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Gestational diabetes mellitus (GDM), is defined as carbohydrate intolerance first detected during pregnancy. GDM is associated with adverse outcomes (preeclampsia, cesarean section, perinatal death, fetal size and Erb's palsy) for both mother and child. After pregnancy women with previous GDM have an elevated risk of type 2 diabetes and severe cardiovascular disease. GDM is often coexisting with overweight and obesity, a condition that is associated with similar adverse outcomes as GDM. There is an ongoing debate on how to manage the growing problem with GDM and its linkage to obesity. How should we screen diagnose and treat these women?

In this thesis we have evaluated the impact of GDM and overweight/obesity on pregnancy outcomes and later cardiovascular disease. We have also evaluated how outcomes have changed over time. In conclusion our major problem is to deal with overweight and obesity to reduce short- and long term outcomes, and we haven't succeeded yet.

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