INFLUENCE OF OBESITY AND CARBOHYDRATE METABOLISM DISORDERS IN GLP-1 LEVELS IN WOMEN WITH HISTORY OF GESTATIONAL DIABETES MELLITUS.

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INTRODUCTION AND OBJECTIVE

There is a reduction of the incretin effect in patients with type 2 diabetes secondary to altered secretion of incretin hormones and/or failure of its action.

To study the GLP-1 secretion pattern after an oral glucose tolerance test (OGTT) in postpartum reassessment of women with previous GDM.

MATERIAL AND METHODS

Prospective epidemiological study of 48 women with a history of GDM. We evaluated age, history of GDM or macrosomia, family history of diabetes, insulin therapy use, birth weight and type of delivery. 1311 months after childbirth, we reassessed clinical-analytical characteristics and performed a 75 g OGTT. We measured glucose, insulin and GLP-1 levels (basal-30-60-120'). Classification of patients was based on OGTT: normal vs prediabetic/diabetic and based on BMI: obese (IMC >30 kg/m2) vs non-obese. Differences between groups were analyzed using Mann Whitney and Chi Square tests.

RESULTS

CONCLUSIONS

- Women with a history of GDM and prediabetes/diabetes in postpartum reassessment don’t differ in GLP-1 secretion after OGTT of healthy patients.
- However, obese patients have lower incretinic response after OGTT compared with non-obese.