

Pumps in Pregnancy

Kate Clapham tells us how a pump made her third pregnancy much easier than before

I have had Type 1 diabetes for 23 years, and am mother to Kayleigh, 7, Simon, 5, and Molly 14 months.

Kate Clapham's kids – Kayleigh, Molly and Simon. December 2000



Two difficult pregnancies

My first two pregnancies were very difficult – I managed to maintain an *HbA1c* of between 5 and 6%, but spent a great deal of time suffering from severe hypos. In my first pregnancy, I had nocturnal fits almost every night, and during my second pregnancy, managed to cultivate a waking hypo, which stopped me driving from about 9 weeks into the pregnancy.

I told my consultant about the problems I was having, but as my *HbA1c* was fairly good, I was just told to continue with what I was doing. I was having too much insulin for the carbohydrate I ate, so causing the hypos, and would then have far too much carbohydrate to bring my blood sugar up. I would then have a correction dose to bring my blood sugar down again, which would cause a hypo... Once on this seesaw, it is very difficult to get off.

Pregnant again!

To say that being pregnant again scared me is an understatement – I would have tried a celery diet, if it stopped me having these episodes! However, when I visited my consultant at Harrogate District Hospital I was offered the chance to go on an insulin pump, and found this a much more attractive proposition.

I started on the pump when I was just over 6 weeks pregnant. I went to the hospital with my husband for a 2-day training course, and started using insulin in the pump on the afternoon of the first day. I have never looked back!

During pregnancy, it is normal for insulin requirements to increase. I found this very easy with my pump, as I was able to add a proportion of my basal rate and adjust this until I got the right balance. I did run for some days on a basal rate of +40%, but could have altered my basal rate earlier – I didn't trust myself to have got it right so quickly.

When I had Molly, I was on a basal rate of about 140 units, compared to 47 pre-pregnancy. Because the increases were gradual, I did not panic, and managed to avoid any severe hypos. The best piece of advice I was given was to use 1 unit of insulin to reduce my blood sugar by 2.5 *mmol/L* (50 *mg/dL*). This enabled me to keep my blood sugar "normal" and accurately predict the likely outcome of my bolus.

The delivery

I was able to keep my pump attached while I was in theatre, although as my operation was delayed by an hour, my blood sugar had gone up to 11 *mmol/L* (200 *mg/dL*) by the time Molly was born (I only had 3

recorded BGs above 9 mmol/L (160 mg/dL) during the entire pregnancy...). She had a slight hypo immediately after birth, but we were able to sort it out with a small amount of milk, and she never left my side. After my experiences with Kayleigh and Simon, this was all I had dreamed of. I was lucky that Leeds General Infirmary have a transitional care ward where diabetic mothers routinely go for a little extra care, and I had our spaces booked well in advance. I finally felt that I had done it right – and have eventually got over the disappointment of never experiencing labour (really!). I was too poorly with Kayleigh, who was delivered by caesarean at 35 weeks. And Simon was breach, so caesarean again, and then he had *respiratory distress syndrome* (RDS) so the first time I met him, he was connected to a respirator, a drip, an umbilical catheter, etc... scary.

When I discovered that I was pregnant, my HbA1c was 7.7%, when I had Molly it was 4.7%. I was told that this was too low although I did not suffer any hypos and could still drive when I went in for my caesarean. (I had plenty of insulin to cope with my dietary requirements, but on reflection, slightly less carbohydrate would probably have been more sensible!). I have not shifted much weight since I had Molly – after 23 years of a diabetic diet, the temptation to indulge is very strong and I have never had much will power!

Control afterwards

It has been more difficult to maintain the stability I managed during pregnancy since I stopped feeding Molly – I am sure that hormones play a big part in balancing my diabetes, but my HbA1c is now slightly above 6%, and physically I have noticed great improvements. I have had a patch of necrobiosis on my right shin for 10 years, and this is shrinking for the first time. I have never had problems with my eyes, kidneys or heart – touch wood! You will not be surprised to hear that there is no evidence of any problems here...

I would heartily recommend the pump as an option during pregnancy – but must point out that consultants who think they will get the pump back when junior arrives are sadly mistaken!

Author: Kate Clapham <kate@oddbods.co.uk>. Kate Clapham is not a medical professional. She has Type 1 diabetes and uses an insulin pump. The information given here is based on her own personal experience. [More about Kate Clapham...](#)

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