

# Outcome of pregnancy in diabetic mothers.

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## Abstract

**OBJECTIVE:** To study complications seen among newborns of gestational diabetic mothers versus nondiabetics, and to compare the pattern of distribution of those complications to similar reports from Western populations.

**METHOD:** Prospective case controlled study of 384 newborns, (191 of diabetic and 193 of nondiabetic mothers) delivered at the King Abdulaziz University Hospital, Jeddah.

**RESULTS:** The overall rate of infant morbidity was greater among newborns of diabetic mothers, especially those who required insulin for metabolic control. The major complications were those associated with increased incidence of large birth weight infants. Complications such as congenital malformations, intrauterine growth retardation and other severe forms of morbidity often associated with insulin-dependent diabetes were rarely seen.

**CONCLUSION:** Fetal and neonatal risks associated with diabetes in pregnancy depend not only on the severity, but also on the type of diabetes. In modern societies fetal complications associated with diabetes are mainly those due to hyperglycemia in the second half of gestation. The results also emphasize the fact that perinatal morbidity rather than mortality should be the yardstick for the efficacy of management of diabetes in pregnancy