

Key variables examined in gestational diabetes advance

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For women with gestational diabetes mellitus, clinical and genetic factors including higher pre-pregnancy body mass index are associated with development of type 2 diabetes mellitus, according to a study published online March 7 in the *Journal of Clinical Endocrinology*.

(HealthDay)—For women with gestational diabetes mellitus (GDM), clinical and genetic factors including higher pre-pregnancy body mass index are associated with development of type 2 diabetes mellitus (T2DM), according to a study published online March 7 in the *Journal of Clinical Endocrinology*.

Soo Heon Kwak, M.D., from the Seoul National University Hospital in Korea, and colleagues conducted a hospital-based [prospective cohort study](#) that enrolled 843 women with GDM to examine the clinical and [genetic risk factors](#) that are associated with the development of early or late T2DM.

The researchers found that 12.5 percent of subjects had T2DM at two months postpartum (early converters). Late converters included a further 23.8 percent of the remaining 370 subjects who developed T2DM during more than one year of follow-up. Higher pre-pregnancy body mass index, higher area under the curve of glucose during an antepartum [oral glucose tolerance test](#), lower fasting insulin concentration, and decreased beta-cell function were independent risk factors for early converters. Higher pre-pregnancy [body mass index](#) and higher glucose area under the curve were independent risk factors for late converters. Early conversion was associated with variants in *CDKN2A/2B* and *HHEX*, while late conversion correlated with variants in *CDKAL1*.

"In conclusion, a significant portion of GDM subjects progress to T2DM in the early postpartum period and continue to have a high incidence of T2DM at later periods," the authors write. "This strongly supports the current recommendation that GDM women be tested for their glucose tolerance status at two months postpartum and annually thereafter."

More information: [Abstract](#)
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