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 give a fixed sum to charity.
I am very pleased to support the development of the Ramadan health guide, which has been independently produced by Communities in Action in order to provide information and advice on maximising health gain during the Muslim fast. We hope it will also prove useful to others fasting for religious or spiritual reasons.

The Department of Health is committed to responding to the needs and preferences of all sections of our diverse population, and this guide is one of a range of activities we have supported in order to promote public health among all sections of the population.

There is considerable evidence to suggest that large sections within Muslim communities experience significant health inequalities, although this is not uniform across all Muslim communities or all aspects of health. In particular, Pakistani and Bangladeshi communities tend to suffer poorer health than the general population. We hope that this guide, alongside the Department’s targeted campaigns, such as our Asian Tobacco Helpline, will help to address these inequalities.

As part of our commitment to creating a patient-led NHS, the Department of Health and the NHS will continue to work in partnership with community-based organisations to meet the needs of all communities, including faith communities, and to promote better health for all.

Surinder Sharma
National Director, Equality and Human Rights
Department of Health
Acknowledgements

Communities in Action would like to thank the following individuals for their contribution to this publication:

Edited and compiled by:
Ajmal Masroor, Director, Communities in Action

Authors: Dr Razeen Mahroof, BM, MRCP(UK), FRCA, Anaesthetist, Oxford
Dr Rizwan Syed, BM, DRCLG, General Practitioner, Birmingham
Dr Ahmed El-Sharkawy, BM, MRCP(UK), Specialist Registrar in Gastroenterology
Tehseen Hasan, BSc(Hons), State Registered Dietitian, Birmingham
Sahra Ahmed, MPharm, Pharmacist, Manchester
Dr Fuad Hussain

Revised: Dr Naveed Ahmed
Dr Amar Ahmed

Research: Henrietta Szovati, Communities in Action
Dr Shahnaz Ahmad, DRCOG, MRCGP
Dr Amar Ahmed, MBBS, DCH, DRCOG, MRCGP
Dr N Ahmad, MRCS, MSc, BSc(Hons), DO-HNS, Specialist Registrar in ENT Surgery

Advisors: Dr Fatima Husain, MBBS, MRCGP, MRCOG, DIPM, Consultant Obstetrician and Gynaecologist
Dr Usama Hasan,
Imam and Lecturer

Layout and design: Nafe Anam

Useful contacts

British Heart Foundation
14 Fitzhardinge Street
London W1H 6DH
020 7935 0185
www.bhf.org.uk

Diabetes UK Central Office
Macleod House
10 Parkway
London NW1 7AA
tel: 020 7424 1000
fax: 020 7424 1001
email: info@diabetes.org.uk
www.diabetes.org.uk

NHS Asian Tobacco Helpline
For free and confidential advice on how to stop smoking or chewing tobacco:
Bengali 0800 00 22 44
Urdu 0800 00 22 88
Punjabi 0800 00 22 77
Turkish 0800 00 22 99
Gujarati 0800 00 22 55
Arabic 0800 169 1300

NHS Smoking Helpline
0800 169 0169
www.gosmokefree.co.uk

The Muslim Council of Britain
PO Box 57330
London E1 2WJ
tel: 0845 26 26 786
fax: 020 7247 7079
email: admin@mcb.org.uk
www.mcb.org.uk
Introduction

Health is the key to happiness, and what we consume directly affects our health. Islam encourages Muslims to ensure that they are mindful of their health. The blessed Prophet said: “Take advantage of the good health before illnesses afflict you”. He also encouraged Muslims to try their best to take up a healthy living lifestyle that includes a balanced diet, regular mental and physical exercise and a balance between material and spiritual needs.

The Health Survey for England 2004 (Department of Health, 2005) has shown poor health and lifestyle choices of the Asian community in general and Muslim community in particular. Compared with the 24% of men in the general population who smoked cigarettes, higher levels of cigarette smoking were reported by Bangladeshi men (40%). South Asian men and women had the highest rates of diabetes. Pakistanis and Bangladeshis were up to five times more likely than the general population to have diabetes, and Indian men and women were up to three times as likely. Some 33% of Pakistani men and women eat the recommended five or more portions of fruit and vegetables a day, compared with 28% of Bangladeshi men and women.

The month of Ramadan is a great opportunity to focus on bringing back a balanced and healthy lifestyle in your life. Through fasting you begin to learn how to manage your eating habits, how to improve self-control and discipline. This month requires you to give the stomach a break, and by doing so you are able to break down and expel the accumulated toxins from your body.

This booklet is aimed at helping you understand the health issues related to fasting, so that you are able to make more informed choices, minimise complications and maximise the benefit of your fast. The booklet will: guide you through physiological changes that occur when you are fasting; give examples of beneficial and harmful foods during fasting; discuss potential medical problems and remedies; suggest a diet plan; and respond to the most frequently asked questions about fasting in general and medical issues in particular. The booklet also contains a section for doctors and medical professionals, to enable them to provide more informed services.

The booklet has been put together by medical experts, Islamic scholars and researchers, who have stayed within the spirit of Islam, while ensuring the medical advice and suggestions are scientific and culturally sensitive.
For many people, the key question regarding fasting is whether it is good or bad for your health. The answer to this requires a quick overview of what happens inside the body during fasting: the physiology of fasting.

The changes that occur in the body in response to fasting depend on the length of the continuous fast. Technically the body enters into a fasting state eight hours or so after the last meal, when the gut finishes absorption of nutrients from the food. In the normal state, body glucose, which is stored in the liver and muscles, is the body’s main source of energy. During a fast, this store of glucose is used up first to provide energy. Later in the fast, once the stores of glucose run out, fat becomes the next store source of energy for the body. Small quantities of glucose are also 'manufactured' through other mechanisms in the liver. Only with a prolonged fast of many days to weeks does the body eventually turn to protein for energy. This is the technical description of what is commonly known as ‘starvation’, and it is clearly unhealthy. It involves protein being released from the breakdown of muscle, which is why people who starve look emaciated and become very weak.

As the Ramadan fast only extends from dawn till dusk, there is ample opportunity to replenish energy stores at pre-dawn and dusk meals. This provides a progressive, gentle transition from using glucose to fat as the main source of energy, and prevents the breakdown of muscle for protein. The use of fat for energy aids weight loss, preserving the muscles, and in the long run reduces your cholesterol levels. In addition, weight loss results in better control of diabetes and reduces blood pressure. A detoxification process also seems to occur, as any toxins stored in the body’s fat are dissolved and removed from the body. After a few days of the fast, higher levels of certain hormones appear in the blood (endorphins), resulting in a better level of alertness and an overall feeling of general mental well-being.

Balanced food and fluid intake is important between fasts. The kidney is very efficient at maintaining the body’s water and salts, such as sodium and potassium. However, these can be lost through sweating. To prevent muscle breakdown, meals must contain adequate levels of ‘energy food’, such as carbohydrates and some fat. Hence, a balanced diet with adequate quantities of nutrients, salts and water is vital.
Normally produces insulin. During fasting, insulin production is shut down and hormones that tell the liver and muscles to release sugar stores are produced. Also, production of digestive juices is reduced.

Concentrates bile during the fast in readiness for the next meal.

This is where a lot of the water absorption occurs from the food, and second to the kidney it is important in water balance in the body.

The body’s main controller of energy reserves. During fasting, the liver releases sugar by breaking down stores in the organ.

Acid production by the stomach is reduced during fasting.

Digestive juices production is shut down and there are regular contractions of the whole small intestine once every 4 hours.

No changes known to occur during fasting.

No changes known to occur during fasting.

No changes known to occur during fasting.
The fasts of Ramadan can improve a person's health, but – if the correct diet is not followed – can possibly worsen it! The deciding factor is not the fast itself, but rather what is consumed in the non-fasting hours. 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. As mentioned in the section on spirituality (see pages 12–13), overeating can not only harm the body but it is thought also to interfere with a person’s spiritual growth during the month. A diet that has less than a normal amount of food but is sufficiently balanced will keep a person healthy and active during the month of Ramadan. The diet should be simple and not differ too much from one's normal everyday diet. It should contain foods from all the major food groups, as shown below.

Foods that benefit and foods that harm

- **Fruit and vegetables**
- **Bread, other cereals and potatoes**
- **Milk and dairy foods**
- **Meat, fish and alternatives**
- **Foods containing fat**
- **Foods containing sugar**
Complex carbohydrates are foods that will help release energy slowly during the long hours of fasting. Complex carbohydrates are found in grains and seeds, like barley, wheat, oats, millets, semolina, beans, lentils, wholemeal flour, basmati rice, etc.

Fibre-rich foods are also digested slowly and include bran, cereals, whole wheat, grains and seeds, potatoes with the skin, vegetables such as green beans and almost all fruit, including apricots, prunes, figs, etc.
Foods to avoid are the heavily-processed, fast-burning foods that contain refined carbohydrates in the form of sugar, white flour, etc., as well as, of course, too much fatty food (eg cakes, biscuits, chocolates and sweets, such as Indian Mithai). It may also be worth avoiding the caffeine content in drinks such as tea, coffee and cola. (Caffeine is a diuretic and stimulates faster water loss through urination.)

<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, Rasgulla, Balushahi, Baklawa</td>
<td>Milk-based sweets and puddings, eg Rasmalai, Barfee</td>
</tr>
<tr>
<td>High-fat cooked foods, eg parathas, 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**

<table>
<thead>
<tr>
<th>Cooking methods to avoid</th>
<th>Alternative cooking methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deep frying</td>
<td>Shallow frying – usually there is very little difference in taste</td>
</tr>
<tr>
<td>Frying</td>
<td>Grilling or baking is healthier and helps retain the taste and original flavour of the food, especially chicken and fish</td>
</tr>
<tr>
<td>Curries with excessive oil</td>
<td>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</td>
</tr>
</tbody>
</table>
Suhoor, the pre-dawn meal, should be a wholesome, moderate meal that is filling and provides enough energy for many hours. It is therefore particularly important to include slowly-digesting foods in the suhoor.

Iftar is the meal which breaks the day’s fast. This meal could include dates, following the Prophetic traditions. Dates will provide a refreshing burst of much-needed energy. Fruit juices will also have a similar, revitalising effect. The meal should remain a meal and not become a feast! Try to minimise the rich, special dishes that traditionally celebrate the fast and keep to the advice included in the table opposite.

Many of the foods which are mentioned and encouraged in this booklet are in the Holy Qur’an, and the Sunnah (the Prophetic traditions) also correspond to modern guidelines on a healthy diet and will help to maintain balanced, healthy meals in Ramadan. The most commonly consumed foods by Prophet Mohammed (peace be upon him) were milk, dates, lamb/mutton and oats. Healthy foods mentioned in the Holy Qur’an are fruit and vegetables, such as olives, onions, cucumber, figs, dates, grapes as well as pulses such as lentils. The encouragement of fish can be seen in the fact that Islamic law spares fish from any specific slaughter requirements, making it easy to incorporate fish in a meal.
Food has a great significance in Islam. It is associated with one’s relationship with God. Chapter 20, verse 81 of the Qur’an states: “Eat of the good and wholesome things that We have provided for your sustenance, but indulge in no excess therein.”

The physical body is a gift from God; it is given to humans as an *amanah* (in trust) to take care of for a fixed period. How much food is consumed and the choice of food has a direct impact on the physical and spiritual well-being of the person. The food that you consume affects your behaviour and personality. Wholesome, natural and healthy food assists the development of a good personality. Overeating has long been frowned upon in Islam as it is thought to increase worldly appetites and cause sluggishness, thereby ‘dulling’ the soul, hampering spiritual growth and increasing physical ailments.

The blessed Prophet said: “The children of Adam fill no vessel worse than their stomach. Sufficient for him is a few morsels to keep his back straight. If he must eat more, then a third should be for his food, a third for his drink, and a third left for air.” (Sunan al-Tirmidhî)

Islam sees health and ‘well-being’ as much more than just bodily health: well-being or tranquillity requires a strong relationship with one’s spirituality, good physical health, mental happiness, a sense of purpose and good character and relationships. Islam makes a strong connection between food and worship and teaches that all forms of worship have a deeper purpose and impact and contribute in some way to individual and social well-being.

In chapter 7, verse 31 the Qur’an is categorical: “Eat and drink freely: but waste not by excess, for He does not like the wasters.”
Islam thus creates a sense of responsibility in people to take a healthy living lifestyle as normal. Fasting in the month of Ramadan teaches us to manage and practise spirituality and not to eat excessively. The essential part of spirituality in food is that we are grateful and thankful for the food we get.

The blessed Prophet once said: “God has a right over you; your body has a right over you…” To strike a balance between the needs of the physical body and your spiritual needs, you must on the one hand consume the right type and amount of food and on the other hand develop excellent interpersonal skills. The blessed Prophet Muhammad said: “I have only been sent for the perfection of character”. Fasting in the month of Ramadan is an opportunity to make significant changes in your lifestyle and develop the resolve to make healthy living choices.
What could you gain from fasting?

Fasting is not only a physical but also a spiritual exercise that has many lasting benefits.

1. **Heightened consciousness of God**
   Fasting helps you to become less preoccupied with bodily appetites, and gives the heart and mind the freedom to reflect upon deeper spiritual matters, such as your relationship with God and with fellow human beings. It enables a person to develop sustained consciousness of God (Taqwa).

2. **Healthy lifestyle**
   A fasting person learns restraint, and only responds to hunger and thirst in the heightened level of consciousness and discipline. Through fasting, a person begins to appreciate the value of food. In the Qur’an “healthy and wholesome food” is described as the best of provisions. Thus fasting helps a person to choose a healthier lifestyle by making small yet lasting changes to their daily diet.
3. Compassion and charity
When fasting, you should think of those in need who may be fasting but have no food at the start or the end of their fast, those whose tiny children are also having to go hungry because of poverty. The Prophet Muhammad described Ramadan as “the month of mercy”. His companions observed: “The Prophet (Muhammad) was the most generous of people, but he would be his most generous during Ramadan …” (Sahih al-Bukhari)

4. Community spirit
During Ramadan, the one who fasts has heightened concerns for the well-being of the community – rich and poor, intellectuals and labourers. Community spirit is promoted as people start fasting at the same time and break their fast at the same time, and reflect together through longer prayer and deeper devotions. It is greatly encouraged that families invite each other to break their fast together.

5. A fast without the spirit is empty of blessing
Abstention for long hours can be very hard physically and spiritually. However, by the end of the long month you should feel cleansed and with a renewed spirit. Ramadan is an ideal time to break bad habits, to reflect on personality and to improve your character.

Those who fast but make no change to their lives except delaying a meal cannot really expect to become any different in their behaviour during or after Ramadan. In many ways, this is a wasted fast, as stressed in a number of sayings of the blessed Prophet: fasting is not merely “abstention from eating and drinking, but also from vain speech and foul language”. (Sahih al-Bukhari)

Fasting is, therefore, about much more than just giving up food and drink and hoping to lose a couple of pounds. By fasting, a person reflects, acts and betters his or her character.
Heartburn (indigestion)
The stomach is an acidic environment, designed to digest food and kill bacteria. The stomach and oesophagus (gullet) are normally protected from this acid by the body’s own special juices and ‘valves’ between these two organs. If either too much acid is produced or the valve at the bottom of the oesophagus is ‘faulty’, you may experience heartburn. Fasting usually reduces the amount of acid produced, but thoughts of food or the smell of it make the brain order the stomach to produce more acid. Hence if there is a net increase in acid, heartburn could be a problem during the fast.

Those who are on regular medication for indigestion, such as antacids (eg Gaviscon), antihistamines (eg Zantac) or proton pump inhibitors (eg Losec, Zoton or Nexium) are advised to continue taking them, at the pre-dawn meal for instance. The control of heartburn or belching can be aided by eating in moderation and avoiding oily, deep-fried or very spicy food. Reducing your caffeine intake and/or stopping smoking can also be of benefit, if relevant. Preparations such as peppermint oil may help reduce belching or colic. Sleeping with your head raised on a few pillows and long-term weight loss may also help prevent heartburn.
Poor control of diabetes
Those injecting insulin are advised not to fast, as the potential risk to health, both in the short and long term, of not taking insulin is too great.

People who have their diabetes under control using tablets should ensure that they visit their GP prior to Ramadan, in order to discuss any possible changes to their drug regime which would facilitate a safe fast. If not, such patients are at risk of poor control of their diabetes during and outside the fasting times.

Regular self-monitoring of your blood glucose is strongly advised. Low blood sugar levels (a ‘hypo’) are dangerous, and if untreated may lead to fainting or fits, and hence must be strictly avoided. Feeling dizzy, sweaty and disorientated may all suggest a hypo. If this is suspected, you should immediately have a sugary drink, or place sugar or a sugar-rich sweet below the tongue.

Long-acting tablets, such as Glibenclamide, increase the risk of having a hypo, and should be changed to a shorter-acting variety before you embark on a fast.

Diabetics with further complications, such as angina or heart failure, stroke, retinopathy (eye disease), nephropathy (kidney disease) or neuropathy (nerve disease of feet/hands with numbness/loss of feeling) should seek careful advice from their doctor before starting a fast.
Headache
This is a common problem and has many causes. Headaches during a fast could commonly be due to dehydration or hunger, inadequate rest, or the absence of addictive substances such as caffeine or nicotine.

A moderate and balanced diet, especially not missing the pre-dawn meal, consuming adequate quantities of fluid and if necessary taking a dose of painkillers such as paracetamol, may all go a long way towards either preventing or reducing the risk of developing a disabling headache. Headaches can also be prevented by sensible measures such as not exposing oneself to direct sunlight, wearing a hat when out, using sunglasses to reduce the effect of glare from the sun and relieving any tense muscles with a short, gentle massage.

Those with a history of frequent and/or disabling migraines should aim to gain adequate control with lifestyle and/or medical treatment if required, prior to starting a fast.

Despite the above measures, if you have a persistent, disabling headache, you should see a doctor.

Dehydration
Dehydration is a common occurrence during a fast. The body continues to lose water and salts through breathing, sweat and urine; the quantity of water loss will vary depending on the weather, how much you had to drink before your fast, the degree of physical exertion and the ability of the kidneys to retain water and salts.

Prevention is always better than cure. However, if you do not adequately rehydrate before a fast, your risk of dehydration is increased. This risk is higher in the elderly and in those taking tablets such as diuretics. Depending on the severity of the dehydration, you may experience a general feeling of being unwell, lethargy, muscle cramps, dizziness, disorientation and even collapse or fainting.

If you are unable to stand up due to dizziness, or you are disorientated, you should urgently rehydrate with regular, moderate quantities of water, ideally with sugar and salt, or Dioralyte or Lucozade.
If you faint due to dehydration, your legs should be raised above your head by others, and when you awake, you should urgently rehydrate as outlined above.

Complications of any common chronic diseases
Diabetes has been discussed above.

Other common diseases such as high blood pressure and asthma are controlled using medication that needs to be taken regularly every day of the year. This is necessary in order to avoid possible complications from the inadequate control of disease, such as a stroke or an asthma attack. A consultation with your doctor should provide an opportunity to discuss any potential options for completing a fast safely, while continuing to control your disease.

Constipation
Constipation could be a very irritating problem for someone undertaking a fast. Maintaining good hydration outside the fast, eating healthily, with lots of fruit and vegetables in your diet, increasing the fibre content of your food using bran, and being active all help to keep your bowel motions as regular as would otherwise be expected.

If the problem persists, a short course of bulk laxatives may help.

Stress
Lack of food and water, changes of routine and shorter periods of sleep can all collude to increase stress levels. Hence it is important to address any potential sources of stress in order to minimise harmful effects. This can be helped by not taking on more than you can reasonably handle, not playing sports in the hot sun, controlling your anger in advance and abstaining from smoking.

Obesity
Strange, but true! For the unwary, or those lacking in caution, food consumed during the pre-dawn and dusk meals may lead to some unintended weight gain. Obesity is an epidemic in the making, and has numerous complications in its own right. It is ironic that you are able to become overweight or obese while you are fasting. But if you do not approach the fast with discipline and will, the opportunity to lose weight and become healthier is wasted.
A general point about illness and fasting: chapter 2, verse 184 of the Qur'an makes it explicitly clear that people who have an illness or medical condition of any kind that makes fasting injurious to their health are exempt from fasting. To compensate for the missed fasts, they must fast later when they are healthy; if this is not possible due to long-term illness, they must feed the poor. The latter form of compensation is known as *fidyah*.

**Q1 Should a person with diabetes fast?**
People who have their diabetes under control, either by diet or using tablets, may fast. However, their GP may require them to make changes to their medication in order to help them take tablets outside the times of fasting. Those who need insulin to control their diabetes are advised not to fast.
Q2 I get severe migraines when I skip meals and they get worse when I fast. Should I fast at all? Those with uncontrolled migraines are advised not to fast. However, adequate control of migraines is possible for most people with medication and alterations to lifestyle, and hence such avenues should be exhausted prior to deciding not to fast. Please see your GP for further advice on better control of your migraines.

Q3 Should a person with high or low blood pressure fast? Those with well-controlled high blood pressure may fast with lifestyle alterations and/or medication. Their GP may require a change to their medication in order to help them take tablets outside the times of fasting. A person with so-called ‘low blood pressure’ who is otherwise well and healthy may fast. An adequate intake of fluid and salts in the diet is advised.

Q4 Is fasting harmful when a woman is expecting a baby? Is it compulsory to fast while pregnant? It is not compulsory to fast while pregnant, but the woman will either need to make up those fasts later or, if unable to do this, should perform *fidyah.* There is some medical evidence to show that fasting in pregnancy is not advisable. If a pregnant woman feels strong and healthy enough to fast, especially during the early part of the pregnancy, she may do so. If she does not feel well enough to fast, Islamic law gives her clear permission not to fast, and to make up the missed fasts later.

Q5 Is Ramadan a good time to quit smoking? Yes. Smoking is wasteful and seriously injurious to health. Allah has entrusted us with a healthy body, and it is a violation to knowingly and willingly harm it. Ramadan provides a great opportunity to amend many bad habits, and smoking is very definitely one of them.

Q6 From what age can children fast safely? Children are required to fast from the age of puberty, and this is not harmful. Fasting prior to this age is tolerated differently depending on the children’s general health, nutrition and attitude. Fasting prior to the age of seven or eight years is not advisable, although it is a good idea to make young children aware of the practice of fasting in the community around them, and to give them a ‘taste’ of fasting, eg for a few hours at a time. It is narrated that the companions would distract young children with toys if they were hungry near the time of *iftar*, so that they would become accustomed to joining
Q7 Can I use an asthma puffer during Ramadan?
Muslim jurists differ on this issue. Some leading jurists argue that using an asthma inhaler is not classified as eating or drinking, and is therefore permissible during fasting. Others argue that because the inhaler provides small amounts of liquid medicine to the lungs, it breaks the fast. Perhaps the former view is stronger, since the inhaler assists with breathing and helps the person to fast, which means abstaining from food and drink.

According to the first view, asthmatics may fast and use their inhalers whenever required during fasting.

According to the second view, asthmatics with poor control of their disease are advised not to fast until good control is achieved. Others may alter their inhalers to those of a longer-acting variety so that fasting may be feasible. Please see your GP for further advice.

Q8 Can I swim during fasting?
Yes, but do not drink the water. Having a bath or shower or swimming has no effect on the fast. Clearly, no water should be swallowed during any of these activities, for that would break the fast.

Q9 Can a person fast if they are getting a blood transfusion in hospital?
No. A person receiving a blood transfusion is advised not to fast on medical grounds. They may fast on the days when no transfusions are required.

Q10 I am on regular medication. Can I still fast?
If such medication needs to be taken during the time of fasting, you should not fast. If this medication is required as treatment for a short illness, you can compensate for missed fasts by fasting on other days when you are well.

If medication is required on a long-term basis as part of an ongoing illness or condition such as high blood pressure or diabetes, then you may discuss with your GP whether to change your medication to a long- or short-acting variety as appropriate, to enable you to take it outside the time of the fast.

If your disease is unstable or poorly controlled, you are advised not to fast.
Those who are unable to compensate later for missed fasts, due to the long-term use of medication, are advised to do *fidyah*.

**Q11 Does a breastfeeding woman have to fast?**
No. Islamic law exempts a breastfeeding mother from fasting. Missed fasts will need to be compensated for by fasting or *fidyah* once breastfeeding has ceased.

**Q12 Can a Muslim patient take tablets, injections, inhalers or patches while fasting?**
Taking tablets invalidates the fast. However, injections, inhalers, patches, ear and eye drops, etc that are not comparable to food and drink do not break the fast, although it is advisable to avoid these if possible due to the difference of opinion among Muslim jurists on these issues.

Islamic law exempts the sick from fasting. Please see the answer to Q10 for further details.

**Q13 Could dehydration become so severe that one has to break the fast?**
Yes. Harmful levels of water loss could occur if the person was poorly hydrated before commencing the fast, and/or could be made worse by activities during the day and weather conditions. If one produces very little or no urine, feels disorientated and confused, or faints due to dehydration, the fast should be broken in order to rehydrate oneself.

Islam does not require that you harm yourself in fulfilling the fast. If a fast is broken, it will need to be compensated for by fasting at a later date.

**Q14 Can I fast while I have dialysis?**
Peritoneal dialysis requires the daily usage of fluid bags in the abdomen, and such patients are advised not to fast (please refer to *fidyah* below). Haemodialysis is performed about three times a week, and results in significant shifts of fluids and salts within the body. Such patients are also advised not to fast (please refer to *fidyah* below).

*Fidyah*: a method of compensation in Islam for a missed act of worship that must be otherwise fulfilled. If you are unable to fulfil a missed fast, for example due to an ongoing illness, you should feed a hungry person (two meals per day) if you are able to. Please consult an Islamic scholar for further details.
Fasting is a physical and spiritual experience requiring a great deal of preparation. If you are physically unwell or not sure of your state of health, it is advisable that you speak to your doctor before the fasting commences. Discuss your medical conditions and explore possible changes to your medication or any other alternatives that doctors may suggest to suit your needs.

What and how much you eat affects your health directly, and refraining from food can help improve self-discipline and restraint if done appropriately. It is an opportunity to make healthy lifestyle choices and give up some of those bad habits. Being mindful of how you fast and how you break your fast can help to improve your overall health – both physical and mental.

Maximise on your gain from fasting and minimise health problems. This booklet will help to explain the issues and suggest remedies. Please read it carefully and get in touch with your local GP for further advice.

Oruç büyük bir hazırlık gerektiren fiziksel ve manevi bir deneyimdir. Eğer fiziksel olarak kendinizi iyi hissetmiyorsanız ya da sağlık durumunuzdan emin değilseniz, oruca başlamadan önce doktorunuzla konuşmanızı tavsiye ederiz. Sağlık durumunu ve varsa tedavinizi etkileye bilecek muhtemel değişiklikleri veya alternatifleri doktorunuzla görüşün.

Ne yediğiniz ve ne kadar yediğiniz sağlığınızı direk olarak etkiler. Yemekten uygun bir şekilde uzak durmak irade gücünüzü geliştirmenize yardımcı edebilir. Oruç, yaşam biçimimize dair sağlıklı seçimleri yapmak ve kötü alışkanlıklarından Kurtulmak için bir fırsattır. Oruç tutarken ve orucunuzu açarken göstereceğiniz özen fiziksel ve manevi sağlığına katkıda bulunabilir.

Oruçla sağlığınıza büyük katkıda bulunun ve sağlık sorunlarınızı azaltın! Bu kitapçık oruçla ilgili sorularınızı açıklık getirmek ve öneriler sunmak için hazırlandı. Lütfen bu kitapçığı dikkatle okuyun ve daha fazla tıbbi tavsiye için doktorunuzla irtibat kurun.
Soontu waa-wax jidhkaaga iyo diiniyanba ubaahan khibrad wanaagsan, kontaraag iyo udiyaargarow si hadaad jidhka kaxanaunsanaysid ama aanad hubin caafimaakaga waxaad talo kaqaadankartaa dhakhtarka-kaga inta aanad soomin ka hore si aad ugalaa hadashid xaalada caafimaadkaaga iyo wixiikale ee aad ku badalikartid dawooyinkaaga ama dhakhtarka wixiikale ee aad isticimaashidba talo kusiinkara ku naasibta.


Waxa ugu wayn ee aad soonta ka-heshid iyo wax ugu yare ee caafimaad dari-ah. Qoraal kani wuxuu inoo macnaynayaa soobixidtaanka iyo talooyinka daawooyinka. Fadlan u akhriso si-hobsiimo-leh lana soo xidhiidh dhakhtarka xaafada si aad u heshid faahfaahin dheeraad ah.
রোজার সাথে দেহ এবং মন উভয় ছাড়িত। তাই রোজার জন্য বড় ধরণের প্রস্তুতি দরকার। শরীর যদি সৃষ্টি না থাকে অথবা সাবা সম্পর্কে আপনি নিশ্চিত না হন তা হলে রমজান মাস শুরু আগেই ডাঙ্কানের সাথে পরামর্শ করা দরকার। ডাঙ্কানের সাথে আপনার শরীরিক অবস্থা নিয়ে আলোচনা করন। ঐপক্ষ বদলাতে হবে কি না অথবা শারীরিক অবস্থার আলোকে ডাঙ্কানের বিকল্প কোন পরামর্শ আছে কি না তা রোজার চেষ্টা করন।

আপনি কি খান এবং বক্তব্য বাখান তা আপনার বাণ্ডের উপর সরাসরি গুজার ফেলে। একটা নির্মান মনে যদি আমারা খাবার গ্রহণ থেকে বিরত থাকি তা হলে এর মাধ্যমে আমাদের মধ্যে আত্মা সংযম এবং আত্মা নিয়ন্ত্রণের কমতা বৃদ্ধি পায়। বাণ্ড-সম্মত জীবনযাপনের প্রশ্ন এবং খাদ্য অভাগ পরিবর্তনের এটা একটা সুযোগ। মনে রাখুন, রোজা রাখা এবং ইচ্ছার করার পদ্ধতি আপনার শরীরিক এবং রূহানী উন্নয়নে সহায়ক হতে পারে।

রোজা থেকে সর্বাধিক ফায়দা প্রাপ্ত এবং এর মাধ্যমে শারীরিক সমস্যা বজ্রুক্ত সাহায্য কমানোর চেষ্টা করন। এই বক্তব্যে বিভিন্ন বিষয় নিয়ে আলোচনা করা হয়েছে এবং তা সমাধানের জন্য পরামর্শ দেয়া হয়েছে। পর করে তা মনোযোগ সহকারে পাঠ করুন। আরো পরামর্শের জন্য আপনার ডাঙ্কানের সাথে যোগাযোগ করতে পারোন।
Tips for healthcare professionals

Guidance notes on the Muslim fast during Ramadan

The Muslim fast during the month of Ramadan provides an opportunity for health professionals to promote health improvement among Muslims by offering lifestyle advice on topics such as diet and smoking cessation. It is important to recognise that the Muslim community, like any other, is diverse. This results in differences of perception and practice among Muslim patients. The start of Ramadan advances 11 days every year as it is based on a lunar calendar and will sometimes fall in the summer months, resulting in a more onerous fast than when it is in the winter months. In 2007 Ramadan starts in mid-September.

Fasting during Ramadan is intended as a discipline and requires abstinence from anything taken orally during the hours of daylight, each consecutive day for a month. This includes water and smoking. Bleeding will also preclude the fast for that day. Fasting is a requirement after puberty for all able-bodied Muslims of sound mind and good health, but there are concessions for those who are on a journey or who are ill, as well as for women during menstruation, pregnancy or breastfeeding. The concessions range from a complete exemption from fasting, for example for insulin-dependent diabetics, to a requirement to make up the fast at a later date in the case of those who are travelling or who have their periods. A charitable contribution as compensation can serve as an alternative to keeping the fast later.

Since the month of Ramadan is an important time across the community, many patients will endeavour to keep their fasts during this time. With some conditions, this can clearly be harmful. The concessions exist specifically to ensure that people do not fast where it would be detrimental to their health, and this is very reasonable advice to give to patients.
• For people with acute illnesses, fasts can be broken and made up later.
• For people with many chronic conditions (e.g., ophthalmic, dermatological, neurological), fasting may have no impact and can continue as normal. If oral medication is required, fasting can be facilitated by reducing dosing to once or twice daily. Topical medication, including patches, is acceptable, but injections are not as they may draw blood.
• Fasting itself may have a physiological impact on diseases affecting the cardiovascular, renal and gastrointestinal systems, such as hypertension, renal impairment and peptic ulcers. Although fasting is possible in many of these circumstances, it may not be well tolerated physiologically, particularly in older patients—and these may be the very patients who are most adamant that they wish to perform their fasts. In some cases where a chronic illness has taken a long while to stabilise and maintain, adjusting medication around the hours of fasting may simply be impractical and potentially harmful.
• During pregnancy and breastfeeding, the mother’s nutrition and hydration are paramount and, while fasting is permissible, it is medically better for the mother to utilise the concession and compensate for or make up the missed fasts.
• Physical examinations, including rectal and vaginal examinations, do not invalidate the fast. Clinical investigations such as blood tests, or those requiring intravenous access or oral contrast, would preclude the fast during those particular days. Where these are elective outpatient investigations, many patients may prefer to reschedule them outside Ramadan. Urgent investigations should clearly not be delayed.

Each situation needs to be judged on its own merits, in the context of the patient’s observance of Ramadan. A comprehensive guide is not possible, but the examples above serve to illustrate that there is Islamic guidance to ensure that fasting is not prejudicial to a patient’s health.