

Glucose Tolerance test

Screening for Gestational Diabetes



What is this test for?

It is a simple screening blood test for gestational diabetes, carried out between 26 and 28 weeks of your pregnancy. This leaflet includes blue text that provides links to further information.

What is gestational diabetes (GDm)?

Gestational diabetes is a condition where your blood sugar (glucose) level is too high. It is a type of diabetes that can develop during pregnancy. It tends to go away again after the birth.

Gestational diabetes is most often caused by hormones that you produce when you're having a baby. Some of these stop insulin (a hormone that helps to lower blood sugar) from working as it should.

This is called insulin resistance. In GDm, the insulin you make does not work well and your blood sugar level rises.

Gestational diabetes may start in the middle or second half of pregnancy. It can cause serious problems. But the risk to you and your baby can usually be reduced if monitored and managed.

Gestational diabetes does not often cause symptoms. Most pregnant people only find out they have it when they are tested for the condition.

We don't fully know why some people get it and others don't.

But we do know that some things increase the risk.

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Am I at risk of GDm?

Anyone can get gestational diabetes during pregnancy. You have an increased risk of gestational diabetes if you:

- have had gestational diabetes before
- have had a large baby before, weighing 4.5kg (10lb) or more at birth
- are very overweight, with a body mass index (BMI) of over 30
- have a parent, brother or sister with diabetes
- have a Black Caribbean, Black African, South Asian (India, Pakistan, Bangladesh), or Middle Eastern background – even if you were born in the UK
- have polycystic ovary syndrome (PCOS)

If you have any of these risk factors, you'll be offered a test for gestational diabetes. This will usually happen when you're between 24 and 28 weeks pregnant, or even sooner if you've had gestational diabetes before.

You may also be offered a test for gestational diabetes if any of your routine tests during pregnancy find glucose in your urine.

If you have a normal result from this test, but there is further concern about gestational diabetes later in your pregnancy, you may be advised to have the test repeated.

What does the test involve?

The test involves a finger-prick test, followed by two blood tests – one for before and the other for after having a measured sugary drink. This will show how well your body processes the sugars in the drink.

Step 1: You will be asked not to eat or drink anything, other than water, from midnight before the test. This is known as fasting. You should check beforehand if any medication you take should be delayed until after the test, and refrain from taking any indigestion remedies.

If you are a smoker, you must also refrain from smoking or vaping until the test is complete.

Step 2: A finger prick test will be done to determine whether you have any sugar in your blood. If the result of this is below 7.0 mmol/l, the GTT can be done and a blood sample to measure your fasting blood sugar level will be taken.

Step 3: You'll be given a sugary drink, along with some water. Both drinks are measured so it is essential to drink them all.

Step 4: After 2 hours, you'll have another blood test to measure your blood sugar level. You will be asked to remain in the waiting area between blood tests, activity may interfere with your glucose level and may consequently affect the results of the test.

Remember to bring a book, hobby or device to pass the time. It is best to try to arrange childcare for any young children.

Your blood sugar level will rise after you have the sugary drink, and should then return to normal as your body processes the sugar.

You will be diagnosed with gestational diabetes if either your fasting blood sugar level was higher than expected, or your blood sugar level hasn't fallen enough after 2 hours.

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When will I get the results of my GTT?

The results take a few days to process. If the results are within normal levels you will be informed of them by your local Midwife. However, if they are above normal levels, you will be contacted and referred to the Diabetes in Pregnancy clinic at the RUH.

Do I have to get a test for gestational diabetes?

You don't have to have the test, but there are a few things to keep in mind.

- If you've been offered a test, this means your midwife thinks you could be at risk of gestational diabetes. If it is not managed, there is a small increased risk of serious complications.
- If you are diagnosed with gestational diabetes, you will be offered more care during your pregnancy and labour, to help reduce the risk of problems. People often say they find this reassuring. You will be able to discuss how this diagnosis might affect the choices you make for the birth of your baby.

After pregnancy

Gestational diabetes almost always resolves after the baby's birth. However, if diagnosed, your GP will be advised to monitor your health by offering you a blood test every year. This is because up to 60% of those who develop gestational diabetes will develop Type 2 diabetes within 10 years. If you require further information, please do not hesitate to speak to a midwife or the practitioner who is carrying out your GTT.

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If you would like this leaflet in email form, large print, braille or another language, please contact the Patient Support and Complaints team on 01225 825656.

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