Gestational Diabetes in Ohio: 2009 - 2016

Prevalence of GDM History among Women of Reproductive Age

Prevalence of a GDM history refers to the estimated population of people who had GDM in a current or past pregnancy. BRFSS identifies women whose first diagnosis of GDM was during a pregnancy. This measure excludes women who had GDM but subsequently developed T2DM. This population may be thought of as the population of women with a GDM history at risk of T2DM.

From 2011-13, approximately 3.1 percent of Ohio women self-reported having been diagnosed with diabetes only during pregnancy, whereas 2.5 percent self-reported the same information in 2016. Any difference by demographics (Table 14a), or by behavioral risk factors (Table 14b) were not statistically significant in either 2011-13 or 2016.

Table 14a. Prevalence of a history of GDM only, among women aged 18-44 years, by demographics, Ohio 2011-13 and 2014-16

		2011-13	(n=151)	2014-16 (n=103)		
		%	95% CI	%	95% CI	
Overall		3.1	2.4-3.8	2.5	1.8-3.3	
	10.04		0.0.0.0	NI /A/	N1 /A4	
Age (years)	18-24	1.7	0.3-3.0	N/A¹	N/A¹	
	25-34	3.5	2.2-4.8	3.5	1.8-5.1	
	35-44	3.7	2.7-4.7	3.5	2.1-4.9	
	Non-Hispanic White	2.7	1.4-4.0	2.9	1.9-3.9	
	Non-Hispanic Black	2.5	0.0-5.2	1.7	0.2-3.2	
Race/Ethnicity	Hispanic	N/A¹	N/A¹	N/A¹	N/A¹	
	Other	N/A¹	N/A¹	N/A¹	N/A ¹	
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Marital Status	Ever Married	3.5	2.7-4.4	3.5	2.2-4.8	
maritar otatao	Never Married	2.5	1.4-3.7	1.5	0.7-2.3	
	Less than HS	6.3	2.6-10.0	4.6	0.8-8.5	
	HS Graduate	2.1	1.2-3.1	1.5	0.7-2.3	
Education	Some College	3.1	1.9-4.4	3.2	1.5-4.9	
	College Graduate	2.4	1.7-3.2	2.0	1.2-2.8	
	oonege aradaate	2.4	1.7-3.2	2.0	1.2-2.0	
Incurance	Plan	3.0	2.2-3.7	2.5	1.7-3.3	
Insurance	No Plan	3.3	1.4-5.3	3.1	0.6-5.6	
	Loss than \$15,000					
	Less than \$15,000	2.8	0.6-5.1	4.1	1.0-7.3	
Income-Level	\$15,000-\$24,999	2.6	1.3-4.0	3.7	0.6-6.8	
	\$25,000-\$34,999	2.6	0.9-4.2	1.2	0.0-2.8	
	\$35,000-\$49,000	3.8	1.4-6.2	1.9	0.2-3.6	
	\$50,000 or More	3.1	2.1-4.1	2.2	1.2-3.2	
	Suburban	3.9	2.2-5.6	3.1	1.2-5.1	
	Rural	4.1	1.9-6.3	1.9	0.6-3.3	
Geographic Region	Metropolitan	3.0	1.8-4.2	1.9	1.0-2.9	
	Appalachian	1.7	0.7-2.6	2.4	1.0-2.9	
	Apparaoman	1.7	0.1-2.0	2.4	1.2-3.0	

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Table 14a (con't)

Source: Ohio Behavioral Risk Factor Surveillance System, Ohio Department of Health, 2018

Note: This table has been updated. The previously published table did not restrict the female population to WRA, as the title references.

¹Estimate does not meet the reliability criteria for reporting set by the CDC.

Table 14b. Prevalence of a history of GDM only among women aged 18-44 years, by behavioral risk factor, Ohio 2011-13 and 2014-16

		2011-1	L3 (n=151)	2014-16 (n=103)		
		%	95% CI	%	95% CI	
BMI ²	Underweight (< 18.5)	N/A¹	N/A¹	N/A^1	N/A^1	
	Normal weight (18.5 - 24.99)	2.9	1.6-4.1	1.6	0.6-2.5	
	Overweight(25.00-29.99)	2.6	1.5-3.7	3.9	1.6-6.1	
	Obese (30.0+)	3.9	2.7-5.2	3.3	1.8-4.9	
Smoking Status	Ever Smoker	3.3	2.3-4.4	4.1	2.3-5.8	
	Never Smoker	2.9	1.9-3.9	1.6	0.9-2.3	

Source: Ohio Behavioral Risk Factor Surveillance System, Ohio Department of Health, 2018

Note: This table has been updated. The previously published table did not restrict the female population to WRA, as the title references.

¹Estimate does not meet the reliability criteria for reporting set by the CDC.

²BMI was calculated from self-reported height and weight

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The current behaviors of women with a GDM history will impact whether or not they go onto develop T2DM. In general, the behaviors of Ohio women with a GDM history are more similar to women who have never been diagnosed with diabetes than with women who have received a T2DM diagnosis. From 2011- 13, almost half of Ohio women with a GDM history self-reported having a history of smoking, one-third did not meet the physical activity recommendation and one in five has not had a routine health checkup within the last 2 years. Self-reported smoking rates increased in 2016 with three in five women reporting a history of smoking. These factors further increase a woman's risk for developing T2DM and jeopardize timely diagnosis and management if they do develop T2DM.

Table 15. Health care and health behaviors among women aged 18-44 years with a history of GDM compared to women with current T2DM and women with no diabetes history, Ohio 2011-13 and 2014-16

2011-13						2014-16						
	History of GDM (%)	95% CI	Current Diabetes (%)	95% CI	No Diabetes History (%)	95% CI	History of GDM (%)	95% CI	Current Diabetes (%)	95% CI	No Diabetes History (%)	95% CI
	n=151		n=196		n=4766		n=103		n=170		n=3896	
Smoker												
Ever Smoker	47.0	35.3-58.8	56.5	46.6-66.4	43.1	41.2-44.9	59.8	44.9-74.7	47.9	37.6-58.2	36.6	34.4-38.7
Never Smoker	53.0	41.2-64.7	43.5	33.6-53.4	56.9	55.0-58.8	40.2	25.3-55.1	52.1	41.8-62.4	63.4	61.3-65.6
Met aerobic physical activity recommendation ¹												
Yes	32.0	14.5-49.4	24.1	9.9-38.3	30.6	28.2-33.1	N/A ²	N/A²	35.1	21.7-48.6	52.6	49.5-55.8
No	68.0	50.6-85.5	75.9	61.6-90.1	69.4	66.9-71.8	N/A ²	N/A²	64.9	51.4-78.3	47.4	44.2-50.5
Last routine health check-up												
Within past 2 years	80.0	70.1-89.9	91.3	86.9-95.7	81.7	80.3-83.2	82.3	72.1-92.6	81.7	72.8-90.7	83.8	82.2-85.4
Within past 5 years	11.5	2.9-20.1	6.1	2.2-10.0	10.2	9.0-11.4	N/A²	N/A²	N/A²	N/A ²	8.5	7.2-9.7
5 or more years	8.5	2.4-14.6	N/A ²	N/A ²	8.1	7.0-9.1	N/A²	N/A²	N/A²	N/A ²	7.7	6.5-8.8

Source: Ohio Behavioral Risk Factor Surveillance System, Ohio Department of Health, 2018

Note: This table has been updated. The previously published table did not restrict the female population to WRA, as the title references.

¹Question not asked in 2012. Estimates derived from 2011 and 2013 data only. Question not asked in 2014. Estimates derived from 2015 and 2016 data only.

²Estimate does not meet the reliability criteria for reporting set by the CDC.