



Ramadan & Diabetes

What is Ramadan?

Ramadan is a lunar month in the Islamic faith focusing on increased spirituality, self-discipline, compassion and gratitude. During this time Muslims fast from dawn to sunset, abstaining from food, drink and oral medications. The main meals consumed during Ramadan are at pre-dawn, called Suhur (also spelled Suhoor), and at sunset, called Iftar.

Fasting during Ramadan is obligatory upon all Muslims, however there are exemptions. These include menstruating women, pregnant and breastfeeding women, children, individuals with acute or chronic diseases, those who are sick, elderly and those who are travelling. These exemptions are emphasized in the religious scripture.

The fast of Ramadan is not only a physical fast but also has a spiritual and social aspect. It is a time marked by increased worship, nightly prayers called Taraweeh, readings from the Holy Book the Quran, charity, and family and community gatherings. The end of Ramadan is marked by a festive 3-day celebration called Eid ul-Fitr.

Despite exemptions, many people with diabetes choose to fast during Ramadan. Some may be able to fast safely, while others may be at risk. Risks of fasting with diabetes include hyperglycemia, hypoglycemia, dehydration, and diabetic ketoacidosis.

Tips for Fasting with Diabetes During Ramadan

- ∞ People fasting with diabetes should have a medical assessment and educational session 1-2 months before the start of fasting.
- ∞ Healthcare professionals should identify an individual's risk for fasting and make medication adjustments to reduce the risk for blood glucose fluctuations.
- ∞ Education sessions should cover blood glucose monitoring, nutrition, exercise, medication dosing/timing, signs and symptoms of hypo- and hyperglycemia, and proper treatment of hypoglycemia.
- ∞ Ramadan-focused educational programs are key to reducing diabetes health risks. Educators can collaborate with religious leaders to provide community programs.

Counseling

- ∞ Fasting can be a very sensitive and emotional topic. Counseling sessions should be approached in a non-judgmental, compassionate way to cultivate trust and rapport. Failure to do so may affect their willingness to open up and share the desire to fast with a healthcare professional.
- ∞ It is important to respect and support an individual's decision whether or not to fast.
- ∞ Diabetes care and education specialists have a key role in offering client-centered, culturally sensitive diabetes education to support a person's decision and minimize health risks.

Clinical Guidelines

- ∞ Fasting For more information on Ramadan and fasting, visit the International Diabetes Federation's Ramadan guidelines at IDF.org. This 500+ page guide has everything from how to determine risk category for fasting (page 47), to an example of a Ramadan plate, a list of recommended times to test BG, and charts with instructions for adjusting each class of diabetes medication, MDI insulin and pump settings..