

Gestational diabetes and breastfeeding

Gestational diabetes mellitus (GDM) is a condition **caused** by impaired glucose tolerance resulting in hyperglycaemia and affecting around 13% of **Australian** women in pregnancy.

Potential lactation challenges

Mothers with GDM have **lower** rates of exclusive and total duration of breastfeeding as compared to mothers without GDM. Lactation may be more challenging for women with GDM because it can **delay** secretory activation, increasing the risk of early supplementation which may **interfere** with the establishment of maternal milk production. Also, mothers with GDM commonly **perceive** their milk supply as being insufficient and have lower breastfeeding **self-efficacy**. In addition, there is an **increased** risk of pregnancy and neonatal complications in women with GDM (eg prematurity, caesarean delivery, infant macrosomia, and hypoglycaemia) which can result in significant breastfeeding challenges.

Importance of breastfeeding for mothers with GDM and their infants

Despite the challenges, breastfeeding is important for mothers with GDM. Women with GDM are 10 times more likely to develop **type 2 diabetes mellitus** (T2DM) later in life compared to women without GDM. A **meta-analysis** of approximately 10,000 women demonstrated a 21% reduced odds of progression to T2DM among women with longer breastfeeding of any intensity after a GDM pregnancy. In addition, women with previous GDM with longer breastfeeding durations have more favourable **metabolic** parameters (eg significantly lower body mass index, fasting glucose, triglyceride, and higher insulin sensitivity index) compared with women with shorter breastfeeding durations.

Breastfeeding is also important for infants born to mothers with GDM. Colostrum helps stabilise blood glucose levels which is particularly important for infants born to mothers with GDM. In addition, children exposed to GDM in utero are at higher risk of **obesity** and **T2DM** later in life but breastfeeding may help to mitigate these risks.

Preparing to breastfeeding successfully with GDM

Given the importance of breastfeeding for mothers with GDM and infants born to mothers with GDM, getting breastfeeding off to the best start possible is worthwhile. These steps may include:

- Expressing colostrum **antenatally**.
- Breastfeeding (and/or expressing as required) within the first hour after birth and frequently thereafter.
- Frequent **skin-to-skin** contact to improve newborn outcomes including assisting with temperature and blood glucose regulation, encouraging the infant to seek their mother's breasts and enhancing maternal/infant bonding.
- Breastfeeding support from the Australian Breastfeeding Association (eg **mum2mum app**, **breastfeeding education classes**, **local support groups**, **National Breastfeeding Helpline**, **website**).



**Australian
Breastfeeding
Association**

For the most up to date version of this and other topics go to abaprofessional.asn.au

