



London InterCommunity Health Centre

DIABETES & THE RAMADAN FAST

Diabetes affects people of all faiths and Muslims are no exception. Many Muslims with diabetes have a desire to fast during the month of Ramadan, although if they cannot for health reasons, they are aware that they can be exempted.

In the past it was widely thought that a daily fast would be detrimental to the health & safety of the patient with diabetes. However, armed with a better understanding of daily living with diabetes & better medications, we now see that many people with diabetes can be shown how to fast safely & comfortably in order to fully enjoy the spiritual benefits of Ramadan.

Ramadan, one of the 5 pillars of Islam, is recognized as very important in the life of a Muslim and the Diabetes Care Team at the London Medical/London Diabetes Centre would be very happy to assist you in preparing for this joyous event.

YOU SHOULD NOT FAST IF:

- You are poorly controlled
- You have serious diabetic complications such as unstable angina or uncontrolled hypertension
- You are pregnant
- You require daily supervision or care (such as the elderly or those with any degree of alertness or comprehension problems)
- You are ill with a temporary condition such as flu
- You have a history of frequent diabetic ketoacidosis or hypoglycemia unawareness
- You have had trouble with hypoglycemia &/or hyperglycemia during previous fasts

YOU SHOULD BE ABLE TO FAST SAFELY IF:

- You have sought recent medical advice about your current stability for fasting & received medication suggestions/adjustments
- You try not to overeat & try to limit the amount of sweet foods taken at Iftar ("breaking-fast" meal at sunset) – have small amounts of foods such as ladoo, jelaibi or burfi

- You try to have the meal at Sehri just before dawn AND not at midnight - this will spread out your food intake more evenly & result in more balanced blood sugars during the fasting hours
- You monitor your blood sugar levels closely – a suggestion would be just before plus three hours after the sunset meal and again before the pre-dawn meal – this will tell you how your body is adapting to the change in routine
- You drink plenty of sugar-free drinks during non-fasting hours & limit your intake of coffee or tea (as they tend to make you pass more urine) – this will prevent dehydration
- You make sure to break the fast as soon as any signs of dehydration, hypoglycemia or hyperglycemia occurs

SOME SUGGESTIONS ABOUT FOOD:

- Try to include more slow-digesting(low glyceimic) foods such as fruits, vegetables, dhal, yoghurt, basmati rice, chapati & naan
- Don't skip meals - make sure to have at least the 2 meals traditionally consumed & have longer gaps between the 2 meals (as suggested above)
- Avoid using too much salt – use herbs & spices instead
- Limit fried foods such as samosas & kebabs – this will help you avoid the usual weight gain experienced during Ramadan, as well as limit your heart risk

Consider consulting with your dietitian for further information – advice about Glycemic Index in foods will help with your every-day diabetes management

SOME SUGGESTIONS ABOUT YOUR MEDICATIONS: (these are GUIDELINES ONLY & should be discussed with your Diabetes Care Team first):

About Pills:

- If you are taking Novonorm or Starlix – continue to take with the meals eaten – you may need to adjust the dose according to the meal size
- If you are taking Glucophage you should take your usual dose at your “breaking-fast”(sunset) meal – you may need to omit the dose with the second meal (sunrise) if you experience nausea during the day
- If you are taking Avandia or Actos once a day – continue to take at the same time every day
- If you are taking Glibenclamide or Gliclazide – you should limit the dose to only with your “breaking-fast” meal – monitoring your blood sugars throughout the day as suggested earlier will help you make the safest decision

About Insulin:

- If you are taking short or rapid-acting insulin with meals, continue to take with the meals eaten – you should adjust the dose to match the
- size of the meal and continue to take your long-acting insulin (Lantus or Levemir) once a day (monitor your blood sugars to determine if any adjustments required)
- If you are taking mixed insulin – you may only need the one dose at the sunset meal or if your blood sugars show that you need to take the second dose before the dawn meal, it may need to be reduced

You can see that any of the above suggestions require individual assessment and discussion with your Diabetes Care Team to best suit your situation – and remember timing is everything.

A combination of the new insulin analogues is the best solution for insulin-users to ensure safety and flexibility.

Your Diabetes Care Team could assist you in switching to this new insulin regimen for the Ramadan period and you will want to continue afterwards for improved overall diabetes management.