

Lush Summer, Louisville, Kentucky

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

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# Preeclampsia

- Definition = New onset of hypertension and proteinuria after 20 weeks gestation.
  - Systolic blood pressure  $\geq 140$  mmHg **OR** diastolic blood pressure  $\geq 90$  mmHg
  - Proteinuria of 0.3 g or greater in a 24-hour urine specimen
  - Protein/creatinine ratio of 0.3 mg/dL or more or
  - c Dipstick reading of 2+ (used only if other quantitative methods not available)

# Preeclampsia(continue)

- Or in the absence of proteinuria, new-onset hypertension with the new onset of any of the following:
- Thrombocytopenia: Platelet count less than  $100,000 \times 10^9/L$
- Renal insufficiency: Serum creatinine concentrations greater than  $1.1 \text{ mg/dL}$  or a doubling of the serum creatinine concentration in the absence of other renal disease
- Impaired liver function: Elevated blood concentrations of liver transaminases to twice normal concentration
- Pulmonary edema
- New-onset headache unresponsive to medication and not accounted for by alternative diagnoses or visual symptoms

# **Diabetes in Pregnancy**

**Definition: Gestational diabetes (GDM) is defined as glucose intolerance of variable degree with onset or first recognition during the present pregnancy.**

## غربالگري و تشخيص ديابت بارداري

□ براي تمام خانم هاي باردار غيرديابتيك (طبيعي و پره ديابتيك)، به منظور غربالگري ديابت بارداري، در هفته 24 الی 28 بارداری آزمون تحمل گلوکز خوراكي دو ساعته با مصرف 75 گرم گلوکز (OGTT) درخواست مي گردد.

غيرطبيعي	$\geq 92$	قند خون ناشتا (mg/dl)
	$\geq 180$	قند خون ۱ ساعت پس از مصرف گلوکز (mg/dl)
	$\geq 153$	قند خون ۲ ساعت پس از مصرف گلوکز (mg/dl)

در صورتي که حداقل يکي از نتايج آزمایش قند خون غير طبيعي باشد، تشخيص ديابت بارداري قطعي و اقدام لازم و پيگيري ضروري است.

# Risk Factors for Gestational Diabetes Mellitus

- Maternal age greater than 30 years
- Previous macrosomic, malformed, or stillborn infant
- GDM in a previous pregnancy
- Family history of diabetes
- Maternal obesity
- Persistent glucosuria
- Chronic use of certain drugs such as  $\alpha$ -sympathomimetics or corticosteroids
- 
- GDM, gestational diabetes mellitus.

# نحوه انجام GTT

- زمان :صبح
- بدنبال ۳روز تغذیه خوب شامل ۲۵۰گرم کربوهیدرات
- NPO(حداقل ۸ساعت)
- بعدازگرفتن FBSمصرف ۱۰۰گرم گلوکز وچک قندخون ۱،۲،۳ ساعت پس از آن
- اگر به علت تهوع نتوانست گلوکز بخورد مصرف وریدی ۵۰گرم گلوکز ۵۰%

**TABLE 52-4.** Fifth International Workshop Conference on Gestational Diabetes: Diagnosis of Gestational Diabetes by Oral Glucose Tolerance Testing<sup>a</sup>

Time	Oral Glucose Load			
	100-g Glucose <sup>b</sup>		75-g Glucose <sup>b</sup>	
Fasting	95 mg/dL	5.3 mmol/L	95 mg/dL	5.3 mmol/L
1-h	180 mg/dL	10.0 mmol/L	180 mg/dL	10.0 mmol/L
2-h	155 mg/dL	8.6 mmol/L	155 mg/dL	8.6 mmol/L
3-h	140 mg/dL	7.8 mmol/L	—	—

<sup>a</sup>The test should be performed in the morning after an overnight fast of at least 8 h but not more than 14 h and after at least 3 days of unrestricted diet ( $\geq 150$  g carbohydrate/d) and physical activity. The subject should remain seated and should not smoke during the test.

<sup>b</sup>Two or more of the venous plasma glucose concentrations indicated below must be met or exceeded for a positive diagnosis.

From Metzger and colleagues (2007), with permission.



**TABLE 51-2. Classification of Diabetes Complicating Pregnancy**

Class	Onset	Fasting Plasma Glucose	2-hour Postprandial Glucose	Therapy
A <sub>1</sub>	Gestational	< 105 mg/dL	< 120 mg/dL	Diet
A <sub>2</sub>	Gestational	> 105 mg/dL	> 120 mg/dL	Insulin
Class	Age of Onset (yr)	Duration (yr)	Vascular Disease	Therapy
B	Over 20	< 10	None	Insulin
C	10-19	10-19	None	Insulin
D	Before 10	> 20	Benign retinopathy	Insulin
F	Any	Any	Nephropathy <sup>a</sup>	Insulin
R	Any	Any	Proliferative retinopathy	Insulin
H	Any	Any	Heart	Insulin

<sup>a</sup> When diagnosed during pregnancy: 500 mg or more proteinuria per 24 hours measured before 20 weeks' gestation.

From American College of Obstetricians and Gynecologists (1986).