“O you who believe! Fasting is prescribed upon you as it was prescribed on those before you so that you may learn self-restraint” [Qur’an Chapter 2 verse 183]

The month of Ramadan is an opportunity to bring a balance back to health with a healthy mind and body. When fasting, one must manage their eating habits, through self-control and discipline.

You and your team can help patients make significant lifestyle changes by educating them on common health matters such as diabetes, cardiovascular related issues and smoking.

Guiding your patients will aid them to benefit fully both physically and spiritually from this month.

When we learn to eat properly we begin to rebuild our bodies and to fulfil our purpose on this planet to grow in health, creativity, wisdom, and compassion.

References:

**Top Tips for:**
- Healthy Fasting
- Patient Care
- MUR Opportunities

**Pharmacy Guide for Ramadan**

**FASTING** is complete abstinence from food and drink between dawn and dusk. All those who are ill or frail, pregnant or menstruating women, breastfeeding mothers and travellers are exempted. They are required to make up the number of days missed at a later date or feed a fasting person for each day missed (charitable act).

<table>
<thead>
<tr>
<th>Foods to avoid</th>
<th>Healthy/alternative foods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deep-fried foods, eg pakoras, samosas, fried dumplings</td>
<td>Whole grains, eg chickpeas (plain, or with potato in yogurt with different Indian spices), samosas baked instead of fried, and boiled dumplings</td>
</tr>
<tr>
<td>High-sugar/high-fat foods, eg Indian sweets such as Ghulab Jamun, Rasgula, Balushahi, Baklawa</td>
<td>Milk-based sweets and puddings, eg Rasmalai, Barafoo</td>
</tr>
<tr>
<td>High-fat cooked foods, eg pachoras, oily curries, greasy pastries</td>
<td>Alternate with chapattis made without oil, and baked or grilled meat and chicken. Try to make pastry at home and use a single layer</td>
</tr>
</tbody>
</table>

**Cooking methods to avoid**

- Deep frying
- Frying
- Curries with excessive oil

- Shallow frying – usually there is very little difference in taste
- Grilling or baking is healthier and helps retain the taste and original flavour of the food, especially chicken and fish
- Start with measuring the oil used in curry and try to bring the oil content down gradually, eg reducing five tablespoons to four. This is a good way of reducing oil without noticing much difference in the taste. A useful tip is to use more onions and tomatoes in the bulk of the curry

This leaflet is aimed at helping you understand the health issues related to fasting, so that you are able to help your patients and give them the advice they may need.


### Pharmacy Guide for Ramadan

During the month of Ramadan, observant Muslims refrain from consuming food and drink during daylight hours. The body undergoes several changes during periods of fasting, including:

- **Physical** – weight loss.
- **Metabolic adaptations** – the body uses fat as the main energy source, thus reducing muscle breakdown. Glucose homeostasis is maintained by meals taken before dawn and by liver glycogen stores.
- **Hormonal changes** – higher levels of endorphins released.

Fasting starts at dawn after the *Sahur* (pre-dawn meal) and it ends at dusk with the *Iftar* (fast breaking supper). The energy stores are replenished with these meals. It is therefore important to emphasis the need for a balanced diet, particularly comprising complex carbohydrates and fibre rich foods.

### Common Medical Issues

**Poor control of diabetes (DM)**

The *Health Survey for England 2004* (Department of Health, 2005) has shown South Asian men and women having the highest rate of diabetes with the Pakistani and Bangladeshi communities being five times more likely in comparison to the general population.

In patients with severe insulin deficiency, a prolonged fast in the absence of adequate insulin can lead to excessive glycogen breakdown, increased gluconeogenesis and ketogenesis, leading to hyperglycaemia and ketoacidosis.

**Top Tips:**

- Those with T1DM/ uncontrolled DM should be advised not to fast
- Patients with diabetes controlled with tablets should discuss their drug regime with their GP. Potential use of controlled release formulations such as Glucophage and eat two to three times a night.
- All patients should end their fast if hypoglycaemic (blood glucose below 3.5mmol/L)
- Common high risk patients: elderly, renal insufficiency, regular hypoglycaemic episodes, advanced macrovascular complications.

### Smoking

During Ramadan Muslims abstain from smoking during the daylight hours (when fasting). Generally, Asians suffer with high rates of heart disease and respiratory conditions related to smoking in comparison to other ethnicities. As a pharmacy you can encourage your patients to use this month to adopt healthier lifestyles including stop smoking and thus promote your services on offer.

### Other common concerns:

- **Consider Cardiovascular** patients e.g.– hypertension, hypercholesterolaemia, congestive heart failure.
- **Drug scheduling and interactions** – changing a drug regime can provide a solution during the fasting month but be sure to weigh up adherence and possible side effects.
- **Exercise** – this can lead to a higher risk of hypoglycaemia in some patients. The best time to hit the gym during Ramadan is either early in the morning (not long after the first meal of the day) or after sunset (soon after *iftar*). Eating high energy foods, drinking plenty of fluid and exercising for shorter periods of time is essential.

### Benefitting From Ramadan

Fasting during Ramadan can generally improve a person’s health, but if the correct diet is not followed, it can possibly worsen it! Therefore, it is not the fast itself, but rather what is consumed in the non-fasting hours which impact negatively on health.

To fully benefit from fasting, a person should spare a great deal of thought to the type and quantity of food they will indulge in through the blessed month.