

MEDIA RELEASE

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For Immediate Publication

NUH LAUNCHES SINGAPORE'S FIRST DEDICATED GESTATIONAL DIABETES SERVICE TO TACKLE HIGH RATES OF POST-PREGNANCY TYPE 2 DIABETES

*New holistic service integrates obstetrics, endocrinology and community care
– close to 400 women have been seen by the multidisciplinary team*



Photo credit: National University Hospital (NUH)

(Seated from left to right) Patients Mdm Geng Yan Juan, Mdm Cheryl Goh and Mdm Nur'Huda Binte Kamsani, who have successfully reversed their condition under the NUH postpartum gestational diabetes mellitus (GDM) service, with (standing from left to right):

- *Associate Professor Su Lin Lin, Head & Senior Consultant, Division of Maternal Fetal Medicine, Department of Obstetrics & Gynaecology, NUH;*
- *Dr Eng Pei Chia, Consultant, Division of Endocrinology, Department of Medicine, NUH;*
- *Adjunct Associate Professor Khoo Chin Meng, Head & Senior Consultant, Division of Endocrinology, Department of Medicine, NUH*
- *Professor A Vathsala, Head & Senior Consultant, Department of Medicine, NUH.*

SINGAPORE — The National University Hospital (NUH) has launched Singapore's first dedicated service to provide specialised care and long-term support for women diagnosed with gestational diabetes mellitus (GDM), a condition that affects one in six pregnancies worldwide and substantially increases a woman's risk of developing type 2 diabetes later in life¹. In Singapore, the rate is even higher with one in five pregnant women affected.

Unlike traditional models where follow-up care for GDM often ends after childbirth, this first-of-its-kind service is a multidisciplinary programme designed to look after mothers from GDM diagnosis to postpartum years. It aims to close a critical gap in diabetes prevention and break the intergenerational cycle of metabolic disease.

Addressing a major women's health challenge

Studies show that women with GDM had at least a 70 per cent increase in lifetime risk of type 2 diabetes. This risk is greatest at three to six years after a GDM delivery. Half of these mothers eventually progress to type 2 diabetes within 10 years after delivery.^{2,3}

The holistic postpartum GDM service started by the NUH endocrinology team in October 2023 ensures that every mother with GDM who delivers at NUH will be seen by the specialist diabetes team. To date, close to 400 women have been seen by the team. The programme found that about 40 per cent of these women continued to experience poor blood sugar control after delivery.

"GDM doesn't end at delivery. Although many women with GDM are relatively young, their long-time risks are real. Women with GDM face increased lifetime risks of diabetes, heart disease, and fatty liver," said Dr Eng Pei Chia, who leads the postpartum GDM service.

"Our women-centred pathway focuses on postpartum follow-up, cardiometabolic screening and practical support, so mothers can safeguard their health for the long run."

A first-of-its-kind holistic pathway

In Singapore, most women diagnosed with GDM are managed by their Obstetrics and Gynaecology (O&G) care team until the baby is born. Follow-up often tapers off after their sixth week post-delivery oral glucose tolerance test (OGTT). Many are then lost to care, when they do not return to manage their diabetes risk.

Instead of a decentralised approach, the NUH GDM programme is a multidisciplinary endeavour that creates a seamless pathway of care.

From the point of GDM diagnosis, both O&G and endocrinology teams co-manage the patient. This same team continues to journey with the patients post-delivery and follow up with them for their sixth week OGTT and annual blood tests thereafter.

¹ Eng, P. C., Teo, A. E., Yew, T. W., & Khoo, C. M. (2024). Implementing care for women with gestational diabetes after delivery-the challenges ahead. *Frontiers in global women's health*, 5, 1391213.

² Retnakaran, Ravi et al. "Risk of early progression to prediabetes or diabetes in women with recent gestational dysglycaemia but normal glucose tolerance at 3-month postpartum." *Clinical endocrinology* vol. 73,4 (2010): 476-83. doi:10.1111/j.1365-2265.2010.03834.x

³ Sweeting, Arianne et al. "Epidemiology and management of gestational diabetes." *Lancet (London, England)* vol. 404,10448 (2024): 175-192. doi:10.1016/S0140-6736(24)00825-0

Obstetricians, endocrinologists, and dietitians work closely together to tailor holistic strategies and treatment to help patients manage their condition.

If determined to be at low risk of developing diabetes, the women are referred to the National University Polyclinics (NUP) for follow-up care in the community, with a streamlined referral pathway back to NUH when specialist care is necessary. High-risk patients will be managed at NUH for at least three to five years post-delivery, by specialists from the NUH diabetes team. All GDM patients will be asked to undergo annual blood tests for lifelong monitoring.

Empowering women, protecting families

Through the new service, all women with GDM will be supported well beyond childbirth. They are cared for by experienced specialists from the NUH diabetes team, and will receive practical and personalised guidance to regain their metabolic health post-pregnancy. Just as importantly, they will be empowered with knowledge and confidence to take charge of both their own long-term health, as well as that of their children and family.

“With global prevalence of GDM rates rising by more than 30 per cent in the past two decades, this highlights a major concern and demands that that we prioritise women’s health after birth. When we prioritise postpartum care for women, children benefit too – through healthier homes and reduced intergenerational and future diabetes risk,” said Dr Eng.

Adjunct Associate Professor Khoo Chin Meng, Head and Senior Consultant, Division of Endocrinology, Department of Medicine, NUH, added: “We hope to encourage women to stay vigilant of their diabetes risk, and promote their wellness and health through this holistic journey with them. By supporting them to make sustainable lifestyle changes and form habits through personalised routines, diet and exercises, we can help these mothers maintain good health and stay diabetes-free for as long as possible. This isn’t just about the mothers, but also about protecting their families and future generations.”

Chinese Glossary

National University Hospital (NUH)	国立大学医院 (国大医院)
Gestational diabetes mellitus (GDM)	妊娠期糖尿病
NUH postpartum GDM service	国大医院产后妊娠期糖尿病服务
Dr Eng Pei Chia Consultant Division of Endocrinology Department of Medicine National University Hospital (NUH)	吴珮嘉 顾问医生 内分泌科 国大医院
Adjunct Associate Professor Khoo Chin Meng Head & Senior Consultant Division of Endocrinology Department of Medicine National University Hospital	邱進明 客座副教授 主任兼高级顾问医生 内分泌科 国大医院

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About the National University Hospital

The National University Hospital (NUH) is Singapore's leading university hospital. While the hospital at Kent Ridge first received its patients on 24 June 1985, our legacy started from 1905, the date of the founding of what is today the NUS Yong Loo Lin School of Medicine. NUH is the principal teaching hospital of the medical school.

Our unique identity as a university hospital is a key attraction for healthcare professionals who aspire to do more than practise tertiary medical care. We offer an environment where research and teaching are an integral part of medicine, and continue to shape medicine and transform care for the community we care for.

We are an academic medical centre with over 1,200 beds, serving more than one million patients a year with over 50 medical, surgical and dental specialties. NUH is the only public and not-for-profit hospital in Singapore to provide trusted care for adults, women and children under one roof, including the only paediatric kidney and liver transplant programme in the country.

The NUH is a key member of the National University Health System (NUHS), one of three public healthcare clusters in Singapore. For more information, visit www.nuh.com.sg

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