# Awareness Regarding Gestational Diabetes Among women in South Punjab, Pakistan

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### Abstract-

**Background :**Gestational diabetes is the leading cause of type 2 diabetes mellitus in females. Approximately 10 to 12 % of females develop type 2 diabetes every year after gestational diabetes. If the current trend continues, it will affect many females in Pakistan. Expectant mothers should be cautious of certain risk factors which may increase their chances of developing the condition.

**Objective:**To determine the awareness practices regarding gestational diabetes among pregnant women attending antenatal clinics in Indus Hospital Muzafargarh.

**Methods:** This study was conducted in Indus Hospital Muazafargarh Pakistan. A descriptive cross-sectional study was conducted. Data was collected by convincing sampling. Our sample size was 150 females attending antenatal visits. Closedended questioner was used. Collected data was analyzed on SPSS, and descriptive statistics was applied.

**Results:** Study included 150 respondents with fullest response rate in which 35% pregnant women known to have gestational diabetes mellitus. Whereas, 65% expected mother was totally unaware of gestational diabetes mellitus. The adherence knowledge was poor in most of pregnant ladies regarding proper health practices, risk factors, and gestational diabetes.

Conclusion The study suggests that the knowledge and awareness of Gestational Diabetes among the larger population needs attention. Additionally, knowledge of the risks and complications is low among participants. Significantly limited literature was available on antenatal women and on the provision of awareness Programs for such participants. Overall survey explains variation in health awareness regarding gestational diabetes in women in South Punjab Pakistan.

*Index Terms*- Awareness, Knowledge, Gestational Diabetes, Pregnancy, Antenatal Visits.

### I. INTRODUCTION

Diabetes is presently perceived as a significant constant general medical issue all through world and influencing an enormous number of individuals in a wide scope of ethnic and monetary levels in both created and agricultural nations. However, it is assessed that the non- industrial nations endure the worst part of this epidemic in the 21<sup>st</sup> century, with 80% of all new cases of diabetes expected to appear in developing countries by 2025 (Mumu, Saleh, Ara et al., 2014).

A subtype of DM is Gestational diabetes mellitus (GDM) and is characterized that glucose intolerance with onset or first recognition during pregnancy. Diabetes in pregnancy can be classified into three types (a) gestational diabetes mellitus (GDM) that is specific during pregnancy; (b) clear DM, unseen past diabetes mellitus that is perceived in pregnancy and last one Pre gestational DM, found in women with set up diabetes who become pregnant. About 16.2% of live births are presented to hyperglycemia in utero, 85.1% of which is because of GDM.2. The prevalence of GDM is most elevated in Southeast Asia, for the most part in low or center pay gatherings, assessed at around 24.2% (ayesha & Shafique, 2020). Women with gestational diabetes have long-term morbidity effects on children (Lucey. Lauren et al., 2017).

Gestational diabetes mellitus occurs during pregnancy, with screening typically occurring at 24–28 weeks of gestation in pregnant women not previously known to have diabetes. Prediabetes is analyzed when blood glucose levels are over the typical reach, however not sufficiently high to be named diabetes; affected people have an increased danger of creating type 2 diabetes yet may forestall/postpone its beginning with actual work capacity and other way of life changes (Colberg et, al., 2016).

Physical activity and exercise a woman can perform while she is pregnant are physical activity prior to and during pregnancy. i.e. Pregnant women with or at risk for gestational diabetes mellitus should be advised to engage in 20–30 min of moderate-intensity exercise on most or all days of the week. Physical activity and exercise during pregnancy have been shown to benefit most women by improving cardiovascular health and general

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fitness while reducing the risk of complications like preeclampsia and cesarean delivery (Manni Uma et al., 2016)

Significance of Study

A study on the awareness of gestational diabetes among pregnant women related to health practices, foods, and culture will help to best serve the health needs of pregnant women. By recognizing social builds might better plan medical care professionals to comprehend pregnant women's sentiments and thoughts about gestational diabetes. They will be able to prevent themselves and many lives around them by providing enough information related to diabetes and its complication that have a direct effect on the health of women and passively, their family.

This study will help students and graduate nurses be aware of current health knowledge so they will have an influential role in modifying patient behavior to assist them. This study will help graduates have in-depth knowledge regarding the best health practices to patients.

Justification of Study

According to data there is a lot of research on this topic but there is still need to more emphasis on awareness and knowledge on gestational diabetes. Currently, developing countries like Pakistan which has improper or poor knowledge. It is assessed that roughly 10 to 12 percent of pregnant women in Pakistan experience its hostile effects. GDM builds danger for these ladies creating Type 2 diabetes later on, despite the fact that glucose might get back to normal soon after baby birth. So if women are aware of health practices, knowledge, and risk factors, they can prevent themselves from future complications.

### Research Question

Do the pregnant women attending clinical antenatal visits have enough awarenessand information regarding gestational diabetes?

Objective: To determine the awareness practices regarding gestational diabetes among pregnant women attending antenatal clinics in Indus Hospital MuzafarGarh.

# **METHODS**

The research design used in the study is a cross sectional study. Study wasconducted from february to March 2022 among women who met inclusion critrea.

# Study population.

The population of this study was pregnant women visiting obstetrics outpatient department of Indus Hopsital Muzafargarh.

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**Sample size:** The sample size of the study was 150 pregnant women.

**Inclusion criteria:**Pregnant women without history of gestational diabetes.

Exclusion criteria: Known cases of diabetes.

**Research tools:**Close ended questions were used concerning knowledge, attitude and practice regarding awareness and risk factors of Gestational diabetes among pregnant women.

**Sampling Technique:** Several sampling techniques are used to collect data but in current study convince sampling technique was used which subset of non-probability is sampling. In convince sampling where the first available primary data was used for research without additional requirement.

**Data Analysis**: Data was analysis SPSS tool (version 20) and present in graphical form.

# Results

Main objective of this study is to know the awareness among pregnant ladies regarding gestational diabetes. The current study analysis the intensity of knowledge about gestational diabetes. A total of 150 pregnant women attending the antenatal clinics were interviewed, of whom 59 were from rural area of south Punjaband the rest from urban areas of muzafargarh district. Women mean age was  $25 \pm 4$  years.

A study of Bangladesh reported that, with increasing age, the prevalence of GDM also increase significantly and the odds of a woman>25 years of developing GDM were 3.8 times than a woman 25 years of age (Begum et al., 2017). Study conducted in India (Seshiah et al., 2008) found the odds ratio was 2.1 for women aged >25 years. Current study found that information providing by family is 43%, friends 34%, neighbors are 10% and tv is a Bangladeshi study reported that, hospital/clinic (50.5%), peer (29.9%) and family (20.6%) was the major and friends (.9%), internet (5.6%), television (15.9%) and other patients (18.7%) were the other source of knowledge (Islam et al., 2017). ). A study of India conveyed among all the antenatal women attending a Primary Health Center (PHC) for antenatal care, found that major sources of knowledge on GDM were television/radio (40%), neighbors/friends (34.2%), and family members while doctors (13.3%), health-care workers (20.8%), or hospital charts/boards (18.3%) were less common sources (Shriraam et al., 2013).

## **Discussion**

The overall findings of this study show that there are significant difference in knowledge between GDM patients and normal pregnant women concerning major aspects of GDM. According to the study, pregnant women more than 27 year age group has highest GDM rate.

Other findings of the study exhibit a significant association among education, healthy diet and processed food and maintaining nutrition with awareness of GDM. These findings are consistent with the study conducted in Malaysia (Hussain et al., 2015), where patients with higher literacy families hadbetter knowledge about GDM.

Health awareness programs should be directed to work on the information on antenatal women for better usage of health administrations, training physicians, paramedical staff, and the public regarding GDM. Early education before pregnancy can also be given. Health guidance sessions can be directed in antenatal clinics , and towns by portable clinical units and meetings. This will create more awareness about GDM and its complications. Health education posters can be displayed in public. Our study showed a high prevalence of GDM awareness and knowledge.

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### Conclusion

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The high and rising predominance of diabetic pregnancy and its unfriendly short and longer term results in South Asians, especially the individuals who relocate to big timesalary nations and districts, are intervened by examples of human conduct (what ladies eat, and how much exercise theytake, previously and during pregnancy) that are ineffectively coordinated to their metabolic necessities. The study has uncovered that information about GDM is poor among pregnant ladies, particularly among ordinary pregnant ladies. Ordinary pregnant ladies need information on GDM in each perspective, which prompts restricted mindfulness. This features the need for more vital endeavors at the program level to further develop lady's information on GDM in light of the fact that higher information will absolutely prompt further develop pregnancy results.

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