

SERVICE RELATED FACTORS ASSOCIATED WITH ANTENATAL GDM SCREENING AMONG MOTHERS DELIVERED AT SECONDARY CARE HOSPITALS IN MATARA DISTRICT

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Gestational Diabetes Mellitus (GDM), defined as 'any degree of glucose intolerance with onset or first recognition during pregnancy', accounts for certain adverse maternal and perinatal outcomes. Early detection and prompt glycaemic control can minimize such outcomes, thus universal screening for GDM is recommended. It has been incorporated to the maternal care programme since 2014 and carried out twice during antenatal period at field antenatal clinics. This study aimed to assess service related factors associated with effective implementation of antenatal GDM screening programme among mothers in Matara district. In a cross-sectional study, 423 post-partum mothers delivered at three secondary care hospitals in Matara district were recruited using a proportionate sampling technique. Data on access to antenatal GDM screening services and screening process were collected using an interviewer-administered questionnaire, and data on availability of screening facilities were collected using a data record sheet. Chi square test and Fisher's exact test were used to test the association between variables. Response rate was 92.3%. Distance to the nearest lab with blood sugar testing was <30 minutes' reach for 91.7%

participants. Area Public Health Midwife was not available during the time of first and second GDM screening for 5.5% and 13.2% participants respectively and availability of logistics were 22.7% and 11.5%. Coverage and timeliness of first screening were found to be 91.4% and 72.4%, respectively and corresponding figures for second screening were 94.5% and 59.5%. Proper documentation and appropriate referral were done in 76.8% and 47.7% respectively after first screening and in 65.4% and 21.2% after second screening. Screening coverage was negatively associated with a longer distance to nearest laboratory ($p=0.002$) and timeliness with non-availability of logistics ($p=0.002$) in second screening, but not in first screening. Despite higher coverage, GDM screening programme needs improvement in timeliness, proper documentation and appropriate referrals. Availability of logistics at MOH level will improve performance of GDM screening and hence maternal care package.

Keywords: GDM screening, Service related factors, Antenatal mothers