

## **Gestational diabetes may predict artery disease**

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**Section:** NEWS

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**Highlight:** Gestational diabetes may be a marker for early atherosclerosis in women.

### **Body**

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HealthDay News -- Having gestational diabetes may be a marker for early [atherosclerosis](#), even among women who weren't obese before getting pregnant and who did not develop diabetes or metabolic syndrome after giving birth, researchers found.

In an analysis of 777 women who did not go on to develop diabetes or metabolic syndrome after pregnancy, mean carotid intima media thickness (ccIMT) was 0.023 mm higher for those who had gestational diabetes than in those who didn't (0.784 vs. 0.761,  $P=0.039$ ), Erica P. Gunderson, PhD, MPH, of Kaiser Permanente Northern California in Oakland, and colleagues reported in the *Journal of the American Heart Association*.

Including pre-pregnancy insulin resistance in the controlled analyses did not impact differences in ccIMT, and mean measurements did not differ by gestational diabetes status among women who developed diabetes or metabolic syndrome ( $P=0.58$ ), the researchers found.

"Our findings support the addition of postpartum screening for cardiovascular disease risk factors among women with a history of [gestational diabetes], to identify women at highest risk for early cardiovascular disease and related morbidity or mortality during mid-life," they wrote.

It is known that gestational diabetes increases lifetime risk for diabetes and metabolic syndrome, both risk factors for cardiovascular disease, but little research exists on how gestational diabetes affects atherosclerosis onset independent of obesity prior to pregnancy or metabolic syndrome after pregnancy.

So Gunderson and colleagues examined data from 898 women enrolled in the **Coronary Artery Risk Development in Young Adults** (CARDIA) trial, a biracial, population-based, multicenter, longitudinal, observational study.

Overall, 119 (13%) had a history of gestational diabetes (7.6 per 100 deliveries). All participants were free of diabetes and metabolic syndrome at baseline in 1985-1986. Participants had at least one child during the 20-year follow-up period. ccIMT measurements were taken in 2005-2006 (average age 44 years).

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Follow-up visits were performed at 7, 10, 15 and 20 years. Study investigators collected data on lifestyle, sociodemographic factors, medical conditions, medication, post-baseline diabetes diagnosis, family history of diabetes, reproductive events, gestational diabetes status, clinical assessments, anthropometric measurements and blood specimens.

"GDM history may be considered a risk factor for atherosclerosis before the onset of diabetes or metabolic disease," the researchers wrote. "Our findings suggest that body size, blood pressure control, and insulin resistance may be important modifiable risk factors that may influence progression of atherosclerosis during midlife in women with a history of GDM."

### References

[\*Gunderson E et al. J Amer Heart Assoc. 2014; doi: 10.1161/JAHA.113.000490.\*](#)

## Classification

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