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Dietary patterns and their association with glycemic control and risk of gestational diabetes mellitus in Gaza Strip, Palestine: A case control study

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Background: This study was conducted to determine the major dietary patterns and their association with glycemic control and risk of gestational diabetes mellitus (GDM) in Gaza Strip, Palestine.

Method: This is a case control study was conducted in the primary healthcare centers, in the year 2021, among 210 pregnant women, aged 20-40 years (70 cases and 140 controls matched for age and geographical location), selected by a purposive sampling method. Dietary patterns were evaluated using a validated semi-quantitative food frequency questionnaire. The international physical activity questionnaire was used to measure physical activity level. Additional information regarding demographic-socioeconomic and medical history variables was obtained with an interview-based questionnaire. The WHO criteria was used for diagnosis and determination of GDM. Additionally, the HbA1c was used as a marker of glycemic control. Statistical analysis was performed using SPSS version 22.

Results: Two major dietary patterns were identified by factor analysis: Healthy dietary pattern and unhealthy dietary pattern. After adjustment for confounding variables, women in the lowest tertile of the healthy dietary pattern had a lower odds for GDM or poor glycemic control [OR, CI 95%: 0.730 (0.596-.895); P-value 0.002]; whereas women in the lowest tertile of the unhealthy dietary pattern had a higher odds for GDM or poor glycemic control [OR, CI 95%: 3.41 (0.033-0.154); P-value 0.003].

Conclusion: The healthy dietary pattern may be associated with a lower risk of GDM or poor glycemic control; whereas the unhealthy dietary pattern may be associated with a high risk of GDM or poor glycemic control.

Biography

Dr. Manal completed her Bachelor degree in Pharmacy, Master program of Clinical Nutrition, Faculty of Pharmacy, Al Azhar University of Gaza, Palestine. Throughout her career she have held positions (in IOCC as Community Health Field Coordinator, in ACF Spain as Health Educator (Emergency preparation), in the culture and Free Though Association (CFTA) in cooperation with CCP- Japan and UNFPA as Health Educator; Coordinator for health promotional events also in ANERA I worked as Health Awareness trainer (Nutrition) and in Al. Aqsa Charitable Clinic as Head Manager of Pharmacy).

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