

Practical Notes for People on Hunger Strike

By Dr. Frank Arnold

1. It is not the job of a doctor to tell you to continue or stop your protest. It is their job to explain, in ways you will understand, the consequences of your decisions.
2. It is very rapidly dangerous to refuse or fail to drink fluids (1.6 L/day minimum). Without fluids you will go into kidney failure within a few days. In its early stages, this is reversible by taking fluids again, although - if you can not keep them down - this may need to be via a drip. Even people who do drink while refusing food lose the sensation of thirst after a variable period (usually some time after two weeks). It is therefore essential to measure fluid intake and urine output. This can be done with two jugs marked on the side for volume, one clean (for water) and one dirty (for urine).
3. Some people with ongoing medical problems are at special risk from hunger strikes/ fluid refusal and will get into danger more rapidly than they would if they were in perfect health to start. These include, but are not limited to those with diabetes, kidney or heart problems. (A careful medical history is essential...)
4. If you are already on medication, whether to continue to take it is a complicated decision and depends upon the particular drug and your past medical history, and needs to be decided on a case by case basis.
5. Most hunger strikers will get serious abdominal pain after a while. Some pain killers (especially ibuprofen and other NSAIDs) can be actively dangerous because they increase the risk of bleeding from the gut.
6. It is not possible to predict how long it takes to suffer irreversible organ damage or death. The shortest time to death that I know of was 21 days. the longest survival without any food but with careful fluid management, 70 days; that patient made a recovery but has lasting neurological [brain] damage.
7. It is probably in the interests of your health to cooperate with certain observations and tests. (These include weight, pulse and blood pressure - standing and lying - FBC, U+E, LFTs and microbiology.) You are entitled to know the results of these tests and have their implications explained to you. A normal capillary blood sugar does not rule out danger, especially if you are drinking sugary fluids.
8. It is in your interests to decide and make clear under what conditions you are prepared to give up your current protest action and to discuss these decisions with a legal representative.
9. If you agree to re-feed after a hunger strike of more than 14 days or 15% loss of body weight, you should be seen by a specialist, with rapid access to tests and their results. It is often dangerous to begin re-feed unless admitted to hospital.
10. There is no requirement to sign an advance directive prohibiting further treatment. You can do so, or take back this consent at any time.

Statement: The attached advice to hunger strikers was developed to provide factual information to people refusing food in protest against what they see as a denial of access to justice. It has been reviewed by international medical and legal experts.

Dr. Frank Arnold takes final and sole personal responsibility for the contents of this advice. He can be contacted via Medact.

E-mail: office@medact.org / **Tel.:** +44 (0)20 732 447 39