

1 **NATIONAL INSTITUTE FOR HEALTH AND CARE**
2 **EXCELLENCE**

3 **Guideline scope**

4 **Diabetes in pregnancy: management from**
5 **preconception to the postnatal period**
6 **(update)**

7 This guideline will update the NICE guideline on Diabetes in pregnancy:
8 management from preconception to the postnatal period (NG3).

9 The guideline will be developed using the methods and processes outlined in
10 [developing NICE guidelines: the manual](#).

11 This guideline will also be used to update the [NICE quality standard for](#)
12 [diabetes in pregnancy](#).

13 **1 Why the update is needed**

14 New evidence that could affect recommendations was identified through the
15 surveillance process. Topic experts, including those who helped to develop
16 the existing guideline, advised NICE on whether areas should be updated or
17 new areas added. Full details are set out in the [surveillance review decision](#).

18 ***Why the guideline is needed***

19 Please see original guideline [scope](#).

20 **2 Who the guideline is for**

21 This guideline is for:

- 22 • healthcare professionals
23 • commissioners and providers
24 • women with diabetes who are planning a pregnancy or are pregnant and
25 women at risk of, or diagnosed with, gestational diabetes.

1 NICE guidelines cover health and care in England. Decisions on how they
2 apply in other UK countries are made by ministers in the [Welsh Government](#),
3 [Scottish Government](#) and [Northern Ireland Executive](#).

4 ***Equality considerations***

5 NICE carried out [an equality impact assessment](#) during development of the
6 original guideline. The assessment:

- 7 • lists equality issues identified, and how they have been addressed
- 8 • explains why any groups are excluded from the guideline.

9 **3 What the updated guideline will cover**

10 **3.1 Who is the focus?**

11 **Groups that will be covered**

- 12 • Women with diabetes who are planning a pregnancy or are pregnant and
13 women at risk of, or diagnosed with, gestational diabetes.

14 In this guideline, "women who are planning to become pregnant or who are
15 already pregnant" includes people who do not identify as a woman.

16 **3.2 Settings**

17 **Settings that will be covered**

18 All settings where NHS funded care is provided.

19 **3.3 Activities, services or aspects of care**

20 **Key areas that will be covered in this update**

21 We will look at evidence in the areas below when developing this update. We
22 will consider making new recommendations or updating existing
23 recommendations in these areas only.

- 24 1 Preconception planning and care: monitoring blood glucose and ketones
25 in the preconception period.

1 – Blood glucose monitoring.

2 2 Antenatal care for women with diabetes: managing diabetes during
3 pregnancy.

4 – Blood glucose monitoring.

5 **Proposed outline for the guideline**

6 The table below outlines all the areas that will be included in the guideline. It
7 sets out what NICE plans to do for each area in this update.

Area in the guideline	What NICE plans to do
1.1 Preconception planning and care	
Information about outcomes and risks for mother and baby	No evidence review: retain recommendations from existing guideline
The importance of planning pregnancy and the role of contraception	No evidence review: retain recommendations from existing guideline
Diet, dietary supplements and body weight	No evidence review: retain recommendations from existing guideline
Monitoring blood glucose and ketones in the preconception period	Review evidence and update existing recommendations as needed
Target blood glucose and HbA1c levels in the preconception period	No evidence review: retain recommendations from existing guideline
Safety of medicines for diabetes before and during pregnancy	No evidence review: retain recommendations from existing guideline
Safety of medicines for complications of diabetes before and during pregnancy	No evidence review: retain recommendations from existing guideline
Removing barriers to the uptake of preconception care and when to offer information	No evidence review: retain recommendations from existing guideline
Education and advice	No evidence review: retain recommendations from existing guideline
Retinal assessment in the preconception period	No evidence review: retain recommendations from existing guideline
Renal assessment in the preconception period	No evidence review: retain recommendations from existing guideline
1.2 Gestational diabetes	
Risk assessment, testing and diagnosis	No evidence review: retain recommendations from existing guideline

Area in the guideline	What NICE plans to do
Interventions	No evidence review: retain recommendations from existing guideline
1.3 Antenatal care for women with diabetes	
Monitoring blood glucose	No evidence review: recommendation 1.3.1 may require updating dependent on recommendations being updated. Retain recommendations 1.3.2 – 1.3.3 from existing guideline
Target blood glucose levels	No evidence review: retain recommendations from existing guideline
Monitoring HbA1c	No evidence review: retain recommendations from existing guideline
Managing diabetes during pregnancy: insulin treatment and risks of hypoglycaemia ketone testing and diabetic ketoacidosis	No evidence review: retain recommendations from existing guideline
Managing diabetes during pregnancy: continuous glucose monitoring	Review evidence and update existing recommendations as needed
Retinal assessment during pregnancy	No evidence review: retain recommendations from existing guideline
Renal assessment during pregnancy	No evidence review: retain recommendations from existing guideline
Preventing pre-eclampsia	No evidence review: retain recommendations from existing guideline
Detecting congenital malformations	No evidence review: retain recommendations from existing guideline
Monitoring fetal growth and wellbeing	No evidence review: retain recommendations from existing guideline

Area in the guideline	What NICE plans to do
Organisation of antenatal care	No evidence review: retain recommendations from existing guideline
Preterm labour in women with diabetes	No evidence review: retain recommendations from existing guideline
1.4 Intrapartum care	
Timing and mode of birth	No evidence review: retain recommendations from existing guideline
Anaesthesia	No evidence review: retain recommendations from existing guideline
Blood glucose control during labour and birth	No evidence review: retain recommendations from existing guideline
1.5 Neonatal care	
Initial assessment and criteria for admission to intensive or special care	No evidence review: retain recommendations from existing guideline
Preventing and assessing neonatal hypoglycaemia	No evidence review: retain recommendations from existing guideline
1.6 Postnatal care	
Blood glucose control, medicines and breast feeding	No evidence review: retain recommendations from existing guideline
Information and follow-up after birth	No evidence review: retain recommendations from existing guideline

- 1
- 2 Recommendations in areas that are being retained from the existing guideline
- 3 may be edited to ensure that they meet current editorial standards, and reflect
- 4 the current policy and practice context.

1 **Related NICE guidance**

2 ***Published***

- 3 • [Twin and triplet pregnancy](#). NICE guideline NG137 (2019).
- 4 • [Hypertension in pregnancy: diagnosis and management](#). NICE guideline
5 NG133 (2019).
- 6 • [Stop smoking interventions and services](#). NICE guideline NG92 (2018).
- 7 • [Type 2 diabetes in adults: management](#). NICE guideline NG28 (2015).
- 8 • [Diabetic foot problems: prevention and management](#). NICE guideline NG19
9 (2015).
- 10 • [Diabetes \(type 1 and type 2\) in children and young people: diagnosis and
11 management](#) NICE guideline NG18 (2015).
- 12 • [Type 1 diabetes in adults: diagnosis and management](#) NICE guideline
13 NG17 (2015).
- 14 • [Antenatal and postnatal mental health: clinical management and service
15 guidance](#). NICE guideline CG192 (2014).
- 16 • [Intrapartum care for healthy women and babies](#). NICE guideline CG190
17 (2014).
- 18 • [Type 2 diabetes: prevention in people at high risk](#). NICE guideline PH38
19 (2012).
- 20 • [Caesarean section](#). NICE guideline CG132 (2011).
- 21 • [Preventing type 2 diabetes: population and community-level interventions](#).
22 NICE guideline PH35 (2011).
- 23 • [Weight management before, during and after pregnancy](#). NICE guideline
24 PH27 (2010).
- 25 • [Inducing labour](#). NICE guideline CG70 (2008).
- 26 • [Antenatal care for uncomplicated pregnancies](#) NICE guidance CG62 (2008)
- 27 • [Continuous subcutaneous insulin infusion for the treatment of diabetes
28 mellitus](#) NICE technology appraisal TA151 (2008).
- 29 • [Obesity prevention](#). NICE guideline CG43 (2006).
- 30 • [Postnatal care up to 8 weeks after birth](#). NICE guideline CG37 (2006).
- 31 • [Nutrition support in adults: oral nutrition support, enteral tube feeding and
32 parenteral nutrition](#). NICE guideline CG32 (2006).

1 ***NICE guidance that will be updated by this guideline***

- 2 • [Diabetes in pregnancy: management from preconception to the postnatal](#)
3 [period](#) (2015) NICE guideline NG3

4 **NICE guidance about the experience of people using NHS services**

5 NICE has produced the following guidance on the experience of people using
6 the NHS. This guideline will not include additional recommendations on these
7 topics unless there are specific issues related to diabetes in pregnancy:

- 8 • [Medicines optimisation](#) (2015) NICE guideline NG5
9 • [Patient experience in adult NHS services](#) (2012) NICE guideline CG138
10 • [Service user experience in adult mental health](#) (2011) NICE guideline
11 CG136
12 • [Medicines adherence](#) (2009) NICE guideline CG76

13 **3.4 *Economic aspects***

14 We will take economic aspects into account when making recommendations.
15 We will develop an economic plan that states for each review question (or key
16 area in the scope) whether economic considerations are relevant, and if so
17 whether this is an area that should be prioritised for economic modelling and
18 analysis. We will review the economic evidence and carry out economic
19 analyses, using an NHS, public sector and other perspectives, as appropriate.

20 ***Key issues and draft questions***

21 While writing the scope for this updated guideline, we have identified the
22 following key issues and draft questions related to them:

- 23 1 Preconception planning and care: monitoring blood glucose and ketones
24 in the preconception period
25 Antenatal care for women with diabetes: managing diabetes during
26 pregnancy; continuous glucose monitoring
27 1.1 In women with type 1 diabetes who are planning to become pregnant
28 or who are already pregnant, what is the most effective method of blood
29 glucose monitoring to improve diabetic control:
30 – continuous glucose monitoring

- 1 – flash glucose monitoring
- 2 – intermittent capillary blood glucose monitoring?

3

4 The key issues and draft questions will be used to develop more detailed
5 review questions, which guide the systematic review of the literature.

6 **3.5 Main outcomes**

7 The main outcomes that may be considered when searching for and
8 assessing the evidence are:

- 9 • Diagnostic accuracy:
 - 10 – sensitivity and specificity.
- 11 • Quality of life:
 - 12 – health-related quality of life (validated questionnaire) – for example,
 - 13 diabetes-specific health-related quality of life.
- 14 • Neonatal outcomes:
 - 15 – admission to a neonatal intensive care unit, special care baby unit, or
 - 16 transitional care unit
 - 17 – miscarriage, stillbirth (fetal death), neonatal or infant death
 - 18 – macrosomia, large for gestational age, small for gestational age and
 - 19 intrauterine growth restriction
 - 20 – neonatal hypoglycaemia requiring active management
 - 21 – respiratory distress
 - 22 – shoulder dystocia and birth trauma (bone fracture or nerve palsy)
 - 23 – other neonatal complications (jaundice, polycythaemia, sepsis,
 - 24 hypocalcaemia or hypoxic ischaemic encephalopathy)
 - 25 – congenital abnormality.
- 26 • Maternal outcomes:
 - 27 – maternal death
 - 28 – perineal trauma
 - 29 – preterm birth
 - 30 – mode of birth (spontaneous vaginal, instrumental, or caesarean section)
 - 31 – mode of infant feeding

- 1 – diabetic complications (hypoglycaemia, diabetic ketoacidosis,
- 2 retinopathy, nephropathy, or macrovascular disease)
- 3 – antenatal and intrapartum complications in the unborn baby
- 4 – development of type 2 diabetes
- 5 – obstetric complications (haemorrhage, infection, thrombosis, admission
- 6 to critical care, or incontinence)
- 7 – diabetes control (HbA1c, fructosamine or mean glucose
- 8 – postnatal mental health
- 9 – maternal satisfaction.

10 **4 NICE quality standards and NICE Pathways**

11 **4.1 NICE quality standards**

12 **NICE quality standards that may need to be revised or updated when** 13 **this guideline is published**

- 14 • [Diabetes in pregnancy](#) (2016) NICE quality standard 109

15 **4.2 NICE Pathways**

16 When this guideline is published, we will update the existing NICE Pathway on
17 [diabetes in pregnancy](#). NICE Pathways bring together everything NICE has
18 said on a topic in an interactive flowchart.

19 **5 Further information**

This is the final scope.

The guideline is expected to be published: to be confirmed.

You can follow progress of the [guideline](#).

Our website has information about how [NICE guidelines](#) are developed.

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