

THE MAIN ISSUE?

A mother's blood **glucose changes** after mealtimes and throughout the day, affected by her **personal characteristics**, daily lifestyle and the pregnancy itself. **Too much or uncontrolled glucose** in your blood during pregnancy can lead to a large baby and can cause problems during pregnancy and labour. Also, babies exposed to higher glucose levels are more likely to become **obese** and get **type 2 diabetes** when they grow up.

WHAT WILL WE INVESTIGATE?

Recent studies have shown that **other factors beyond the characteristics of food** play an important role in how glucose is absorbed after a meal during pregnancy. These factors include your **personal characteristics** such as age, ethnicity and BMI and genetics.

Using **continuous glucose monitoring (CGM)**, which measures **glucose levels every few minutes**, we will investigate:

- 1) How **diet quality** affects **glucose control** in type 1 and 2 diabetes pregnancy?
- 2) Which **personal characteristics** are most strongly related?
- 3) How does **glucose control evolve** during pregnancy?

INTERESTED?

If you have **type 1 or type 2 diabetes** and are **within the first 12 weeks of pregnancy** and interested in taking part, please **contact us** for more information.

 +31627072821

 fscd@leeds.ac.uk

WHAT WE WILL ASK FROM YOU?

During your routine care, medical details are recorded and you will wear a CGM device. We ask for **your permission to safely access and assess** this data.

Furthermore, we ask you to complete **short questionnaires on diet, physical activity and sleep** at three occasions during your pregnancy (after each routine care visit). These questionnaires will be partly online and via phone calls.

To gain more insight in mealtime glucose responses, we ask you to consume **standardised breakfast meals** on two separate occasions (*optional*), no additional clinical visits needed. These meals will be delivered at your home.

HOW LONG DOES THE STUDY LAST?

We will collect data **throughout the pregnancy**, including birth outcomes.

WHAT WILL THIS TELL US?

We think that all the information we gather will help to develop new ways in which women can **reduce their risk of having uncontrolled glucose, reduce still births, pregnancy complications and improve the long term health of their children.**