

there were fewer big babies than we thought there would be. We will show our findings to policy makers and health care providers to help them make choices about the tests used.

Our findings agree with other recent large clinical trials, like LIMIT in Australia. And a recent review of diet and activity interventions to reduce diabetes in pregnancy also concluded that these do not work (*Bain et al., 2015*).

## What happens next?

We will use the information from UPBEAT to work out the best way to provide care for heavier pregnant women.

The results have been presented at the American Diabetes Association conference and will be published shortly in the medical journal, *Lancet Diabetes & Endocrinology*.

There is also a lot of other information we collected about you, your pregnancy and your baby, we will be looking at this in the coming weeks and it is likely further papers will be published. But we thought it was important to let you know about these first results.

We also want to see if there are any long term benefits of the 'healthy advice sessions' for the mums and children who took part.

We therefore really hope you will agree to come along and see the research team again when your UPBEAT child is between 3 and 4 years old. This is called the UPBEAT TEMPO study



## UPBEAT-TEMPO

Thank you to all those who have already done this.

Once the 3-4 year old visits are finished, we are hoping to get funding to see you and your UPBEAT child when he/she is 6. So please do keep in touch

**We really want to keep in touch with you and your UPBEAT child. If your contact details change, please let us know in the main trial office:**

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# Results newsletter



UPBEAT

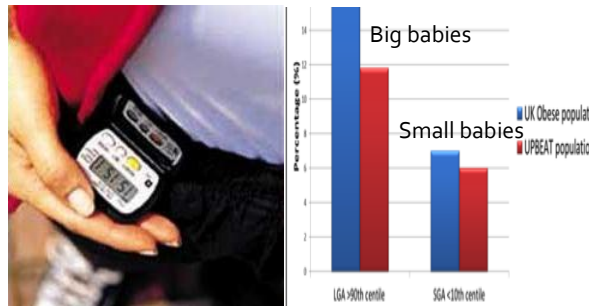
# Thank you for taking part

Thank you so much for taking part in UPBEAT. You are one of 1555 women who took part.

UPBEAT is the biggest trial looking at a lifestyle intervention just in larger women during pregnancy.

We hope you found being part of UPBEAT helpful and that you and your UPBEAT child will help with follow up studies in the future.

## Results



UPBEAT wanted to find if 'healthy lifestyle advice' compared to normal antenatal care could help improve health. The UPBEAT women were, on average:

- Just over 30 years
- BMI 36kg/m<sup>2</sup>

43% were expecting their first baby.

Women in the lifestyle advice group, on average went to 7 health trainer sessions, 4 in person and 3 by email or telephone.

Compared to women who did not go to the sessions, those who did on average walked for 13 minutes more every day and ate more low glycaemic index foods. These were the results we hoped for.

However following this advice did not reduce the number of women who developed gestational diabetes. Overall 1 in 4 women were diagnosed with gestational diabetes according to the strict

definition we used. Some hospital Trusts use other diagnostic criteria and if we had used these only 13% of UPBEAT women would have had gestational diabetes.

We also wanted to see if the intervention reduced the number of babies born large for gestational age, which is calculated using baby's sex, birth weight, the length of pregnancy, together with height weight and ethnicity of the mother.

In UPBEAT the overall incidence of large babies was much less than we had thought, although there was no difference in the babies born to mums who attended and did not attend the healthy advice sessions. Importantly the numbers of both big and small babies was less than reported in a recent Confidential Enquiry into Maternal and Child Health. As shown in the graph.

## What does this mean?

Those who had the lifestyle advice ate more healthily and were more active than the women in the normal care group. This means that the information given in the handbook and sessions could be useful for heavier pregnant women all over the world.

Because we used lower blood sugar results to diagnose diabetes in pregnancy than commonly used in hospital Trusts, more women got advice about the condition and that is probably why



**Participant number 1 at 6 month and 3 year UPBEAT TEMPO visit**

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