

POST-PARTUM CARE NEEDS FOR WOMEN (Type 1 and Type 2 Diabetes)

Blood Glucose Goals:

- Fasting or pre-meal: 80-130 mg/dL
- Peak prandial or after meal less than 180 mg/dL
- Hypoglycemia or low blood glucose is less than 70 mg/dL
- Breastfeeding increases insulin sensitivity and could cause hypoglycemia, and some women need an additional snack of 15 grams of Carbohydrate around feedings
- HbA1c goal \leq 7.0 %

Glucose Monitoring:

- Continue testing 4-8x daily unless otherwise advised (Fasting, Pre-meal, and Bedtime)
- Continue wearing continuous glucose monitor unless otherwise advised

Calorie Needs:

- If you plan on breastfeeding you will need additional calories in order to meet your nutrition needs.

Exercise:

- When cleared by your doctor for exercise, standard goals for post-partum are 30 minutes of moderate activity every other day, and not resting more than 2 days in a row.
- Weight loss goals for post-partum are 60 minutes of moderate-vigorous activity for 5-6x per week.

Diabetes Medication Management:

- Most postpartum women will need to reduce doses by 50-60% due to having more insulin sensitivity post-partum.
- Some women with Type 2 diabetes may be started back on oral medications instead of insulin.
- Make sure insulin on board and glucose targets are changed back to original settings.
- Review infusion sets as you can change back to original set if you prefer

Provider Follow-Up:

- It is recommended to follow-up with your health care provider 6 weeks post-partum in order to ensure medication doses are accurate.
- If you are experiencing unexplained hypo or hyperglycemia please contact your CDE for assistance prior to your next schedule appointment.
- If you do not have a primary care physician or endocrinologist you see regularly, we do recommend finding one to be seen at least annually, if not every 3-6 months to reassess HbA1c and glucose control status as well as proper medication management to meet your most current care needs.