Ramadan and health-related applications for mobiles and smartphones: Ramadan 2.0 or the digital ramadan as a new emerging trend

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Ramadan fasting represents one of the five pillars of the Islam creed. Even though patients are exempted from observing this religious duty, they may be eager to take part into this religious ceremony, fully living all its implications. Here, we review the extant literature on the topic of e-health and in particular the new concept of Islamic e-health introducing the important theme of the fasting in the digital era (Ramadan 2.0). Applications for mobiles and smart-phones provide a wide range of functions and services for Muslims: Customers can read, listen and memorize the Qu'ran and are offered the possibilities to bookmark the verses and the various surat (Qu'ran chapters). They can know exact prayer times together with the Qibla direction can locate nearby mosques and also use a personalized Islamic events calendar. Applications can even mimic and reproduce the rhythmic clicking of the prayer beads as well as calculate the zakat. Actually, many applications specifically designed for Ramadan exist. Some help diabetic Muslims to better manage their fasting, others suggest nutritional tips or physical exercises in order to maintain the weight and have a healthy lifestyle during the fasting month. In conclusion, Islamic e-health is an emerging trend and represents an incredible opportunity that can be exploited for educating diabetic patients willing to fast during the Ramadan month as well as treating patients suffering from other diseases or providing healthy subjects with nutritional recommendations and suggestions. However, health-care providers should be aware of this phenomenon, monitor the reliability of information provided by the applications and eventually correct misleading material, informing their patients. Further studies in the field are urgently needed including randomized controlled trials to test whether applications are effective in assisting patients from remote during the Ramadan fasting.

13 years retrospective review of spectrum of inborn errors of metabolism presenting in a tertiary center with identification of 37 novel mutations

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Background: Inborn errors of metabolism (IEM) are individually rare; however, it is collectively common. Over 600 human diseases due to inborn errors of metabolism are now recognized, and this number is constantly increasing as new concepts and techniques become available for identifying biochemical phenotypes.

Aim of the study: To identify the type and distribution of IEM in patients presenting to a tertiary care center in Saudi Arabia.

Method: We conducted a retrospective review of children diagnosed with IEM presenting to the Pediatric Department of King Abdul-Aziz Medical City in Riyadh, Saudi Arabia over a 13-year interval.

Results: Over 13-year period of this retrospective cohort, the total numbers of live births reached 110601 births. 187 patients were diagnosed with IEM representing prevalence of 169 in 100000 births (1:591). 121 patients (64.7%) identified with small molecule diseases and 66 (35.3%) with large molecule diseases. Organic acidemias were the most common small molecules IEM while lysosomal storage disorders (LSD) were the most common large molecule diseases. Shingolipidosis were the most common LSD.

Conclusion: Our study confirm the previous studies of high rate of IEM in Saudi Arabia and urge the health care strategist in the country to come with a long term strategic plan for the prevention of such disorders including IEM national registry and high school carrier screening program.