



Diabetes and Ramadan during the COVID-19 epidemic

Each year as the holy month of Ramadan approaches, people with diabetes face the question of whether or not to fast.

This year, the month of Ramadan is characterized by its occurrence in the midst of the COVID-19 pandemic followed by numerous prevention measures including containment and strict hygiene rules, which are undertaken throughout Morocco and most of the countries around the world.

This exceptional and unprecedented health situation poses special risks for all patients with chronic diseases, the elderly and diabetics.

It is understood that in healthy people, fasting for the month of Ramadan is not risky and may even be beneficial in terms of improving immunity.

Although the vast majority of diabetics are exempt from fasting, and against medical advice, many diabetics insist on fasting. This year and given the many risks associated with Diabetes and COVID-19, it is strongly recommended that diabetics, even those who have fasted in the past, not to fast this year for the following reasons:

- the exceptional health situation in the world and in Morocco with a gigantic effort focused on COVID-19
- the higher risks for elderly, unbalanced and/or multi-complicated diabetics of decompensating their diabetes or worsening preexisting complications due to fasting and / or COVID-19
- the risks linked to the lack of supply of medicines and / or monitoring tools
- The immense difficulties in accessing treating physicians, health and emergency structures
- the high risks of contamination for diabetics who may need to go to emergency rooms.
- the psychological consequences of confinement for diabetics affects them and those around them.

In this regard, it should be remembered that fasting during Ramadan remains a difficult test which can develop to serious risks for people with diabetes (decompensation of diabetes, diabetic coma, hypoglycemia, dehydration, worsening of renal, cardiac insufficiency or respiratory...).

In the case of type 1 diabetes, which requires the use of insulin as soon as diabetes is announced, diabetics should not fast. However, if the patient insists despite the medical advice, self-monitoring of blood glucose multiple times a day should be instituted, which will easily discourage the diabetic from fasting.

In the case of type 2 diabetes and especially this year with the COVID-19 epidemic, diabetics are strongly advised not to fast especially in the presence of diabetic complications from the kidneys, heart, neurology and/or psychiatrics or before a disease of the liver. People who are unbalanced, elderly or who have just had surgery are also completely exempt from fasting.

In all cases and in the current context, the medical decision to authorize Ramadan fasting remains personalized and takes into account the health state and those close to him, his age, the type of drug treatment, the quality of diabetes balance, the quality of follow-up and the absence of diabetic complications.

When fasting is authorized and in addition to strict hygiene precautions (general measures and those related to COVID-19), support for diabetics remains essential. Certain precautions are necessary to avoid hypoglycaemia in the event of fasting:

- 1- Take the "Shour" as late as possible, close to the time when fasting begins (the Fajr);
- 2- Respect the usual dietetic prescriptions;
- 4- Drink abundantly
- 5- Reduce physical activity during the day. However, physical exercise can be done about one to two hours after breaking the fast in order to keep the same diet as before Ramadan.
- 6- Respect the hours of sleep;
- 7- Follow scrupulously the recommendations of the attending physician with regard to the drugs: dosage and schedules for taking the drugs.

The quality of the doctor-patient relationship based on trust is a major asset. Indeed, understanding and observing the treatment is essential. The fasting diabetic must make 3 to 4 capillary glycaemia per day and especially in case of unusual sensations: fatigue, malaise, blurred vision, palpitations, sweat ...

Whatever the time of day, in case of discomfort and/or a blood sugar lower than 0.70 g/l, fasting must be broken immediately. Likewise, if the blood sugar level is more than 2.50 g/l, it is necessary to look for the presence of ketone bodies in the urine and to seek medical advice quickly.

Given the generally silent nature of diabetic disease and the significant potential risks, particularly in the event of complications and in accordance with the flexible percepts of Islam, it is therefore essential for any diabetic seek the advice of their treating physician before observing the crescent moon of the sacred month.