Abstract:

Introduction & Purpose:
Gestational diabetes mellitus has a very high prevalence rate in the United States, and is even higher in Hawaii. This disease can have negative repercussions for both the mother and child for years post-partum, and significantly increases the mother’s risk of developing type 2 diabetes mellitus (T2DM). The primary aim of this needs assessment was to determine the types of T2DM preventative treatments available both ante- and post-partum to women in Hawaii with a history of gestational diabetes.

Experimental Design:
Practitioners around the Hawaiian Islands were interviewed about the standard treatment process for women in their practice after the women have been diagnosed with gestational diabetes mellitus (GDM). They were also asked to describe their clinics standard post-partum T2DM screening process, and what could be done to improve the current diabetes prevention interventions for the target population.

Results:
There is no provider reported state wide gestational diabetes data currently available. Additionally, there is no statewide gestational diabetes plan in place that attempts to prevent post-partum T2DM development. There is a large discrepancy in the continuity of care these women receive to prevent T2DM post-partum.

Conclusions:
The principal recommendation is to create a statewide gestational diabetes registry that would allow practitioners to flag medical charts and provide resources for longitudinal studies about T2DM development in this population post-partum.