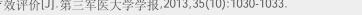
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[1]曾媛,袁丽佳,王琳,等.不同的医学营养治疗方法对妊娠糖尿病的疗效评价[J].第三军医大学学报,2013,35(10):1030-1033.









## 不同的医学营养治疗方法对妊娠糖尿病的疗效评价

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Therapeutic effect of medical nutrition therapies with different Title:

frequency of nutritional guidance on gestational diabetes mellitus

作者: 曾媛; 袁丽佳; 王琳; 康莉; 万婧; 孟珊; 糜漫天

第三军医大学:军事预防医学院营养与食品卫生学教研室,西南医院妇产科

Author(s): Zeng Yuan; Yuan Lijia; Wang Lin; Kang Li; Wan Jing; Meng Shan; Mi

Mantian

Department of Nutrition and Food Hygiene, Chongqing Key Laboratory of Nutrition and Food Safety, College of Military Preventive Medicine, Department of

Obstetrics and Gynecology, Southwest Hospital, Third Military University,

Chongqing, 400038, China

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医学营养治疗(medical nutrition therapy, MNT)前后,通过检测妊娠期糖尿病 摘要:

> (gestational diabetes mellitus, GDM) 患者空腹和餐后2 h血糖水平, 比较不同的治 将90名诊断为GDM的孕妇采用随机数字表法 疗方法对GDM的治疗效果。 方法 分为一次宣教组和持续干预组,每组各45名。2组按标准体质量法给予个体化的MNT治 疗方案,限制每日能量摄入,调整膳食结构,用食物交换份法安排食谱。一次性宣教组 营养治疗的实施方式仅采用1次面对面的营养宣教:持续干预组则进行持续性的治疗, 即在干预期内保持密切联系,加强对营养治疗的监控,包括面对面、电话和定期营养门 诊随访教育,并根据孕周、孕期体质量增长以及血糖水平动态调整饮食方案。观察2组1 个月后空腹和餐后2 h血糖的控制效果。 结果 持续干预组较一次性宣教组餐后2 h血糖值的下降更为显著(P<0.05)。持续干预组血糖控制合格率显著高于一次性宣教组 (55.6% vs 28.9%, P<0.05)。持续干预组尿酮体阳性率低于一次性盲教组(6.7% vs 17.8%), 但差异无统计学意义(P>0.05)。 结论 对GDM孕妇实施个体化的

MNT, 采用持续性治疗的方法, 能更有效的控制血糖水平。

Abstract: Objective To determine the therapeutic effect of medical nutrition therapies

> (MNT) with different frequency of nutritional guidance on gestational diabetes mellitus (GDM). Methods A total of 90 identified gestational diabetes mellitus patients who receiving prenatal checkup in the Department of

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Obstetrics and Gynecology, Southwest Hospital from January to May 2012 were randomly and equally divided into observation group and control group. Both groups were provided with individualized nutritional therapeutic foods by nutritionists based on their standard weight to limit daily energy intake, and their diet was adjusted by exchanging food arrangements recipes. Patients in control group were given face to face nutritional guidance for once, and those in observation group were given nutritional guidance from time to time in different manners, including face to face, telephone and regular nutrition clinic follow-up and education. Their diet was also adjusted based on their gestational weeks, body weight and blood glucose level. Then the fasting blood glucose and 2 hour blood glucose were compared between the 2 groups. Compared with control group, the 2 hour blood glucose in observation group were significantly decreased(P<0.05), and the amount of those with controlled blood glucose was higher in the observation group than in control group (55.6% vs 28.9%, P<0.05). The positive rate of urine acetone bodies was lower in the observation group than in control group though without significant difference (6.7% vs 17.8%, P>0.05). Conclusion It is more beneficial to practice the individualized MNT with continuous nutritional guidance in patients with gestational diabetes mellitus.

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