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HC 761  
Assignment 3B: Online feature story  
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## What It's Like to Have a Baby When You Have Type 1 Diabetes

*In this often-overlooked autoimmune disease, it's all about blood sugar--for mother and baby*

In many ways, Megan is a typical new mother: slightly foggy-eyed, minimal makeup, and [back at work](#) full-time only 8 weeks after giving birth. She has a smile that lights up when talking about her infant daughter and describes being overwhelmed with parenthood, work, and chores. Meeting Megan for the first time, you might never guess that she lives with type 1 diabetes (T1D).

"I'm going to check my glucose," Megan says, putting down her phone to use her Omnipod, an insulin pump system with a built-in blood glucose meter. At 1:30 pm, she hasn't had much to eat today. Behind her, the floor-to-ceiling windows of her condo unit overlook downtown Kansas City on an overcast, gray day.

T1D is an autoimmune disease. In people with T1D, the body's immune system destroys the cells in the pancreas that produce insulin, which is an important hormone that the body needs to convert food into energy. T1D is often mistaken with the more common [type 2 diabetes](#), but they differ in several ways. Type 2 diabetes is not related to the immune system, and it is more commonly found in people over age 40. Common treatments for type 2 include diet and exercise. With T1D, the only treatment is insulin and frequent blood sugar monitoring.

Megan checks her glucose six to eight times a day, she says, sometimes less. Satisfied with her reading, she takes an eager bite of scone--ham and cheese--picked up from a local bakery.

### **A Diabetes Diagnosis**

Megan's diabetes journey is unusual: she was diagnosed with T1D at age 30, later than the norm. Formerly known as "juvenile diabetes," T1D usually has an onset during childhood, commonly in [one of two peaks](#): between 4 and 7 years old, and between 10 and 14 years old.

As a new diabetic, Megan struggled when moving into [hypoglycemia](#), or low blood sugar. T1D-related hypoglycemia can cause blurry vision, dizziness, and nausea. It took Megan some time for her body to adjust to administered insulin--both physically and mentally. "I had to stop gardening, I couldn't do anything. . . . It really hindered my productivity at home." This led to frustration and depression. "Apparently, diabetics are . . . more likely than the average person to get depressed," she says. "I was like, oh, that makes sense." Most studies suggest that people with T1D may be up to [three times as likely](#) as the general population to have depression.

### **Pregnancy**

When preparing for pregnancy, Megan admits, diabetes wasn't on her mind very much. Her main concern was knowing that during pregnancy she would need to keep her blood glucose level even lower. Normally, in T1D patients, a blood glucose level of up to 6.5 is considered normal, but in pregnancy, T1D patients need to [stay below 6](#).

Hypoglycemia, Megan says, became a concern for her doctors during pregnancy. "They are very aggressive," she explains, "because it can affect the baby." For Megan, this meant controlling her blood glucose level so that it remained within the acceptable range. Blood

glucose that is not controlled can result in birth defects. As a result, Megan had to check her glucose constantly.

### **Delivery and Complications**

As with many T1D pregnancies, early delivery was also a possibility--one which ended up happening. Megan went into labor at 37 weeks, three weeks before her due date. She underwent a Cesarean section (C-section), a surgery in which the baby is delivered through the mother's belly. Megan was soon busy recovering from surgery and learning how to feed and care for her newborn daughter, when her blood pressure began increasing steadily. She had developed postpartum preeclampsia, a complication of pregnancy involving high blood pressure and possible damage to organs like the liver and kidneys.

Suddenly, "everybody and their mother kept visiting the hospital room," her husband John says. "Every ten minutes somebody would come in and ask questions." When Megan's blood pressure didn't show signs of decreasing, the medical team decided to treat the condition with magnesium sulfate. At the same time, their newborn daughter was hypoglycemic. In newborns, hypoglycemia can result in learning problems and can affect the baby's mental function. It was a very scary time for the family. "We didn't know what the outcomes would be, for the baby or for Megan," says John.

Megan was exhausted, in pain, and hopeless. It was especially difficult, she says, because she could not feed her daughter during the treatment. "So that's where my body just shut down and was like, I can't do this anymore. But I'm a midwesterner so I still had that politeness thing going on, like I have to be polite."

Finally, the medical team agreed that Megan and her daughter could be released. The family returned home after four days in the hospital, where they agreed to test Megan's blood pressure daily. "Her blood pressure reduced almost immediately when we got home," says John. "Her stress response has always been to just sleep it off, and I knew that's what we needed."

### **Back to a New Normal**

These days, things are a lot more normal for the family, and their concerns and joys are typical of many new parents. One of their biggest joys: their daughter is healthy and thriving. "She's done well with eating. She's hit most of her milestones," says Megan. This weekend, Megan says, the couple plans to set up the crib so they can transition their daughter out of her temporary sleeper. She and John will even get out for a rare date night. They'll kiss their baby daughter goodbye at the in-laws. Megan, wearing her Omnipod, will check her glucose, as usual, before eating. And then, a real treat: "West Side Story" at Kansas City's Kauffman Center. But it will be difficult, as it is with most parents, to think of anything but their daughter.

Addendum:

The target audience for this feature is mainly women—in particular, mainly women in the millennial generation, especially young mothers. The target audience would be readers of online parenting blogs and websites, such as romper.com, which is the type of publication for which this story is written.

Facebook post:

What's it like to have a baby when you have #type1diabetes? It's all about the blood sugar.

Check out this feature story about #pregnancy and #motherhood with #T1D.

[Insert link]

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