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## **Causes and Treatment of Gestational Diabetes**

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## **Description**

Diabetes that is diagnosed for the first time during pregnancy (gestation) is known as gestational diabetes. Gestational diabetes, like other types of diabetes, has an effect on how your cells use sugar (glucose). Diabetes gestational raises blood sugar levels, which can harm your pregnancy and the health of your baby. There is good news despite any pregnancy complications being concerning. You can control gestational diabetes during pregnancy by eating healthy foods, exercising, and taking medication if necessary. If you have gestational diabetes during your pregnancy, your blood sugar usually returns to its usual level shortly after delivery. This can keep you and your baby healthy and prevent a difficult delivery. However, you are more likely to develop type 2 diabetes if you have had gestational diabetes. You will require more frequent blood sugar changes tests. Extreme pain that persists after regional anesthesia wears off is known as rebound pain. Patient, surgical, and anesthesiarelated factors influence the frequency and intensity of rebound pain. The perioperative multimodal strategy reduces both the frequency and severity of rebound pain after peripheral nerve block resolution. The current study sought to determine the frequency, severity, and risk factors of recurrent pain after peripheral nerve block resolution. From August 20, 2021 to June 30, 2022, a cross-sectional study with 384 patients who had received peripheral nerve blocks was conducted. Within the first 24 hours following the block's performance, information was gathered using a semi-structured questionnaire. The data were entered and analysed using SPSS 25. Rebound pain is the transition from well-controlled pain during the block's operation to severe pain within 24 hours of block performance.

## Significance of Multivariable Analysis

The relationship between various parameters and rebound pain was investigated using both univariate and multivariable analyses. A P-value of 0.05 or less is considered statistically significant in the multivariable analysis. Suggestion Preoperative pain, dexamethasone premedication, type of surgery, use of an adjuvant, postoperative opioid use, and nonsteroidal anti-inflammatory drugs (NSAIDs) were independently associated with rebound pain in 61.7% of patients. As a result, clinicians should continue to employ preventative measures, particularly for patients who are more likely to suffer from rebound pain. The purpose of this article was to assess the various

epidemiological aspects of the population in the Fez-Meknes region, to reveal the secular food-related trends, to describe the fundamental concepts and mechanisms of food in both urban and rural areas, and, finally, to evaluate the findings in light of a literature review. There was a difference (P 0,001) between the urban and rural groups in the frequency with which they ate outside of the home; the average amount of certain foods that people of different social classes eat (p 0,001); Compared to the urban environment, legumes, olive oil, fermented milk, tea, and other foods are consumed more frequently per week (p 0,001). However, there was no statistically significant difference found in the consumption of sweets, dairy, and whole grains between the two study environments.

## **Postoperative Pain Management**

It was noted that eating habits differed between urban and rural areas. By encouraging the Moroccan people to keep as many of their traditional and healthy eating habits as possible, it would be necessary to take prudent action against the environment. Over the years, a variety of neoplastic procedures have been developed to maintain breast cosmesis and symmetry without jeopardizing the fundamentals of tumor excision. The use of fasciocutaneous pedicled chest wall perforator flaps or local perforator flaps (LPF) is one of the more recent methods for replacing breast volume to achieve symmetry and cosmesis. Utilizing a validated BREAST-Q tool, the purpose of this study was to document the specifics of the surgical procedure as well as the patient-reported satisfaction and well-being following the procedure among Pakistani women. At The Aga Khan University Hospital, Karachi, 25 female patients who had undergone breast conservative surgery with LPF for breast tumors participated in this cross-sectional study from March 2019 to February 2021. A pre-designed proforma was used to collect the procedurerelated data. Two BREAST-Q BCT domain version 2.0 scales were used to evaluate cosmetic outcomes and patient satisfaction. During their regular clinic follow-up, the patients selfadministered the questionnaire. Statistical Package for the Social Sciences (SPSS) version 23 was utilized for data analysis. For quantitative variables, mean (SD)/median (IQR) were calculated, and for qualitative variables, frequency and percentages were calculated. The two-sample t-test was used. A significance level of 0.05 was considered. Despite increased awareness of pain management in many healthcare settings, many patients still experience unnecessary pain in many hospitals, particularly after

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surgery. Postoperative complications like atelectasis, pneumonia, thromboembolism, and impaired immune function have been linked to unrelieved postoperative pain. Evidence to fill in the gaps in our hospital's nurses' attitudes and practices regarding postoperative pain management. 144 nurses participated in a descriptive cross-sectional study. A systematic random sampling method was used to select study participants. A self-administered and verified structured questionnaire was used to collect the data SPSS version 24 was used to enter and analyze the data. The frequency, percentage, mean, bar graph, and pie chart are all ways to present descriptive results. Overall,

nurses with 144 participants in the study had 78 (54.2%) good knowledge, 67 (60.4%) favourable attitudes, and practiced 81 (56). on how to deal with pain after surgery. Only 34 nurses, or 23.6%, are trained in postoperative pain management, while 60 nurses (41.7%) hold a bachelor's degree. Overall, the nurses' knowledge of postoperative management was good, and they had positive attitudes and good practices, according to this study. However, the research indicates that knowledge, attitude, and practice levels are only as a result, it will make it possible to suggest plans for nurses, hospitals, and universities to organize continuing education