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# Can You Take Medication While

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## KEY POINTS

- A 2026 Rutgers study found that older women who narrowed their daily eating window to 8 to 9 hours scored better on some planning and problem-solving tests than women who ate across a typical 12-hour window.
- The findings are preliminary. The study was small, presented at a conference, and has not yet been peer-reviewed.
- Several common medications, including thyroid, diabetes, and some blood pressure and heart drugs, are timed around meals because of how they're absorbed or how they act in the body.
- Before narrowing your eating window, check it against your full medication list with your prescriber or pharmacist, and adjust from there.

Intermittent fasting, or time-restricted eating, is back in the news. In a new Rutgers University study, older women who narrowed their eating to about 8 to 9 hours a day scored better on some thinking and problem-solving tests than women who ate across a typical 12-hour eating window.

Whether time-restricted eating is safe alongside a medication schedule depends on the specific drugs involved. Some need a consistent empty-stomach timing window. Others, like insulin or certain diabetes pills, are dosed around expected meals and carry real risk if a meal shifts. Anyone on a fixed medication schedule should check their full drug list against their planned eating window with a prescriber or pharmacist before changing anything.

**Thinking about trying a shorter eating window?** A Solace advocate can check it against your full medication list before you change anything. [Learn more →](#)

## What the Rutgers study found

Researchers at Rutgers University enrolled 47 women, ages 50 to 79, all with overweight or obesity, in a six-month pilot study. Every participant was counseled to cut about 500 calories a day. One group also narrowed their eating to a window averaging 8.2 hours, typically 10 a.m. to 6 p.m., and stopped eating at least 4 hours before bed. The comparison group ate across a window of about 12.3

hours. Both groups lost a similar amount of weight, around 15 pounds.

Only the shorter-window group showed a measurable improvement in spatial planning and problem-solving. They also made fewer mistakes on memory and learning tests, though that difference was small enough that it “did not reach statistical significance” and could have happened by chance. Because both groups lost about the same weight, the researchers think the eating window itself, not just the weight loss, may explain the difference.

The findings were presented at NUTRITION 2026, the American Society for Nutrition's annual meeting, held July 25 to 28, 2026, in National Harbor, Maryland. They have not yet been published in a peer-reviewed journal, and the researchers themselves describe the results as preliminary. If you're curious about trying intermittent fasting for weight loss or brain performance, this is encouraging early evidence. But is it possible in tandem with daily medication?

## "Does it work" isn't the only question worth asking

Most coverage of this study, and of time-restricted eating in general, stops at whether it works. For someone who takes daily medication, that's an incomplete answer.

Many of the most common medications for chronic conditions, including thyroid, diabetes, and certain blood pressure and heart drugs, are timed around meals because of how they're absorbed or how they act on

blood sugar. Narrowing your eating window changes when your meals happen. For some medications, that also changes whether the dose works the way it's supposed to. Let's get into it.

## A few medications where meal timing matters

The medications mentioned below are only a few examples, **not** a complete list. Confirm the specifics of your own prescriptions with your prescriber or pharmacist.

- **Thyroid medication, such as levothyroxine.** Levothyroxine is typically taken on an empty stomach, 30 to 60 minutes before the day's first food, so the body absorbs it consistently. A shorter eating window doesn't rule this out. But if the new window pushes your first meal later, the dose may need to move too to keep that necessary gap.
- **Diabetes medications, including insulin, sulfonylureas, and metformin.** This category calls for the most caution. Insulin and sulfonylureas are dosed against an expected meal, so delaying or skipping that meal on a fixed dose can cause hypoglycemia, or dangerously low blood sugar.
- **Blood pressure and heart medications.** Many of these can be taken with or without food, but some are sensitive to meal timing, and a few interact with grapefruit. This one is worth a direct check with your pharmacist rather than an assumption either way.
- **NSAIDs, corticosteroids, and other food-dependent medications.** These are often taken with food specifically to protect the stomach. Fewer meals in

a day can mean fewer built-in chances to take them as directed.

None of this takes intermittent fasting off the table. It does mean the eating window and the medication schedule need to be checked against each other.

**A Solace advocate can run this check for you.**

Your advocate can build one complete medication list, bring the timing questions to your prescriber or pharmacist, and follow-up on every answer before your eating window changes.

Find an advocate →

## How to try intermittent fasting safely

If you want to try narrowing your eating window, here's how to know before you start if it will collide with your medications:

1. **Start with your full medication list.** Include prescriptions, over-the-counter medications, and supplements, not just the one tied to your main condition.
2. **Flag anything timed around food,** using the categories above as a starting checklist.
3. **Talk to your prescriber or pharmacist before changing anything,** especially if you take insulin, a sulfonylurea, or any medication with a narrow safety margin.
4. **If you get the go-ahead, start wider and narrow gradually.** A 10-hour window is a reasonable first step, rather than jumping straight to 8 hours.

**5. Set a real check-in a few weeks out** to see how your eating pattern and your medication schedule are working together.

This is the kind of legwork a Solace advocate takes on. A patient advocate is an experienced healthcare professional who will understand and support your goals, gather your complete medication list, bring it to your prescriber or pharmacist with the timing questions attached, and follow up on the answers, so the checking happens before your eating window changes.

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## FAQs

### **Is time-restricted eating safe if I take medication on a schedule?**

It depends on the medication and the eating window. Some drugs, like levothyroxine, need to be taken on an empty stomach at a consistent time. Others, like insulin or sulfonylureas, are dosed against expected meals and carry a real risk if a meal is delayed. Check your specific medications with your prescriber or pharmacist before narrowing your eating window.

### **What medications can you take while fasting?**

Most standard pills and capsules taken with water don't break a fast. Anything meant to be taken with food, or dosed against an expected meal, needs to stay aligned with your eating window rather than your fasting window.

### **Do medications break intermittent fasting?**

Swallowing a pill with water generally doesn't break a

fast. What can complicate things is timing, not the fast itself. Some medications need to be taken with food, which means they have to happen inside your eating window regardless of how strict your fast is otherwise.

### **Can intermittent fasting help with dementia?**

Not conclusively. A small 2026 Rutgers trial found that older women with a shorter eating window scored better on some cognitive tests than a comparison group, but the study was preliminary, and hasn't been peer-reviewed.

### **Does intermittent fasting help with memory?**

The same 2026 Rutgers trial found that the shorter-eating-window group made somewhat fewer mistakes on memory and learning tests, though that result was small enough that it could have happened by chance. The clearer finding was in planning and problem-solving.

### **How long should you fast for brain health?**

The 2026 Rutgers study didn't test one fasting duration against another. It compared an eating window of about 8 to 9 hours to a typical 12-hour window and found the shorter window linked to better results. That's a starting reference point, not a universal target.

## **REFERENCES**



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*Eligibility varies by plan. Advocates do not provide medical or legal advice or services. Must be 18 years or older.*

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