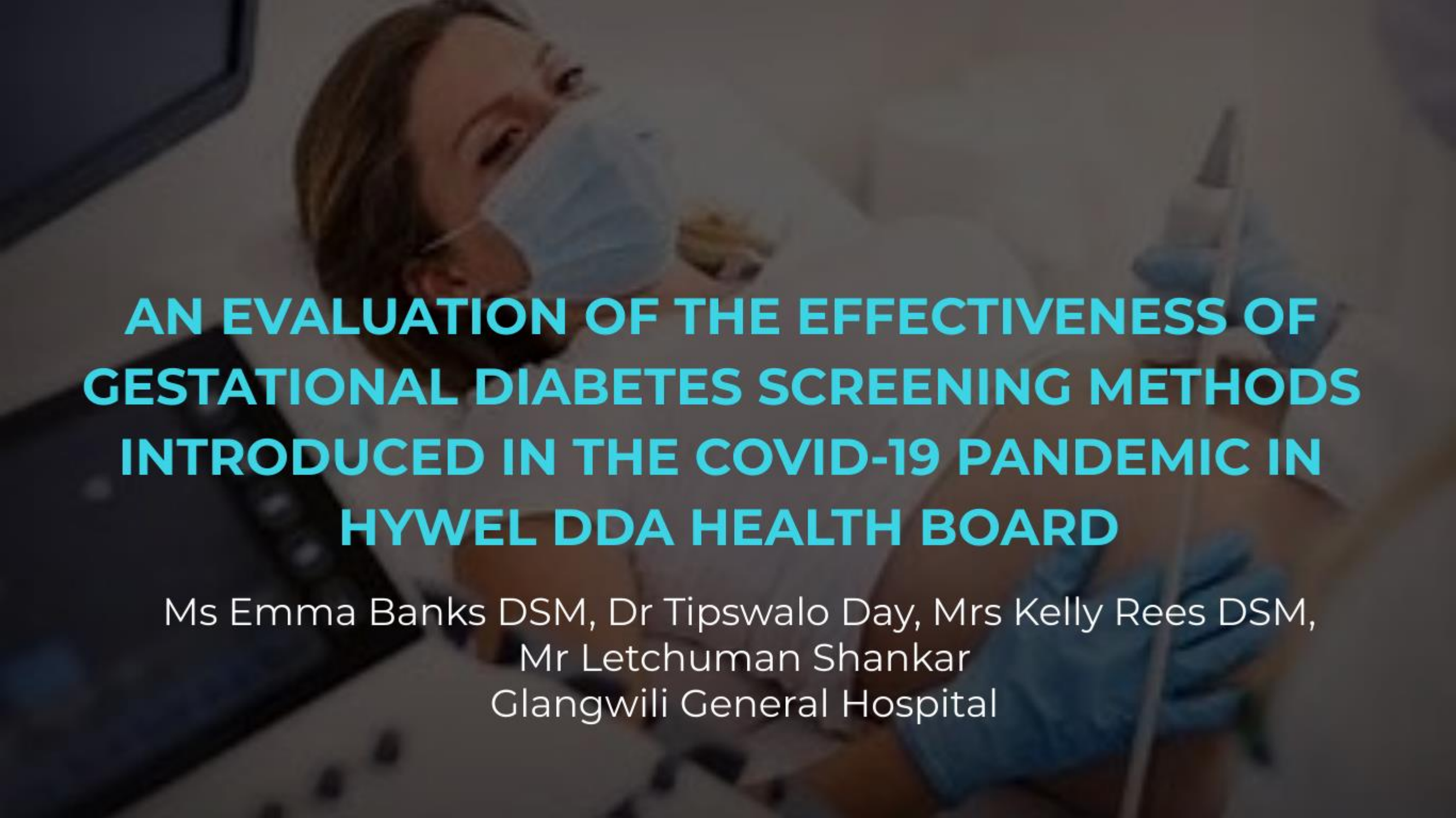


AN EVALUATION OF THE EFFECTIVENESS OF GESTATIONAL DIABETES SCREENING METHODS INTRODUCED IN THE COVID-19 PANDEMIC IN HYWEL DDA HEALTH BOARD

Ms Emma Banks DSM, Dr Tipswalo Day, Mrs Kelly Rees DSM,
Mr Letchuman Shankar
Glangwili General Hospital

STUDY DESCRIPTION

Study to compare detection rates of GDM between the OGTT and the RCOG temporary HBA1c and fasting plasma glucose

What?

Retrospective cohort study

Who?

Women with GDM confirmed by OGTT

When?

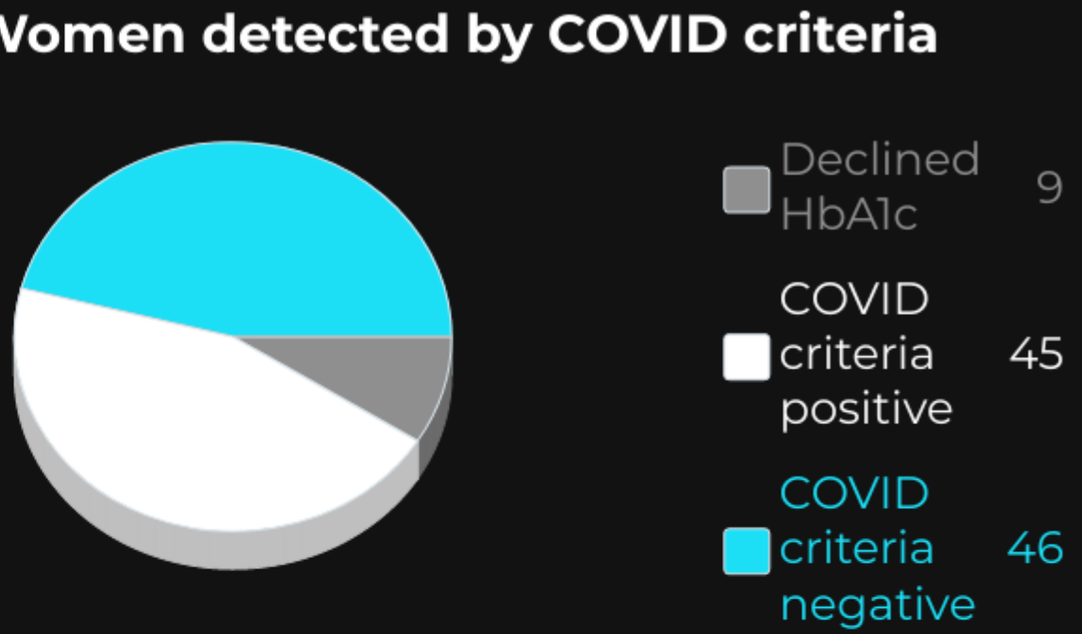
Estimated date of delivery between 01/01/2020 and 31/10/2020

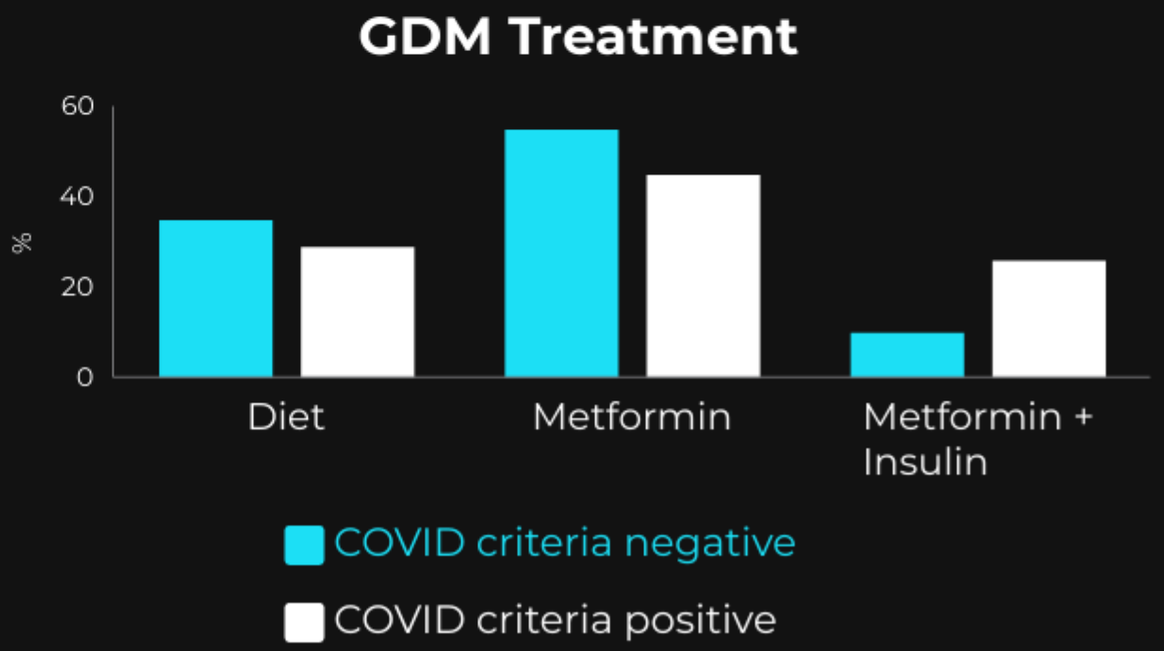
How?

Women offered HbA1c and results analysed to determine if their FPG or HbA1c met the RCOG COVID-19 criteria

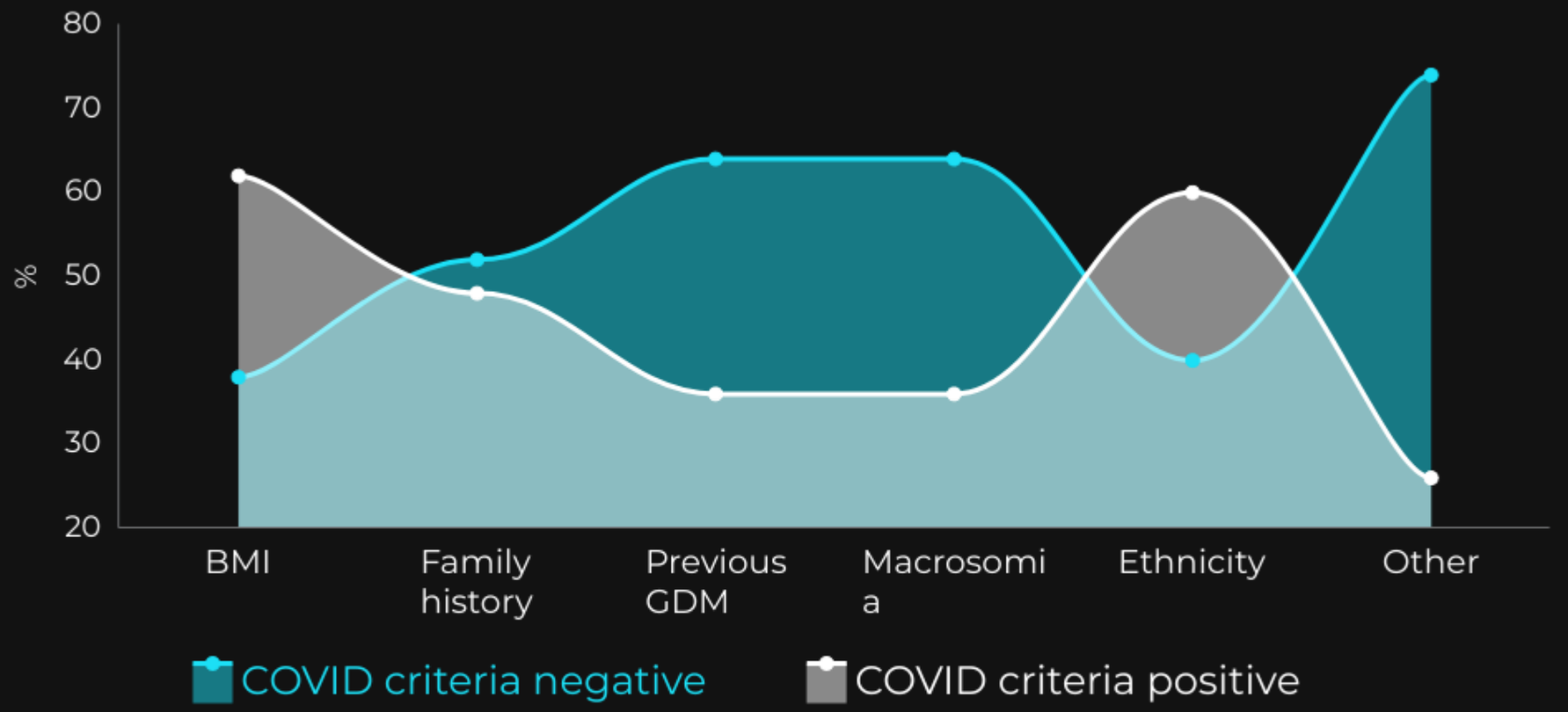
RESULTS

- 106 women positive OGTT
- The RCOG COVID criteria failed to detect 46% of women found to have GDM by OGTT
- 65% of the women who would not have been identified went on to require pharmacological treatment for their GDM

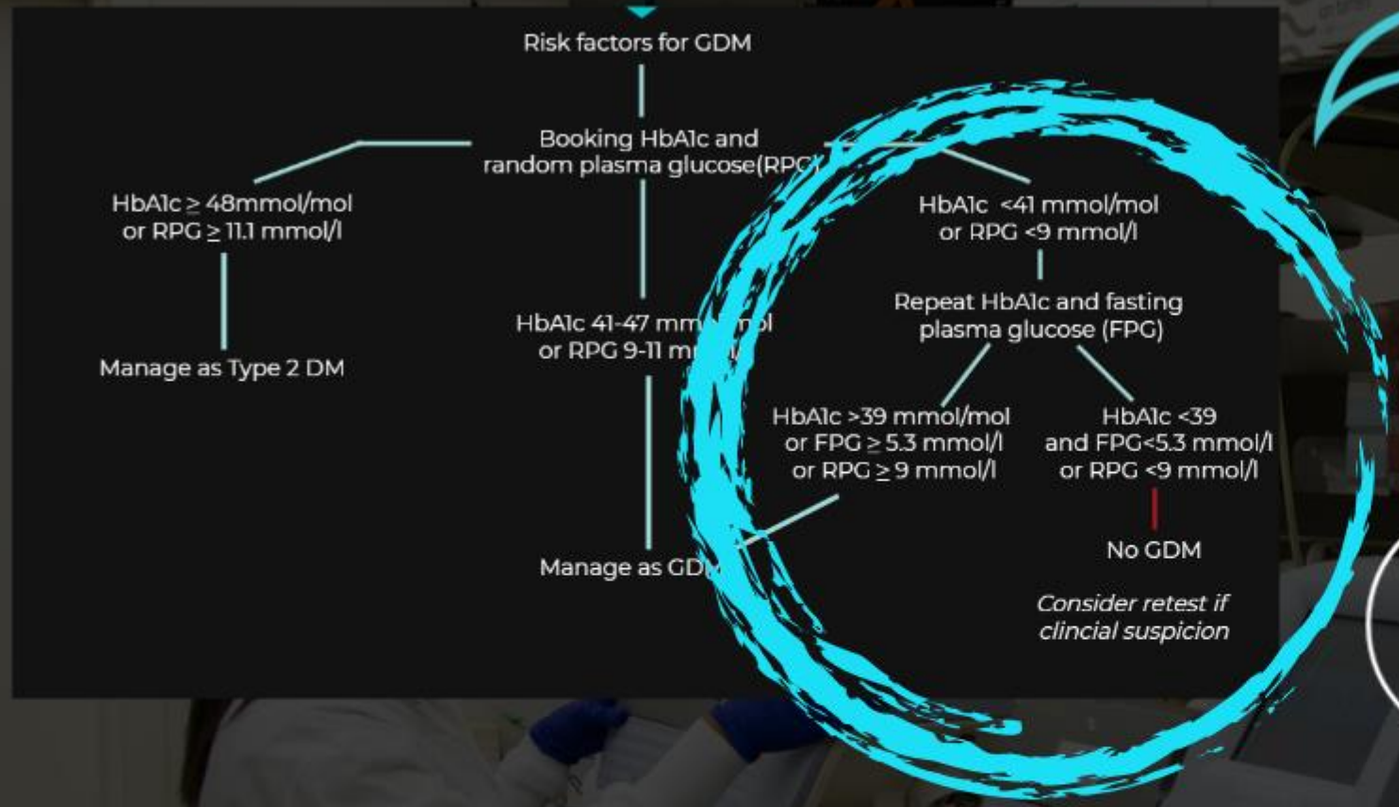




COVID criteria detection by GDM risk factor



The RCOG COVID criteria was most effective in identifying GDM in raised BMI patients but poor at detecting GDM in women with a previous history of GDM, macrosomic foetus and glycosuria.



24-28/40 HbA1c and FPG

HbA1c ≥ 39 mmol/mol or FPG ≥ 5.3 mmol/l

FPG 4.6-5.2 mmol/l

Manage as GDM

Offer OGTT

An alternative two tier screening could have increased detection by 33% in our cohort

CONCLUSION

The temporary RCOG COVID-19 screening using FPG and HbA1c was less effective than OGTT at detecting GDM

A significant number of the women with false negative results required pharmacological treatment

An interim two-tier criteria could increase the detection rate whilst awaiting a return to normal screening

References:
NICE NG3 Diabetes in pregnancy: management from preconception to the postnatal period
RCOG Guidance for maternal medicine services in the coronavirus (COVID-19) pandemic
RANZCOG COVID-19 and Gestational Diabetes Screening, Diagnosis and Management