## MAGNESIUM, TOTAL CALCIUM, PHOSPHORUS, COPPER AND ZINC IN PLASMA OF CORD BLOOD FROM INFANTS OF DIABETIC MOTHERS

Thesis

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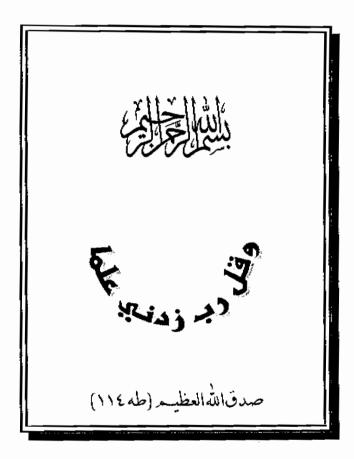
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#### CONTENTS

	Page
Introduction	1
Aim of the work	3
Review of Literature	4
I. Diabetes mellitus with pregnancy	4
II. Infant of diabetic mother	27
III. Calcium	36
IV. Mangesium	67
V. Phosphorus	90
VI. Copper	102
VII. Zinc	119
Subjects and Methods	136
Results	141
Discussion	166
Summary	178
References	183
Arabic Summary	

### LIST OF TABLES

Tab. No.	Title	Page
Ą	Some general characteristics of insulin-dependent (type I) and non insulin-dependent (type II) diabetes	5
	mellitus	
В	Modified white classification of	7
-	pregnant diabetic women	
С	Criteria for diagnosis of gestational diabetes	10
D	Prevalence of complications by case- control status the pittsburg EDC	12
_	pregnancy study	
Æ	Congenital anomalies in infants of diabetic mothers	31
$\mathbf{F}$	Infant of the diabetic mother, long term effects	34
a	The essential trace elements	05
G		35
H	Zinc requirements for maintenance, growth, surface loss, menses, and lactation	121
I	The weight of neonates of the studied groups	142
2	The Apgar score (1 minute) and (5 minutes) in the studied groups	143
<b>3</b>	Mean and SD of clinical characteristics and mean and SD of levels of elements in maternal and cord blood of diabetic group	144

4	Mean and SD of clinical characteristics and mean and SD of	145
	levels of elements in maternal and	
_	cord blood of control group	
5	Mean and SD of the maternal levels	146
	of the elements in the studied	
c	groups	4 40
6	Mean and SD of the cord blood	149
	levels of the elements in the studied	
7	groups Correlation between the maternal	152
•	levels and cord blood levels of the	152
	elements in the diabetic group	
8	Correlation between the maternal	153
Ü	levels and cord blood levels of the	100
	elements in the control group	
9	Comparison between maternal	154
_	levels of the elements in the	
	controlled and in the uncontrolled	
	diabetic group	
10	Comparison between cord blood	157
	levels of the elements in the	
	controlled and in the uncontrolled	
	diabetic group	
11	Correlation between weight of	157
	newborn and maternal levels of the	
	elements and cord blood levels of	
10	the elements in the diabetic group	161
12	Correlation between weight of	161
	newborn and maternal levels of the elements and cord blood levels of	
	the elements in the control group	
	me elements in the control group	

13	Correlation between Appar score (1	162
	minute) of the newborn and	
	maternal levels of the elements and	
	cord blood levels of the elements in	
	the diabetic group	
l4	Correlation between Appar score (1	163
••	minute) of the newborn and	
	maternal levels of the elements and	
	cord blood levels of the elements in	
	the control group	
15	Correlation between Appar score (5	164
	minute) of the newborn and	
	maternal levels of the elements and	
	cord blood levels of the elements in	
	the diabetic group	
16	Correlation between Appar score (5	165
10	minute) of the newborn and	
	maternal levels of the elements and	
	cord blood levels of the elements in	
	the control group	

## LIST OF FIGURES

Fig. No.	Title	Page
Α	Model of the effects on offspring of	28
	maternal diabetes during the	
	second and third trimesters	
В	Feed back control of the formation	38
	of 1,25-dihydroxycholecalciferol from	
	25-hydroxycholecalciferol in the	
	kidneys	
$\mathbf{C}$	Schematic representation of	53
	calcium metabolism and use	
1	Comparison between diabetic and	147
	control groups regarding maternal	
	calcium, magnesium and	
	phosphorus	
2	Comparison between diabetic and	148
	control groups regarding maternal	
	copper and zinc	
3	Comparison between diabetic and	150
	control groups regarding cord blood	
	calcium, magnesium and	
	phosphorus	

- 4 Comparison between diabetic and 151 control groups regarding cord blood copper and zinc
- 5 Comparison between controlled and 155
  uncontrolled diabetics regarding
  maternal calcium, magnesium and
  phosphorus
- 6 Comparison between controlled and 156
  uncontrolled diabetics regarding
  maternal copper and zinc

158

- 7 Comparison between controlled and uncontrolled diabetics regarding cord blood calcium, magnesium and phosphorus
- 8 Comparison between controlled and 159 uncontrolled diabetics regarding cord blood copper and zinc

#### LIST OF ABBREVIATIONS

AMP Adenosine monophosphate

Adenosine triphosphate

ATP Adenosine triphosphate
ATPase Adenosine triphosphatase

Ca Calcium

Cu Copper

DM Diabetes mellitus

EDC Epidemiology of diabetes complications

g gram

GFR Glomerular filteration rate

GTT Glucose tolerance test

IDDM Insulin dependant diabetes mellitus

IDM Infant of diabetic mother

iPTH Immunoreactive parathyroid hormone

IUGR Intrauterine growth retardation

Kcal/kg Kilocalory per kilogram

Kg Kilogram

LGA Large for gestational age

μg Microgram

mEq/L milliequivalent per litre

Mg Magnesium

mg milligram

mg/dl Milligram per deciliter

mg/ml milligram per millilitre mmol millimol

MSAFP Maternal serum alpha-fetoprotein

ng/ml Nanogram per millitre

Ph Phosphorus

Pi Inorganic phosphorus

PTHRP parathyroid hormone related protein

RDA Recommended Daily/Dietary Allowarce

SD Standard deviation

VLBW Very low birth weight

WHO World Health Organization

wk . Week

yr Year

Zn Zinc

# Introduction

### INTRODUCTION

Diabetes Mellitus is an important cause of maternal and perinatal complications. In the literature, there are certain data which indicate that diabetes mellitus affects metabolism of inorganic compounds and trace elements (Hurley, 1976 and Ratnam and Bhandarkar, 1981).

Diabetes Mellitus and pregnancy have interrelated effects that can cause both physiological and pathological disturbances in maternal concentrations of macro-and microelement and may lead to fetal variation (Mimouni et al., 1987 and Mooradian and Morley, 1987).

Disturbances in metabolism of minerals particularly essential trace elements, in diabetic mothers could cause fetal malformation (Kuoppola, 1988 and Uriu - Hare et al., 1984).

The infants of diabetic mothers are at increased risk of major congential malformation (Miller et al., 1981).

Insulin dependant diabetes is associated with magnesium deficiency due to increased urinary magnesium losses (Atchley, 1933).

High rates of hypomagnesemia and hypocalcemia have been recorded in infants of insulin dependant diabetic mothers (*Tsang et al.*, 1976).

The plasma magnesium and calcium were low in infants of diabetic mothers compared with those for the non diabetic ones (Speich et al., 1992).

At birth, plasma zinc values in infants are higher and plasma copper values lower than those of mother. (Powell-Beard et al., 1987, Bros et al., 1988). On the other hand, Veena et al. 1991 reported insignificant difference between maternal serum zinc and cord blood levels.