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Very Low Calorie Diet in Islamic Perspective: A Review of Effectiveness, Safety, and Sustainability in Obesity Management

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Abstract
The high prevalence and trend of instant weight loss illustrate the public's need for effective and strategic obesity management. As a popular diet, the Very Low Calorie Diet (VLCD) offers weight loss through significant energy intake restriction. This study aims to analyse VLCDs from an Islamic perspective. A qualitative library research method was used through a literature review of nutrition, dietetics, and Islamic studies. Searches were conducted through the PubMed, Frontiers, ScienceDirect, and Google Scholar databases using the keywords Very Low Calorie Diet, VLCD Diet for Obesity, Balanced Diet, Halal Diet, and Thayyib over a 10-year period (2016-2026). The analysis was conducted descriptively through reduction, presentation, content analysis, and drawing conclusions regarding the suitability of the VLCD diet with three Islamic principles: balance, prohibition of israf, and preservation of the soul. The results of the study indicate that VLCDs under the supervision of professionals with certain medical criteria are effective, safe, and sustainable in obesity management. These findings demonstrate the alignment of a calorie-restricted diet with the principles of balance (washatiyah), prohibition of excess (israf), and preservation of the soul (hifdz al-nafs), so that the diet's success in weight loss is not the sole basis for the appropriateness of the intervention. This study recommends a VLCD diet, with medical criteria met and monitored, as an intervention that provides effective results in obese patients without neglecting physiological needs, health maintenance, and sustainable weight management.

Tingginya prevalensi dan tren penurunan berat badan instan menggambarkan kebutuhan masyarakat terhadap penanganan obesitas yang efektif dan strategis. Sebagai diet populer,

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Very Low Calorie Diet (VLCD) menawarkan penurunan berat badan melalui pembatasan asupan energi signifikan. Penelitian ini bertujuan menganalisis VLCD dalam perspektif Islam. Metode kualitatif berbasis library research (studi kepustakaan) digunakan melalui telaah literatur gizi, dietetik, dan studi islam. Penelusuran dilakukan melalui database PubMed, Frontiers, ScienceDirect, dan Google Scholar menggunakan kata kunci Very Low Calorie Diet, Diet VLCD pada Obesitas, Diet Seimbang, Diet Halal dan Thayyib dalam rentang 10 tahun (2016-2026). Analisis dilakukan secara deskriptif melalui reduksi, penyajian, analisis konten, dan penarikan kesimpulan berupa kesesuaian diet VLCD dengan tiga prinsip Islam yaitu keseimbangan, larangan israf, dan penjagaan jiwa. Hasil telaah menunjukan bahwa VLCD di bawah pengawasan tenaga profesional dengan kriteria medis tertentu efektif, aman, dan menuai keberlanjutan dalam tatalaksana obesitas. Temuan tersebut menunjukan keselarasan diet restriksi kalori dengan prinsip keseimbangan (washatiyah), larangan berlebih-lebihan (israf), dan penjagaan jiwa (hifdz al-nafs), sehingga keberhasilan diet dalam penurunan berat badan tidak menjadi satu-satunya dasar kelayakan intervensi. Kajian ini merekomendasikan diet VLCD dengan pemenuhan kriteria medis dan pengawasan sebagai intervensi yang memberikan hasil efektif pada pasien obesitas tanpa mengabaikan kebutuhan fisiologis, pemeliharaan kesehatan, dan keberlanjutan manajemen berat badan.

Keywords: VLCD; Obesity; Popular Diet; Balanced Nutrition; Halal-Thayyib

Introduction

Obesity is the accumulation of excess body fat.[1] It is one of the triple burdens of malnutrition that is growing rapidly over time. According to the 2021 Global Burden of Disease report, adult body mass index data show that more than 45% of the global population, consisting of 1 billion men and 1.1 billion women, is overweight or obese. This number is estimated to increase to 3.3 billion, representing 54% of the adult population.[2] The high prevalence of obesity is associated with an increased risk of metabolic disorders, diabetes mellitus, cardiovascular disease, cancer, and various other complications.[3] These conditions have encouraged the development of weight management strategies, such as pharmacological-based therapies, behavioural changes, and dietary modifications.

[1] Enriko Aprilio, Dian Isti Angraini, Putri Damayanti, and Reni Zuraida, "Obesity: Clinical Aspects, Risk Factors, and Health Impacts," Nusantara Hasana Journal 5, no. 8 (2026): 396–408, https://doi.org/10.59003/nhj.v5i8.1868

[2] Katarzyna Wiśniewska et al., "The VEGPREV Study: Effectiveness of Four Plant-Based Diets on Weight Loss, Metabolic Syndrome Components and Appetitive Traits in Overweight and Obese Individuals: A Randomized Controlled Trial," Frontiers in Nutrition 12 (2025): 1677496.

[3] Ju Young Kim, "Optimal Diet Strategies for Weight Loss and Weight Loss Maintenance," Journal of Obesity & Metabolic Syndrome 30, no. 1 (2020): 20.

Excessive fat accumulation is not only about physical appearance, but also psychological aspects, such as poor self-image, social pressures, false beliefs about the ideal slim and thin body shape, and women's dissatisfaction with their own bodies. This triggers strict dietary restrictions that lead to extreme weight loss. [4] One form of diet that is widely used is the Very Low Calorie Diet (VLCD), or a diet with a very low daily intake limit (<800 kcal per day), which is designed to produce an energy deficit and weight loss in a relatively short time.[5]

In practice, VLCDs have many pros and cons. On the one hand, very low energy restriction results in rapid weight loss and improvements in metabolic parameters, such as glucose, cholesterol, and triglycerides.[6] On the other hand, without proper supervision and planning, energy restriction below basic needs (resting metabolic rate) has a negative impact on nutritional adequacy and physiological conditions, such as decreased muscle mass.[7] Heart function, metabolism, fluid and electrolyte disturbances, aortic elasticity, constipation, and hypoglycemia[8]. In addition to safety, the sustainability of dieting behaviours is often questioned due to the limited evidence of successful long-term weight loss.[9] Thus, the effectiveness of VLCDs needs to be considered in conjunction with the health risks and sustainability of the diet, not simply the magnitude of weight loss produced.

This issue becomes relevant when weight management is placed within an Islamic perspective. Islam views the body and health as a trust that must be

[4] Ardyanisa Raihan Kusuma et al., "Exploring the Public Opinion on Celebrity Fad Diets: Twitter Sentiment and Netnographic Analysis," Amerta Nutrition 9, no. 3 (2025): 460–468.

[5] Sheila Amara Putri et al., "Very Low Calorie Diets Affect Long Term Weight Loss and Health Outcomes: A Systematic Review," The Indonesian Journal of Public Health 20, no. 1 (2025): 187.

[6] Shilpa Joshi and Viswanathan Mohan, "Pros & Cons of Some Popular Extreme Weight-Loss Diets," Indian Journal of Medical Research 148, no. 5 (2018): 642–647,https://doi.org/10.4103/ijmr.IJMR_1793_18.

[7] Tom Anthonius Hubertus Janssen, Derrick W. Van Every, and Stuart M. Phillips, "The Impact and Utility of Very Low-Calorie Diets: The Role of Exercise and Protein in Preserving Skeletal Muscle Mass," Current Opinion in Clinical Nutrition & Metabolic Care 26, no. 6 (2023): 521–527, https://doi.org/10.1097/MCO.0000000000000980

[8] Jennifer J. Rayner, Ines Abdesselam, Mark A. Peterzan, Ioannis Akoumianakis, Nadia Akawi, Charalambos Antoniades, Jeremy W. Tomlinson, Stefan Neubauer, and Oliver J. Rider, "Very Low Calorie Diets Are Associated with Transient Ventricular Impairment before Reversal of Diastolic Dysfunction in Obesity," International Journal of Obesity 43, no. 12 (2019): 2536–2544, https://doi.org/10.1038/s41366-018-0263-2

[9] Aaiza Tahreem, Allah Rakha, Roshina Rabail, Aqsa Nazir, Claudia Terezia Socol, Cristina Maria Maerescu, and Rana Muhammad Aadil, "Fad Diets: Facts and Fiction," Frontiers in Nutrition 9 (2022): 960922, https://doi.org/10.3389/fnut.2022.960922

safeguarded, so consumption practices relate not only to the type of food, but also to its balance, quantity, and effects on the body. The principle of wasathiyah and the prohibition of israf emphasise balance and proportionality. Within the framework of maqāṣ id al-syarī'ah, the principle of *ḥifẓ al-nafs* places soul care as the foundation for maintaining health. This framework provides a basis for assessing the merits of the VLCD method, not only based on weight loss but also on safety, sustainability, and the practice's alignment with spiritual dimensions. Despite the growing clinical evidence regarding VLCD practices in obesity management, the integration of Islamic principles in assessing their effectiveness, safety, and sustainability still requires further study. This article offers a normative-evaluative framework that assesses the alignment of the effectiveness, safety, and sustainability of VLCD diets with the principles of balance and soul care.

Method

This study uses a qualitative approach based on library research to examine the Very Low Calorie Diet (VLCD) from an Islamic perspective. Data were obtained from a search of scientific literature through PubMed, Frontiers, ScienceDirect, and Google Scholar using the keywords "Very Low Calorie Diet", "VLCD Diet in Obesity", "Balanced Diet", "Halal and Thayyib Diet" with a publication span of 10 years (2016–2026). A total of 174,173 literature sources were found in the keyword input, and 25 relevant studies were classified based on two aspects of the study, namely VLCD in a Dietetic Perspective (effectiveness, safety, and sustainability in obesity management) and VLCD in an Islamic Perspective (The concept of balance and protection of the soul in Islam; the intersection of VLCD diet practices with sharia). Furthermore, the findings were analysed descriptively through data reduction, presentation through narratives and tables, content analysis, and drawing conclusions in the form of the suitability of the VLCD diet based on supervision and medical criteria with three Islamic principles, namely balance, prohibition of israf, and protection of the soul.

Results and Discussion

Very Low Calorie Diet from a Dietetic Perspective

Very Low Calorie Diet (VLCD), Very Low Energy Diet (VLED), or calorie restriction diet <800 kcal/day is a high-protein (70-100 grams) dietary intervention, enriched with biologically valuable protein sources and low in carbohydrates (≤30%), designed for rapid weight loss. Clinical reviews have

expanded the diet's goals to improve metabolic profiles, such as blood sugar, insulin, and lipids, under strict medical supervision, along with lifestyle changes deemed safe and effective. Its potential for rapid weight loss is highly sought after, making it extremely popular.[10]

A low-carbohydrate, high-protein diet aims to ensure the body is in a fat-burning phase (ketosis) as an energy source to replace glucose without sacrificing muscle mass. Some clinical indications associated with this diet include patients at very high risk for obesity, a BMI of at least 30 kg/m2, and failure to adhere to a low-calorie diet or other medications. Generally, the diet uses total or partial meal replacement, is supervised by a healthcare professional, undergoes metabolic monitoring, and is supported by additional vitamins and minerals. This is because long-term calorie consumption of <800 kcal can increase the risk of protein, vitamin, and mineral deficiencies. Over a period of 8-16 weeks, obese patients experience a 15-25% weight loss.[11]

Meal Replacement: Meal replacements (MRs) are food or beverage products containing a specific energy content, enriched with protein, vitamins, and minerals (supplemented meal replacement). Meal replacements are used as a substitute for regular meals to control energy intake. Generally, VLCDs use two approaches: partial diet replacement (PDR) and total diet replacement (TDR). PDR replaces part of a meal with a combination of balanced, low-energy meals. Meanwhile, TDR replaces all food intake as the primary energy source during the intervention period.[12]

Using meal replacements, either totally or partially, is much more helpful in controlling and measuring the amount of energy and nutritional composition consumed compared to regular food. [13] In practice, PDR is relatively more flexible because patients still consume regular food, whereas TDR is limited to substitute foods, so it requires closer supervision. Effectiveness in controlling

[10] Marco Rondanelli et al., "The Potential Roles of Very Low Calorie, Very Low Calorie Ketogenic Diets and Very Low Carbohydrate Diets on the Gut Microbiota Composition," Frontiers in Endocrinology 12 (2021): 662591,https://doi.org/10.3389/fendo.2021.662591

[11] Suharyati et al., eds., Diet and Nutrition Therapy Guide, 3rd ed. (Jakarta: EGC Medical Book Publisher, 2019). p. 300

[12] Shenelle A. Edwards-Hampton and Jamy Ard, "The Latest Evidence and Clinical Guidelines for Use of Meal Replacements in Very-Low-Calorie Diets or Low-Calorie Diets for the Treatment of Obesity," Diabetes, Obesity and Metabolism 26, suppl. 4 (2024): 28–38,https://doi.org/10.1111/dom.15819

[13] Jihyun Min, Seo Young Kim, In Soo Shin, Young Bae Park, and Young Woo Lim, "The Effect of Meal Replacement on Weight Loss According to Calorie-Restriction Type and Proportion of Energy Intake: A Systematic Review and Meta-Analysis of Randomized Controlled Trials," Obesity Reviews 22, no. 1 (2021): e13165,https://doi.org/10.1111/obr.13165

energy intake makes meal replacement a strategic tool in obesity management. [14] Recent guidelines and clinical reviews position VLCDs and meal replacements as part of medical nutrition therapy for obesity, particularly in specific clinical conditions, rather than as dietary patterns to be applied freely.[15]

Problems arise when VLCD diets and meal replacement products are used without strict supervision. Public attention and acceptance of these diets are influenced by the surge in popularity of Korean culture (K-pop) and celebrity diets.[16] Without clinical indication, supervision, and professional consultation, the diet has the potential to cause side effects and factors that hinder long-term goals.[17] Therefore, definitively, the practice of extreme diets with excessive calorie restriction without supervision and fulfilment of medical categories is not appropriately equated with the practice of VLCD.[18] Moreover, different practices have the potential to have different effects.

Although often perceived in practice as a form of fad diet, VLCDs offer rapid weight loss; their clinical application yields different results. The concept of a fad diet itself refers to popular diets that have limitations in terms of dietary adequacy and sustainability. [19] Several studies have shown that VLCDs are effective in certain medical conditions, both for weight loss and changing metabolic parameters. [20] Therefore, evaluation of VLCDs should consider the medical condition, the intervention's goals, and its implementation, rather than

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[14] European Association for the Study of Obesity, "European Association for the Study of Obesity Position Statement on Medical Nutrition Therapy for the Management of Overweight and Obesity in Adults Developed in Collaboration with the European Federation of the Associations of Dietitians," 2022.

[15] Shenelle A. Edwards-Hampton and Jamy Ard, "The Latest Evidence and Clinical Guidelines for Use of Meal Replacements in Very-Low-Calorie Diets or Low-Calorie Diets for the Treatment of Obesity," Diabetes, Obesity and Metabolism 26, suppl. 4 (2024): 28–38,https://doi.org/10.1111/dom.15819

[16] Ardyanisa Raihan Kusuma et al., "Exploring the Public Opinion on Celebrity Fad Diets: Twitter Sentiment and Netnographic Analysis," Amerta Nutrition 9, no. 3 (2025): 460–468.

[17] Sheila Amara Putri et al., "Very Low Calorie Diets Affect Long Term Weight Loss and Health Outcomes: A Systematic Review," The Indonesian Journal of Public Health 20, no. 1 (2025): 187.

[18] Shenelle A. Edwards-Hampton and Jamy Ard, "The Latest Evidence and Clinical Guidelines for Use of Meal Replacements in Very-Low-Calorie Diets or Low-Calorie Diets for the Treatment of Obesity," Diabetes, Obesity and Metabolism 26, suppl. 4 (2024): 28–38,https://doi.org/10.1111/dom.15819

[19] Aaiza Tahreem et al., "Fad Diets: Facts and Fiction," Frontiers in Nutrition 9 (2022): 960922, https://doi.org/10.3389/fnut.2022.960922

[20] Eunbyul Cho et al., "Effectiveness of a Protein-Supplemented Very-Low-Calorie Diet Program for Weight Loss: A Randomized Controlled Trial in South Korea," Frontiers in Nutrition 11 (2024): 1370737, https://doi.org/10.3389/fnut.2024.1370737

solely the diet's popularity as a weight loss aid. Some medical conditions and findings related to VLCD diets are summarised in Table 1.

Table 1.
Effectiveness, Safety, and Side Effects of the VLCD Diet

Discussion Focus	Diet Practice, Effectiveness, Safety, & Sustainability
Obesity[21]	Protein-supplemented meal replacement (PSMR)-based VLCDs are effective in reducing body weight, waist circumference, visceral fat, and improving cardiometabolic parameters. The intervention is carried out in stages, starting with the VLCD, followed by reintroduction of regular foods, and continuing maintenance, avoiding the need for continuous energy restriction.
Obesity with metabolic disorders[22]	VLCDs improve body weight, waist circumference, blood pressure, and glucose and lipid metabolism parameters in obese patients with metabolic disorders. However, the intervention requires monitoring, as very low energy restriction can cause physiological changes early in the diet.
Obesity with type 2 diabetes mellitus[23]	VLCDs reduce weight and support glycemic control, even allowing remission of type 2 diabetes mellitus or blood sugar levels in diabetics to return to normal (HbA1c <6.5%) for at least 3 months without insulin and diabetes medication.
Obesity with Non-alcoholic fatty liver disease (NAFLD)[24]	VLCDs reduce body weight, fatty liver indicators, and liver size in the short term, although some studies still report mild side effects and the duration of the studies is still short.

Very Low Calorie Diet from an Islamic Perspective

Balance (al-wasathiyah) is a fundamental principle of Islamic teachings, reflected in various aspects of life, one of which relates to consumption patterns. Islam discourages excessive fulfilment of biological needs, but it also does not condone neglecting the body's needs through strict restrictions without a clear purpose.[25] This principle is reflected in the verses of the Quran

[21] Eunbyul Cho et al., "Effectiveness of a Protein-Supplemented Very-Low-Calorie Diet Program for Weight Loss: A Randomized Controlled Trial in South Korea," Frontiers in Nutrition 11 (2024): 1370737, https://doi.org/10.3389/fnut.2024.1370737

[22] "Effects of Short-Term Very Low-Calorie Diet on Metabolic Profile in Patients with Metabolic Syndrome," PubMed, 2025.

[23] HA Dissanayake et al., "Very-Low-Calorie Diet-Based Intensive Lifestyle Intervention for Remission of Type 2 Diabetes: Real-World Experience in a South Asian Population," Diabetic Medicine (2024),https://doi.org/10.1111/dme.15422

[24] Grant J. Herrington et al., "The Use of Very Low-Calorie Diets in Subjects with Obesity Complicated with Nonalcoholic Fatty Liver Disease: A Scoping Review," Obesity Science & Practice 8, no. 4 (2022): 510–524,https://doi.org/10.1002/osp4.589

[25] Syahira, Filza. "Balanced Consumption Patterns In The Qur'an And Its Integration For Health (Scientific Interpretation Study)." PhD diss., Sultan Syarif Kasim Riau State Islamic University, 2025.

which order humans to eat and drink according to their needs, but prohibit excess (israf).[26] The Word of God:

وَّكُلُوْا وَاشْرَبُوْا وَلَا تُسْرِفُوْٓا اِنَّهٗ لَا يُحِبُّ الْمُسْرِفِيْنَ

> "... *eat and drink, but do not overdo it. Indeed, Allah does not like people who overdo it."* (Qs. Al-A'raf [7]: 31)

According to Ibn Kathir, this verse was revealed regarding the Arab custom of forbidding certain types of food, such as fat, during the Hajj pilgrimage. Through this verse, Allah emphasises that humans are permitted to enjoy various lawful and good provisions as long as they are not excessive and within reasonable limits.[27]

This verse indicates that fulfilling physical needs is recommended as long as it is done proportionally and does not exceed limits that cause harm. In tafsir studies, the prohibition on israf relates not only to the quantity of food consumed but also encompasses all consumptive behaviour or desires without justifiable need.[28]

The concept of balance is reinforced by the hadith of the Prophet Muhammad (peace be upon him), which explains that no vessel is worse for a person to fill than his stomach. The Prophet (peace be upon him) said: "*No son of Adam fills a vessel worse than his stomach. It is enough for the son of Adam to eat a few mouthfuls to straighten his back. But if he must (excess), he should fill one-third of his stomach for food, one-third for drink, and one-third for breathing.*" [Narrated by At-Tirmidhi no. 2380; Narrated by Ibn Majah no. 3349, narrated by Shaykh Albani: Sahih]

One-third of food, drink, and air demonstrate the importance of controlling consumption and proportional intake. In the context of nutrition and dietetics, this principle aligns with regulating intake according to physiological needs.[29] Dietetics views nutritional balance as the appropriateness of energy and nutrient intake to physiological needs. The body requires energy to maintain vital functions, carry out metabolic processes, digest food, and support daily

[26] Safrudin, Moh, Nurhilaliyah Nurhilaliyah, and Faza Achsan Baihaqi. "The Concept of Halal and Thayyiban Food in the Qur'an: An Analysis of Thematic Interpretation and Its Relevance to Modern Nutrition." Tajdid: Journal of Islamic and Humanitarian Thought 10, no. 1 (2026): 771-783.

[27] Ibid, p. 777

[28] Ash-Shabuni, Muhammad Ali. Shafwatut Tafasir. 3 Vols. Beirut: Dar al-Qur'an al-Karim, 1400 AH/1980 AD.

[29] Mohideen, Fathima Begum Syed, Mohamad Syahir Ramli, and Norhasnira Ibrahim. "A Review of the Notion of Healthy Eating Practices in Islam for a Healthy Lifestyle." Ulum Islamiyyah 34, no. 3 (2021): 1–16.https://doi.org/10.33102/uij.vol34no3.480

activities.[30] Therefore, balance is not just about avoiding excesses, but also about ensuring the body receives adequate nutrition to carry out its biological functions. Therefore, the concept of balance in Islam has strong relevance to a balanced diet. Both reject excessive consumption, restriction, or harmful dietary practices. This concept serves as an important basis for evaluating various dietary practices, one of which is the Very Low Calorie Diet.

The Meeting Point of VLCD Practice in Obesity with Maqasid Syariah

Table 2.
Compliance of VLCD with Maqashid Syariah in Obesity Diet

Aspect Diet	Principle Dietetics	Principle Islam	Point Meeting
Restrictions Energy	Significant restriction of intake results in an energy deficit and accelerates the required weight loss.	*Modesty*(balance) and the prohibition of israf (exaggeration)	Intake restrictions can be applied as long as they do not ignore the body's physiological needs.
Nutritional Adequacy	Low energy restriction is carried out with diet planning and meal replacements that are formulated precisely.	*Hifdz al-nafs*(protection of life) and the principles of Halal-Thoyyib	Effective weight loss must go hand in hand with meeting nutritional needs and maintaining health.
Professional Supervision	VLCD diets require professional supervision because low energy restriction increases the risk of nutrient deficiencies and physiological changes.	*Hifdz al-nafs*and avoid harm (dharar)	Clinical application of diet is more in line with the concept of hifdz al-nafs if it is carried out according to medical needs and professional supervision.
Sustainability of Weight Management	Short-term weight loss does not guarantee long-term maintenance, so a transition phase, behavioural changes, and weight maintenance strategies are necessary.	*Modesty and* hifdz al-nafs	The effectiveness of VLCDs needs to be directed at sustainable weight management and not just short-term weight loss.

Based on dietetic and Islamic principles, implementing VLCDs can reconcile the therapeutic goal of weight loss with the obligation to maintain physical health. From the perspective of *maqāsid al-syarī'ah*, *hifẓ al-nafs* places life protection as an important consideration in dietary decision-making, so that interventions are aligned with patient safety. Contemporary Islamic bioethics studies show that the principle *hifẓ al-nafs* and prevention *darar* can be used as a

[30] Nurhayati, A., Patriasih, R., Judijanto, L., Wasaraka, YN, Prastia, TN, Asrawaty, A., ... & Maineny, A. (2025). Family Nutrition. PT. Sonpedia Publishing Indonesia.

framework in evaluating medical actions by considering benefits, risks, and protection of life.[31]

In the context of VLCDs, this principle can be used to distinguish between therapeutic and extreme energy restriction without clinical basis. VLCDs have a structured medical purpose when used to help obese patients lose weight and improve their metabolic condition. However, these benefits still need to be balanced with relevant indications, professional supervision, and nutritional and weight management strategies. Based on this, the intersection of VLCDs with the maqāṣid al-shari'ah can be seen through several aspects, namely weight loss goals, energy restriction, nutritional adequacy, expert supervision, and sustainability of results. The relationship between maqāṣid al-shari'ah and the implementation of VLCDs is summarized in Table 2.

Conclusion

VLCDs, as evidence-based dietetic interventions, are useful in managing obesity, effectively reducing weight, and improving metabolic parameters in a relatively short time. Diet effectiveness needs to be balanced with standardised practices through nutrient composition management, the use of appropriate meal replacements, professional monitoring, and weight maintenance strategies. Thus, VLCDs in a clinical context can be distinguished from extreme diets without indication and supervision. From an Islamic perspective, appropriate VLCD dietary practices are recommended based on the principles of wasathiyah (moderation), prohibition of isrāf (indulgence in food), and the practice of *hifẓ al-nafs* and prevention *darar*, so that the success of a diet is not only measured by the speed of weight loss, but also by the ability to maintain adequate nutrition, health, and sustainability.

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[31] SA Munirah Bohang and Norhanna Sohaimi, "An Overview on the Alignment of Radiation Protection in Computed Tomography with Maqasid al-Shari'ah in the Context of al-Dharuriyat," Malaysian Journal of Medical Sciences 30, no. 3 (2023): 60–72,https://doi.org/10.21315/mjms2023.30.3.5

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