

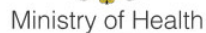


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Gestational Diabetes- Tonga Experience Screening & Challenges. Change for Tomorrow

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MATE MA'A TONGA !!!...





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Presentation Outline

- Where we are now
- Tonga's Approach to NCD (Multisector Approach)
- Gestational Diabetes- History & Trends
- Future look with GDM





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Internationally

- Prevalence of GDM 4.6%-9.2% in USA, Australian Territories - >5%
- 0.6% pre-existing diabetes 4.7% GDM
- New Zealand up to 6.6% and Tonga under the Universal Screening – 10%





Diabetes in Tonga

- The prevalence of diabetes was 34.4% in 2012 and slightly gone up to 40% .due to all risk include:
- Obesity, Family Hx, Previous Hx GDM etc
- No established DIP prevalence, evidence based screening & management program until now. **UNIVERSAL SCREENING**



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GDM - Tonga

- **2014- Establish GDM Taskforce**
- **2015-National guidelines for GDM screening & management/ National Strategy for prevention & control of NCD 2015-2020/ Universal Screening for GDM**
- **2016- Technology/e-Health**





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Annual Stats

- 93% of ♀ aged 25-44y.o. are overweight & 77% are obese
- 99.9% adult Tongans age 25-64y.o. are at moderate to high risk of developing NCD
- 2012- Tonga ranked 3rd and 2017 – ranked 5th 43.3% in the world





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Traditional Screening for GDM - Pregnancy Screening In Tonga.

- Risk Factors- Selective modified OGTT screening test
 - Obstetrician decides
 - capillary OGTT test
 - no multidiscipline approach
 - WHO criteria





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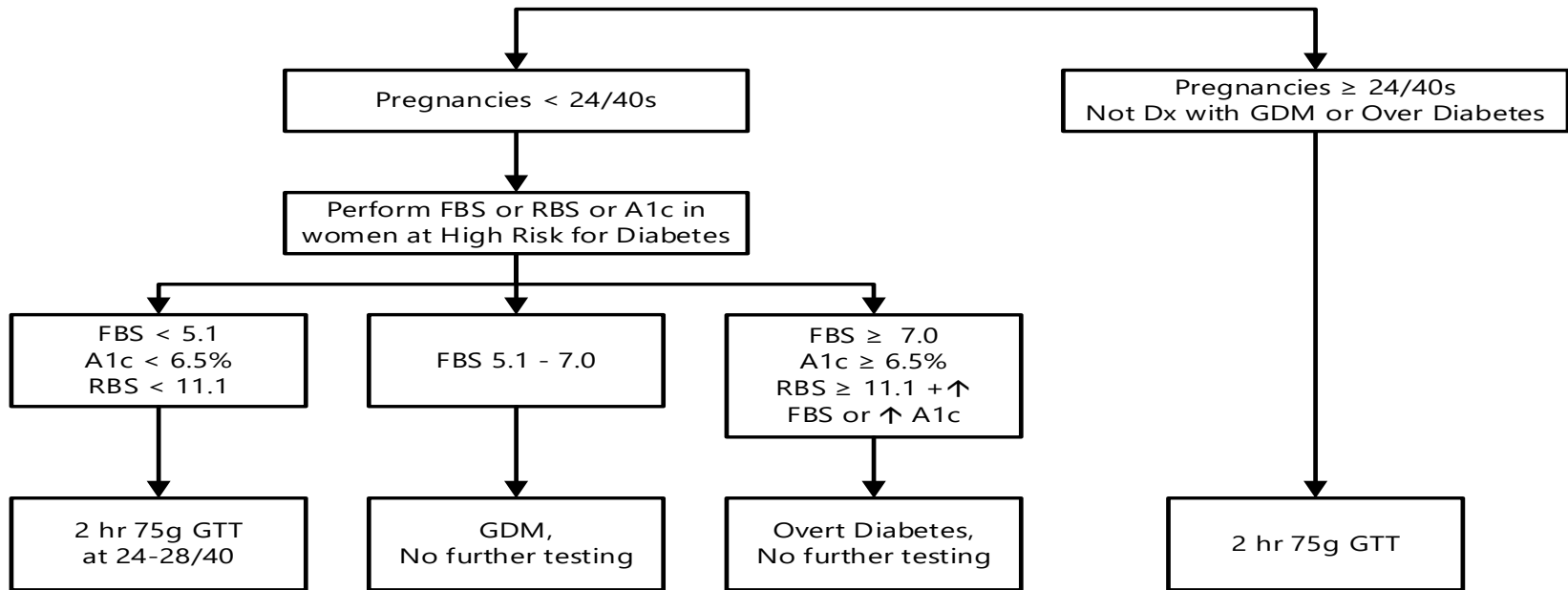
Outcomes

- 2700 National Deliveries in Tonga
- 2000 in Vaiola – Main Hospital in Tongatapu
- Aim Universal Screening to screen at least 2000 pregnant women yearly to meet target – that is 40-50 weekly.



Universal Screening

IADPSG Protocol for the Evaluation of Diabetes in Pregnancy



Risk Factors For Diabetes In Pregnancy

High Risk Group.

- Age ≥ 35 yrs
- FHx DM – parents & siblings
- Previous GDM, sister with GDM
- Baby ≥ 4.5 kg
- Persistent glycosuria
- BMI > 30
- Previous unexplained perinatal loss or malformed



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56 Babies delivered

- All at 37+ weeks (Term)
- 5 had LSCS, 51 NVD
- All had good Apgar Score at Birth
- BW Range – 2200 – 4630 grams
- 9 (16%) had BW \geq 4000 grams
- 1 had BW of \geq 4500 grams (4630)
- **None had Postnatal Complications**





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Important Lessons Learned

- ONE OF THE MOST VALUABLE ASSET IN IMPROVING DIABETES MANAGEMENT IN Tonga is THE Mutual Partnership with Midwives, Nurses and NCD Nurses for the Continuum Care for Pregnant Women





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Future look with GDM

- Continuation on Universal Screening for the all Pregnant Women so we identify the risk early for the betterment of our Maternal Midwifery Care in Tonga.
- Enforce the follow up care to be consistent in all level.
- Empower the significant of data collection and audit





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Thank You All

- Acknowledge the GDM Taskforce by train more midwives
- Ministry of Health -Tonga
- WDF –World Diabetic Federation

Malo 'Aupito





A group of football players in red jerseys are celebrating on a field at night. One player in the center has his arm raised high, holding a bright light. The background is a blurred crowd of spectators.

Oku Ika Siana
Die For Tonga