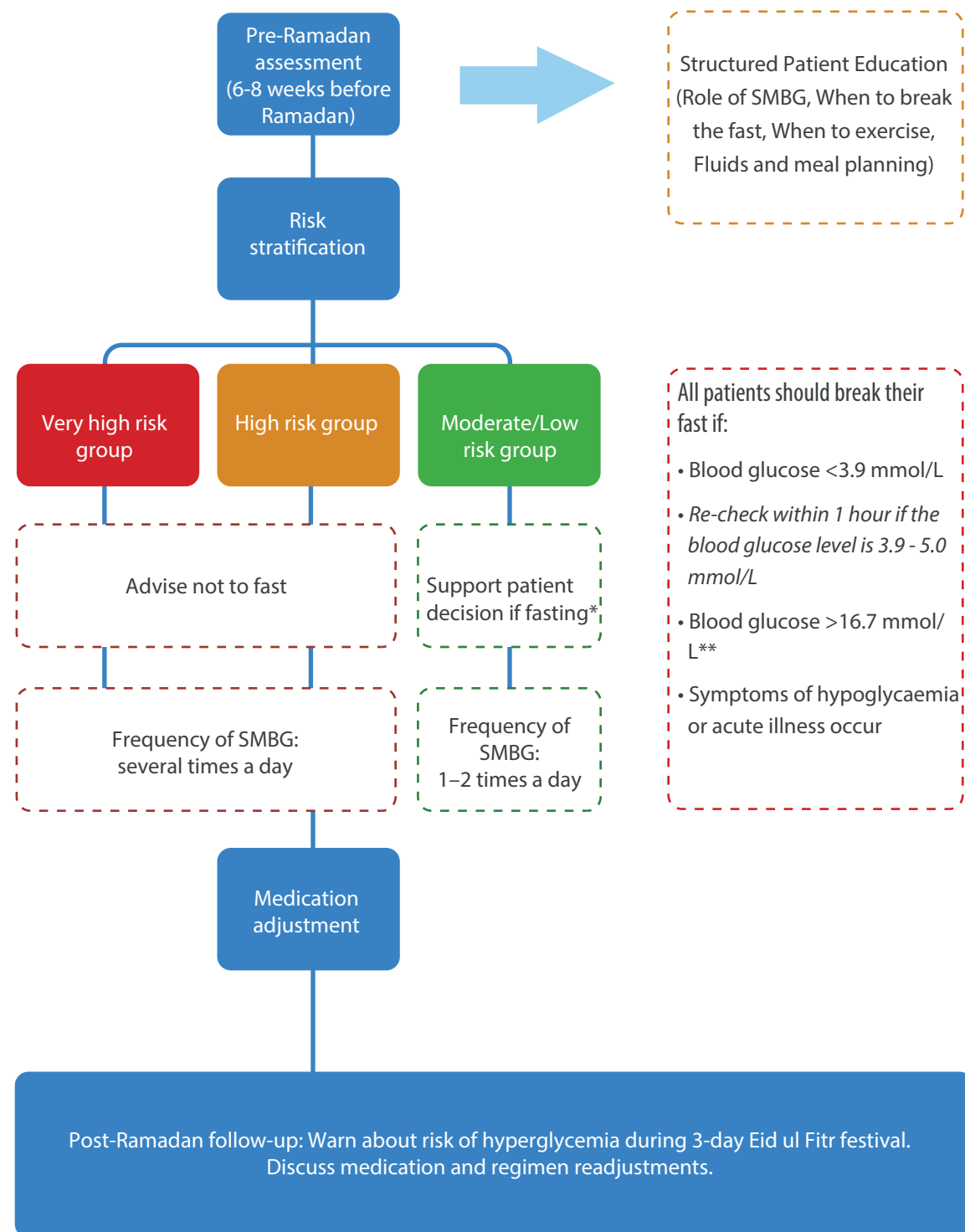


## Summary: Management algorithm



\*Decision to fast based on medical opinion and ability of the individual to tolerate fast  
\*\*Consider individualisation of care

# MANAGEMENT OF DIABETES DURING RAMADAN

## QUICK REFERENCE GUIDE

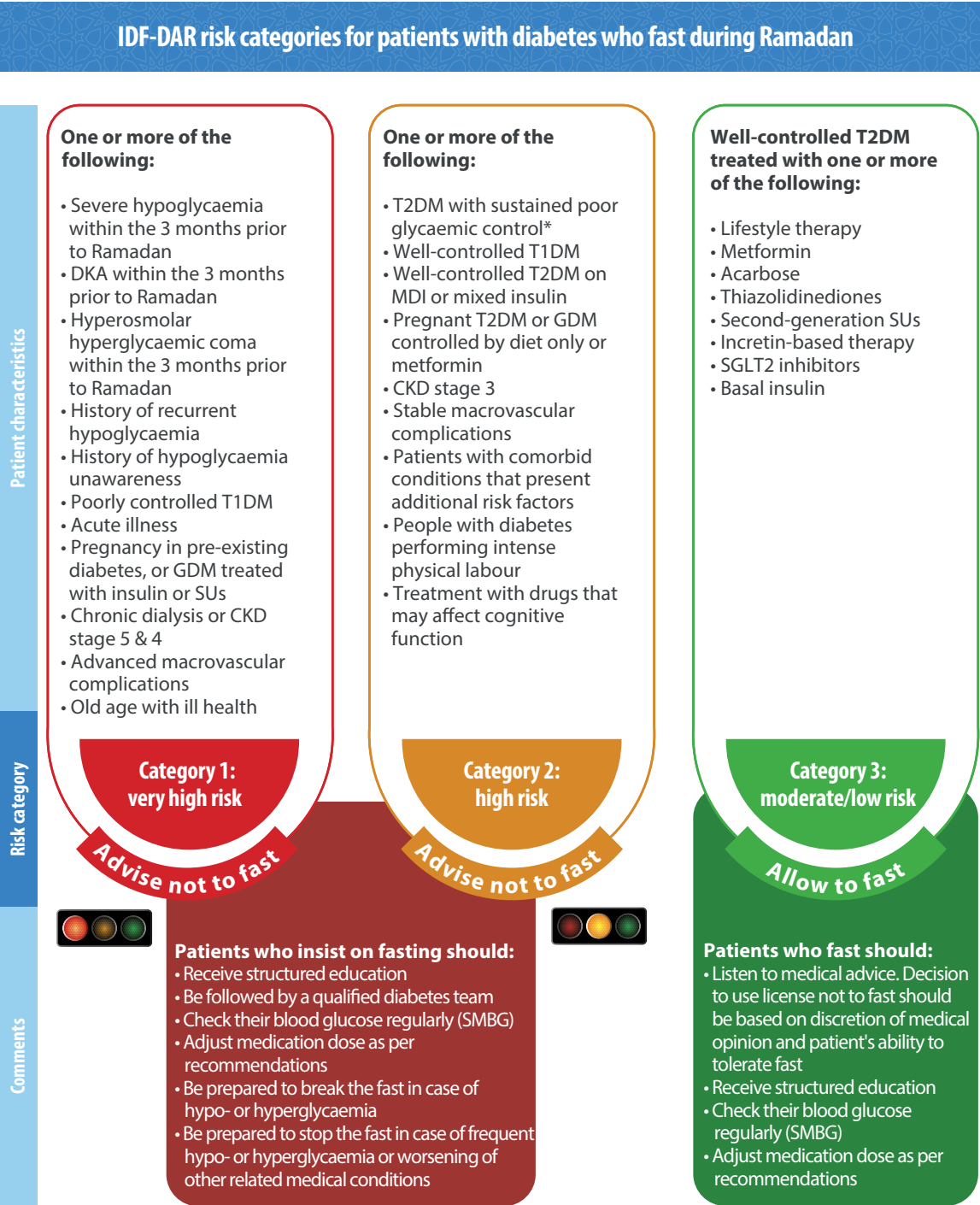


This Quick Reference Guide provides key messages and a summary of the Practical Guide to Diabetes Management in Ramadan. Details of the evidence supporting these recommendations can be found in the Practical Guidelines, available on the following website: <http://www.idf.org/news/idf-dar-diabetes-in-ramadan-guidelines>



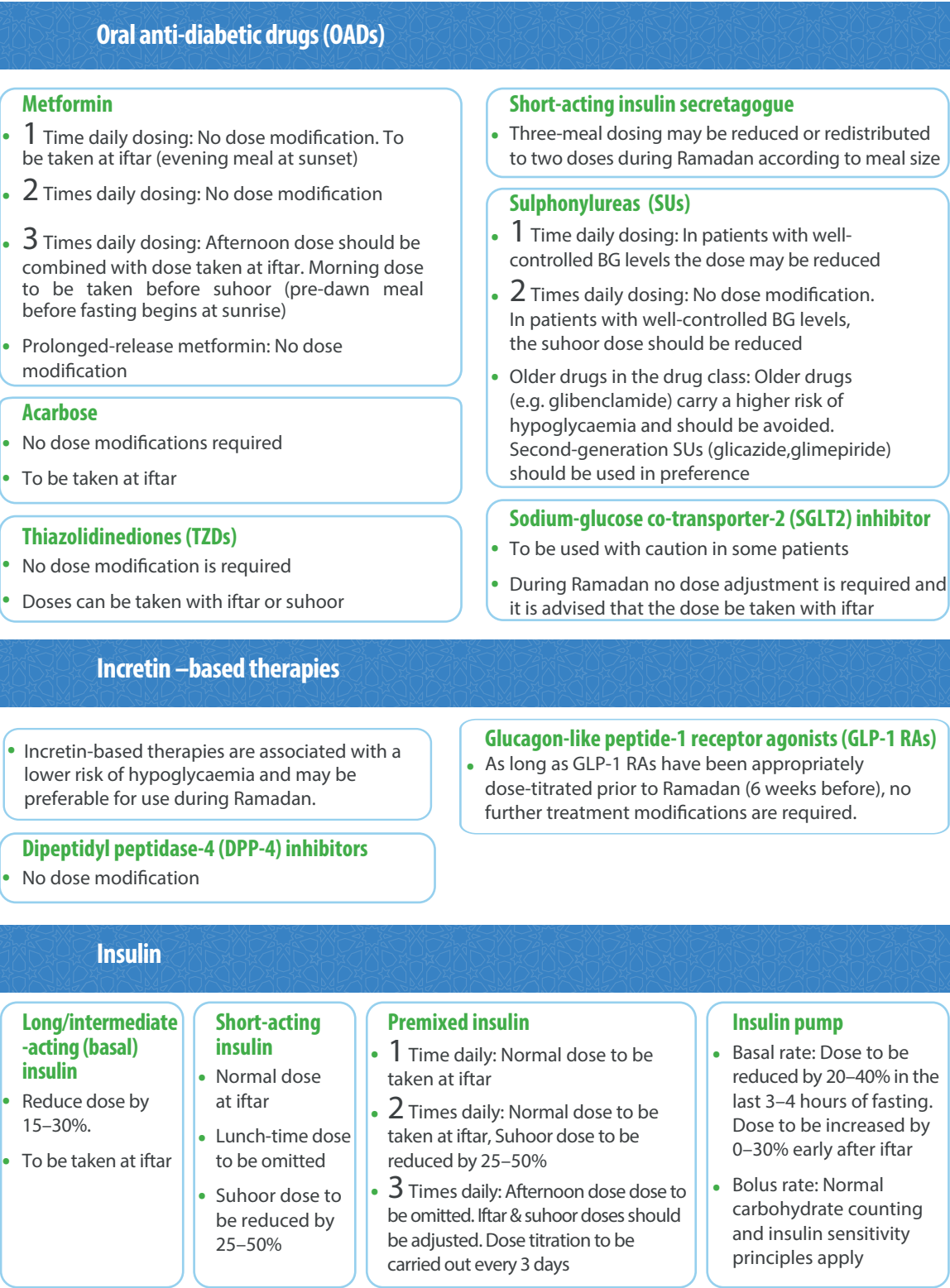
Stratification of risks associated with fasting

During Ramadan, the risk of events such as hypoglycaemia and hyperglycaemia is increased due to fasting in patients with diabetes. It is important to quantify and stratify the risk of each patient to provide best possible care.



Medication adjustment for people with diabetes

Adjustments to the dose, timing or the type of medication are needed to minimize the risk during fasting.



\*The level of glycaemic control is to be agreed upon between doctor and patient according to a multitude of factors  
DKA: Diabetic ketoacidosis; T1DM: Type 1 diabetes mellitus; GDM: Gestational diabetes mellitus; SUs: Sulphonylureas; CKD: Chronic kidney disease; T2DM: Type 2 diabetes mellitus; MDI: multiple daily insulin; SGLT-2: Sodium-glucose co-transporter 2; SMBG: Self monitoring of blood glucose