

A web/smartphone-based lifestyle program for the prevention of gestational diabetes mellitus (GDM) in Malaysia: Optimizing gestational weight gain (GWG)



### PRESENTATION OUTLINE

- 01 Introduction
- **02** Project Background
  - Phase 1 Development of materials
  - Phase 2 Training of health professionals
  - Phase 3 Implementation of lifestyle program



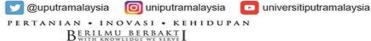




# 101 INTRODUCTION







### Hyperglycaemia in **Pregnancy (HIP)**

- □ Pre-gestational diabetes
- ☐ Gestational diabetes mellitus (GDM)
- ☐ Diabetes in pregnancy (DIP)

- Estimated 21.1 million (16.7%) of live births to women had some forms of HIP
  - ✓ Proportion of HIP cases due to GDM is 80.3%
  - ✓ Most (87.5%) HIP cases are in low- and middleincome countries
- Age-adjusted (20-49 years) prevalence of HIP
  - ✓ SEA region (highest) 28.0%; WP region 14.0%
  - ✓ Under age 30 years (due to higher fertility rates) 46.3%
- Prevalence of GDM (20 30 years old)
  - ✓ Global 14.0%
  - ✓ MENA region (highest) 27.6%; WP region 14.7%

(International Diabetes Federation, 2022; Wang et al., 2022)





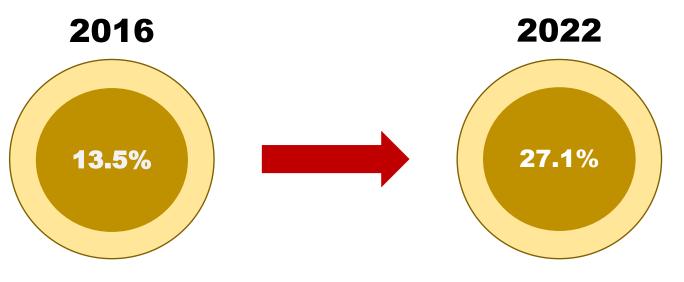


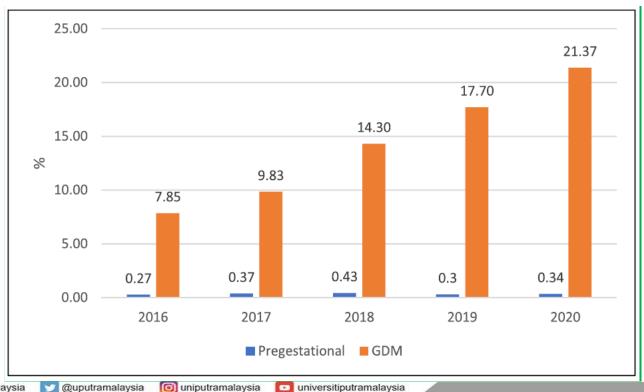
### **NATIONAL HEALTH & MORBIDITY SURVEY**

(Hyperglycaemia in Pregnancy)

### **NATIONAL OBSTETRICS REGISTRY (2018-2020)**

(Pre-gestational Diabetes & GDM)



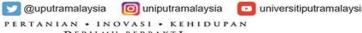


- GWG is an important determinant of short- and long-term health outcomes for the mother and offspring
  - Excessive / inadequate GWG and pre-pregnancy BMI are associated with adverse pregnancy outcomes
    - ✓ low birthweight, SGA, LGA, macrosomia, stillbirth, caesarean birth, pre-term delivery, GDM, preeclampsia, post-partum hemorrhage, post-partum weight retention and offspring obesity
  - Independent effect of GWG and pre-pregnancy BMI or combination of both
- Structured diet and physical activity-based lifestyle interventions are associated with reduced GWG and lower risk of adverse pregnancy outcomes

(Teede et al., 2022; Choi et al., 2022; Voerman et al., 2019)







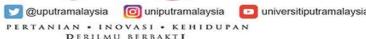
 Digital application is a technology that provides access to information and social support via mobile apps, portals, websites, software and other internet-based programs

- Digital health-related applications and web-based digital tools can manage all forms of diabetes, particularly GDM
  - Pregnant women manage diet, track physical activity and conduct self-monitoring routines such as weight monitoring and glucose reading
  - Reduced diabetic clinic visits and lower blood glucose level

(Morris et al., 2023; Leblalta at al., 2022; Chan & Chen, 2019)













# Community-based platforms remain as an effective approach

- Nutrition education / nutrition counseling / psychosocial interventions
- Home visits / clinic setting
- Community health workers / Peer counsellors / Mother peer groups

# Utilization of mass-media and mobile technology

- Reach target groups
- Support front-line workers









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# PROJECT BACKGROUND







# UPM – MOH Collaborative Project: Optimizing Gestational Weight Gain (GWG) for Prevention of Gestational Diabetes Mellitus (GDM) in Malaysia



### IBU SIHAT

"Ibu sihat, generasi sihat"







### **Project Partners**











**USM** 





**UiTM** 

**UCSI University** 



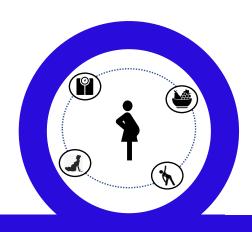




## **Project Phases**







### Phase 1

Development of materials (Website / Apps – Health and nutrition education (HNE) resources, gestational weight gain, dietary intake, data collection)

### Phase 2

Training of nutritionists and nurses

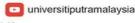
### Phase 3

Project implementation (Pilot study)



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# PHASE 01

# DEVELOPMENT OF MATERIALS



For Health Professionals

- 4 key topics
- 32 sub-topics
- Reviewed by 2 experts

Health and Nutrition Education Resources

## For Pregnant Women

- 4 key topics
- 32 sub-topics
- Pre-tested on pregnant and nonpregnant women

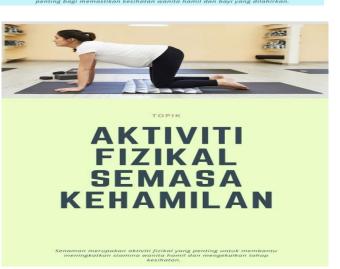




### **HNE Resources for Health Professionals**

















Peningkatan Berat Badan

6 sub-topics



**Pemakanan** 

11 sub-topics



12 sub-topics



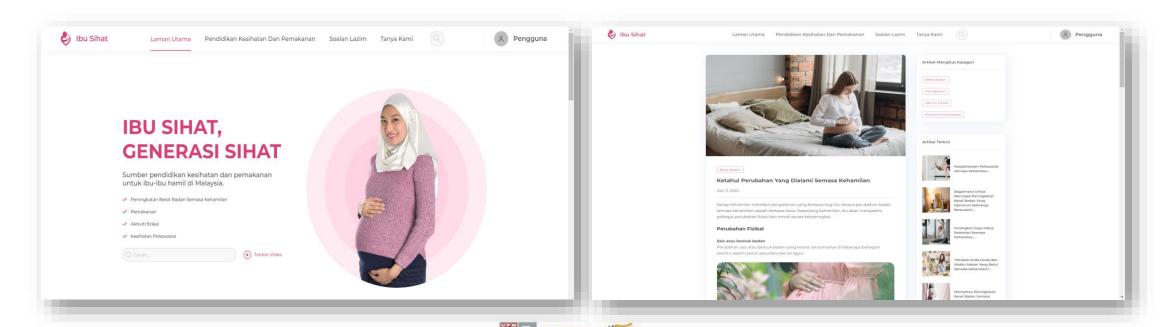
Kesihatan Psikososial

3 sub-topics



### **Ibu Sihat Website**

- Website link: https://www.ibusihat.my/
- Can be accessed via Ibu Sihat Application through Health and Nutrition Education icon.
- Consists of 32 subtopics (4 main topics) article articles, infographics and videos.
- Additional features Soalan Lazim (Frequently Asked Questions) and Tanya Kami (Ask Us).









## **Ibu Sihat Application**



### **Consists of 4 main apps:**













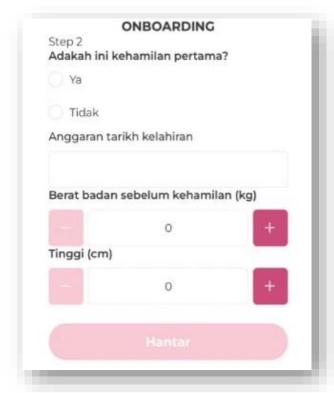


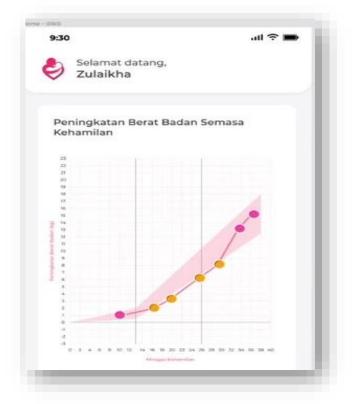


### App – Gestational Weight Gain (GWG) Monitoring

Allows a pregnant woman to record her weight throughout pregnancy and receive real-time feedback in the form of graphical illustration and text on weight gain progress.





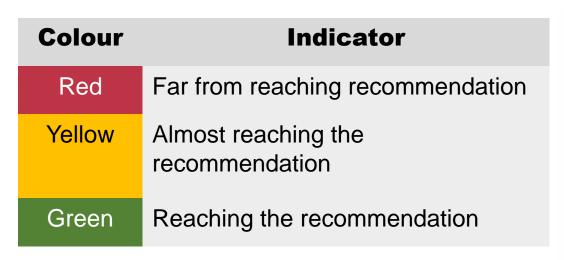






### App – Dietary Intake Monitoring

- Allows a pregnant woman to record her dietary intake throughout pregnancy and receive real-time feedback on her daily energy intake and number of servings for each food group.
- The feedback will be presented in a graph and in-text with a "traffic light"











# PHASE 02

# TRAINING OF NUTRITIONISTS AND NURSES





2. Training for MOH nutritionists1-day virtual workshop byTechnical Experts

4. MOH nutritionists and nurses trained





1. HNE resources for health professionals



3. Training for MOH nurses1-day virtual workshop by nutritionists





### **Training of Nutritionists**



### A day virtual workshop by Technical Experts

- Content (Slide presentation and Q&A session)
- > Activities (Case-studies and Interactive Quiz)



State nutritionists of MOH (N=367)

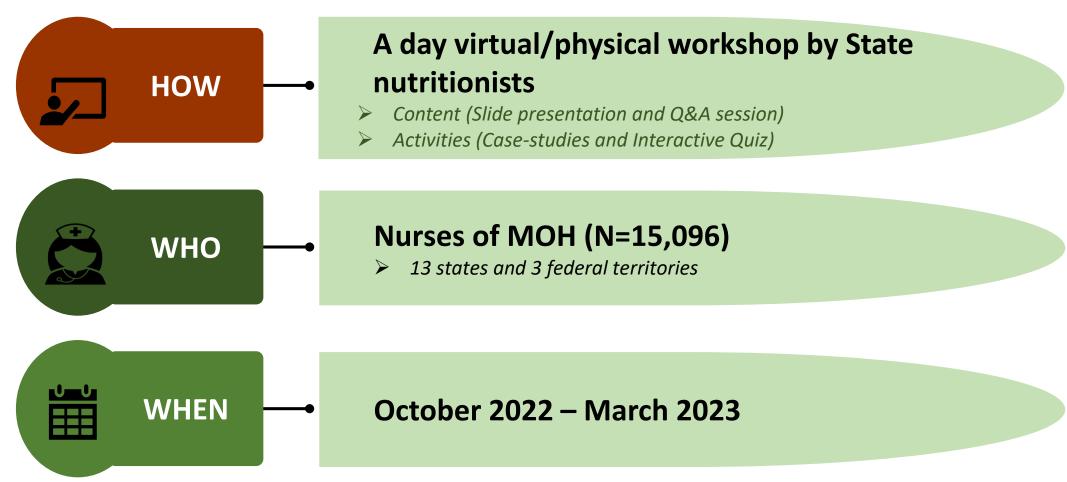


April 2022

> 4 sessions







# PHASE 03

# PROJECT IMPLEMENTATION

(PILOT STUDY)



### **General Objective**

To determine the effectiveness of a web/smartphone-based lifestyle program on optimizing gestational weight gain (GWG) to prevent the incidence of gestational diabetes mellitus (GDM)









### SELECTION OF STATES

 A total of nine (9) states are selected to represent the Northern, Southern, East Coast and Central region of Peninsular Malaysia

N	0	rt	h	e	rr	1

**Penang** 

Kedah

### Southern

**Johor** 

Malacca

### **East Coast**

Terengganu

Kelantan

#### Central

Perak

Selangor

Negeri Sembilan

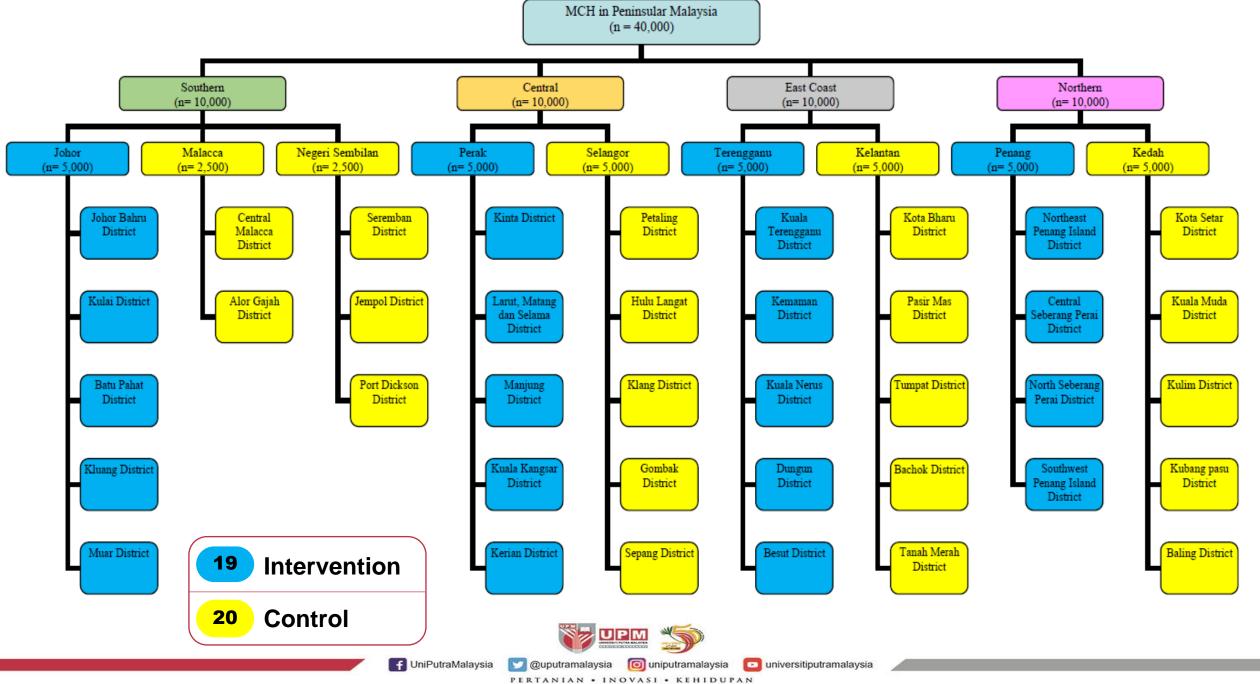
- States are randomly assigned as either intervention or control (wait list) group
- Selected MCH clinics in the top five highest populated districts of each state



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### **SUMMARY OF SELECTED CLINICS**

States	Number of clinics
Johor	22
Perak	23
Terengganu	23
Pulau Pinang	19
Total Clinics (Interv	vention) 87
Kedah	25
Kelantan	4
Melaka	10
Negeri Sembilan	12
Selangor	24
Total Clinics (	Control) 75
Total	Clinics 162









### **PARTICIPANTS**

Pregnant women (in any trimester) attending antenatal care at health clinics of the Ministry of Health, Malaysia.











### **TREATMENT**



Note – Control group will have access to all apps after June 2024







### STUDY OUTCOMES



**Primary Outcome** 

**Incidence of GDM** 

**Secondary Outcomes** 

- Gestational weight gain
- Dietary intake
- Physical activity

**Other Variables** 

- Socio-demographics
- Obstetrical information







### DATA COLLECTION





Pregnant women from intervention and control (wait list) groups will use 'Data Collection' app to report:

- Socio-demographics
- Obstetrical information
- Glucose level
- Anthropometric measurements (at each trimester)
- Dietary intake (at each trimester)
- Physical activity (at each trimester)

Instructions will be given to the women before they answer the questionnaires in the smartphone app





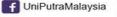


### **DATA COLLECTION TIME POINTS**



No	Measurements	First registration	1 <sup>st</sup> Trimester	2 <sup>nd</sup> Trimester	3 <sup>rd</sup> Trimester
1	Socio-demographics				
2	Obstetrical information				
3	Glucose level - OGTT				
4	Anthropometric measurements				
	<ul><li>Pre-pregnancy weight / BMI</li><li>Height</li><li>Weight</li></ul>				
5	Dietary assessment - FFQ				
6	Physical activity - PPAQ				







### **Project Execution**





- **❖ Start date:** May 2023
- ❖ Recruitment of participants: May-October 2023 (6 months)
- **Duration:** May 2023 July 2024 (15 months)



### Achievements so far ......

- ✓ Support from the Ministry of Health
- ✓ Development of project materials and resources
- ✓ Online training of health professionals





## Challenges to come ......

- ✓ Support at the clinic level in participant recruitment
- ✓ Participation of pregnant women
- ✓ Project materials (website / apps) may not meet the need of pregnant women
- Quality data for the study design





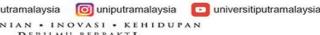
### Acknowledgement:

### **Project Members**

- Prof. Dr. Zalilah Mohd Shariff
- Prof. Dr. Chan Yoke Mun
- ❖ Dr. Yong Heng Yaw
- Ms. Najhah Mat Yunus
- ❖Ms. Er Ying Ting
- ❖ Mr. Azrul Zafri Azuri







### Acknowledgement:

- Project Collaborator Ministry of Health (Nutrition Division & Family Health Development Division)
- Funding Agency World Diabetes Foundation
- ❖ Technical Experts UPM, UKM, USM, UiTM, UCSI, MOH



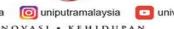


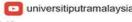










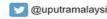






### **THANK YOU**









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