

Effect of mode of insulin delivery on glycaemic control and pregnancy outcomes in women with Type 1 diabetes in pregnancy.

R Bhatti¹, R Khan², S Howard¹, S Mckinnon¹
 Department of Diabetes¹, Department of Obstetrics²
 Worthing Hospital, Western Sussex NHS Trust, UK.

Introduction

We looked at pregnancy outcomes with subcutaneous continuous insulin infusion (CSII) compared to multiple daily injections (MDI) in women with type 1 diabetes.

Methods

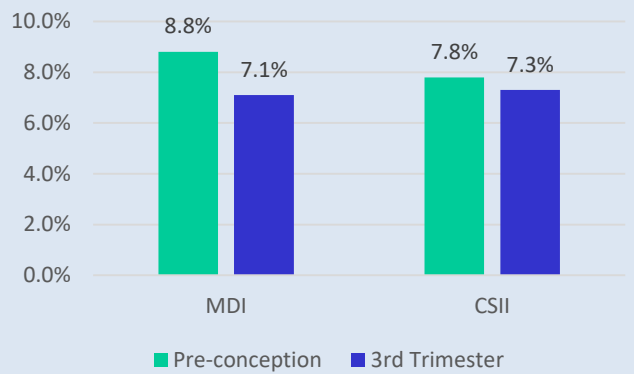
- Retrospective data
- Pregnant T1DM women from October 2015-2016 managed in diabetes antenatal clinic in a district general hospital, UK
- Data collected from electronic record Medway Maternity ®

Baseline Characteristics

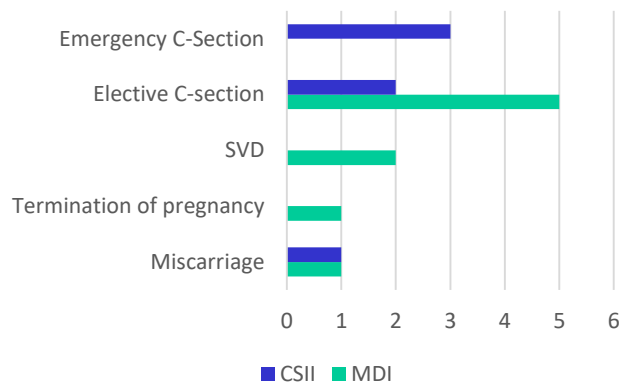
	MDI	CSII
Number of patients	9	6
Age (Median ± IQR)	24 ± 10	30 ± 4
BMI (Median ± IQR)	24 ± 11	26 ± 2.7
Gestational age at delivery (Median)	37 weeks	36 weeks
Birth Weight (Median)	3445 ± 753 gm	3380 ± 1205 gm

Results

Improvement in HbA1c



Maternal Outcomes



Conclusions

- Women with T1DM treated with MDI and CSII achieved similar glycaemic control throughout pregnancy.
- There was no difference in foetal and maternal outcomes.
- Further research is needed for use of CSII in pregnancy

References

1-Continuous subcutaneous insulin infusion vs intensive conventional insulin Therapy in pregnant diabetic women: a systematic review and meta-analysis of randomized, controlled trials. Mukhopadhyay, Asima et al. *Am J Obstet Gynecol* . 2007;197 (5): 447 - 456