Summary and Conclusion

Serum immunoq tobutin , IgG , IgM , and IgA , levels were measured in :30 diabetic pregnant lad Ies during the 3 trimester s of pregnancy, 30 normal pregnant , 10 diabetic nonpregnant patients. and 10 normal controls

A statistically significant rise in IgA was found in diabetics whether pregnant or not . The level of IgG declined in the second and ttJird trimesters of both normal and diahetic pregnancy .

Significant rise , p < 0.05 ,of IgM and IgA was found in the diatret I.cpregnant compared to the normal pl'egnant $\mbox{\footnotemath{\mbox{JroUp}}}$.

Sign1 ficant rise of lyA was found in the diabetic nonpregnant group compared to the "'norm'll,.cQntrols.

Primigravidae had significantly higher iJDJDunoglobulin values , p $<\,0.05$, than multigravidae in the diabetic pregnant group .

In the present work ,the maternal age significantly aff-

ected the Ig levels. This indicates that the age is an important factor which must be controlled in further studies. Variation in the type of diabetic treatment. history of oral contraceptive pills, blood sugar level and accompanying complications had no significant differences.

Therefore. our study is compatible with the concept that the superimposition of diabetes upon normal pregnancy may represent an immunological ••final straw" • which leads to damage with potentially disasterous consequences not only for the fetus • but also for the mother • since pregnancy costitutes a major source of morbidity and mortality in diabetes today

Furthermore. qualitative stUdies of the immunoglobulins is required not only in the diabetic pregnancy but also in the normal pr'egnancy and in diabetes to determine its nature, Investigations for the antigen specificity of IgA is also required to evaluate its significance in relation to diabetes.