Introduction

It is difficult these days to open a medical journal and not find some paper on the role of "reactive oxygen species" or "free radicals" in human disease *(Halliwell, 1991)*.

While oxidants play an important role in a wide variety of normal biologic reactions, there is major interest in this class of molecules in clinical medicine because of the overwhelming evidence of the importance of oxidants in the pathogenesis of many diseases *(Crystal, 1991$_a$)*.

An imbalance in the antioxidant protective mechanism leading to oxygen stress in the cells is being identified as a common factor in diabetes mellitus and several other disorders *(Sundarm et al., 1996)*.

Among the other factors which may be important, there has recently been considerable interest in the idea that greater production of O free radicals in the fetus of the diabetic mother may contribute to the risk of fetal abnormality *(Eriksson and Borg, 1991)*.

It remains possible that pregnancy in diabetic (and other) mothers with lower antioxidant status is associated with an increased risk of fetal abnormality *(Bates et al., 1997)*.

The outcome of diabetic pregnancies has been reported to have improved during the last 20 years *(Hansson and Persson, 1993)*, with decreasing frequencies of spontaneous abortion, stillbirth, and congenital malformation *(Nordström et al., 1998)*.