



Ramadan for people with type 2 diabetes

Group 1:

If you manage your diabetes with diet and exercise

If you manage your diabetes with diet and exercise and don't take any medication, as long as you continue to be careful with your diet, you can fast safely during Ramadan. If you are overweight, you may lose weight during Ramadan, which will help you improve the way you control your blood glucose levels.

The following tips will be helpful:

- Divide your daily food into two meals, Sehri and Iftar.
- Have some starchy food such as cereals, basmati rice, chapatis or naan at every meal.
- Have plenty of fruit, vegetables, dhal and yoghurt.
- Eat only small amounts of sweet foods such as laddoo, jalebi or burfi.
- Avoid fatty fried foods such as samosa or pakora.
- Stick to low-calorie or 'diet' drinks or, better still, water. Drink plenty of fluid.

You may feel tired when fasting during Ramadan, so although it is important that you continue your daily activity and prayer, try to rest at some point in the day.

Group 2:

If you manage your diabetes with diet, exercise and tablets

It is important that you follow the same guidelines as for people in Group 1 regarding diet and rest.

The advice for fasting will vary slightly depending on what diabetes medication you take. You may need to adjust your medication, depending on your symptoms and blood glucose levels. You should discuss any changes to your medication with your diabetes care team.

If you take [metformin](#) or acarbose tablets and feel unwell while you are fasting, you can consider stopping them, reducing the dose or changing the timing of when you take them. If you continue to take them, the largest dose should be taken at Iftar, so that they work when you are eating.

If you take [sulphonylurea](#) tablets or prandial glucose regulators, be aware that these can cause hypoglycaemia when you are fasting, which could make you feel ill. They should not be taken during fasting hours but you may take a dose when you are eating, e.g. at Iftar.



Pioglitazone tablets do not cause hypoglycaemia when taken alone and are usually taken once a day in the morning. If you feel unwell when you are fasting, you may wish to take them at Iftar.

DPP4 inhibitors (also known as gliptins) generally do not cause hypoglycaemia on their own. In addition, as they are taken once daily, you can continue to take them as normal, or, if it is easier, you can take them with food, e.g. at Iftar.

SGLT2 inhibitors generally do not cause hypoglycaemia on their own so you can continue to take them as normal, take a reduced dose or, if it is easier, take them with food, e.g. at Iftar.

Non-insulin injections do not cause hypoglycaemia on their own so it may be possible to continue to take these as long as you monitor your blood glucose levels closely. They can, however, cause nausea. Whether or not you can continue with these injections will depend on your blood glucose levels and symptoms.

If you are in any doubt at all about what to do with your tablets or injections when fasting, discuss it with your diabetes care team.

Testing your blood glucose when taking tablets and fasting

When you take tablets that can cause hypoglycaemia, it is a good idea to check your blood glucose more often when fasting to make sure that the level is not rising too high (more than 10) or dropping too low (less than 4).

If your results worry you and you are unsure about what to do, contact your diabetes care team for advice.

