**Real world challenges to implementing guideline-based therapy in pregnant women with diabetes in Timaru New Zealand**

**Background and Aim:** The ADIPS 2020 guidelines and the New Zealand Gestational Diabetes guidelines 2014 cover the management of pregnant women with diabetes. The extent to which limited resource areas can meet these recommended guidelines remains poorly understood. A better understanding of these challenges could improve value-based interventions to improve maternal and foetal outcomes.

**Methods:** We measured the number of encounters generated by each of 45 women seen in diabetes clinic over the course of their pregnancies from January 2024 to December 2024. We also measured the patient related outcomes of these pregnancies.

**Results:**45 pregnant women were seen (3 with type 1 diabetes,2 with type 2 diabetes, 37 with gestational diabetes and 3 others). The number of encounters per patient during pregnancies ranged from 1 to 45 (average 9, median 7). Most women had either elective or emergency C-sections. There were two miscarriages and one foetal death. 70% of the women did not have a repeat HbA1C 3 months after delivery.

**Discussion:** This study identified several real-world challenges to implementing guideline-based therapy in pregnant women with diabetes in Timaru. These challenges included; unplanned pregnancy, lack of prenatal counselling, pre-existing psychiatric disorders, higher preconception body weight, poor preconception glycaemic control, low comfort or proficiency with using technologies (continuous glucose monitoring and data) and cultural factors. This information will further guide interventions to identify and prioritise the most impactful targets to improve outcomes in these resource intensive patients.