

Exercise advice⁴



- Rigorous exercise is not recommended during Ramadan due to the increased risk of hypoglycaemia and/or dehydration

- Take regular light to moderate exercise during Ramadan (e.g. walking)



- The Taraweeh prayer during Ramadan should be considered as part of your daily exercise regime

When should I break my Ramadan fast?¹



- If you experience hypoglycaemia (blood sugar levels below 3.9 mmol/L).

- Signs of hypoglycaemia include: feeling hungry, dizzy, confused, tired or weak, anxious or irritable, sweating, shaking, tingling lips, heart palpitations, changes in your vision such as blurred vision⁵



- You can treat hypoglycaemia with a fast-acting glucose e.g. a small can of sugared fizzy drink, 5 glucose tablets or a small glass of fruit juice

- If you experience hyperglycaemia (blood sugar levels above 16.6 mmol/L)

- Signs of hyperglycaemia include: feeling very thirsty, weak or tired, passing more urine, blurred vision, losing weight⁶



- You should also break your fast if you are experiencing dehydration or an acute illness

Useful resources to help you

Diabetes UK: Diabetes and Ramadan

Scan the adjacent QR code to access:



Muslim Council of Britain: Ramadan and diabetes: A guide for patients

Scan the adjacent QR code to access:



In summary



DO:

- Talk to your GP or nurse at least 6–8 weeks prior to fasting
- Review each year with an HCP whether it is appropriate to fast
- Eat well balanced meals and stay hydrated during non-fasting hours
- Take regular light to moderate exercise
- Break your fast if you experience hypoglycaemia, hyperglycaemia, dehydration or an acute illness



DON'T:

- Adjust your diabetes medication(s) without talking with your GP or nurse first
- Fast if your health is deteriorating
- Eat foods high in sugar or saturated fats
- Undertake rigorous exercise

To find out more:

Scan the adjacent QR code

to watch a video about Ramadan fasting and type 2 diabetes:



GP: general practitioner; HCP: healthcare professional

1. International Diabetes Federation and the Diabetes and Ramadan International Alliance (2021) Diabetes and Ramadan practical guidelines 2021. Available at: <https://www.daralliance.org/daralliance/idf-darpractical-guidelines-2021> (accessed December 2023); 2. Hanif S et al. Diabet Med 2020;37:1094–1102; 3. Muslim Spiritual Care Provision in the NHS (2023) Ramadan Health Factsheet 2023. Available at: <https://mcb.org.uk/wp-content/uploads/2023/02/2023-MCB-Ramadan-Health-Factsheet-Template.pdf> (accessed December 2023); 4. Ibrahim M et al. BMJ Open Diab Res Care 2020;8:e001248; 5. NHS (2023) Low blood sugar (hypoglycaemia). Available at: <https://www.nhs.uk/conditions/low-blood-sugarhypoglycaemia/> (accessed December 2023); 6. NHS (2023) High blood sugar (hyperglycaemia). Available at: <https://www.nhs.uk/conditions/high-blood-sugar-hyperglycaemia/> (accessed December 2023)

This leaflet has been developed, reviewed and certified by Boehringer Ingelheim
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Ramadan fasting: A guide for adults with type 2 diabetes



Ramadan fasting in type 2 diabetes: An overview



- Ramadan is one of the five pillars of Islam¹
- Some Muslims with diabetes may be exempt from fasting; however, many will still choose to fast for spiritual as well as social and cultural reasons.¹ If you have diabetes and wish to fast, it is important to do so safely



Key considerations when planning to fast during Ramadan

Communication¹



- Talk to your HCP (GP or nurse) if you are planning to fast during Ramadan. It is important that your diabetes medication is ideally reviewed at least 6–8 weeks prior to Ramadan



- If you are unable to fast due to illness, you can compensate by paying fidyaa alms to the poor for each fast missed



- Your ability to fast may change from one year to the next. The decision to fast should therefore be reviewed annually with your HCP

Dietary advice



- Ensure meals are well balanced¹
- Include low glycaemic index, high-fibre foods that release energy slowly before and after fasting (e.g. chappatis, rice, oat-based cereals, grains, seeds, beans and pulses)¹



- Include plenty of fruit, vegetables and salads¹



- Minimise foods that are high in saturated fats (e.g. samosas, pakoras)¹

- Avoid sugary foods¹

- Use small amounts of oil when cooking¹



- To avoid dehydration, drink 2–3 litres of water or unsweetened beverages over the course of the non-fasting hours²

- Avoid caffeinated and sweetened drinks¹

Type 2 diabetes medication



- Some diabetes medications may need to be adjusted during Ramadan
- Do not stop or adjust medications without talking to your HCP first



- If you are on medications that require you to test your blood sugar levels, then this should be done so regularly during the fasting period. Checking your blood glucose levels does not constitute breaking the fast³

- If you are on certain medications including insulin and a group of tablets called sulphonylureas you may be at risk of low blood sugar levels (hypoglycaemia)

- Too much adjustment of your medication and/or your diet can lead to high sugar levels (hyperglycaemia). Dose adjustments should only be made after talking to your HCP



- If you are on insulin and decide to fast, you must not stop taking your insulin. Ask your HCP for advice on whether your insulin dose should be adjusted

Medication changes during Ramadan

After having a discussion with your HCP, use the table below to note any changes you need to make to your medication during Ramadan

Current treatments
Medication changes during Sehri (morning)
Medication changes during Iftari (evening)