Ramadan: a different side of the emergencies?

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Why fast?
Ramadan is the fasting month of the Muslim calendar. Fasting in Ramadan is one of the five pillars of Islam. During this holy month, healthy adult Muslims are required to abstain eating, drinking and from any sexual activity between dawn to sunset, in an effort to achieve better self control. It is well established that the incidence of some diseases requiring emergency visit, increases dramatically during this sacred month.

Which diseases increase during the Ramadan?
Our emergency service, can receive about 500 patients on a daily basis during this month (in other month the emergency admission range between 250 and 600 patient/day). The most frequent emergencies ever seen are gastro-duodenal ulcer and its complications such as: hemorrhage and perforation. This is due to fasting, stress, variation of circadian rhythm which can worsen untreated or insufficiently treated ulcers. In addition, several chronic pathologies can be seen in higher levels, especially diabetes mellitus complicated by acidocetosis or hypoglycemia in patients treated with insulin shots. Despite using inhaled medications do not nullify fasting, most of severe asthma exacerbations requiring intensive care admission, are due to stopping these medications during daylight. Cardiac and vascular problems are also more frequent during this month, especially severe hypertension, thromboarteriopathy obliterans and acute ischemia. Such occurrences can be explained by many factors; amongst them, the diet’s change. Indeed, sweets and fatty foods are more consummated during Ramadan. In addition, people are more prone to having health problems because they do not take their medications during the day in a fear to break their fast. Consequently, they either take them at daybreak or at sunset, which could worsen their disease.

Why should a patient not fast?
We should note that The Islamic faith allows exemptions from fasting during Ramadan for those who are sick, including those requiring drug treatment and even the travellers if they are healthy. However, many people do not accept these exemptions and prefer to fast. Moslems with chronic illness should be aware that they put themselves at risk by abstaining from their drugs for long periods. Therefore, appropriate advice from doctors during Ramadan may encourage patients to continue their treatments and prevent major health issues. Also, local religious authority figures can and should play a major role in convincing sick people not to fast.

Which disease decrease during the Ramadan?
The number of emergencies due to aggressions is reduced because of a decrease in crime during this holy month. Accidents related to alcohol intake (trauma, aggression, car accidents…) are significantly reduced during Ramadan. Because, most of the traumas that we see in the ER are due to alcohol intake; and since all alcohol stores are required, by law, to close during this month. Laverick et al. have proven that decreasing alcohol consumption reduces the incidence of maxillofacial trauma. El-Maaytah et al. demonstrated that the “24 hour alcohol licensing law” reduced the number of head and neck injuries following alcohol associated assaults at the Accident and Emergency department in London. Therefore, we think that religious recommendations combined with authority regulations can and are in fact contributing in reducing all traumas due to alcohol abuse during Ramadan. Even, heavy smokers stop smoking during this month, and this can be a first step to quit this addicting habit. In our opinion, Ramadan seems to be the right time to convince people to change their alcoholic and tobacco habits.

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Ramadan an occasion to educate patients: Educating patients who suffer from chronic diseases on how to take their medications during the month of Ramadan is a good way to ensure them healthy fasting. Also, several campaigns should be conducted to inform people about the dangers of imbalanced diet. Last but not least, informing people about the dangers of smoking and other addiciting habits and helping them to quit during this month should be one of our concerns.

Further studies and measures are being planned in our emergency department in order to deal with the issues mentioned above during the holy month of Ramadan. These measures should ensure healthy habits and prevent serious health problems that usually occur in Ramadan.

References