

## Nutrition and Dietetics

# Healthy Eating for Mums to be with Diabetes

Many women who have diabetes (Type 1, Type 2 and gestational) have healthy pregnancies and healthy babies. This booklet contains dietary information that will help you to manage your diabetes during pregnancy.

Gestational diabetes develops during pregnancy usually during the 2nd or 3rd trimester and results in a raised blood glucose level. This is thought to be as a result of the hormones produced during pregnancy blocking the action of insulin in the body. Insulin is the main hormone responsible for controlling blood glucose levels. In women who have gestational diabetes, not enough extra insulin is produced to overcome this blocking effect.

Blood glucose levels usually return to normal after your baby is delivered. However for some women blood glucose can remain high. It is therefore very important that you have a blood test to check your blood glucose levels 6 weeks after your baby is born.

Following a healthy balanced diet in pregnancy will provide all the nutrients to support you and your developing baby.

### Carbohydrate

Carbohydrate provides your body with an essential source of energy in the form of glucose. All carbohydrate containing foods are digested into glucose.

#### Examples of carbohydrate containing foods are:

**Starchy:** Potatoes, rice, bread, cereals, pasta, chapatti, sweet potato, noodles, couscous, yam and plantain, pastry and bread crumbs.

**Foods with added sugar:** Cakes, pastries, biscuits, pudding, desserts, sweet, chocolate, sweet and sugar drinks.

**Naturally sweet foods:** Fruit, fruit juice, smoothies, milk and dairy products.

In pregnancy you will find that your blood glucose levels respond differently to carbohydrate and you will need to be more mindful of the type and the amount of carbohydrate you choose to eat.

### Carbohydrate Amount / Portion

The amount of carbohydrate needed will vary from person to person and at different stages of pregnancy. We can review this with you in clinic. Most women find that they are unable to tolerate large amounts of carbohydrate without elevating their blood glucose levels.

Some women find they do not tolerate carbohydrate as well in the morning compared to other times of day and need to split their usual breakfast between breakfast and mid-morning. For example, if you usually have 2 slices of toast in the morning you may need to have one slice at breakfast and the second slice a couple of hours later. For some women this is achievable, but not for others and we can discuss this with you in clinic.

To make sure you eat to your appetite and get sufficient nutrients, adding in protein at breakfast can be helpful – again we can discuss this with you in clinic.

The following may be a good place to start:

### **Breakfast: 20 – 30g carbohydrate**

- Small pot of natural / diet / Greek yoghurt (125g) and 1 cup of berries with added natural unsalted nuts / seeds.
- 25g low GI cereal with low fat milk .
- 25g jumbo porridge oats with crème fraiche and 1 cup of berries.
- 1 slice of granary toast with either poached, boiled, scrambled eggs, mushrooms, tomatoes, low fat cheese spread or peanut butter.

### **Lunch and dinner / evening meal: 30 - 40g carbohydrate**

- 2 - 3 slices of bread (medium cut).
- 1 - 1 ½ medium pitta bread.
- 1 medium teacake.
- 3 - 4 egg size new potatoes.
- 1 palm size jacket potato / sweet potato.
- 3 - 4 scoops mashed potato.
- 3 - 4 tablespoon of rice, couscous or pasta.

### **Healthy Snacks**

If you need a small snack between meals or before bed, here are some ideas:

- Fresh fruit, for example: 1 apple, orange, pear, banana.
- A small handful / tablespoon of dried fruit such as raisins or apricots.
- A slice of granary or multigrain bread / toast or 2 ryvitas / high fibre crackers or 2-3 oatcakes with topping such as low fat spread, hummus or salsa.
- 2 small plain biscuits such as Rich Tea or Garibaldi or 1 digestive biscuit.
- 3 tablespoons of breakfast cereal with semi-skimmed milk.
- A small scone, currant teacake, toasted muffin or crumpet with low fat spread.
- A small pot of healthy option, light, virtually fat free or low calorie yoghurt.
- 1 - 2 slices malt loaf.
- 1 x mini pitta bread with low fat cheese spread, peanut butter etc.

### **Low carbohydrate / carbohydrate free snacks:**

- Natural nuts / seeds - handful.
- Olives.
- Avocados.
- Chopped vegetables with low fat hummus, low fat cream cheese or salsa dip.
- Cherry tomatoes.
- Sugar free jelly.
- 1 cup of cherries / berry fruits.
- Lean cooked meats.
- Corn on the cob.
- Boiled egg.
- 1oz low fat cheese.

## Sweet and Sugary Food and Drinks

Sweet and sugary foods and drinks can cause a quick increase in blood glucose levels. Choosing a low sugar or sugar free alternative will help control your blood glucose levels.

Foods high in sugar	Foods to try instead
Sugar, honey, syrup.	Artificial sweeteners (it is best to use a variety), for example, Splenda, Hermetas, Canderel, Sweetex, Truvia, supermarket own brands.
Sugary and sweet drinks.	Diet, Light or Zero fizzy drinks. Sugar free or “no added sugar” squash. 1 small glass of pure fruit juice or smoothie a day (150 - 200ml).
Cream and chocolate biscuits.	1 to 2 plain biscuits such as Rich Tea, Ginger or Garibaldi, Oatcakes.
Cakes, sweet pastries and puddings.	A small serving of low fat milk puddings such as rice pudding, semolina or custard. 1 scone, crumpet, small currant teacake or 1 small slice of malt loaf. 1 portion of fruit.
Thick and creamy yoghurts and fromage frais. (Note some brands of low fat yoghurts can also be high in sugar).	Healthy option, light, diet, virtually fat free or low calorie yoghurts. (Aim for about 5-8g of sugar per 100g).
Jams and marmalade.	Spread thinly or use reduced-sugar varieties or pure fruit spreads.
Tinned fruit in syrup.	Tinned fruit in juice, drained.
Sweets, chocolate, sugary foods such as laddoo, gulas, jamun, kheer, halma and rassomalai.	Sugar free mints or gum. 1 portion of fruit. Low calorie chocolate drinks such as Options and Highlights.

**Special diabetic products such as sweets, biscuits and chocolates are not necessary. They can be high in calories and are usually expensive.**

## Type of Carbohydrate

As well as considering the amount of carbohydrate, choosing more slowly digested carbohydrates can aid blood glucose management.

### Slower release / Low glycaemic index (GI) carbohydrates food

- Bread: Multigrain, granary, rye, seeded, wholegrain, oat, pitta bread and chapatti.
- Potatoes: New potatoes in their skins, sweet potato and yam.
- Pasta: All pasta - cook until al dente and noodles.
- Rice: Long grain rice varieties such as Basmati rice and wild rice.
- Breakfast cereals: Porridge, muesli, most oat and bran-based cereals.
- Other grains: Bulgur wheat, barley, cous cous and quinoa.

## Weight Gain and Physical Activity

The body becomes more efficient at using energy from food when you are pregnant, so most women do not need to eat more than usual until the last 3 months. NICE advises that a woman's energy needs to increase by around 200 calories a day only in the last 3 months of her pregnancy so there is no need to eat for two!

Weight gain in pregnancy varies greatly. Most pregnant women gain between 10kg and 12.5kg (22lb to 26lb), putting on most of the weight after week 20.

Much of the extra weight is due to your baby growing, but your body will also be storing fat, ready to make breast milk after your baby is born.

Trying to avoid excessive weight gain will be helpful in managing your blood glucose levels.

Being more active, especially in the period between eating and doing your 1 hour post meal blood glucose check, can really help manage the blood glucose post meal rise. Try to plan doing some household chores or go for a walk after you meals to aid blood glucose management.

## Useful websites

Diabetes UK

website: [www.diabetes.org.uk](http://www.diabetes.org.uk)

Carbs and Cals

website: [www.carbsandcals.com](http://www.carbsandcals.com)

NHS Choices

website: [www.nhs.uk](http://www.nhs.uk)

**If you have any comments about this leaflet or the service you have received you can contact :**

Diabetes Dietitians  
Diabetes Centre  
Calderdale Royal Hospital

Tel: 01422 222033

email: [cah-tr.diabetesdietitians@nhs.net](mailto:cah-tr.diabetesdietitians@nhs.net)

[www.cht.nhs.uk](http://www.cht.nhs.uk)

**If you would like this information in another format or language contact the above.**

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

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