

## Medication Recommendations for Ramadan Observers

As healthcare providers, we may be asked for advice from patients, caregivers or other healthcare team members regarding how to address medication taking behaviors safely during Ramadan.

Ramadan, which began on March 1 this year, is a month-long observance practiced by Muslims which involves fasting, worship and feasting, aimed at deepening faith, service to others, and improving personal relationships with God. For the duration of Ramadan, individuals refrain from consuming anything by mouth, including food, water, and medications during the daylight hours. Each day begins with *Suhoor*, a pre-dawn meal consisting of enough food and water to sustain the person for the entire day. At sunset, families break the fast together with a celebratory meal often rich in calories and fluids, called *Iftar*.

It is considered mandatory for all adult Muslims of sound mind and those physically able to tolerate it. While those who generally cannot safely perform fasting, such as elderly or chronically ill (e.g., diabetes) are exempted from fasting, Ramadan is the largest, most important celebration of the Muslim year, akin to the Christmas season for Christians. There is a often strong desire by many to participate in the fast, despite known risks, and some observers may choose not to disclose this to their healthcare providers. It is important for healthcare team members to ask patients if they plan to honor Ramadan by fasting.

Up to 86% of Muslim patients with type 2 diabetes will fast, and 43% of Muslim patients with type 1 diabetes will fast. [Fasting can be done safely, even for insulin users](#), but it is important to recognize risk for hypoglycemia and ketoacidosis. Therefore, patients and providers are urged to work closely together to minimize risk.

Patients with hypertension should be educated to maintain proper hydration by drinking enough fluids with Suhoor and Iftar, stay out of the heat, and monitor for signs of hypotension during the day.

The following recommendations are offered to observers of Ramadan to manage medications safely:

- Make sure the patient can safely navigate throughout the daylight hours without medication. (This becomes especially challenging when Ramadan falls during the summer months, when daylight lasts longer). If not, the patient can discuss alternative methods of honoring Ramadan with their spiritual leader, called an Imam.
- Switch to sustained-release formulations or longer-acting medications which can be given once or twice daily (at dawn and sunset).
- For acute conditions like infections or acute pain, choose once daily antibiotics or anti-inflammatories.
- Alternative dosage forms, like topical, transdermal, injectable, inhaled medication, rectal dosage forms, or ophthalmic/otic preparations are often considered acceptable for use during fasting hours.

References:

<https://sop.washington.edu/wp-content/uploads/Ramadan-and-Medications.pdf>. Accessed March 10, 2025

[https://www.diabetesresearchclinicalpractice.com/article/S0168-8227\(21\)00545-3/fulltext](https://www.diabetesresearchclinicalpractice.com/article/S0168-8227(21)00545-3/fulltext). Accessed March 12, 2025.