

About Hunger Strikes

- Hunger strikes are a form of protest designed to raise awareness of a particular grievance.
- There are number of variances in types of hunger striking, but all include some form of 'food refusal.'
- A 'dry' hunger strike in which the striker refuses both food and water is rare as it can quickly lead to death and does not allow the striker to achieve his goals.
- 'Total fasting' usually means that the striker is only consuming water, but this may include the intake of minerals, sugar or vitamins.
- Other forms of hunger striking include the consumption of carbohydrates, minerals, vitamins or other supplements in varying quantities.
- Any type of hunger strike can be detrimental to one's health. The health risk to a hunger striker depends on the person's age, pre-existing medical conditions, water and other intake, amount of weight lost, and duration of the strike.
- Any underlying health problems are likely to be made worse by fasting, and some underlying conditions such as diabetes, kidney disease, cardiovascular disease, or peptic ulcer disease, may make fasting very dangerous, even life threatening, very quickly.

The Expected Medical Sequence Of Symptoms:

(the timeline is based on those ingesting only water; further nourishment prolongs the sequence)

1. In the first 3-7 days, the healthy adult hunger striker will feel reasonably normal, as long as adequate water (2 liters) is ingested. Feelings of hunger abate after the second or third day.
2. Shortly after, the striker will begin to experience symptoms of dizziness, fatigue and weakness when it might be difficult to stand.
3. After the first few weeks, the hunger striker may develop a sensation of feeling cold, and abdominal pain is common.
4. During the latter part of the month, mental lethargy and irritability may develop.
5. By the 4th week, hospitalization may be necessary.
6. By 4-5 weeks, if the hunger striker is not taking vitamins, double vision, severe vertigo, vomiting and difficulty swallowing will occur due to nerve damage.
7. From about 40 days onward, progressive confusion, incoherence, loss of hearing, blindness and bleeding may occur. Death eventually ensues from cardiovascular collapse and heart arrhythmias at between 55 and 75 days into the hunger strike.
8. Other complications of malnutrition include kidney, liver, immune, and cardiac function. Wound healing is impaired and susceptibility to infection is increased throughout the duration of the hunger strike.

Recommendations:

1. All hunger strikers should be under the care of a trusted physician who has the clinical skills and authority to direct medical care.
2. Children and adolescents are especially vulnerable to the complications of fasting AND SHOULD BE STRONGLY DISCOURAGED FROM HUNGER STRIKING THEMSELVES. In addition, malnutrition can interfere with bone development and growth and can irreversibly impair neurological development, which includes brain damage. In general, children and adolescents do not have the decision making ability to evaluate and process the consequences of a hunger strike, and thus cannot make an informed decision to strike.
3. Hunger strikers should be encouraged to consume approximately 2 liters of water a day in addition to small amounts of carbohydrates and vitamins to prevent neurological damage.
4. When starting to eat after fasting, it must be done slowly to avoid what is called the "re-feeding syndrome." Re-feeding after a period of fasting can precipitate a number of potentially lethal metabolic and physiologic complications caused by electrolyte and fluid shifts resulting in cardiac, respiratory, and neuromuscular abnormalities. Thus, when the hunger striker begins to eat after a period of prolonged fasting, he should be under a physician's supervision and monitoring.