Arly

Instructor Name

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 Annotated Bibliography

Deputy, Nicholas P., et al. "Prevalence and changes in preexisting diabetes and gestational diabetes among women who had a live birth—United States, 2012–2016." *Morbidity and Mortality Weekly Report* 67.43 (2018): 1201. Retrieved from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6319799/>

Diabetes throughout pregnancy upsurges the threat of hostile maternal and newborn health consequences. Type 1 or type 2 diabetes identified afore pregnancy amplifies newborns’ threat for congenital abnormalities, miscarriage, and enormous other threats for the gestational period. A study was conducted in the year 2012 to 2016 to evaluate the prevalence of gestational diabetes and preexisting diabetes among females of the United States. The study was forwarded by Nicholas and colleagues (Deputy et al.). Diabetes that progresses in 2nd half of pregnancy upsurges the risk of newborns for macrosomia and might have a role in the development of childhood obesity in later years. It was observed in the United States, the occurrence of preexisting diabetes and gestational diabetes amplified from 2000 to 2010 (Deputy et al.). Current state-particular developments have not been stated in the field of gestational diabetes. In the United States, the occurrence of preexisting diabetes is reported to be 0.9% among females and the occurrence of gestational diabetes was 6.0% (Deputy et al.). Nutrition, physical activity, and diet can significantly reduce obesity from communities (Deputy et al.). changes in the diet plan and physical activity is associated to be a reduction in weight and body mass index in females (Deputy et al.). It needs health promotion and health education programs that can promote healthy lifestyle activities and physical exercise among communities and societies. Health campaigns such as the promotion of physical activity and discouraging sedentary lifestyles could help create a significant difference in the health status of communities of the United States.

Hawkins, M., et al. "A pregnancy lifestyle intervention to prevent gestational diabetes risk factors in overweight Hispanic women: a feasibility randomized controlled trial." *Diabetic Medicine* 32.1 (2015): 108-115. Retrieved from: <https://onlinelibrary.wiley.com/doi/abs/10.1111/dme.12601>

A study was performed to experimentally observe the achievability of a prenatal modified lifestyle interference of physical exercise and food between expectant overweight Hispanic females, to decrease possible aspects for gestational diabetes mellitus (Hawkins et al.). Randomly females were selected and a group of females with interference and intervention consisting of adapted, culturally and linguistically modified were chosen (Hawkins et al.). This study was conducted by Hawkins and colleagues in the year 2015. The lifestyle interference group also had marginally lesser gestational weight increase and infant birth weights matched with the control care group; though, these modifications were not noteworthy. Findings suggested that proposed intervention has the strength to reduce gestation diabetes among females. Physical activity and exercise can contribute to its role in the reduction of weight gain in obese Hispanic females before pregnancy (Hawkins et al.). Together with appropriate diet and physical activity, it can be significantly reduced. Dynamic bodyweight and appropriate diet are essential methods of a person's general health and well-being. The proposed intervention can be utilized in clinical practices to significantly reduce the disease burden universally.

Pennington, Andrew VR, et al. "Improving follow-up care for women with a history of gestational diabetes: perspectives of GPs and patients." *Australian journal of primary health* 23.1 (2017): 66-74. Retrieved from: <http://www.publish.csiro.au/py/PY15177>

The paper examines elements influencing females’ engagement with diabetes precautionary care after a pregnancy with gestational diabetes from the perceptions of general physicians and the role of GPs in care (Pennington et al.). the study was conducted by Pennington and the colleagues in the year 2017. Qualitative study by semi-structured interviews with females having previous experience of gestational diabetes were selected. Interviews were conducted with females regarding previous experience of gestational diabetes, influencing factors and follow up care from general physicians (Pennington et al.). The interviews were specifically designed regarding the prevention and anticipation of gestational diabetes and the role of general physicians in providing care. Mother's care for the prevention of gestational diabetes including advice and testing, the obstruction to care and the promoting factors for care as well as the role of general physicians in delivering care were assessed. The groups identified that general physicians were delivering care and follow up treatment effectively. The physicians suggested preventive measures such as diet plans, physical exercises and weight loss management tips for the females previously having an experience of gestational diabetes (Pennington et al.). These females are having a higher risk of development of gestational diabetes (Pennington et al.). The probable factors that were obstructing in between the prevention and anticipation were related to the literacy level of females and barriers such as tailored advice from general physicians. Health education and promotion can play a role in reducing gestational diabetes in females during pregnancy.

Oza-Frank, Reena, et al. "Healthcare experiences of low-income women with prior gestational diabetes." *Maternal and child health journal* 22.7 (2018): 1059-1066. Retrieved from: <https://link.springer.com/article/10.1007/s10995-018-2489-y>

A study was conducted to evaluate the healthcare experiences of previously experienced gestational diabetes in low-income females (Oza-Frank et al.). The study also included suggestions from females for the quality of healthcare. This study was conducted in the year 2018 by Oza-Frank and colleagues. Focus groups were introduced as a study methodology and the participants were African Americans, Appalachian and Hispanic females having a previous medical history of gestational diabetes within the last 10 years (Oza-Frank et al.). There were 12 focus groups in the study. Major themes identified were personal and environmental barriers, communication problem and quality of the type of healthcare. The conclusions recommend that through all racial and ethnic demonstrations in the study, low-income females experienced communication problems and environmental barriers for healthcare services (Oza-Frank et al.). The study suggested that certain probable environmental issues create hindrances for women to take appropriate and suitable medical care from physicians (Oza-Frank et al.). Females suggested that certain socio-economic factors were also responsible that create problems for them to take healthcare facilities. Specific communication issues were also responsible between them and general physicians to receive healthcare facilities. Low socioeconomic status is associated with certain financial issues, social disparities and health inequalities, particularly for females.

Jones, Kai E., et al. "Prenatal counseling on type 2 diabetes risk, exercise, and nutrition affects the likelihood of postpartum diabetes screening after gestational diabetes." *Journal of Perinatology* 38.4 (2018): 315. Retrieved from: <https://www.nature.com/articles/s41372-017-0035-1>

A study was conducted to identify effects on postpartum screening after counseling from physicians on specific exercises, diet, nutrition and type II diabetes (Jones et al.). The study was conducted in the year 2018 by Jones and colleagues. A regression relationship was examined among prenatal counseling and postpartum screening utilizing the pregnancy risk assessment monitoring system from Colorado (2009-2011) (Jones et al.). Out of 556 females, prenatal psychoanalysis was connected with amplified post-delivery diabetes screening among females (Jones et al.). It was evident that prenatal counseling is an essential tool to create awareness among females to opt for screening after delivery. The study created awareness among females to adopt a healthy lifestyle to reduce weight and diabetes-related diseases (Jones et al.). consumption of appropriate diet and constant physical activity among communities particularly females can significantly reduce the risk of development of gestational diabetes mellitus. Dynamic bodyweight and appropriate diet are essential health indicators to maintain health. The proposed intervention can be utilized in clinical and healthcare practices to significantly reduce the disease burden from communities and societies. Nutrition values for diet, nutrition and beverage atmosphere should be improved to reduce obesity and diabetes among communities and societies. The childcare setting and health promotion are the prerequisites to encourage a healthy lifestyle at the public level (Jones et al.). Health education and promotion programs explicitly targeting societies and social workers, teenagers' participation in health promotion and awareness campaigns, synchronization between governmental bodies to address the developing illnesses such as diabetes, cardiac-linked syndromes, and hypertension are required to be conducted.

Tran, Linda. "The Association between History of Gestational Diabetes Mellitus and Current Type 2 Diabetes Status: An Examination of NHANES Data 2011-2014." (2018). retrieved from: <http://scholarworks.gsu.edu/cgi/viewcontent.cgi?article=1597&context=iph_theses>

Diabetes mellitus is an emerging disease that has affected more than 29 million individuals in the United States and 422 million individuals worldwide (Tran). Females having gestational diabetes are at a greater risk of developing type II diabetes mellitus. A study was conducted in recent year 2018 by Tran, Linda. The study was specifically aimed to observe the prevalence rate of diabetes type II in females having a previous medical history of gestational diabetes. It was evident that females having gestational diabetes in previous medical history are at higher risk of developing diabetes type II disease. National Health and Nutrition Examination surveys were examined to conduct a cross-sectional research on 4006 individuals from the United States and were from ethnic groups of non-Hispanic White, non-Hispanic black, non-Hispanic Asians and others (Tran). The multivariate regression analysis was performed to assess the association of gestational diabetes mellitus and type II diabetes mellitus. 315 individuals were found with a previous medical history of gestational diabetes and out of which 111 developed type II diabetes mellitus (Tran). Overweight and obese females were at higher risk of developing type II diabetes mellitus as compared to other women (Tran). When compared with a previous medical history of gestational diabetes, it was found that these females were having twofold chances to develop type II diabetes mellitus (Tran). Together with organizations and individual efforts the rise in obesity can be reduced to a significant level. The rising proportions of obesity, gestation diabetes, hypertension, health disorders, and cardiovascular disorders are increasing in communities and societies (Tran). A nutritious food, constant physical exercise, and achieving and sustaining a dynamic body mass index are the greatest provisions to cope and control obesity and obesity-related diseases such as diabetes. The study evaluated that women with greater body mass index between ages 20 and 44 years are at higher risk of developing diabetes type II. Physical exercise and maintenance of vigorous weight can significantly reduce the risk of developing diabetes type II in these females.

Hanson, Mark, et al. "Interventions to prevent maternal obesity before conception, during pregnancy, and post-partum." *The lancet Diabetes & endocrinology* 5.1 (2017): 65-76. Retrieved from: <https://www.sciencedirect.com/science/article/abs/pii/S2213858716301085>

Anticipation of obesity in females of the reproductive phase is extensively acknowledged to be significant equally for their fitness and for their newborns. Weight-linked interferences, counting drug management in pregnant females who are overweight or obese are observed with complications in pregnancy and after delivery. A study was forwarded by Hanson and the colleagues to observe the impact of interventions before conception, during pregnancy and after delivery (Hanson et al.). The study was conducted in the year 2017 and was published in the journal The Lancet Diabetes and Endocrinology. Future study is required for the lasting effects of dietary and lifestyle interferences and interventions before commencement of pregnancy (Hanson et al.). To progress preconception well-being, a combined method, counting pregnancy prevention, planning, and preparation is essentially needed. It should involve more than the primary health-care area and accepting an environmental method to decline the risk factors to address all issues related to obesity and diabetes. Creating awareness of the significance of a balanced diet and improved health in the phase afore pregnancy will need novel social and ecological approaches (Hanson et al.). The factors such as poor diet, insufficient nutrition, and unhealthy lifestyles are significantly responsible for the onset of gestational diabetes and type II diabetes mellitus. It is observed that improved diet and constant physical activity can significantly reduce the risk of diabetes among females, particularly pregnant females. Interventions and interferences such as improved diet and nutrition, adequate physical activity and access to quality health care are essentially important to reduce the risk of development of diabetes and diabetes-related diseases among pregnant females. It is also essential to maintain a healthy lifestyle of pregnant females to achieve and attain sustainable developmental goals particularly improved health status, productivity and health equity (Hanson et al.). Obesity, diabetes and diabetes-related diseases are preventable and avoidable among communities by utilizing a healthy lifestyle.

Quansah, Dan Yedu, et al. "Intuitive eating is associated with improved health indicators at 1-year postpartum in women with gestational diabetes mellitus." *Journal of health psychology* (2019): 1359105319869814. Retrieved from: <https://journals.sagepub.com/doi/abs/10.1177/1359105319869814>

The study assessed the relations among intuitive eating throughout pregnancy and after pregnancy with metabolic health at 1-year postpartum in females having gestational diabetes mellitus and in high-risk gestational diabetes mellitus subgroups (Quansah). The study was intended to evaluate the relationship of diet among the high-risk group and the gestational diabetes group of females (Quansah).117 females were the participants having gestational diabetes and were intended to fill the questionnaire. The females were called during pregnancy and after pregnancy for the questionnaires (Quansah). The study was conducted in the year 2019 by Quansah and colleagues. The study was intended to find out the association between diet and gestational diabetes with particular health indicators to be improved with diet. The diet was French intuitive eating for the participants. It was evident from the study that there is a strong relationship between diet and gestational diabetes. Physical activity and maintenance of vigorous weight utilizing an adequate diet can significantly reduce the risk of developing diabetes type II in females. It was also evaluated that diet can significantly reduce the weight of obese females. The intervention used was successfully assessed in 117 females and results have been suggested that diet and improved nutrition can significantly improve the health status of females with gestational diabetes. The study was intended to see the difference among high-risk women and gestation diabetes group however, the study has significantly evaluated the importance of diet for the females having gestational diabetes. The results and findings have suggested that the intervention of intuitive eating can successfully be used as an effective intervention particularly for females with gestational diabetes. It can also be used as a tool for weight control in obese women.

Price, Lucy Anne, et al. "Awareness of gestational diabetes and its risk factors among pregnant women in Samoa." *Hawai'i Journal of Medicine & Public Health* 76.2 (2017): 48. Retrieved from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5304428/#R4>

The first and early recognition of glucose intolerance during pregnancy is gestational diabetes mellitus0 (GDM). It is a type of diabetes mellitus that occur during pregnancy. The role of awareness was evaluated by a study conducted by Price and colleagues in the year 2017 (Price et al.). The study was intended to assess the role of awareness regarding gestational diabetes and high-risk factors in females of Samoa (Price et al.). The risk of developing type 2 diabetes mellitus is higher in females with gestational diabetes mellitus matched to the overall population (Price et al.). Averting the progress of gestational diabetes mellitus might aid decrease the occurrence of Type II diabetes mellitus and prolonged morbidity in the offspring of affected mothers (Price et al.). The tenacity of the research was to examine the level of awareness of gestational diabetes mellitus and discovering whether information and knowledge regarding approaches to nutrition and physical exercise would be helpful in the reducing gestational diabetes mellitus (Price et al.). Non-communicable illnesses pretense a great health risk to the population. The occurrence of diabetes mellitus in females is projected to be higher and is increasing significantly (Price et al.). The World Health Organization characterizes obesity and type II diabetes mellitus, to a great level, to elevated intake of calorie-rich, nutrient-deficient, junk food and deficiency of physical activity (Price et al.). With the appropriate diet and physical exercise, it can be significantly reduced. Vigorous bodyweight and suitable diet are vital methods of a person's general health and well-being. The proposed intervention can be utilized in clinical practices to significantly reduce the disease burden worldwide. Gestational diabetes mellitus is a type of diabetes mellitus and is described as glucose intolerance with initial recognition in pregnancy (Price et al.). Gestational diabetes is linked with pre-eclampsia for the female and greater risk of birth defects such as macrosomia, polycythemia and neonatal hypoglycemia (Price et al.). Other related complications in pregnancy due to gestational diabetes involves respiratory distress syndrome and jaundice in newborns (Price et al.). Results have proved that health education and promotion can significantly reduce gestational diabetes and risk for type II diabetes mellitus in females (Price et al.). The study evaluated that awareness regarding diet and nutrition among females can significantly reduce the risk of gestational diabetes.

Hagen, Erica. "CE: Overview of the Gestational Diabetes Educational Gap." *Annual Review of Changes in Healthcare* 2.1 (2018). Retrieved from: <http://journals.findlay.edu/index.php/ARxCH/article/view/76>

A general method to preventing gestational diabetes mellitus in expectant females may reduce the occurrence of frequent gestational diabetes mellitus and type two diabetes mellitus postpartum. A study was conducted to see the educational gap by The American College of Obstetricians and Gynecologists in the year 2018 (Hagen and Thao). They have utilized a glucose screening examination for females between 24 and 28 weeks of gestation, except the female has a past medical history of gestational diabetes mellitus (Hagen and Thao). Teaching on averting gestational diabetes mellitus for females is not available, however, the greater focus is moved towards health education and promotion. Obesity, in particular, is the consideration of many public health examiners in the United States. Together with suitable diet and physical activity, it can be significantly reduced. Healthy body weight and appropriate diet are essential indicators of a person's general health and well-being. Innovative strategies have been smeared by the US sections of food, diet, and other connected administrations (Hagen and Thao). Various approaches are also in improvement to be applied by centers for disease control and prevention. However, the incidence of obesity in the United States is unusual, recognizing roughly one-third of adults. Further investigation on these subjects may have worldwide influences to prevent gestational diabetes. Health education and promotion can significantly reduce the risk of gestational diabetes among females. Health education regarding regular checkups, follow up and routine screening can significantly reduce the risk of development of diabetes mellitus among communities. The screening and evaluation of health status can be significantly improved by educating communities regarding gestational diabetes.