

Fasting and Medicines in Ramadhan (Information for Health Care Professionals)

Introduction

During the Muslim holy month of Ramadhan there are likely to be queries about medication and how it can be taken when people are fasting.

Until recently little was known of medication compliance during Ramadhan. A few years ago, a project was undertaken at Bart's and the London NHS Trust, to determine medication usage in the Tower Hamlets Muslim population during Ramadhan.

Project Results:

The results were quite alarming. It was found that 23% of patients **did not take** their medication at all during the holy month, and a further 48% **doubled** their evening dose to compensate for medicines normally taken twice a day. Doubling the dose of twice-daily medication or omitting a dose all together could in some cases cause severe adverse effects and is an important point to note when prescribing or counselling this group of patients especially when acute therapy is prescribed during this time.

Action:

As healthcare professionals we can advise patients if it is safe for them to fast in the first instance and advise on safe ways to fast, if they still wish to do so. Figure 1 lists groups of patients who should **not** fast.

It is **not** part of the Muslim religion to cause self-harm by altering medication taken and illness is the one occasion when Muslims are allowed to break the practice of fasting. Figure 2 gives guidance on patients in whom it may be safe to fast and those who should be advised against fasting.

Dietary Advice:

There are three stages to the fast during Ramadhan. Firstly there is the pre-dawn breakfast, which should consist of a meal and water. The fasting period runs from dawn to sunset. At sunset the fast is broken with a small snack and dinner is eaten in the evening. There is no need for excess. All patients must maintain a balanced diet consisting of items from the following five groups, that is, meat or bean, bread or cereal, milk, vegetable and fruit. The following advice is particularly useful:

- Encourage fluids, especially water, to prevent dehydration. (Break the fast with fruit and water).
- Consume sufficient vegetables at mealtimes.
- Avoid caffeine-containing beverages such as tea, coffee and cola etc. (Reduce the quantity consumed before Ramadhan to prevent headache, irritability and mood swings).
- Avoid intake of refined sugar (table sugar, sucrose) in food such as sweets or other forms.
- Avoid spicy foods.

If you require any further advice, please contact Jan Tomes or Phillippa Crockford in the Medicines and Prescribing Team on 020 82711322

References

1. Athar, S. "Health Concerns for Believers; contemporary issues." <http://www.islam-usa.com/h8.htm>
2. Nomani, M.Z.A. "Diet during Ramadhan." <http://www.labs.net/aims/j99ar1.htm>
3. Azizi, F. and Behnam, S. "Ramadhan fasting and diabetes mellitus." (1998) Int. Journ. Ramadhan. Fasting Res. 2:8-17. <http://www.labs.net/ains/j98ar2.htm>
4. Athar, S. "Medical aspects of Islamic fasting." <http://www.islam-usa.com/im15.html>
5. Aprilawati, L. (translated by Green, C.) "Fasting for Muslims with AIDS" (1998) PROCARE. <http://www.essentialdrugs.org/programs/provcaare-hma>
6. Athar, S. "Medical Aspects of Islamic Fasting." <http://www.islam-usa.com/Fasting.htm>

Figure 1

Fasting is not obligatory upon the following:

- **Children under 12 years** (i.e. under the age of puberty)
- **Persons incapable of fasting due to:**
 - a) **Old age fragility** (these patients will be required to offer compensation (fidya), refer to local imam)
 - b) **Chronic diseases which are uncontrolled i.e. diabetes, COPD**
 - c) **HIV infection where the individual is taking medication, especially antiretrovirals.** (These people would be required to offer compensation (fidya) and should be referred to their local imam.)
 - d) **Terminal illness i.e. cancer** (these patients will be required to offer compensation (fidya), refer to local imam)
- **Pregnant or nursing mothers** (can make up days missed at an alternative time)
- **Menstruating women or women with post-partum bleeding** (can make up days missed at an alternative time)
- **Travellers** (can make up days missed at an alternative time)

Figure 2 : Advice on Specific Disease States

Disease state	Advice	Safe way to fast
Diabetes Type 1 Type 2	<p>All Type 1 and Type 2 insulin dependant diabetic patients should not fast unless their diabetes is well-controlled and have had medical advice on how to adjust the doses of medications that they are on. They should also not fast if they meet any of the following criteria:</p> <ul style="list-style-type: none"> • Frail • Poor compliance to medication and lifestyle advice • Serious co-morbidities such as: uncontrolled hypertension, unstable angina or any other major chronic illness • Pregnancy • History of diabetic ketoacidosis • Serious inter-current infections such as: chest infection, skin infection • Elderly patients with any impairment of alertness • Two or more episodes of hypoglycaemia and/or any serious episode of hyperglycaemia during present Ramadhan. Previous Ramadhans are not an issue as the patients control may have been improved since then <p><i>(These patients will be required to offer compensation (fidya), refer to local imam).</i></p> <p>Most patients will insist on fasting, but should only do so if their diabetes is well-controlled.</p>	<p>Should only be undertaken if the diabetes is well-controlled.</p> <p>Patients must maintain their normal diet i.e. low fat and low sugar diet, when breaking the fast and maintain their normal daily activity.</p> <p>Patients must also drink sufficient water in the hours before and after the fasting period to prevent dehydration (<i>please see Diabetes and Ramadhan leaflet</i>).</p> <p>All patients must be counselled on the warning signs of dehydration or hypoglycaemia. If either occurs they should first check their blood glucose, and if it is below 4mmol/L, they must break the fast immediately and take a sugary drink followed by starchy food with a high glycaemic index (GI)</p>
Diabetes Type 2 a) Diet controlled b) Oral medication	<p>a) Diet controlled diabetic patients can fast safely.</p> <p>b) Patients taking oral hypoglycaemic agents should not fast unless their diabetes is well-controlled and have had medical advice on how to adjust the doses of medications that they are on.</p>	
<ul style="list-style-type: none"> ▪ Chronic respiratory disease ▪ COPD ▪ Emphysema ▪ Severe asthma ▪ Bronchitis 	<p>Exempt from fasting (<i>these patients will be required to offer compensation (fidya), refer to local imam</i>), but those who do fast and experience shortness of breath or worsening of breath or have an asthma attack must immediately break the fast and take the required medication or seek medical attention if appropriate.</p>	<p>Unsafe for these patients to fast Inhalers cannot be used during fasting therefore asthmatic patients who are not well controlled on preventative inhalers and who are using relief inhalers more frequently should consider not fasting, as using inhalers will break the fast.</p>
<ul style="list-style-type: none"> ▪ Chronic heart disease ▪ Coronary artery disease ▪ Severe uncontrolled hypertension 	<p>Exempt from fasting (<i>these patients will be required to offer compensation (fidya), refer to local imam</i>), but those who do fast and experience severe illness must immediately break the fast and take the required medication or seek medical attention if appropriate.</p>	<p>Unsafe for these patients to fast In controlled hypertension with no other co-existing cardiovascular disease patients can fast, but must continue all regular medication. It may be a good opportunity to review current treatment and use longer acting alternatives to encourage better compliance.</p>

Disease state	Advice	Safe way to fast
<ul style="list-style-type: none"> ▪ Chronic renal disease ▪ Renal dialysis ▪ Renal transplant ▪ Nephrotic syndrome 	<p>It is not safe to fast if the patient has co-existing disease such as coronary artery disease, severe uncontrolled hypertension or is at risk of dehydration (<i>these patients will be required to offer compensation (fidya), refer to local imam</i>)</p> <p>If dehydration occurs they must break the fast immediately.</p>	<p>If there are no other co-existing diseases or all are controlled the patient can fast if they adhere to their normal diet and receive counselling so they are aware of the signs of dehydration.</p>
<p>Immunocompromised (i.e. taking immunosuppressants such as: <i>steroids, ciclosporin, mycophenolate azathioprine, tacrolimus</i>)</p>	<p>It is safe to fast providing the patient is generally well. Most medications are taken once or twice daily. Doses can be adjusted to suit the meal times i.e. sunset and sunrise meals</p>	<p>The steroid dose must be taken with food and is best taken in the morning (<i>the pre-dawn meal</i>) to mimic the body's normal release.</p> <p>Ensure adequate fluid intake between the fasting periods to prevent dehydration.</p>
<p>HIV/AIDS infection</p>	<p>Someone living with HIV may be taking antiretrovirals. Antiretrovirals need to be taken continuously and at the same time each day as discussed with healthcare professionals.</p> <p>If someone living with HIV and taking antiretrovirals stops taking them without consulting their HIV doctor they could become very unwell.</p> <p>Anyone taking antiretrovirals who wants to change the way they take them needs to speak to their HIV doctor.</p> <p>Those living with HIV should not fast if they are unwell. This is unsafe (<i>these patients will be required to offer compensation (fidya), refer to local imam</i>)</p>	<p>A person living with HIV who wishes to fast should discuss this with their HIV doctor. It may not be possible to fast due to them being unwell or due to their antiretroviral medication.</p>
<p>Aged over 65 years</p>	<p>It is safe to fast providing the patient is of good health generally.</p>	<p>A balanced diet comprising all nutrients. Break the fast with fruits or water. Ensure sufficient water is taken between the fasting periods.</p>
<p>Pregnant and nursing mothers</p>	<p>Exempt from fasting (<i>Can make up the days missed at an alternative time</i>).</p>	
<ul style="list-style-type: none"> ▪ Menstruating women ▪ Post partum bleeding 	<p>Exempt from fasting (<i>Can make up days missed at an alternative time</i>).</p>	
<ul style="list-style-type: none"> ▪ Glaucoma ▪ Eye infection ▪ Hayfever 	<p>Eye drops are permissible (<i>General consensus amongst Muslim scholars</i>).</p>	
<ul style="list-style-type: none"> ▪ Ear infection ▪ Wax removal 	<p>Ear drops are permissible as long as the tympanic membrane is not broken/perforated (Not a general consensus amongst Muslim scholars).</p>	
<ul style="list-style-type: none"> ▪ Nasal congestion ▪ Hay fever 	<p>Nose drops are not permissible (<i>General consensus amongst Muslim scholars</i>)</p>	<p>If twice daily dosing, can use drops/spray at dawn and sunset if appropriate (<i>will depend on the severity of the condition</i>).</p>