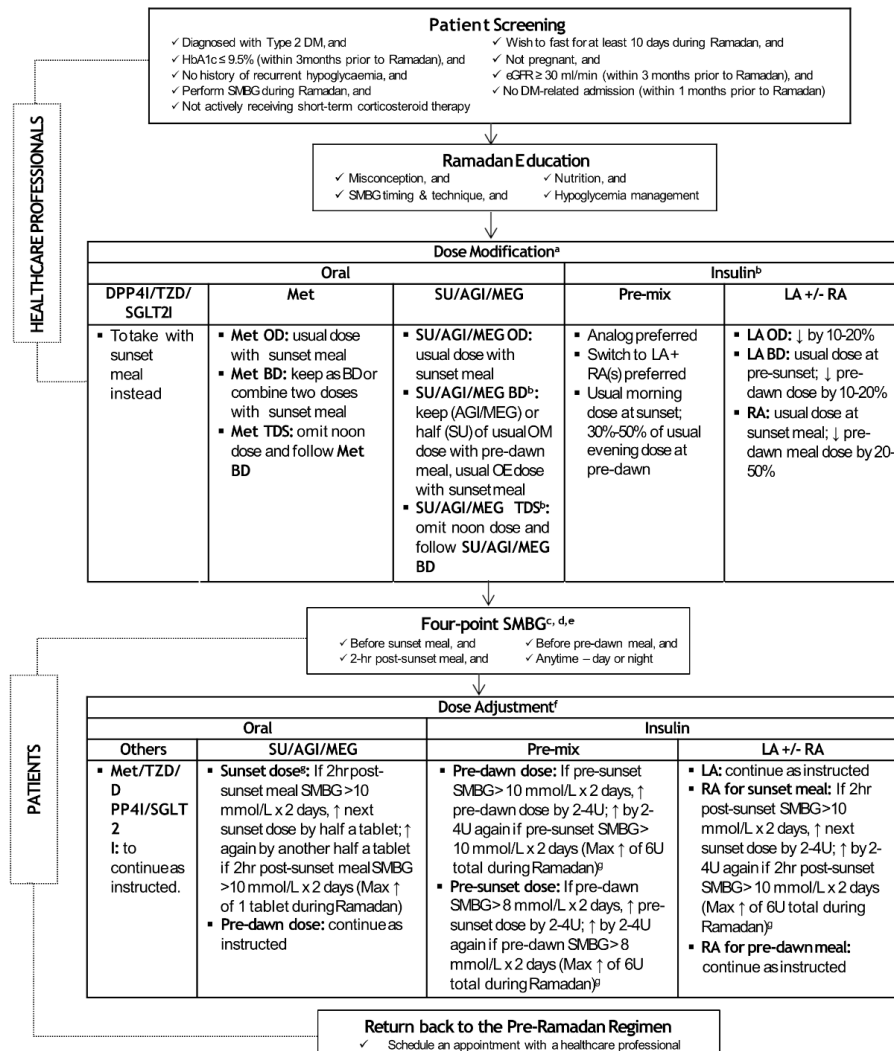


Supplemental materials for:

Lum Z, Khoo Z, See Toh W, et al. Efficacy and safety of use of the fasting algorithm for singaporeans with type 2 diabetes (FAST) during Ramadan: a prospective, multicenter, randomized controlled trial. *Ann Fam Med.* 2020;18(3):139-147.

APPENDIX 1. FASTING ALGORITHM FOR SINGAPOREANS WITH TYPE 2 DIABETES (FAST)



^a Initial dose modification should be based on projected food intake described by patient and not to exceed maximum per dose;

^b round to the nearest tablet strength or practical insulin units;

^c patients are encouraged to perform SMBG frequently throughout the day, not limited to the four points;

^d blood glucose should be maintained between 6.0 to 8.0 mmol/L throughout the day;

^e if blood glucose during the day is <5.0 mmol/L or major hypoglycemic event occur, stop fasting for the rest of the day and contact a healthcare professional;

^f omit if patient is not capable of self-adjustment per the judgement of healthcare professionals, not to exceed maximum per dose, if SMBG is between 5.0 to 6.0 mmol/L or minor hypoglycemic symptoms occur at anytime after dose adjustment, revert back to previously instructed or adjusted dose.

^g if at max dose and not able to titrate, contact a healthcare professional.

Abbreviations: SMBG – self-monitoring of blood glucose; AGI – alpha glucosidase inhibitors; MEG – meglitinides; DPP4i – dipeptidyl peptidase 4 inhibitors; Met – metformin; SGLT2i – Sodium-glucose cotransporter 2 inhibitors; SU – sulfonylurea; TZD – thiazolidinediones; LA – long-acting insulin (Neutral Protamine Hagedron, glargine, detemir); RA – rapid acting insulin (aspart, lispro, glulisine, regular insulin); U – units; OD – once a day; BD – twice a day; TDS – three times a day; OM – every morning; OE – every evening.

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