Gestational Diabetes Mellitus (GDM) is glucose intolerance which begins or is first diagnosed during pregnancy (Metzger and Coustan 1998). The number of women being diagnosed with GDM during pregnancy has increased in recent years. The increase in cases of GDM is due in part to a change in diagnostic criteria due to studies such as that by the Hyperglycemia and Adverse Pregnancy Outcomes (HAPO) Study Cooperative Research Group (2008) which identified maternal and fetal risks associated with diabetes at lower glucose levels than that of diabetes diagnosis and the 2015 NICE guidelines. The rate of GDM is also increasing due to growing rates of overweight and obesity (World Health Organisation (WHO) 2015) and higher maternal age at delivery (Snapp and Donaldson 2008). The prevalence of GDM worldwide is estimated to be between 1.7% and 11.6% (Schneider et al. 2012). Due to the increasing levels of GDM and the future risk to the mother of developing type two diabetes (Bellamy et al. 2009), further research is necessary. The overall study aim is to investigate maternal and fetal outcomes for women with Gestational Diabetes (GDM). The study will use data from the NIMATS database to create a picture for Northern Ireland on GDM rates and distribution and identify the risk factors. Through the linking of NIMATS data with Diamond Data from the Ulster Hospital and data from the prescribing database it will be possible to profile GDM mothers with non GDM mothers and mothers with pre-existing diabetes. The study will also explore the outcomes for the baby when the mother has been diagnosed with GDM.