Abstract:

This bachelor's thesis deals with the subject of gestational diabetes mellitus (GDM), the most common metabolic disorder in pregnancy. GDM is a carbohydrate metabolism disorder that develops during pregnancy and disappears after delivery. GDM is associated with a lot of complications and risks for both mother and child. For this reason, it is very important to make an early diagnosis of GDM and start timely treatment, which includes lifestyle changes, regular physical activity, or drug therapy.

The theoretical part summarizes current information on GDM. In the practical part, follow-up OGTT data obtained 3 - 6 months after delivery were analysed. The aim of the thesis was to assess OGTT results through a statistical analysis of data of women treated for GDM diagnosed in 2016 and 2017. Retrospective processing of medical records was done.

It was found that 75 patients (48.1%) had positive follow-up OGTT results after delivery, out of which 70 patients (93.3%) had elevated fasting blood glucose. 7 patients (9.3%) had increased glycaemia at 120 minutes after the test. Positive OGTT results fell into the pre-diabetic range.

Only a very small percentage of women undergo follow-up OGTT after delivery, although nearly half of them have positive OGTT results. Risk factors such as higher BMI before pregnancy or drug therapy play a role.

Key words: gestational diabetes mellitus, risk factors, diet, treatment of GDM