

## RAMADAN IS WELCOME

Pr. Abdelmjid Chraibi  
Director of the Pedagogic & Research Unit - Endocrinology  
Faculty of Medicine & Pharmacy, Mohammed the Vth University, Rabat, Morocco.

---

### Corresponding author:

Pr. Abdelmjid Chraibi  
Director of the Pedagogic & Research Unit - Endocrinology  
Faculty of Medicine & Pharmacy, Mohammed the Vth University, Rabat, Morocco.

**Copyright© 2012- 2015 Pr. Abdelmjid Chraibi.** This is an open access article published under **Creative Commons Attribution-Non Commercial-No Derivs 4.0 International Public License (CC BY-NC-ND)**. This license allows others to download the articles and share them with others as long as they credit you, but they can't change them in any way or use them commercially.

---

Ramadan is the ninth month of the Islamic lunar calendar (Hijri), the duration of the fast in Morocco this year is 16 to 17 hours. The Iftaar (Breakfast) is generally abundant in sweet and fried dishes and constitutes in Morocco 84% of the daily caloric intake on average. The number of meals per day is generally reduced to two, however another meal before bed times is common, and consumption of juice and sweets is frequent between meals. Consequently, a reduction in duration of sleep has been shown. Physical activity is not recommended when fasting because of the inability to refuel or rehydrate. Several studies have reported changes in body composition due to energy imbalance during Ramadan, but the results are inconsistent and largely lifestyle-dependent. Low blood glucose levels and accumulated sleep loss can both contribute to reductions in certain cognitive functions and overall mood.

Ramadan fasting could not induce any harmful effect in healthy subjects; life conditions related to the practice of fasting during Ramadan are in the origin of some modifications of the physiologic and metabolic mechanisms. These modifications are rendered by the fluctuations of weak amplitudes in biological parameters; we will talk about the moving of reference values within the usual interval. A sound body develops compensative reactions in order to prevent the variations and thus to preserve the stability of the classified constituents. However, Ramadan fasting can induce several complications in patients with an increased morbidity.

Islamic rules allow such patients not to fast, although they usually insist on doing so. Fasting diabetes patients will have to endure very long days until sunset and an increased risk of dehydration, hypo and hyperglycemia. Health professionals can play an important role in making their patients aware of the risks and providing guidelines to minimize any negative effects that might result from the fasting.

The guidelines about Ramadan fasting and diseases are not only rare but also not powerful because they express experts opinions more than study results with evidence based medicine. In our opinion, ten parameters have to be respected in the profile of enrolled subjects in such studies: age, gender, ethnicity, number and timing of meals, quantity and quality of food, duration and timing of sleep, physical activity (Taraweeh), addictions (tobacco, alcohol, coffee, laptop, phone...), nature and rhythm of job, morbidity. For the methodology, our ten parameters are: fasting duration, the climate (hydration), the size of the group of patients, the study design (randomization, observational study or Cohort study), whether the study is mono or multi-centric, the timing and period of taking blood samples, the methods of analysis (central laboratory) and the existence of structured education.

Finally, our global propositions are also ten recommendations about Ramadan and health: the creation of an international committee, an E-Library, ideal design projects, multi-centric studies, analysis of psychological, social and religious aspects without forgetting the role of patients, organization of annual meetings about Ramadan and health, publications and finally collaboration with preachers, pharmaceutical firms and mass Media.