

## Case Study: Muslim Child and Diabetes Treatment

*Authored by Joset Brown*

A four-year-old male was diagnosed on admission to a local hospital with type-1 diabetes. Following confirmation of the diagnosis, the patient's family was informed by the medical team that he needed to remain in the hospital until his blood sugar stabilized and would need to use insulin for the rest of his life. The team began diabetes education for the patient's parents and extended family to ensure that they felt confident and comfortable caring for him at home.

During morning rounds, the patient's nurse found that the patient did not eat his breakfast of pancakes, sausage, and fruit, and she explained to the family that it was time for their son to have his glucose checked prior to his insulin. The patient's family became very upset. They said that they did not want their son to eat the food or have the insulin because it was "haram."

### Reflection:

- What does haram mean and what is the family's concern with the food and medication?
- Name one validated spiritual assessment tool. How does having this information enhance patient care?
- Why is it important for medical providers to inquire about the spiritual/religious backgrounds of their patients? In addition to asking the family, where could the information be documented?
- Discuss the family's concerns around insulin. What are the educational opportunities for both the nurse and for the family in this case?

### Additional Resources:

Puchalski, C., & Romer, A. L. (2000). Taking a spiritual history allows clinicians to understand patients more fully. *Journal of Palliative Medicine*, 3(1), 129-137.

Sachedina, A. (2009). *Islamic Biomedical Ethics: Principles and Application*. Oxford: Oxford University Press.

Green, R. & Little, G. (2019). Religion and Ethics in the Neonatal Intensive Care Unit. *Oxford Medicine Online*. <https://oxfordmedicine.com/view/10.1093/med/9780190636852.001.0001/med-9780190636852>