Glucose Challenge Test (GCT)

Gestational diabetes is a complication of pregnancy in which the pregnancy hormones create a temporary condition of diabetes which resolves after the delivery. If not diagnosed and treated, it can lead to complications for both mother and baby. When it is diagnosed and managed properly, most of the pregnancy complications can be prevented.

Since 1-3% of pregnancies can be complicated by gestational diabetes, most authorities recommend that all pregnant women be screened between 24-28 weeks gestation, although we may advise patients with certain risk factors to be screened earlier. The definitive test is a 3-hour glucose tolerance test (GTT), which is inconvenient and time-consuming. The Glucose Challenge Test (GCT), also called the O'Sullivan Screen, has been designed as a screening test for gestational diabetes. If you have a normal GCT, you probably do not have gestational diabetes, and you do not need to undergo a GTT. If the GCT is abnormal, you may have gestational diabetes and GTT will need to be performed. Most women with abnormal GCT’s turn out to have a normal GTT and do not have diabetes.

On the day of the test, eat normally, but try to avoid things that are excessively sweet. For the test you will take in 50 grams of glucose (sugar) orally in one dose by drinking a special sweet drink. One hour later you will have your blood drawn to obtain a glucose level. You will receive a sheet with your glucose test instructions, please follow them closely. If the results of the GCT are normal, you do not have gestational diabetes, and do not have to do a GTT. If the results are abnormal, we will schedule you for a GTT to be done at the hospital laboratory. Don’t panic! Most patients with abnormal GCT’s turn out to NOT have diabetes.

If you have any questions regarding your upcoming tests, please feel free to call our office.