

Eating Well with Gestational Diabetes

**This booklet provides healthy eating advice for
women diagnosed with Gestational Diabetes**

This booklet was given to you by:

Name:

Contact Tel No:

Our Values

Service Teamwork Ambition Respect

What is gestational diabetes?

Our blood glucose (or sugar) levels are normally controlled by a hormone called insulin. In diabetes, there is a lack of insulin and the blood glucose levels rise. More insulin is needed during pregnancy, so diabetes is more likely to occur. Diabetes during pregnancy is known as Gestational Diabetes.

Will I always have diabetes?

Once your baby is born, your blood glucose levels will probably return to normal. It is likely that you will get gestational diabetes again in any future pregnancy. For a small minority, the diabetes continues after pregnancy. You will have a test after your baby is born to determine whether you still have diabetes.

Women who develop gestational diabetes are at an increased risk of developing type 2 diabetes. This is especially so if you are overweight. Losing weight after you have had your baby, if you need to, is the best way to reduce your risk of developing diabetes in later life.

What treatment will I need?

You will be shown how to check and record your own blood glucose readings. Sometimes, changing your diet is enough to control blood glucose levels. Often, insulin may also be needed in order to achieve good control. It is important that gestational diabetes is properly treated, as high blood glucose levels in pregnancy may lead to complications for you and your baby.

Do I need a special diet?

Your diet should be healthy and well-balanced and include all the nutrients that you and your baby need. You do not need to buy any “special” food. The healthy eating advice on the following pages will help you control your blood glucose levels.

Eat regular meals containing ‘starchy’ carbohydrate foods

Eat regularly, ideally at least three times a day. If you are hungry, or taking insulin, you may need to add small snacks in-between meals.

Include a *medium-sized* portion of one of the following foods with each meal. The choices marked with a ☺ are especially good as they tend to produce a smaller rise in blood glucose and keep you feeling full for longer. These are known as “low glycaemic index” foods.

- **Breakfast Cereals** – e.g. porridge☺, unsweetened muesli☺, fruit and fibre, Shreddies, Weetabix, Shredded Wheat, Special K.
- **Bread** – e.g. granary☺, multi-grain☺, wholemeal, high-fibre, white, white, pitta, rye☺, chapatti☺, naan.
- **Starchy vegetables** – boiled, jacket or mashed potato, sweet potatoes☺, oven chips, yam.
- **Pasta and Noodles.** All kinds☺
- **Crackers** - Crackers, rye crispbread☺, oatcakes☺.
- **Rice and other Grains** – e.g. basmati rice☺, couscous, bulgar wheat☺, white or brown rice.

Cut down on sugar and sugary foods and drinks

Sugar does not need to be excluded completely from your diet but it is important to avoid foods and drinks that cause a rapid rise in blood glucose levels.

- Use diet and 'no added sugar' varieties of squash and fizzy drinks. Avoid glucose/sports drinks.
- Limit/avoid high-sugar foods, e.g. cakes, biscuits, sweet puddings and chocolate. Choose semi-sweet varieties e.g. rich tea/garibaldi or un-iced fruit buns/scones
- Use sweeteners, e.g. 'Canderel', 'Sweetex', 'Hermesetas', 'Splenda' in place of sugar
- Choose tinned fruit in natural juice rather than syrup.
- Avoid sugar-coated breakfast cereals, e.g. frosted flakes, sugary puffs and hoops, chocolate-flavoured cereals.
- Bedtime drinks e.g. 'Horlicks', 'Ovaltine' and drinking chocolate (including low-fat varieties) are high in sugar. Diet versions e.g. 'Highlights' and 'Options' are fine.
- Jams and marmalades, including reduced-sugar versions, should be spread thinly.
- Choose diet/healthy eating yogurts and fromage frais instead of ordinary or low fat ones
- Be careful with low fat cakes and puddings – these often have extra sugar in place of the fat

Reduce your fat intake

A high fat intake increases the risk of heart disease, particularly if you have diabetes. Cutting down on fat will also help if you need to lose weight.

- Choose lean meat, chicken or turkey (no skin) and/or trim off visible fat. Keep portions of meat small. Limit fatty meats, e.g. luncheon meat, sausages, etc.
- Use semi-skimmed or skimmed milk.
- Limit cheese to about 100g/4oz per week, or try lower fat versions e.g Edam, cottage cheese, low-fat cheese spread
- When frying or roasting, use a non-stick pan and a tiny amount of a mono-unsaturated oil (e.g olive or rapeseed oil). Grill, casserole, microwave or bake food instead, where possible
- Choose a reduced fat spread: again, olive-based varieties are best
- Choose low-fat salad creams, mayonnaises, salad dressing and sauces wherever possible and use small amounts, e.g. 1–2 tsp per serving.
- Cut down on pastry, dumplings, crisps, nuts and similar snacks.



Increase your intake of fruit and vegetables

These contain good quantities of fibre, are low in fat and are also high in vitamins and minerals, which are important for long-term health. The aim is to eat *at least* 5 portions of fruit and vegetables per day – the more variety the better.

What is a portion?

Half a grapefruit or mango
One medium apple, pear, peach or orange, small banana, slice of melon, peach, handful of grapes, large handful (6oz/150g) berries
Two small fruits e.g clementines, satsumas, kiwi, plums
2-3 heaped tablespoons of vegetables, including pulses/dahl
Small bowl of salad
Small glass of unsweetened fruit juice (maximum 2 per day taken with meals as it contains lots of natural sugar)

- Because fruit contains natural sugars, it is a good idea to limit your total daily fruit intake to no more than 4 portions, spread out over the day.
- Take care not to overcook vegetables – this can destroy the vitamin and mineral content.
- The nutrient content of frozen vegetables is just as good as fresh.

Meal Ideas

Breakfast:

Porridge – try it topped with fresh or dried fruits

Granary bread or toast with low-fat spread and reduced sugar marmalade

Weetabix with sliced banana and semi-skimmed milk

Unsweetened muesli with milk or low-fat natural yoghurt



Fruit and fibre cereal with low-fat milk

Main Meals:

Lean meat, fish or chicken with vegetables and boiled potatoes

Meat, fish or vegetable curry with rice or naan or chapatti

Cottage pie with vegetables

Ham, chicken, egg or cheese salad with new potatoes

Lasagne with salad

Chilli Con Carne with rice



Light Meals:

Baked beans on granary toast

Soup and roll

Jacket potato with baked beans or tuna with salad

Sardines or pilchards on toast

Sandwiches: ham/salad, egg/tomato, tuna/cucumber



Desserts:

“Diet” or “healthy eating” yoghurt/fromage frais

Sugar-free instant whip/Angel Delight/jelly

Fruit tinned in natural juice, stewed fruit or fruit salad, served with sugar free custard, single cream or a scoop of ice-cream



Between Meal Snacks:

Fresh fruit

Slice of toast

Wholemeal fruit scone or muffin

Breakfast cereals, cereal bar



Foods To Avoid During Pregnancy

Your midwife has probably already given you information about the foods to avoid during pregnancy. In summary, these are:

- Mould-ripened or blue-veined cheeses e.g Stilton, Brie. Cheese spreads and hard cheeses like Cheddar are fine.
- Raw or lightly cooked eggs. Well-cooked eggs and mayonnaise from a jar can be safely eaten
- Paté, liver and liver products
- Raw or undercooked meat
- Shark, Swordfish and Marlin
- Keep oily fish, e.g. Salmon, Mackerel and Sardines to no more than two portions per week. Do not eat more than four medium cans of tuna per week.
- Limit caffeine intake from coffee, cola and chocolate
- Ideally, avoid alcohol, or only drink in small amounts e.g. a small glass of wine

Notes

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Created by Registered Dietitians
Nutrition & Dietetics Department, The Great Western Hospital,
Marlborough Road, Swindon, Wiltshire, SN3 6BB
Tel.: 01793 605149 www.gwh.nhs.uk
Date Created: December 2011 Review Date: December 2013