

Diabetes and fasting: Things to consider

DR SHAHJADA SELIM

There is often discussion about whether people with diabetes should fast during Ramadan or not. There is no straightforward answer to it. It actually depends on the factors that determine the condition of the patient. For some patients, especially with medication and complications, it may be very challenging to keep their sugar within normal range. However, many people with diabetes can keep their sugar under control by taking extra precautions during Ramadan fasting.

It is strongly recommended that people with diabetes should consult physician before Ramadan. Physician can assess if it is safe for the patient to fast and what precautions should be taken to prevent blood glucose levels from going either too low or too high.

For people who use to take blood glucose lowering medication during day, the daylight hours of fasting may present a particular risk of low blood glucose (called hypoglycemia). During the hours of night, when the fasting is broken, the body may need to take in more food than would normally be eaten. As a result, this may lead to higher blood glucose levels during the night time. People are generally recommended not to fast if it affects negatively, especially with serious complications.



People who decide to fast should not stop taking their insulin during fasting as this could lead to a dangerous condition called diabetic ketoacidosis. Taking insulin does not invalidate fasting. People also should check blood sugar during fasting if needed to prevent hypoglycemia.

Other people who may get exemption from fasting include pregnant women, the elderly and those suffering an illness.

Tips for controlling your blood sugar during fasting

- It is advisable to test your blood sugar

levels more often than normal through Ramadan.

- Be aware of the symptoms of high and low blood sugar.
- Have your testing kit ready if you notice you may be either too high or low on sugar.

If you are taking blood glucose lowering medication, make sure you have a form of quickly absorbed sugar including honey with you.

Tips for eating

Carbohydrates provide a lot of energy but can be less good for blood sugar levels, particularly for people with type 2 diabetes. Carbohydrates with a low glycaemic index such as brown rice, full grain bread and vegetables are better options over white rice, non-full grain bread or potatoes.

Sweets may be popular dishes at Iftar, but are not good for blood sugar levels. If you wish to consume sweets or white carbohydrates, it may be best to stick to much smaller portions of these.

Protein is a good source of energy and is more slowly absorbed than carbohydrate. People with signs of kidney damage should seek the advice of their doctor before significantly increasing the amount of protein they eat.

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RAMADAN TIPS

Stay healthy during Ramadan

PROF MD TAHMINUR RAHMAN

Ramadan is the holiest month for the Muslims throughout the world. To keep you healthy during Ramadan the following tips may be useful:

Heart burn or acidity: This is a very common problem at this time. During Ramadan acid secretion from stomach is reduced, but smelling of food and craving for food stimulates brain which ultimately stimulate increased acid secretion. For this those who are suffering from previous acidity, peptic ulceration — should take different antacid as per advice of their physicians, avoid fatty, oily and spicy meals at sehri, iftar, mels.

Headache: This is very common problem, especially in first few days of Ramadan. It is due to fasting, change of schedule of normal food habits and less sleep. It can also happen due to dehydration, fluid loss, inadequate rest. To avoid headache, have adequate rest, drink plenty of water and fresh fruit juice. For severe headache, analgesic like paracetamol or NSAID can be taken. Avoid drinking more coffee or tea and smoking along with exposure to sunlight during Ramadan.

Constipation: This is another common problem during Ramadan. Because of long time fasting, dehydration and less intake of fiber rich food, constipation may occur. For this reason, it is advised to drink plenty of water, fresh fruit juice, fiber rich diet and vegetables during meal, iftar and sehri. In case of severe constipation appropriate laxative may be used as per advice of doctors.

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HEALTH bulletin

Nanomedicine: The next big weapon to fight cancer

MD NURUNNABI

Most cancers still remains as undefeated diseases. Scientists are trying hard to find cure for the cancers, but they are yet to achieve it. Though different therapeutic windows are being considered for cancer treatment such as chemotherapy, radiotherapy and gene therapy, but survival rates of survival are much lower than that of the expectation.

Conventional cancer fighting agents have several drawbacks including higher toxicity, highly expensive and non-specificity. Therefore, the major concern of scientists is to overcome those obstacles to enhance the potency of anti-cancer agents.

In this context, a novel technology called nanotechnology is considered as a promising and powerful tool for cancer diagnosis and treatment.

This new technology has several advantages over chemotherapy. It precisely locates the cancer cell and destroys it rather than attacking normal cell. Severe toxic side effects produced by chemotherapy can be bypassed through nanotechnology. For example, a patient is suffering from breast cancer, whenever chemotherapeutic agents/drugs are administered in blood, it is distributed and accumulated not only breast tissue but also in liver cell, muscle cell, lung cells, bone marrow etc. Then it becomes non-specific and can also damage those organs/systems along with destruction of breast tissue.

The nanotechnology which is

applying in human body for medical purpose is termed as nanomedicine. The size of this medicine is less than 100 nm in diameter that gives a justification of the name. Several famous research groups from the USA, Japan, South Korea, Australia, the UK, Europe and also India are focusing on nanomedicine to find a cure for cancer. Experts identified it as one of the most promising and prospectus strategies for new generation cancer therapy and early cancer detection.

Multifunctional nanomedicine is another approach recently explored by several research groups. This could be used for multiple purposes including cancer cell targeting, early cancer diagnosis and its treatment.

Researchers are thinking that fighting with cancer would be easier through developing of optimised multifunctional nanomedicine.

We may hope and dream that thousand of lives will be safe by inventing nanomedicine sooner or later. However, lots of things should be done to optimise this technique, process and validation are required. To get the nanomedicine in market, clinical trials and final approval from the authorised institution such as US-FDA are required.

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Fish habit may reduce breast cancer risk

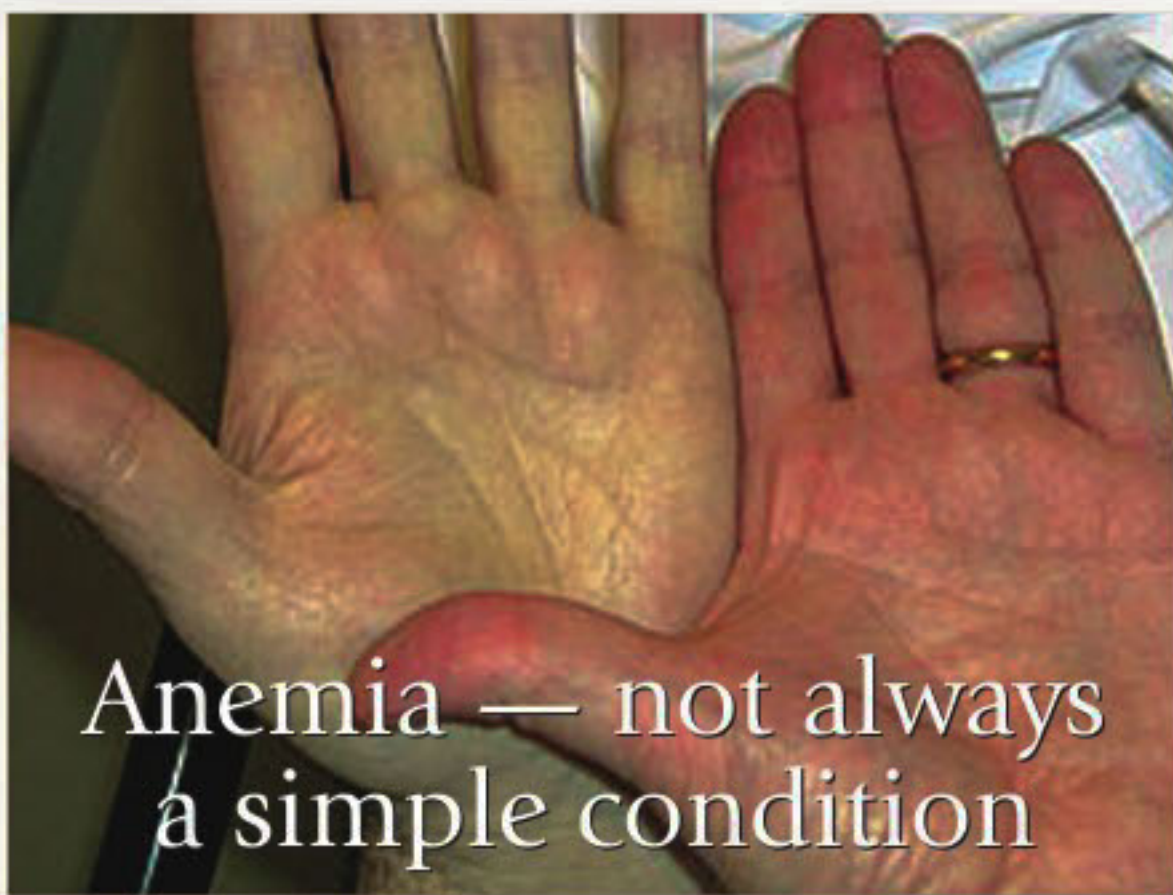
Regularly eating oily fish may help reduce the risk of breast cancer, a new report published in the journal BMJ suggests.

Brain injury may raise stroke risk

People who have a traumatic brain injury may be more likely to suffer a stroke, a large new study published in the journal Neurology suggests.

Older, cheap drug may cut suicide risk for people with mood disorders

A new review of data published in the journal BMJ suggests that an old and inexpensive drug, lithium, may help lower suicide risk in people with mood disorders such as depression or bipolar disorder.



Anemia — not always a simple condition

PROF DR M KARIM KHAN

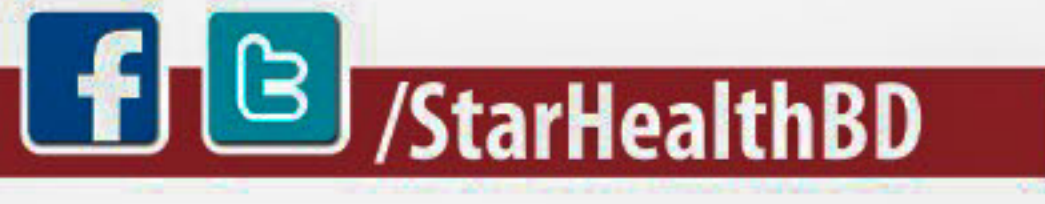
Arnab's mother works at a bank. She remains in office till 7 pm and thus gets less time to take care of her child. However, recently she noticed that her five years old son is getting gradually pallor and often suffers from fever, cough, bowel problem etc. Recently, she came to me with Arnab as he is having oral thrush and low grade fever along with gum bleeding while brushes teeth.

On examination, it was revealed that Arnab was having moderate to severe anaemia with increased body temperature and oral thrush. From History, physical examination and CBC finding, I thought Arnab has developed Aplastic anaemia. Bone marrow examination confirmed the diagnosis.

Aplastic anaemia is a serious condition and it may be inherited or acquired in origin. Cause may be unknown or may be secondary to ingestion of some drugs, radiation, viral infection etc. Along with supportive treatment like blood transfusion, antibiotics, systemic steroid and immunotherapy may be tried. But the choice of treatment is bone marrow transplantation. In spite of all effort mortality rate is about 50-80%. Death in Aplastic anaemia is due to haemorrhage and or infection.

So all types of anaemia are not as simple as we think, thus moderate to severe anaemia without enlargement of any organ demands through evaluation for correct diagnosis, better and timely management.

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Knowing for better living

1 in 10 adults will have diabetes by 2030 !

- 80% of people with diabetes live in low and middle income countries
- Every year 78,000 children develop type-1 diabetes
- The greatest number of people with diabetes are between 40-59 years of age

- Take healthy diet - low in fat, sugar and salt
- Take 20-minute exercise for at least 3 days per week
- Maintain a normal body weight
- Avoid Smoking
- Avoid alcohol



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