Addressing barriers to weight loss such as maternal fatigue and time constraints may be critical to the success of interventions in gestational diabetes patients.

The CDC estimates that 5% of pregnancies are complicated by gestational diabetes, which means about 200,000 women each year are affected. A small percentage of these women have undiagnosed preexisting diabetes; these women can be identified for early treatment through structured counseling. Structured counseling is one of the most effective methods for counseling women, a 2.9-kg weight loss was achieved, women who had preexisting diabetes, might benefit from diabetes prevention interventions, Dr. England said. Dr. England said in a 2007 Cochrane review, the impact of diet, exercise, or both were compared with usual care for weight reduction in postpartum women in six trials. Diet interventions included dietary advice through group meetings, telephone calls, mail correspondence, individual dietary counseling, or prescription of a calorie-restricted diet. Exercise interventions included counseling and structured exercise programs with supervised exercise (Cochrane Database Syst Rev. 2007;CD005627). In a single trial of exercise alone in 33 postpartum women, no weight loss was achieved. In a single trial of diet alone in 45 postpartum women, a 1.7-kg weight loss was achieved, which reached statistical significance. In four trials of diet and exercise combined in 169 postpartum women, a 2.9-kg weight loss was achieved, which reached statistical significance. However, Dr. England emphasized, “these trials were small.”

She said she had no conflicts of interest to disclose.