

# Diabetes and Reproductive Health

## for Girls



“ This is  
more than  
talk...

this is what you need to know  
about taking care of your changing  
body, sex and having children...

...when  
you have  
diabetes.

”



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## Your Body is Changing – Are You Ready?

Since you have diabetes, you already know a lot more about your health than other girls your age. And now that you are a teenager, there are even more things that you need to know and do.

You need to know how diabetes can affect your changing body, your period, and even having sex and having a baby. It sounds like a lot, but now is the time to start getting ready for your future.

Managing your diabetes and knowing what to expect will help you meet the challenge of being prepared for all of the changes as you move toward womanhood.

## Get Ready to Stay Healthy

Just like the rest of your body, your reproductive system needs to have normal blood glucose levels to keep it healthy and working properly.

**“Puberty, periods, sex and pregnancy with diabetes. It’s all about being prepared and knowing how to get ready. This information is called preconception counseling and you can get it from your health care provider.”**





## Keeping Your Blood Glucose on Target

### Target Your Blood Glucose to Normal

It's hard work to keep your blood glucose (sugar) and A1C close to your target. You probably already measure your blood glucose several times a day to make sure it doesn't go too low or too high. As your body changes, you'll find that it might be harder to keep your blood glucose within certain limits.

Some things that affect your blood glucose are under your control like your diet, your medicine, and your activity. Other things are out of your control like

*hormones*, emotions, and how you grow and develop. Managing your diabetes means doing what you can to keep your blood glucose as close to your target range as possible.

Adolescents with diabetes could have a target A1C of less than 7.5%. Work with your doctor or nurse to set your target A1C.

**Hormone:** A chemical in the body that affects how a specific body part works (or functions)

**Q** What is an HbA1c or the A1C?

**A** The HbA1c (or A1C for short) is a blood test that tells what your average blood glucose has been over a few months.

**An A1C of 7% means your estimated average blood glucose is 154 mg/dl.**

**“ Because of hormones, you have to pay way more attention during puberty. Not only are hormones making your body change, but now you might also have to change your meal plan, your exercise, or your medicine. ”**

## Control What You Can:

### 1. Take your diabetes medicine

Medicine, either insulin from shots or a pump or pills, helps blood glucose go down. Insulin helps glucose move out of your blood and into the cells where your body can use it as energy.

### 2. Eat healthy foods

After a meal or snack your blood glucose will go up. Some foods make your blood glucose go up more than others. Balance this with physical activity or insulin.

### 3. Be physically active

Physical activity usually makes blood glucose go down. Sometimes if you exercise and take your insulin as prescribed, your blood glucose can go too low. But, if you are not in good control and you exercise hard, your blood glucose can actually go up!

## How to Get Ready for Physical Activity:

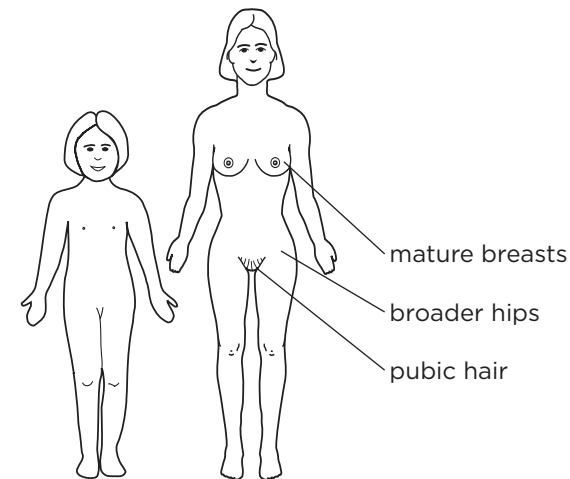
- Check your blood glucose before and after you are physically active
- Adjust your insulin if your blood glucose levels are too high or too low
- Have a snack as needed
- Be sure to drink plenty of water to stay hydrated
- Keep something with glucose with you at all times
- Wear your medical ID



## Puberty and Diabetes

Are you growing taller and weighing more? Your body is getting ready to become an adult. *Puberty* is when your body is turning into an adult body. You might notice that you are growing taller and weighing more. You see changes on the outside of your body like hair in your armpits, your genitals and your breasts begin to develop. There are also changes happening inside your body. All of these changes happen in your reproductive system that gets you ready to make babies in the future.

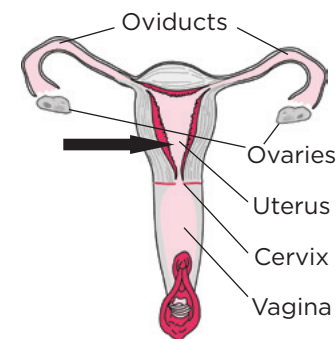
### Changes on the Outside



### Changes on the Inside

What is the arrow pointing to?

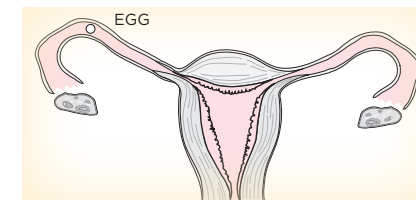
- Uterus
- Ovary
- Cervix
- Vagina



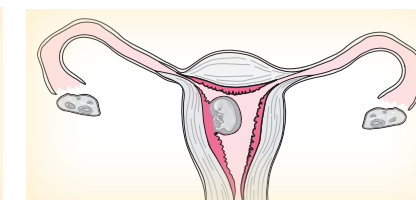
Did you choose uterus? Did you know that a baby grows in the uterus?

## Puberty Means Starting Your Periods

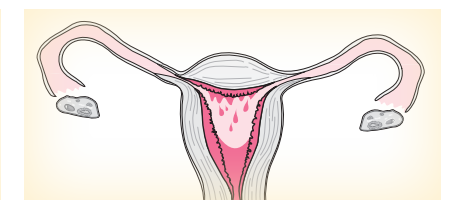
When your body is ready, you will start to get a period. This is what happens in your body to make you have a period.



About once a month an egg leaves the ovary and moves down the fallopian tube to the uterus (or womb).



If you become pregnant, the uterus builds up a thick lining of blood to help the egg grow into an embryo.



If you don't become pregnant during that month, after a few days the blood and egg flow from the uterus and vagina. This is called your *menses* or *period*. When you get your period, the blood flows from the uterus out through the cervix.

**“ If your blood glucose levels are not in good control, your body may or may not have the energy needed to develop properly. You may even start puberty late. ”**

### Definitions:

**Ovaries** – Store and produce the eggs

**Oviducts (fallopian tubes)** – The path that the egg follows from the ovary to the uterus

**Uterus** – Womb. The lower part forms the cervical canal

**Cervix** – Surrounds the cervical canal

**Vagina** – A canal that stretches easily



## Living with Your Hormones

Your body uses special chemical messengers called *hormones* to help it grow and function. During puberty these hormones change. As an egg ripens each month and becomes ready to be released down the fallopian tube, your body makes more hormones. Having your period can make diabetes harder to control. Hormones change in the days before and during your period. After your period your hormones go back to the way they were before an egg was released.

Hormones can change the way that you think about your body and about sex. These changes are called *Premenstrual Syndrome* or *PMS*. *PMS* makes it harder to control your blood glucose.

Q

During your period, controlling diabetes can be

1. easier
2. harder
3. no different

A

**Harder**, because of changing hormone levels

## What Should You Do?

You check your blood glucose and it is over 200!

Too much glucose is in your blood and can't get into your cells to be used as energy. Your body looks for other energy and starts breaking down fat into ketones and fatty acids. Ketones can cause problems and make you sick. If your blood glucose is above 240, check your ketones for a few days before and during your period to avoid problems.

## Riding the PMS Roller Coaster

### Does this sound familiar?

"I have been feeling a little jumpy and my belly's just yucky. And it's like I always want to eat! And I can't help it and my blood glucose is all whacked out!"

### This could be why...

You are probably getting or just starting your period! These types of feelings are normal and related to the hormonal changes in your body. You will need to check your blood glucose more often. You also might need to adjust your insulin or change your meal plan.

## What Can You Expect?

**If your blood glucose is in GOOD CONTROL, you can expect:**

- normal puberty
- normal development

**If your blood glucose is in POOR CONTROL, you might expect:**

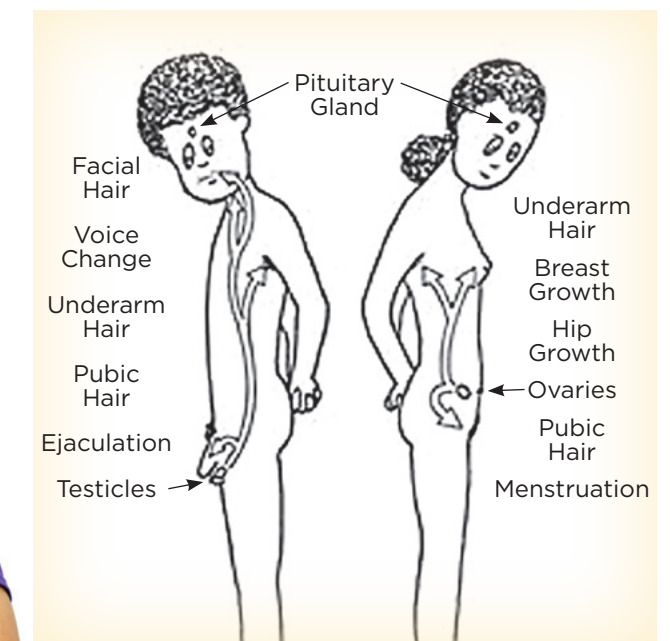
- late puberty (starting your period later)
- irregular periods
- a greater risk for urinary tract infections (UTI)
- vaginal dryness



## Boys Go Through Puberty Too!

While girls' bodies are developing into women's bodies, boys' bodies are developing into men's bodies. Boys' reproductive systems are on the outside of their bodies.

The testicles make many tiny cells called *sperm*. Sperm leave the testicles through the sperm ducts to get to the *penis*. Usually the penis is limp. However, when a man gets sexually excited, blood rushes into the penis and it stiffens. This is called an erection.





## Sex and Pregnancy

### What is Sex?

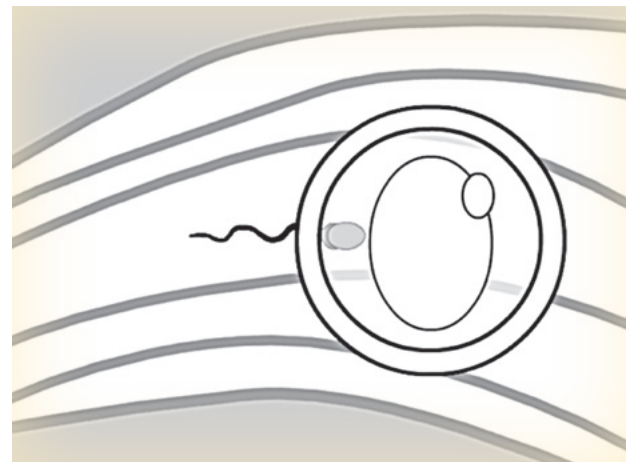
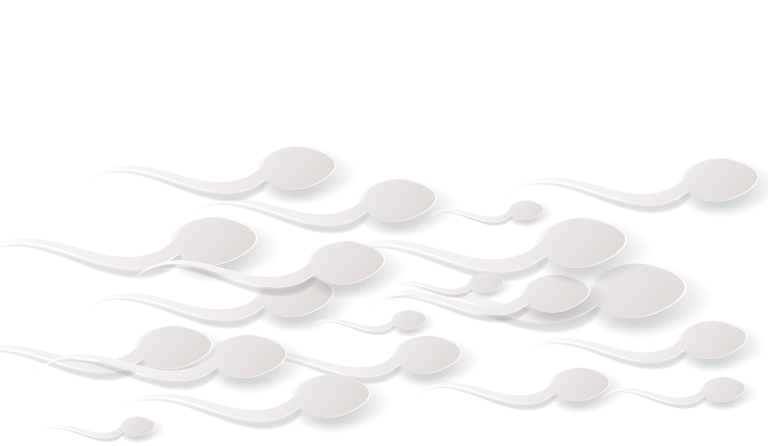
In this book, when we talk about sex, we mean sexual intercourse or vaginal sex. This is when a man puts his penis into a woman's vagina.

### How Do Women Get Pregnant?

During sexual intercourse, that is, when the man's penis is inserted into the woman's vagina, and the man has an ejaculation, sperm squirts into the woman's vagina. The sperm swim up the cervix into the uterus.

If there is an egg coming down the fallopian tube, the sperm and egg meet and the egg is fertilized. This is when *conception* occurs. If *conception* occurs, that means that the woman has become pregnant.

The fertilized egg travels down the fallopian tube into the uterus. When it reaches the uterus it plants itself in the lining of the uterus. The egg then starts dividing many times to form new living cells. This develops into an embryo and then into a fetus which is a developing baby inside the woman's uterus.



Q

An egg must be moving down the fallopian tube for pregnancy to occur

1. True
2. False

A

**True:** In each month cycle, the ovary releases an egg and it moves down the fallopian tube to the uterus

Q

Conception occurs when a sperm meets the egg in the

1. Vagina
2. Uterus
3. Ovary
4. Fallopian tube

A

Conception occurs when sperm meets an egg in the fallopian tubes



## How Fast Does an Embryo Develop?

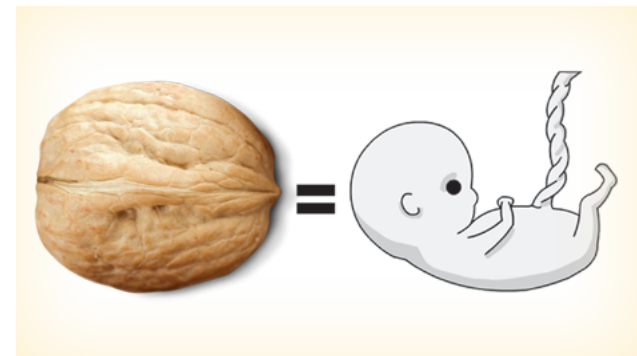
The importance of having tightly controlled blood glucose levels before you become pregnant is obvious when you consider how fast a fetus develops during the first few weeks after conception.

The heart and brain may not form correctly if a woman's blood glucose levels are high during this time.

About 4 weeks after conception, the developing baby is just the size of a pea but already has a head with a brain forming; little bumps that will be arms, legs, and eyes; and a heart beating and pumping blood.



By about 8 weeks after conception, the developing baby is the size of a walnut. The eyes, ears, and nose have taken shape; the arms and legs are formed; the hands have fingers; and the feet have toes.



As you can see, the **first two months of a pregnancy are very important**. During this time the basic organs and body parts are formed. High blood glucose levels can hurt the baby's development. This is why it is essential to control your diabetes **BEFORE** you conceive.

If you don't want to get pregnant you need to think about family planning before you have sex.

**Q**

Only 4 weeks after conception, what has already begun to develop?

1. Heart
2. Brain
3. Eyes
4. Arms
5. All of the above

**A**

**All of the above.** The heart, the brain, the eyes the arms and even legs have begun to develop! In fact, a heart is beating and pumping blood.

## Sex and Diabetes

Just like with any other form of physical activity, when you have sex your glucose level can drop and it can keep dropping afterwards. And just like with any other

type of activity, you should be prepared to prevent low blood glucose before you have sex.

### Prevent Low Blood Glucose

- Check your blood glucose before sex
- Adjust insulin if needed
- Eat a snack if taking insulin
- Have a glucose source handy
- Tell your partner that you have diabetes



**Q**

Did you know that sex can cause low blood glucose, also known as *hypoglycemia*?

**A**

During sex, you need to be careful that your glucose level **does not**

1. rise too high
2. drop too low



## Sex and Diabetes

### What Can Happen?

As you grow and your body changes, you might start thinking about sex. Although your body is becoming an adult's body, you are still a teenager with a lot more growing, and lots of teen activities to do. Teenagers may not yet be prepared for things like having responsible sex, getting pregnant and raising a child.

There are other things you have to consider when having sex. Sex can lead to bladder and yeast infections. You can also catch a sexually transmitted infection (STI). Sex can also change your feelings about other people and how you feel about yourself. You are in control. This includes knowing where you stand in regards to having sex. You may think it is best to wait and not have sex yet and that's okay. Women with diabetes need to plan ahead.



### Having Sex With a Guy Can Lead to Pregnancy

A woman can get pregnant and not even know it.

If you become pregnant before you are ready, you will have some hard decisions to make.

#### *Getting pregnant as a teenager with diabetes means that*

- you can have a bigger chance of serious problems with the pregnancy because of your diabetes and age, especially if you have had problems controlling your blood glucose.
- your baby has a bigger chance of having health problems, even dying.

**But in the future, when you're ready and plan ahead, you can have a healthy pregnancy and healthy baby.**

**“Deciding whether or not to have sex is a really BIG deal. You can become pregnant and not even know it, and the results for you and the baby can be serious. There are so many things to think about and things that can happen. Even more so for girls who have diabetes. When you are READY to get pregnant in the future, plan ahead.”**





Prevent Unplanned Pregnancies

In the future you may decide that you want a baby and are ready for the responsibility of becoming a mom. You will need to work with your health care team to get tight blood glucose control before you become pregnant. You can have a healthy baby if you plan ahead. If you are not ready to have a baby and if you have sex, you could get pregnant accidentally.

The Most Effective Birth Control?

**Abstinence!** There is no sperm to fertilize the egg.

- 100% safe
- 100% effective
- Added bonus: no sexually transmitted infections

“Abstinence is 100% guaranteed!”

The family planning method that you choose will depend on your health, your religious beliefs, and your needs. Your health care provider will help you decide what method is best for you.

**Remember:** If you have sex, there is always some chance of getting pregnant. If you plan to have sex, be sure to protect yourself. That’s why it is important to wait until you’re 100% ready. Women with diabetes need to plan ahead.

Women who smoke or take medication or have medical problems, such as high blood pressure, heart disease, or have damage to blood vessels or nerves could have higher risks for some side effects of certain birth control methods and need to talk to their health care provider to decide the best method for them.

Q

In the future, who can help you figure out which family planning methods will work best for you?

- A. Family planning clinic
- B. Primary care team
- C. Your diabetes team
- D. Your family/parents
- E. All of these options

A

All of the options! Your health care professionals can advise you on your individual needs

Methods of Birth Control

	Forms	Advantages	Disadvantages
BEST	Abstinence	100% effective. That means NO pregnancy. 100% safe. No sexually transmitted infections.	
	Long Acting, Reversible Contraception IUD <ul style="list-style-type: none"><li>• Hormonal</li><li>• Copper</li></ul> Subdermal implant	99% effective. That means less than 1 pregnancy in every 100 women who use this method each year. Doesn't require daily attention. Lasts for years.	Requires office visit to insert and remove. Does NOT protect against sexually transmitted infections. Can cause spotting or irregular bleeding.
	Hormonal Birth Control Combination hormones (estrogen + progesterone) <ul style="list-style-type: none"><li>• The Pill</li><li>• The Patch</li><li>• Nuva-Ring</li></ul> Progesterone Only <ul style="list-style-type: none"><li>• Depo Shots</li><li>• Mini-Pill</li></ul>	99% effective if always used as directed. 91% effective the way most people use them. That means about 10 pregnancies in every 100 women who use this method each year.	Can worsen blood glucose control. Does NOT protect against sexually transmitted infections. Often used incorrectly.
	Dual Method Protection This means using a Condom with Spermicide AND Hormonal Birth Control	99% effective if both are used as directed. That means less than 1 pregnancy in every 100 women who use this method each year. Prevents sexually transmitted infections.	Can worsen blood glucose control. They are often used incorrectly. Condoms sometimes break.
	Hormone-Free Options Condom with spermicide (a fluid that kills sperm) ..... Withdrawal (when a guy pulls out before he ejaculates) Diaphragm Sponge Cervical cap Fertility awareness (using a calendar or body temperature to know when during the month you are most likely to get pregnant if you have sex)	98% effective if always used as directed. 85% effective the way most people use them. That means about 15 pregnancies in every 100 women who use this method each year. Prevents sexually transmitted infections. ..... 85% or less effective the way most people use them. That means about 15 or more pregnancies in every 100 women who use these methods each year.	Condoms are often used incorrectly. Condoms sometimes break. ..... Often used incorrectly. Does NOT protect against sexually transmitted infections.
WORST	No Birth Control	85% or less effective. That means about 15 or more pregnancies in every 100 women each year.	

Talking About It

Talk to Your Health Care Professional

*“But it’s, you know, personal...”*

For many teens, it’s hard to talk about topics like sex and birth control with a health professional. Here are some common reasons why you might hesitate to “start the conversation”:



If you feel like this...	Remember:
“It’s embarrassing and some of my questions are hard to ask.”	<ul style="list-style-type: none"><li>• Members of your health care team are sensitive, used to hearing the questions you are embarrassed about, and should keep things confidential.</li><li>• Ask your doctor or nurse if there are limits on confidentiality.</li><li>• Talk to the person you feel the most comfortable with.</li></ul>
“One of my parents will want to be there.”	<ul style="list-style-type: none"><li>• You don’t need parents’ permission to ask these questions.</li><li>• Your sexual behavior should not be discussed with your parent without your permission.</li></ul>
“I don’t want to talk about sex with the doctor that I’ve had since I was a little kid.”	<ul style="list-style-type: none"><li>• Choose the person you feel the most comfortable with.</li><li>• You might want to talk without your parents present. Explain to your parent that you need to talk about personal things with the doctor or nurse.</li></ul>
“I don’t even know where to start. These are hard questions.”	<ul style="list-style-type: none"><li>• It’s always a good idea to practice beforehand. Sometimes it helps to jot down your questions. You might want to hand your doctor or nurse a note. Here are some ideas to get started:</li><li>• “Doctor (nurse), I have some questions that are pretty hard to ask.”</li><li>• “If I ask you some questions, can it just be between us?”</li></ul>

Talk with Your Parents

Sometimes it’s hard to talk with a parent about sex, and some parents feel nervous talking with their children. These types of conversations tell the parents that their little girl is growing up. Sometimes parents don’t want to think that their little girl is growing into a woman. But parents can be helpful in giving information and advice. Here are some tips to get started:

1. Think about the parent that you feel would be the easiest to start talking to.
2. Choose a time when you both have some free time so you won’t be interrupted. Sometimes the best times to talk are when you are doing ‘normal’ things like riding in the car or when you have just watched a movie.
3. Ask if you can have a “private” conversation; this alerts your parent that the topic will be important to you.
4. Start by saying that you are curious. Ask a general question such as, “I was wondering what you think is important for me to know about sex.” This allows your mom or dad to tell you what they feel is important.
5. Briefly, repeat back to them what they just said only in your own words. This helps you both to understand each other.

*“So, you hope that I wait to have a partner until I get older.”*

*“You’re worried that kids are doing a lot of things without thinking about the consequences.”*

*“You think that my friends are starting to have sex.”*

6. Ask questions. Give your mom or dad the chance to give you information. It is A LOT easier than having them ask you all of the questions!
7. Ask your parents if they know how diabetes will affect you as you grow up. Suggest that this would be a good topic to talk about with your health care team.





**Talk with Your Partner**

You make choices every day. Choices have one thing in common—they mean that you have to stop and think before you act. Think about the risks that you are about to take. Think about the results. Some results have more serious consequences than others. Making a decision about sex and what you want and don't want to do can be hard. Telling your partner about your decisions can be even harder.

Your partner may really want to have sex, and you need to speak up if you don't want to. Having sex can change a relationship and how you feel about yourself. Having sex doesn't prove that you're in love or that you are an adult. Your partner should also know that you have diabetes and what that means in terms of having sex and the potential consequences.

Are you thinking about having sex for any of the following reasons?

- My partner will love me more if we have sex.
- My partner won't wait forever while I make up my mind.
- We've been together long enough; making love is the next step.
- It's not a big deal.
- Everybody is doing it.

Having sex is a huge decision. It's possible your partner might want to break up with you based on what you decide. How would you feel if you got an STI or became pregnant? How would you feel about the consequences?

If your partner says...	Try this:
"If you loved me, you'd have sex with me."	"If you really loved me, you wouldn't pressure me."
"Don't you trust me?"	"It has nothing to do with trust. I just don't feel right about having sex."

**It's Your Body, Your Future**

It can be hard to tell your partner if you don't want to have sex.


But you have the right to

- say that you are not ready
- choose if and when you want to have sex, without feeling pressured
- tell your partner to stop
- protect yourself from getting a disease
- protect yourself against getting pregnant
- be abstinent



Diabetes Affects Pregnancy

When you are ready to plan a pregnancy, why is it important to have tight blood glucose control?



**Planning for Success**

**Women with diabetes can have a healthy pregnancy and baby.**

Blood glucose levels need to be under tight control for at least 3-6 months before trying to become pregnant, at conception and during the pregnancy.

You can be pregnant and not know it until you have missed a period. This means that a month has already gone by. During this month, the baby is developing very quickly. High blood glucose can cause birth defects in the baby. The first two months of pregnancy are critical for having a healthy baby. If you become pregnant and do not have tight control, the chances of having a baby with birth defects increase.

Did you know that having diabetes and being pregnant can also raise **your** risk of health

problems? If your blood glucose is not in tight control before and during your pregnancy, your risks for diabetes-related health problems go way up. High blood glucose levels can hurt the mother and the baby.

High blood glucose levels in the first month of development can cause the baby to have problems with the heart, brain, spinal cord, or skeleton. High blood glucose after the first month can make the baby grow too big or be born prematurely. It can be hard on the mom and baby when it is time to give birth.

High Blood Glucose Can Harm...	
<b>A developing baby by:</b>	<b>The mother, by causing:</b>
<ul style="list-style-type: none"><li>• Miscarriage (baby dies)</li><li>• Born too soon</li><li>• Birth defects<ul style="list-style-type: none"><li>- Heart</li><li>- Brain</li><li>- Other organs</li></ul></li><li>• Born with low blood glucose</li><li>• Being oversized</li></ul>	<ul style="list-style-type: none"><li>• DKA (ketones)</li><li>• High blood pressure</li><li>• Eye problems (Retinopathy)</li><li>• Kidney problems (Nephropathy)</li><li>• Nerve problems (Neuropathy)</li><li>• Trauma from giving birth if the baby grows too big</li></ul>

The Glucose Connection

High blood glucose levels in the first 8 weeks of development are hard on the baby because its pancreas is not yet developed. The baby can't make its own insulin so it depends on the mother's blood glucose for its energy. Insulin from the mother does not get to the baby, only blood glucose does. After the baby's pancreas develops it begins making its own insulin. If blood glucose levels stay high, the baby's pancreas will continue to make a lot of insulin as it grows in the mother's uterus. When the baby is born it stops getting all of the glucose from the

mother leading to problems with the baby having low blood glucose or hypoglycemia.



Ketones Transfer to Baby Too!

What are Ketones?

Ketones are chemicals that in large amounts are poisonous to the body.

Blood glucose is not the only thing that goes from the mother to the baby. If the mother has ketones in her blood, those ketones will also get to the baby. If a lot of ketones get to the baby, it can get very sick or even die.



**Q**

If you have a blood glucose level of 150, what is the baby's blood glucose level?  
a. 100   b. 125   c. 150   d. 175

**A**

The answer is **150**. Did you know that your baby will have almost the same blood glucose level as you? This becomes even more complicated because your insulin does not pass through the placenta to the baby.



**It Works Both Ways:  
Pregnancy Affects Diabetes**

Not only will your diabetes affect your pregnancy, but the pregnancy also makes it harder to control your diabetes.

**Pregnancy Can Make Blood Glucose Harder to Control**

There may be more blood glucose reactions in the first few weeks, and a mother might need less insulin. At the middle and end of a pregnancy, blood glucose will go up and the mother might need double or triple the insulin! After birth, the insulin need drops to the normal levels before pregnancy.

**Pregnancy Can Cause Fat to Break Down into Ketones**

A healthy pregnancy requires a lot of energy. If the mother does not eat enough to keep up the energy needed, fat can break down for the body to use as energy. This can result in a dangerous condition called DKA, and the mother needs to get medical help right away.

Because of the changes brought on by pregnancy, pregnant women may need to change their treatment to keep blood glucose in tight control to minimize the risk of problems to themselves and their babies.

**What is Tight Control?**

- Keeping blood glucose between 60 and 90 before meals
- Keeping blood glucose between 100 and 129 after eating
- Checking blood glucose a lot more often
- Getting your A1C tested every 4-6 weeks
- Changing your medicine (for example, starting insulin if advised by your health care professional)

What is the target blood glucose range for planning and during a pregnancy? Your own goal should be determined by your health provider and you.	
Target range when you wake up, before meals, bedtime, and overnight	Between 60 and 90 mg/dl
Target range after meals	Between 100 and 129 mg/dl
Target A1C	6-6.5% A1C of 6% = 126 mg/dl

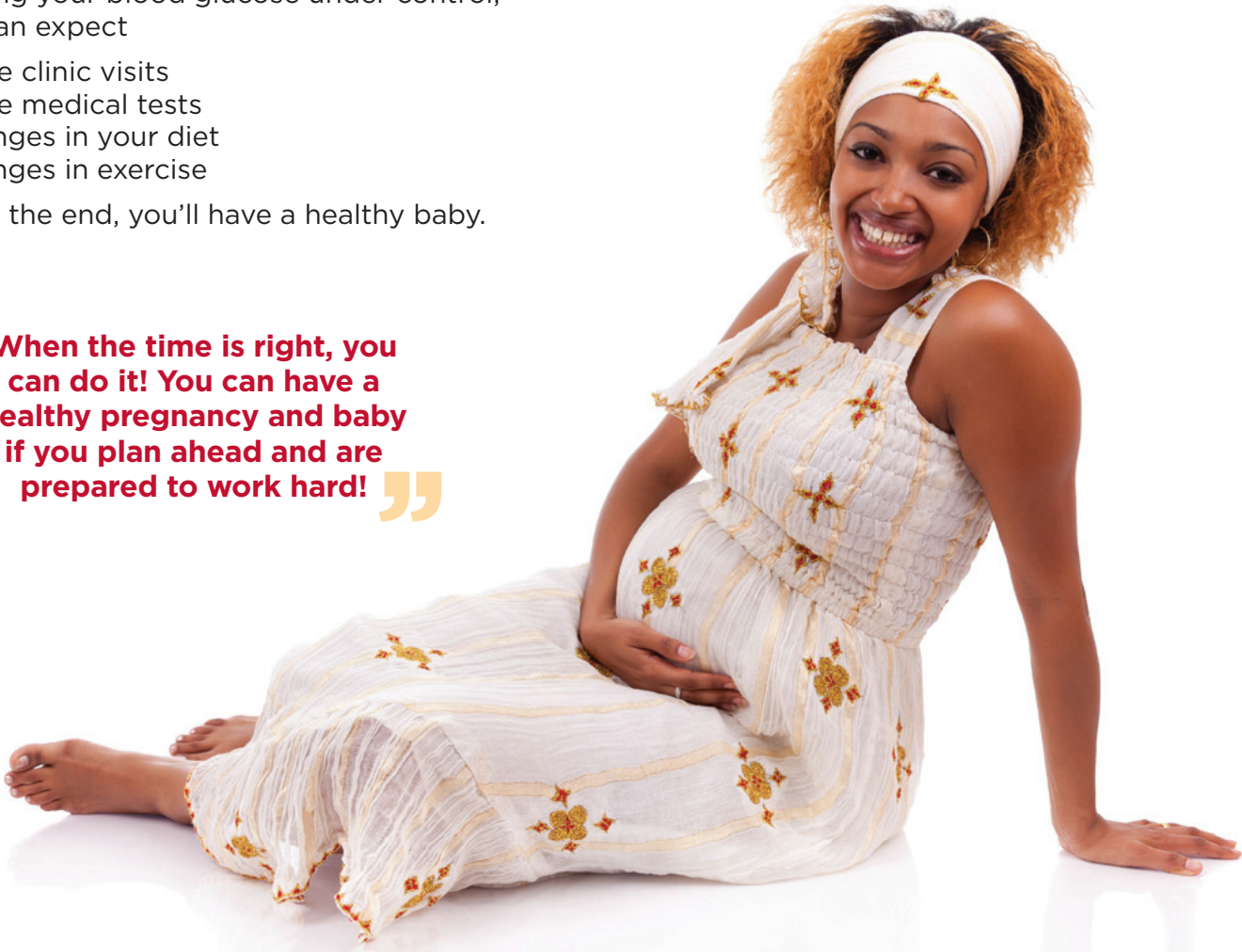
**Pregnancy is Hard Work...  
but It's Worth It**

Managing a pregnancy is hard work for you and your diabetes care team. In addition to keeping your blood glucose under control, you can expect

- more clinic visits
- more medical tests
- changes in your diet
- changes in exercise

But in the end, you'll have a healthy baby.

“When the time is right, you can do it! You can have a healthy pregnancy and baby if you plan ahead and are prepared to work hard!”



## Getting Ready with Preconception Counseling

The key to a healthy pregnancy is planning: Plan on maintaining tight blood glucose control so that it is safe to become pregnant, and maintaining tight blood glucose control during pregnancy. You don't have to do it alone! A special team of doctors, nurses, and other health professionals will help you.

**Preconception counseling** is an ongoing conversation with your diabetes health care team that starts at puberty and continues during your child-bearing years. It increases your chances of having a healthy pregnancy and a healthy baby by teaching you how to get and keep normal blood glucose levels and postpone a pregnancy until it's safe and wanted.

## Definitions

**Conception** – When the egg and the sperm meet and fertilization occurs. This is the beginning of a pregnancy.

**Preconception** – Before conception; starts even before having sex; before the sperm and the egg join together.

## Where would you put yourself on this scale?



Regardless of where you fall on the readiness scale, preconception counseling can help you. Remember if you're not ready yet, and you are still sexually active, it's not safe to get pregnant.

**“You should start getting preconception counseling in your early teens. It will help you learn about how to take care of your changing body, puberty, and periods. It will help you plan your pregnancies to have healthy babies. And it is important for your health, too!”**

## Not Ready to Get Pregnant

Preconception counseling should begin when you first get your period. Your health care team will be there for you as you grow from a girl into a woman. At this stage, preconception counseling will involve general goals for your reproductive health.

### Preconception Counseling will help you to

- be aware of family planning
- control your blood glucose levels
- learn how diabetes affects you as you grow into a woman
- learn how diabetes affects a pregnancy

**Q**

What's my risk for problems with me or my baby if I become pregnant?

- ☐ I am a teenager
- ☐ I have diabetes
- ☐ My blood glucose is out of control.
- ☐ I have not attended preconception counseling

**A**

Each “check” raises your risk higher. But, with careful planning you CAN have a healthy pregnancy.

## Getting Ready for a Pregnancy

As a woman with diabetes, in the future if and when you are thinking about getting pregnant, there are some things that you will need to do to be ready.

### In Preconception Counseling, you will

- work with a health care team, that specializes in diabetes and pregnancy
- ask your health care provider what your target A1C should be (usually the A1C should be 6-6.5% for 3-6 months)
- get blood glucose levels within your target range before getting pregnant
- learn how high blood glucose levels can hurt an unborn baby
- use a family planning method until it's safe to get pregnant
- make changes to meal plans, medicine, exercise and blood glucose monitoring if needed
- make changes in blood pressure medicine if needed
- start taking vitamins, calcium and folic acid
- get vaccines up to date
- get genetic counseling, if you want to
- stop unhealthy behaviors (smoking, drugs, alcohol)



## Being Ready for Pregnancy

In the future, if and when you are actively planning to have a baby, you have done all the steps in “Getting Ready for a Pregnancy.” The goals now become more focused since your unborn baby’s health is at stake, too.

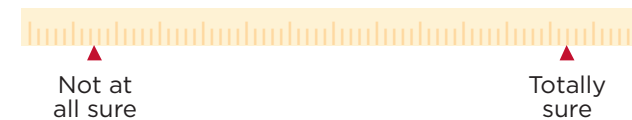
### In Preconception Counseling you will

- keep tight control of your blood glucose
- get medical exams more frequently
- change your medicines, if needed
- manage your diabetes closely (meal plan, medicine, exercise and blood glucose monitoring)
- take vitamins, calcium and folic acid
- get up to date with vaccinations
- avoid unhealthy behaviors (smoking, drugs, and alcohol)

You and your health care team will decide when it is safe to stop your family planning method and try to get pregnant.

## Become Confident about Your Future

*“Are you sure that you could plan a pregnancy in the future, when you’re ready?”*



### How sure are YOU that you

- understand why it is important to plan a pregnancy?
- know how to plan a pregnancy?
- can get and stay in tight blood glucose control for one year?
- will get preconception counseling?
- can plan a healthy pregnancy in the future?

## READY-Girls

### Take the First Step

You may want to talk with different people about diabetes, sex, and pregnancy. Remember, the first time that you get your period is the right time to start the conversation about diabetes, sex and pregnancy.

If you have any questions about diabetes, sex, and pregnancy it’s important to ask.

Ask someone you trust and feel comfortable with...

- Your health care team members will give you the straight facts and help you make choices. They will keep your conversations confidential.
- Parents can help you make choices.
- Friends can listen, give advice, and support your decisions.
- Your partner should know about your diabetes and how you feel about relationships, sex, birth control, and abstinence.

## Will You Be Ready?

Here are three promises you should make to yourself:

- I’ll get Preconception Counseling.
- When I decide to plan a pregnancy, I will get help from my health care team to keep my blood glucose close to normal (A1C less than 6.5%).
- I will only get pregnant if my average blood glucose levels have been normal for at least 3 months.

**“ You have the power to choose to be in control. ”**

To find resources near you, call the American Diabetes Association:  
**1-800-DIABETES (342-2383)**  
or visit **diabetes.org**



## For Further Learning

### Books

American Diabetes Association. *Diabetes and Pregnancy: A Guide to a Healthy Pregnancy for Women with Type 1, Type 2, or Gestational Diabetes*. Sacks DA, Ed. Alexandria, VA, American Diabetes Association, 2011

Barnes B, Strand, N. *A Women's Guide to Diabetes: A Path to Wellness*. Alexandria, VA, American Diabetes Association, 2015

American Diabetes Association. *American Diabetes Association Complete Guide to Diabetes: The Ultimate Home Reference from the Diabetes Experts*. 5th ed. Alexandria, VA, American Diabetes Association, 2011

### Web Resources

Advocates for Youth website:  
[www.advocatesforyouth.org](http://www.advocatesforyouth.org)

American Diabetes Association (ADA) website:  
[www.diabetes.org](http://www.diabetes.org)

American Association of Diabetes Educators (AADE) website: [www.diabeteseducator.org](http://www.diabeteseducator.org)

Center for Disease Control and Prevention. (2013). Contraception web page: <http://www.cdc.gov/reproductivehealth/UnintendedPregnancy/Contraception.htm>

Sweet Success (California Diabetes and Pregnancy Program) website: [www.sweetsuccessexpress.com](http://www.sweetsuccessexpress.com)

World Health Organization Medical Eligibility Criteria for more information about which birth control options may be contraindicated: [http://www.who.int/reproductivehealth/publications/family\\_planning/en/](http://www.who.int/reproductivehealth/publications/family_planning/en/)

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