

RAMADAN FASTING

Managing diabetes and its risks

DR SHAHJADA SELIM

The holy month of Ramadan — the month of fasting and prayer has arrived again. But for the millions of Muslims with diabetes, it can be a challenging time of fluctuations in blood sugar level that can be dangerous, even deadly! With proper evaluation of physical condition, taking extra precaution and adjustment of medicine, Muslim diabetics can manage their condition better in this holy month.

Although the holy Quran specifically exempts those who are sick or suffer from a chronic condition such as diabetes from fasting, many at risk patients with diabetes insist on fasting during Ramadan; thereby creating a medical challenge for themselves and their physicians. It is therefore important that they should be aware of potential risks that may be associated with fasting during Ramadan.

Fasting during Ramadan has been uniformly discouraged by the medical profession for patients with diabetes. In this regard, a large epidemiological study was conducted in 13 Islamic countries on 12,243 individuals with diabetes who fasted during Ramadan. It showed a high rate of acute complications like

hypoglycaemia (decrease blood sugar), hyperglycaemia (high blood sugar), Diabetic Ketoacidosis (life-threatening condition characterised by thirst, vomiting, confusion, dry skin, dry mouth, breathing difficulty etc.), dehydration and thrombosis (a blood clot inside a blood vessel). It is essential that patients have the means of monitoring their blood glucose level multiple times daily. This is especially critical in patients with type 1 diabetes and in patients with type 2 diabetes who require insulin.

The diet during Ramadan should not differ significantly from a healthy and balanced diet. The common practice of ingesting large amounts of foods rich in carbohydrate and fat, especially at the sunset meal, should be avoided. It is also recommended that fluid intake should be increased during non fasting hours and that the predawn meal should be taken as late as possible before the start of the daily fast.

Normal levels of physical activity may be maintained. However, excessive physical activity may lead to higher risk of hypoglycemia and should be avoided, particularly during the few hours before the sunset meal.

All patients should understand that



Blood test for glucose monitoring and administering insulin do not invalidate fasting of Ramadan.

Source: www.islamqa.com, Fataawa Muhammad ibn Ibraaheem, 4/189, Majmoo' Fataawa Shaykh al-Islam, 25/233; 25/245

they must always and immediately end their fast if hypoglycemia (blood glucose less than 3.3 mmol/L) occurs, since there is no guarantee that their blood glucose will not drop further if they wait or delay treatment.

Fasting should also be broken if blood glucose reaches above 3.9 mmol/L in the first few hours after the start of the fast, especially if insulin or diabetic drugs are taken at predawn. Again, the fast should be broken if blood glucose exceeds 16.7 mmol/L.

Patients should avoid fasting if they are sick. All diabetics who wish to fast during Ramadan should take necessary precaution and safety measures, preferably consulting with their physicians. These include medical assessment 2 months before Ramadan and educational counselling regarding self-care, signs and symptoms of high or low sugar, blood glucose, meal planning, physical activity, medication and management of acute complications.

The write up is based on report "Recommendations for Management of Diabetes During Ramadan" published in The American Diabetes Association (ADA). The writer works at Department of Endocrinology, BIRDEM Hospital, Dhaka, Bangladesh. Email: selimshahjada@gmail.com

HAVE A NICE DAY

Dangers of Hepatitis B

Hepatitis B is a liver disease caused by the hepatitis B virus. It is a major cause of morbidity and mortality in Bangladesh. According to The Liver Foundation of Bangladesh, about 7%-10% population have hepatitis B infection. One could get hepatitis B through contact with an infected person's blood, semen or other body fluid.



Dr Rubaiul Murshed

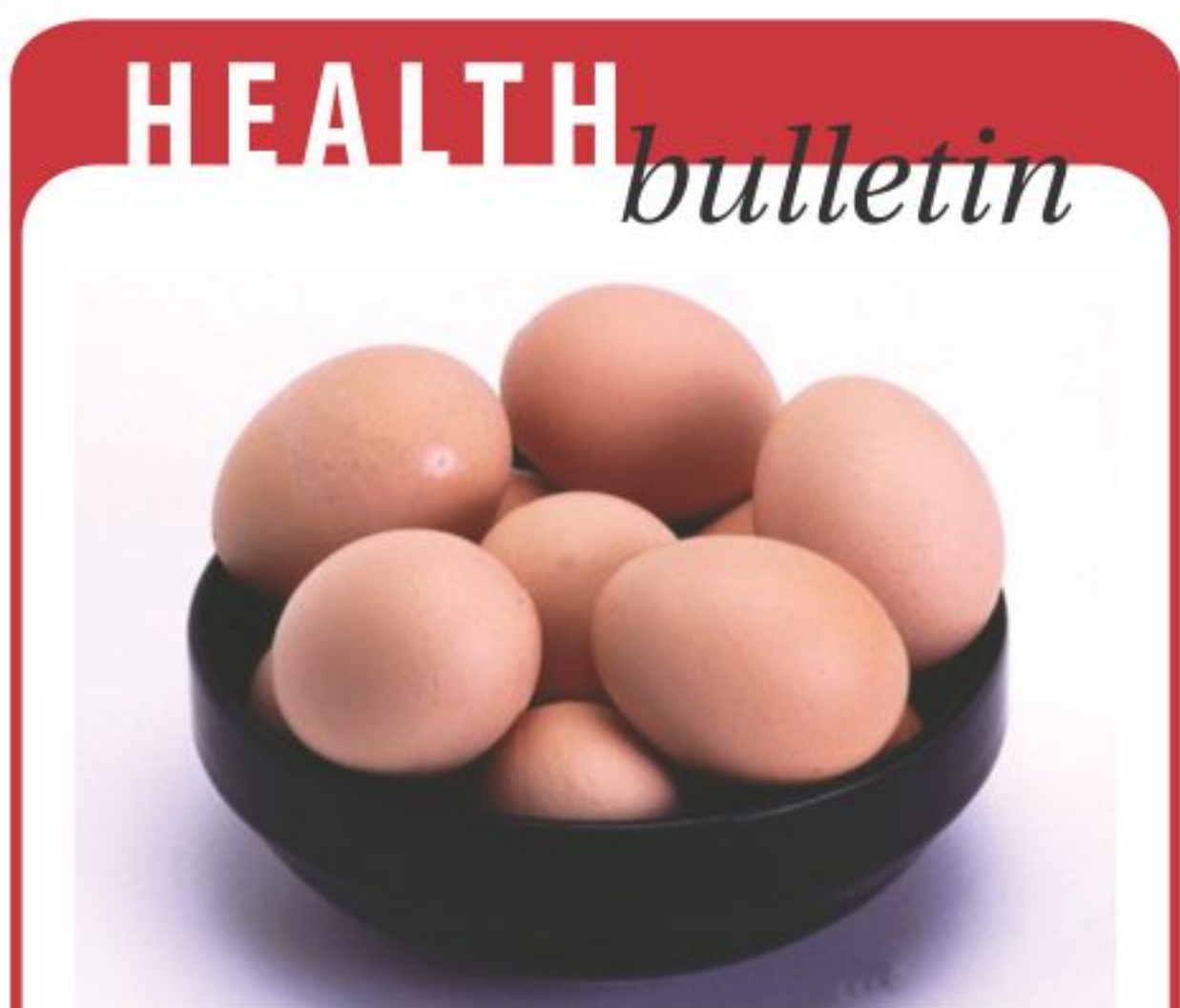
Most people who get hepatitis B virus are affected acutely but in most cases, the virus is cleared off by the body within 6 months. People who have persistence presence of the virus after 6 months are called carrier.

Symptoms of hepatitis B may include loss of appetite, nausea and vomiting, abdominal pain, dark urine, fever, weakness, fatigue, joint pain and jaundice (yellowing of the whites of eyes and skin). Early diagnosis and treatment can help prevent liver damage. So, contact a doctor immediately if you have any signs or symptoms that worry you.

There are many safety measures regarding this disease. Here are only five you should not ignore:

1. Do not use someone's personal items like toothbrush, razor, scissors etc.
2. Be cautious about choosing a haircutting saloon (Scissors, razors, blades sterility).
3. Be careful about surgical, dental treatment and accidental injuries (equipments sterility).
4. Get vaccinated against Hepatitis B virus.
5. Never receive unscreened blood.

Read more: healthprior21.com



Egg allergy overcome with egg therapy

New research from the U.S. finds that egg therapy, eating small but gradually increasing daily doses of egg white powder, may help affected children overcome their allergy to eggs. However, the researchers urge people not try it at home because the conditions have to be carefully controlled by a trained doctor.

Polypill could save thousands of lives

A polypill combining a statin that lowers cholesterol along with blood pressure drugs could prevent thousands of heart attacks and strokes every year, according to a UK study published in the journal PLoS One.

The results suggested the polypill reduced blood pressure by 12% and LDL cholesterol by 39%. Researchers called for the pill to be made available as a matter of urgency.

Quest to cure HIV

DR MD RAJIB HOSSAIN

In thirty-one years fight against HIV/AIDS, most of the effort has gone into treatment to keep the virus under control and development of vaccines to stop transmission. Finding a cure for HIV was a dare dream for decades. With some new developments and better understanding of the mysterious virus, the scientists are now desperately hoping for a cure of HIV/AIDS, what they believe is the only way to end epidemic.

There are over 20 anti-HIV drugs available worldwide that can restore health, prolong life of the person living with HIV/AIDS and significantly reduce transmission of the virus to those not infected. However, drugs do not eradicate HIV and people are exposed to its

potential toxic effects for life. Moreover, the expense to adhere to therapy for indefinite period is enormous specially in resource-poor setting. Developing an effective vaccine is another potential area to end epidemic. But success of this effort is still far away and has not yet shown very promising result.

In these contexts, keeping the quest to cure HIV is crucial and the efforts need to be intensified to get a potential solution to end the epidemic and save money and resource for other emerging crisis.

A number of recent advancements in proving an effective cure that shed light and renew optimism to peruse cure research. The case of Timothy Brown, the so-called "Berlin Patient", who received a stem-cell bone-marrow transplant in 2007 and is now considered to be

cured of HIV has proved that a cure is at least possible.

There is also a rare group of HIV infected people who appear to have naturally cured their own infection are being examined and researched extensively to find a clue for cure.

The major challenge to cure is the latent HIV reservoirs — where HIV hides and persists in unreachable location that does not eradicated by drugs. Some recent researches have shown that drugs in combination can unmask latent virus that might allow clearance of infection and boost immune defense. Researches also revealed that benefit of early treatment that can successfully stop the need of drug after a certain period without viral rebound.

A group of international experts convened by the International AIDS Society (IAS) have very recently developed a roadmap for research towards an HIV cure. It highlighted the need of more investment in cure research, establishment of large, multinational collaborations involving experts from multiple disciplines (basic and clinical scientists including those outside of the HIV arena), mentoring and supporting young researchers with out of box ideas and strong community support for advocacy.

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The Inaugural Global Scientific Strategy -Towards an HIV Cure was launched on Thursday ahead of the XIX International AIDS Conference amid renewed optimism from the world's leading HIV/AIDS scientists that the future prospects for finding an HIV cure are increasing.

NEWS IN FRAME



With a view to increasing income of urban extreme poor and to graduate from extreme poverty, Concern Worldwide established a mobile hygienic brand of a food business chain named 'Mojar Khabar'. It is supported by the GoB and funded by UK aid's Shiree project. A vendor seen in the photo is selling hygienic foods at a street in Mirpur of Dhaka city.



An experience sharing meeting was held recently among the patients, consultants and management of Apollo Hospitals Dhaka. The patients who have undergone Total Laparoscopic Hysterectomy, a minimally invasive procedure to remove uterus under the department are seen in the photo.



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