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Association between First Trimester Pregnancy Associated Plasma Protein–A (PAPP-A) and Gestational Diabetes Mellitus Development

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Background

◆ Affecting 5-6% of pregnancies, Gestational Diabetes (GDM) is a common pregnancy complication with significant cardiometabolic consequences for mothers and offspring.

◆ Previous research from our group suggests that adipose tissue IGFBP-5 and the metalloprotease PAPP-A (Pregnancy Associated Plasma Protein-A) may play a mechanistic role in GDM development by regulating functional IGF-1 levels and lipid storage and metabolism.

Methods

◆ Retrospective cohort from EMR data of 1,251 women delivering singleton gestations during the years 2009, 2010, 2014 and 2015

◆ PAPP-A was measured in the first trimester (11-14 weeks) as part of routine aneuploidy screen, and reported as quartiles of multiples of the mean (MoM) based on gestational age and adjusted for maternal weight and race/ethnicity.

◆ GDM diagnosis was based on a standard 2-step protocol (~24-28 weeks; failed 50g 1hr glucose screen followed by ≥2 abnormal values per Carpenter-Coustan criteria on 100g 3hr glucose tolerance test).

◆ Crude and multivariable-adjusted logistic regression models estimated the association between PAPP-A MoM quartiles and GDM.

Results

◆ 7.6% (n=95) of women developed GDM.

◆ Median PAPP-A MoM levels were 0.7 (interquartile range [IQR]=0.5-1.0) among women with GDM & 0.9 [IQR=0.6-1.3] among women who did not develop GDM.

◆ Adjusting for pre-pregnancy BMI, nuchal translucency, crown rump length, smoking status, and parity, women with PAPP-A MoM in 2nd, 3rd, and 4th quartiles had 52% (OR=0.48, 95%CI=0.26-0.88), 45% (OR=0.55, 95%CI=0.30-0.99) and 73% (OR=0.27, 95%CI=0.13-0.53) lower odds of developing GDM vs women in the 1st quartile.

Conclusions

◆ Higher PAPP-A MoM levels were associated with lower GDM risk.

◆ Future studies should assess whether higher PAPP-A levels are associated with enhanced IGF-1 signaling and improved pregnancy metabolic homeostasis.