8. Medical theory in the Prophet's medicine

The established medical theory in medieval Muslim society was the Graeco-Islamic theory that was based on the ideas of Hippocrates and Galen. This theory was accepted by the authors of the Prophet's medicine, who acknowledged the position of Hippocrates and Galen as medical authorities. al-Dhahabī praised Hippocrates as the master of medicine and Galen as his successor in the position of authority. Ibn al-Qayyim and Ibn Muflih did not give Hippocrates a place above all others, but they both agreed that Hippocrates' knowledge of medicine had been as important for his people, the Greeks, as al-Ḥārith ibn Kalada's had been for the Arabs. 102

8.1. Physiology

The basis of Graeco-Islamic physiology was formed by the so-called seven naturals. The first of these naturals were the elements $(ark\bar{a}n)$: fire, air, water and earth. The second were the temperaments $(miz\bar{a}j)$, which could be divided into nine types: one evenly balanced, in which the elements were represented in equal proportions; four simple temperament types, in which one element dominated (hot, wet, dry, cold); and four composite temperaments, in which two of the elements had a dominant position (hot-dry, hot-wet, cold-dry and cold-wet). The third group of the naturals consisted of the humours $(akhl\bar{a}t)$, which were four: blood (wet-hot), phlegm (wet-cold), yellow bile (hot-dry) and black bile (cold-dry).

The basic organs $(a'd\bar{a}')$ were the fourth group. The fifth group of the naturals consisted of the pneumata, the spirits $(arw\bar{a}h)$ divided into the natural, animal and psychic pneumata. The sixth were the faculties $(quw\bar{a})$ and the seventh were the actions $(af'\bar{a}l)$. In the Graeco-Islamic theory the pneumata were considered as the servants of the faculties, whereas the faculties were the origin of the actions. The actions were the effect of the faculties. Owing to this interdependence, the faculties and actions were like the pneumata divided into three types: natural, animal and psychic. Among the many natural faculties were the retentive faculty and the excretory faculty. The effects of these faculties were the retentive action and the excretory action: the retention of nutrition in the organ and the excretion of waste matter. 303

³⁰¹ DH, p. 157.

³⁰² IQ, p. 93. IM, vol. 2, p. 365.

³⁰³ Klein-Franke 1982, pp. 79f and Ullmann 1978, p. 61.

Of the three authors of the Prophet's medicine only al-Dhahabī systematically presented all of the seven groups of naturals. The description was cursory without any detailed information on the various naturals. He merely listed the groups adding hardly any words of explanation or comment. Although superficial, his presentation shows that he accepted the basic principles of the Graeco-Islamic medical theory. It is worth noting that he did not make any references to the Koran or Sunna to find support for the physiological system he presented. This indicates that the Graeco-Islamic theory was well established and generally accepted even among the religious scholars. al-Dhahabī obviously considered the theory to be correct and found nothing reprehensible in it. Therefore there was no need for a theological discussion.

al-Dhahabī's presentation of the temperaments included four hadiths, but they were not used to defend or refute the medical theory, rather to praise the Prophet. al-Dhahabī expressed his agreement with the Galenic view that man was temperamentally the most balanced among the animate things. He then expanded on this by stating that the most balanced among the men were the believers, and among the believers the prophets (anbiyā') and among the prophets the messengers (rusul) and among the messengers the ones with determination and among these the Prophet Muḥammad had had the most balanced temperament. The hadiths that al-Dhahabī quoted witnessed for the Prophet's balanced character. They reported that he had not angered easily but had remained patient and benevolent. The hadiths showed that the Prophet had possessed the virtues considered exemplary by the medical authorities.³⁰⁵

The theory of naturals contained one detail which was a possible source of disagreement between the Koran and the medical theory. The fourth group of the naturals consisted of the basic organs. The problematic issue was the origin of these organs. According to the Graeco-Islamic view the uterine membranes originated from the female semen, whereas the blood vessels, nerves, tendons, bones and cartilage originated from the male sperm. Muscles, liver and the other viscera were generated later directly from blood. The Koranic view is expressed in the verses: «We created man of an extraction of clay, then We set him, a drop, in a receptacle secure, then We created of the drop a clot, then We created of the clot a tissue, then We created of the tissue bones, then We garmented the bones in flesh; thereafter We produced him as another creature» (23:12-14). These verses were understood by many commentators to refer not to the creation of Adam but to the creation of the sons of Adam. Therefore they interpreted the verses as explaining the development of the foetus, where the extract of clay signified semen and the secure receptacle where the drop of semen was placed was the uterus. 307

In his list of naturals al-Dhahabī only mentioned that the organs originated in semen, 308 which was an opinion in agreement with the Koran and largely also with

³⁰⁴ DH, pp. 17-19.

³⁰⁵ DH, pp. 17f. Galen's view is stated in Dols 1984, p. 13.

³⁰⁶ Siegel 1968, pp. 229f.

³⁰⁷ al-Ţabarī, Jāmi' al-bayān, vol. 18, pp. 7f.

³⁰⁸ DH, p. 19.

medical theory. He returned to the issue later in a chapter on foetal development.³⁰⁹ In that chapter, al-Dhahabī first presented the Koranic view which, according to the traditional interpretation, gave the woman the role of vessel in producing the foetus. In contrast to the Graeco-Islamic theory, the Koran did not seem to recognize the concept of female semen. However, there were some hadiths where a female fluid was mentioned. al-Dhahabī quoted the tradition: "The fluid of the man is white and viscous and the fluid of woman is thin and yellow. Whichever of the two excels or precedes the other determines the child's resemblance."310 The existence of this type of tradition enabled al-Dhahabī to accept the existence of female semen and by quoting them as explanations to the word 'drop' in the verse above, he implied that the drop consisted not only of male sperm but also of female semen. He further claimed that "from the fluid of the man $(m\bar{a})$ al-rajul) are created the basic organs and the bones and from the fluid of the woman $(m\bar{a}, al-mar)$ is created the flesh". 311 This was not identical with the Galenic view in detail, but it contained the Graeco-Islamic idea of female semen. al-Dhahabī accepted the traditional interpretation of 'the drop' as semen (minā), but then indicated that the semen could be seen as a mixture of female and male fluids. This interpretation brought the Koranic view closer to the medical view.

The two other authors, Ibn al-Qayyim and Ibn Muflih did not present the physiological theory in a systematic manner. The only group of naturals which Ibn Muflih presented in any detail were the temperaments, how a temperament could be determined and what factors determine an individual's temperament. His presentation complied fully with the Graeco-Islamic theory. Ibn al-Qayyim discussed the theory of elements—particularly fire—in detail, because it had some theological significance. Other groups of naturals, i.e. humours, pneumata and faculties, he only mentioned in passing while discussing the general aspects of physical diseases. The casual treatment both Ibn Muflih and Ibn al-Qayyim gave to physiology confirms the impression gained from al-Dhahabī's presentation that Graeco-Islamic physiological theory was well established and considered correct also by the scholars of the religious sciences.

8.1.1. Ibn al-Qayyim's view of fire as an element

As mentioned above, the only physiological subject that Ibn al-Qayyim treated more thoroughly was the question of elements. According to the Graeco-Islamic theory the human being had four components: earth, air, water and fire. The problem Ibn al-

³⁰⁹ DH, pp. 213-216.

³¹⁰ DH, p. 215.

³¹¹ DH, p. 215. This statement is not a tradition reported by Muslim as Elgood translated (Elgood 1962, p. 166). The words "It is reported by Muslim" refer backwards to the tradition about the child taking after his father or mother presented in Muslim, al-Şaḥīh, vol. 1, p. 133.

³¹² IM, vol. 2, p. 475.

³¹³ IQ, pp. 4f.

Qayyim faced was that the idea of four elements did not fully comply with the information given in the Koran. He could find three of the elements mentioned in the Koran: in some verses it was said that God had created man from water, in some that He had created man from earth, in some that He had created man from clay, a combination of earth and air. There was not a single verse in the Koran confirming that God had created man from fire. Instead, God had made fire a characteristic of the Devil. This made it impossible for Ibn al-Qayyim to accept fire as an element of human beings. In his opinion the ones who maintained that fire was an element in man denied God's own words on His creation and therefore could not be considered believers. This he indicated by calling them the companions of fire (aṣḥāb al-nār), a designation that connotes that they were infidels, who will finally be banished to hell.³¹⁴

Ibn al-Qayyim did not only want to refute the idea that man was partly made of fire, but he wanted to show that it could not be an element of any part of God's creation. He entered a long exposition of some of the problems which would arise if fire was accepted as an element in animate or inanimate things. 315 First there was the question of the origin of fire. Ibn al-Qayyim stated that there were two opinions as to how fire had become an element. One of them was the assumption that fire had descended from the ether and had then mixed with earth and water. According to the other opinion fire had developed from air, earth and water. He refuted both of these views as improbable: fire was by nature ascending and therefore only exertion of force could have made it descend. Moreover, when descending to our world, the fire particles should have gone through the extremely cold sphere, where they would have been extinguished. Here Ibn al-Qayyim obviously referred to the cosmological view according to which the sublunary world was divided into four layers. One of these layers consisted of pure cold air and this was presumably Ibn al-Qayyim's extremely cold sphere. Above these layers was the sphere of fire and if the fire had descended to the earth it would have passed the layer of cold air.316

The solution that fire had developed from the other elements was in his opinion equally unlikely, because how could air, earth or water, which did not individually or in compounds contain fire, change into fire? A further problem was that if fire retained its essential characteristics in combinations, as was—according to Ibn al-Qayyim—the opinion of the majority of doctors, how was it then possible that fire particles were not extinguished in liquids. Ibn al-Qayyim illustrated the problem by taking the substance of old wine as an example. Old wine was generally considered to have an extremely hot nature. If its hotness was caused by fire, how could it be that the fire had not been extinguished by the watery components?

Although he refuted fire as an element, he did not deny the existence of hotness and heat in the body. In his opinion this heat did not have to be caused by fire: "It can

³¹⁴ IQ, pp. 15f.

³¹⁵ IQ, pp. 13-17.

³¹⁶ Nasr 1978, pp. 241f: Nasr presents this cosmological view of Ibn Sīnā, and it seems to form the background to Ibn al-Qayyim's text.

be said that every fire is a heater, but this statement cannot be completely inverted [i.e. every heater is fire], but its true inversion is: a heater can be fire."³¹⁷ His opposition to Graeco-Islamic physiology was confined to the rejection of fire as an element of others than the Devil. He did not doubt that the elements earth, air and water existed as components of man, because he could find this confirmed in the Koran. Neither did he hesitate to admit the correctness of the other aspects of the humoral theory, even the hot temperament was acceptable to him. Therefore, because the question of the original elements was more a theoretical than a practical issue, his rejection of fire did not prevent him from following the humoral theory in the diagnosis and treatment of illnesses.

8.2. Aetiology

Ibn al-Qayyim, al-Dhahabī and Ibn Mufliḥ agreed that illnesses came from God, but they did not discuss in detail why He sent them to people. They did, however, express some opinions on the matter while discussing various illnesses. They considered that illnesses were not God's punishment to the believers, 318 but God could use illnesses to punish other peoples. Ibn al-Qayyim and al-Dhahabī expressed this view by quoting the Prophet's words that God had sent plague as a punishment (rujz) to the Israelites and to the Arabs in pre-Islamic times. 319 Ibn Mufliḥ quoted another tradition according to which the Prophet had said:

The plague is a torment (${}^{c}adh\bar{a}b$) which God sends to whom He wants, and He made it a mercy (rahma) to the believers. Only for the reward of martyrdom is it demanded that anyone in whose country there is a plague, remains there patiently and is content with the knowledge that nothing befalls him except what God has prescribed for him. 320

³¹⁷ IQ, p. 17.

This seems to be contradicted by Elgood's translation of a sentence in al-Dhahabī's text. Elgood translated: "It [disease] originates from want or misdeed or from misfortune" (Elgood 1962, p. 52). In the place of this sentence DH has "wa-kull marad lahu ibtidā' fa-yazīdu (?) wa-inḥiṭāt wa-intihā'" (DH, p. 21). The text ascribed to al-Baghdādī gives the same wording as al-Dhahabī except that the unlikely verbal form fa-yazīdu is replaced by wa-tazāyud (increase) (al-Baghdādī, al-Tibb min al-kitāb wal-sunna, p. 9). The sentence should be translated: "Each illness has a beginning, an increase, a decline and an end." I have not found in al-Dhahabī's book any other indication that he considered illnesses as punishments for misdeeds, I therefore believe that Elgood's version is faulty due to errors in the manuscript he used. It seems to be a general view in Islam that illnesses are not considered punishments. Illnesses do not indicate God's anger or His desire to punish (al-Khaṭīb 1985, p. 22). Exception to this was the attitude of some theologians towards plague, e.g. Ibn al-Wardī and Ibn Abī Ḥajala believed that the plague was God's punishment for sins (Dols 1977, p. 114).

³¹⁹ IQ, p. 28 and DH, p. 187.

³²⁰ IM, vol. 3, p. 386. The tradition is also quoted in DH, p. 188.

The idea of the plague as a cause of martyrdom was extended to other severe diseases such as pleurisy and intestinal ailments.³²¹ The reason why these diseases were considered as martyrdom was given by Ibn al-Qayyim to be the fact that no cure was known for them. These diseases were trials sent by God, the believer did not have any part in their occurrence.³²²

Illnesses could further be a guidance or a warning given by God. This was the way Ibn al-Qayyim and Ibn Mufliḥ interpreted the words of the Prophet: "The fever is a breath of hell". God had created fever in order to give a foretaste of hell and to warn the soul of the strength of torment in it. 323 Illnesses could also be blessings in disguise, because they atoned for sins. The Prophet forbade the cursing of fever and said: "Fever removes sins like fire removes dross from iron". 324 Only if the soul was too corrupt, given over to what God had forbidden, could it not be purified by fever. 325

By quoting the traditions that defined illnesses as trials sent by God, the authors wanted to show that illnesses had positive sides, which gave a meaning to suffering. Illnesses for which no cure was known were a martyrdom, whereas the curable illnesses were incitements to lead a better life. According to Ibn al-Qayyim, the fever and the treatment formed a positive combination. During the treatment the patient was instructed to reject bad food and to eat instead wholesome food and medicaments. This purified his body of bad substances, whereas the fever purified the soul from sins. 326

God was seen as the ultimate cause of illnesses. However, God did not create the illness directly, but used secondary causes.³²⁷ These were the physical causes of illnesses. Similarly God was also seen as the actual provider of health, but also in giving health God used intermediary causes, i.e. medicaments. Therefore it was necessary to know the physical causes of illnesses so that the correct medication could be chosen.

The authors of the Prophet's medicine agreed with the Graeco-Islamic views on the physical aspects of illnesses. In the Galenic system illnesses were seen as conditions of humoral imbalance, which was caused by either qualitative or quantitative changes in the humours. A qualitative change meant that the humours became putrid, whereas the quantitative change meant that one of the humours increased in quantity and became dominant. These qualitative and quantitative changes were mentioned and very briefly explained by Ibn al-Qayyim and Ibn Muflih. 328

al-Dhahabī listed six causes for illnesses: (1) the surrounding air, (2) food and

³²¹ DH, p. 189 and IQ, p. 214.

³²² IQ, p. 214.

³²³ IQ, p. 21. IM, vol. 3, p. 120. The belief that illnesses were God's warnings could explain the renewed enforcements of Islamic law during plague epidemics. These actions have been documented in Dols 1977, p. 114.

³²⁴ DH, p. 175, IQ, p. 23 and IM, vol. 3, pp. 118f.

³²⁵ IQ, p. 23.

³²⁶ IQ, p. 23.

³²⁷ IQ, p. 21: "inna Allāh subḥānahu qaddara zuhūrahā bi-asbāb taqtaḍīhā".

³²⁸ IQ, pp. 4f. IM, vol. 2, pp. 379f.

drink, (3) the motion and rest of the body, (4) the motion and rest of the soul, (5) sleep and wakefulness, (6) excretion and retention of superfluities.³²⁹ These were the so-called six non-naturals of the Graeco-Islamic theory. They were the unavoidable factors that affected the balance of the humours, and therefore an individual's habits with regard to them were important for the preservation of health and for establishing the best way to treat the illness.³³⁰

A special characteristic of the Prophet's medicine was the inclusion of spirits, witchcraft and the evil eye among the causes of illnesses. These factors were not recognized by the major authorities of the Graeco-Islamic medicine, but for the scholars of religious sciences—and for other true believers—they were part of the reality. The existence of the evil eye was, according to Ibn al-Qayyim, al-Dhahabī and Ibn Mufliḥ, confirmed by the words of the Koran: «The unbelievers wellnigh strike thee down with their glances» (68:51).³³¹ In the hadith material the authors found ample evidence that the Prophet had accepted the existence of both witchcraft and the evil eye.³³²

Witchcraft could affect the body, the soul or the reason, and the bewitched person could be cured only by the expulsion of the witchcraft from his body. 333 Ibn al-Qayyim discussed the effects of witchcraft in more detail than al-Dhahabī and Ibn Mufliḥ. According to Ibn al-Qayyim it affected the person's body by changing his temperamental balance and causing symptoms of a physical illness, which, however, could not be cured by ordinary means. The evacuation of the evil could be effected only by divine medicaments: prayer, recitation of the Koran and the repeating of God's name. 334

All three authors accepted the existence of the evil eye, but only Ibn al-Qayyim took up the question of how the evil eye could have its damaging effect. He first presented the view of some scholars that there was no causal nexus between the evil eye and its effect. The apparent causality was a custom ('āda) created by God, and the evil eye did not actually have any effect. This view followed the Ash arite theory on causality and was condemned by Ibn al-Qayyim. According to him God had created spirits (arwāḥ) with different faculties and characteristics in human beings. The blushing or paling visible on a person were among the effects of these spirits. A spirit within a person could have the ability to influence other persons. The spirit of an envious person could cause harm to the envied if the spirit was very strong. Similarly a strong spirit residing in the envied could protect him from the influence of the envier's spirit and avert the effects of the evil eye. Ibn al-Qayyim likened the evil eye to arrows that were dispatched from the soul of the envious person towards the envied,

³²⁹ DH, p. 22.

³³⁰ Dols 1984, pp. 14f.

³³¹ IQ, p. 131; DH, p. 194; IM, vol. 3, p. 71. Also the Koranic commentators were of the opinion that the verse referred to the evil eye, cf. al-Baidāwī, Commentarius in Coranum, vol. 2, p. 351.

³³² IQ, pp. 127f (evil eye) and pp. 98-100 (witchcraft); DH, pp. 193f (evil eye) and p. 198 (witchcraft); IM, vol. 3, pp. 66-68 (evil eye) and pp. 92f (witchcraft).

³³³ IQ, p. 99, DH, p. 198 and IM, vol. 3, pp. 95f.

³³⁴ IQ, pp. 100f.

sometimes hitting him and sometimes missing him, depending on the strength of the spirits.³³⁵

In the cases of witchcraft and the evil eye, the spirit affected persons other than the host, but the evil spirits (arwāḥ khābitha) could, according to Ibn al-Qayyim, also damage the host's own body by causing him serious illnesses. If the host's temperament was out of balance, the spirit could take over the control of the body. Some harmful substances, such as agitated blood, black bile or semen could damage the soul (nafs) and make it possible for the spirits to gain power within man. The influence of the spirits made it impossible for the doctors to cure the patients, because the spirits could not be defeated by ordinary medicaments. Only religious means were effective against them. By reading the Koran, almsgiving, prayer and mentioning the name of God could a person invoke the angelic spirits (arwāḥ malakīya), which would then fight against the evil spirits and counteract their wickedness.³³⁶

The failure of the physicians to understand the influence of the spirits was seen as a sign of their ignorance by Ibn al-Qayyim. It was the reason why Graeco-Islamic medicine could not find cures to some illnesses. Ibn al-Qayyim's view was that if the doctors wanted to improve their art, they should not concentrate solely on physical causes but had to recognize the existence of the spirits and include the religious treatment in their practices.³³⁷

8.3. Contagion ('adwā)338

Graeco-Islamic medical theory recognized the contagiousness of some illnesses. Qustā ibn Lūqā (d. ca. 300/912) defined the concept: "The contagion $(i \, {}^c d\bar{a}^{\, 2})$ is a spark that passes from a diseased body to a healthy body. Then there occurs in the healthy body the same illness as in the diseased body." ³³⁹ He further explained that most contagious diseases, such as leprosy $(judh\bar{a}m)$, hectic fever (diqq) and mange (jarab) caused a sick person to discharge corrupted vapours, which mixed with the air that surrounded him. When a healthy person inhaled this air, it reached his spirit $(r\bar{u}h, pneuma)$ and corrupted it. The corrupted spirit got into the blood and gradually all the organs of the body lost their temperamental balance. The previously healthy body acquired the temperament of the sick person and the disease came apparent. ³⁴⁰

Also plague $(t\bar{a}^c\bar{u}n)$ epidemics were caused by corrupted air. The plague mias-

³³⁵ IQ, pp. 130f.

³³⁶ IQ, pp. 30f.

³³⁷ IO, pp. 30f and 51f.

I have chosen to use the word contagion, even though the Arabic word means both infection and contagion. Medieval medical theory did not differentiate between infection and contagion as is done in modern medicine, where contagion means the transmission of illness by an agent carrying the bacilli and infection means direct communication of the bacilli. Cf. Ullmann 1978, p. 87 and Dols 1977, p. 74, note 9.

³³⁹ Qusṭā ibn Lūqā, Kitāb fī al-i'dā', p. 12.

³⁴⁰ ibid., pp. 24, 26.

ma could be caused by various factors such as stagnant water, rotten cadavers and drought. When people inhaled the corrupted air, the predisposed got ill. The plague spread further also through contagion: the sick themselves, their clothes and utensils contaminated the air and made others ill.³⁴¹

The presence of corrupted air was not necessary in connection with all contagious illnesses. For example in ophthalmia (ramad) the contagion did not occur through inhaling corrupted vapours but through gazing into a diseased eye. Qustā ibn Lūqā explained that a person suffering from ophthalmia was otherwise healthy and his body did not discharge any bad vapours, but the sightrays $(shu^c\bar{a}^c ba\bar{s}ar\bar{\imath})$ his diseased eye sent were weak and corrupt. If they met the sightrays of a healthy eye, they corrupted and weakened the healthy rays and the healthy eye contracted the disease. Of the contagious diseases at least leprosy could also be transmitted by touch. 343

In the medical literature contagion was acknowledged, but it caused opposition among the religious scholars. According to the teachings of Islam, God was the one who caused illnesses. It was difficult therefore to accept that a sick person could independently infect a healthy person. Because the idea of contagion as a cause of illnesses was closely related to the problem of causation, it is reasonable to assume that those speculative theologians who rejected causation also denied contagion.

The issue was also problematic for the traditionalists, who did not approve of theological speculations, but preferred to base their opinions on the example of the Prophet. Owing to the contradictory character of the relevant hadith material, they found it very difficult to establish the opinion of the Prophet. Some of the hadiths contained evidence that the Prophet had denied the existence of contagion: "There is no contagion, no augury, no owl and no snake" ($l\bar{a}$ 'adwā wa-lā tiyara wa-lā hāma wa-lā ṣafar). This tradition gave reason to believe that contagion should be considered one of the pre-Islamic beliefs.

The augury mentioned in the tradition referred to the pre-Islamic custom of reading omens in birds' flight. If the birds flew to the right, it was a good omen, whereas if they flew to the left, it was a bad one.³⁴⁵ The owls referred to a belief that the spirits of the unrevenged dead took residence in owls,³⁴⁶ and the snakes were used to explain intestinal pain. The snakes had entered the stomach and gnawed the ribs and liver causing pain and finally death.³⁴⁷ This hadith seemed to compare the acceptance of contagion to the belief in these pre-Islamic concepts.

³⁴¹ Dols 1977, pp. 88f and 92.

³⁴² Qusţā ibn Lūqā, Kitāb fī al-i'dā', p. 26.

³⁴³ IQ, p. 120.

al-Bukhārī, al-Şaḥīḥ, vol. 4, p. 65 (bāb 45). This tradition is quoted in DH, p. 168, IQ, p. 118 and IM, vol. 3, p. 379. They quote it in a shorter form "lā 'adwā wa-lā ṭiyara" (there is no contagion and no augury).

³⁴⁵ Ibn Ḥajar, Fatḥ al-bārī, vol. 10, p. 165.

³⁴⁶ Juynboll 1969, p. 140, note 5.

³⁴⁷ Ibn Ḥajar, Fatḥ al-bārī, vol. 10, p. 132.

The hadiths rejecting contagion were contradicted by others with the opposite message. These traditions indicated that the Prophet had not rejected but accepted the existence of contagion. One of these hadiths reports that when a man suffering from leprosy came to pledge allegiance to the Prophet, the Prophet refused to see him but sent him a message: "Return. We have concluded an agreement with you." 348

These controversies were discussed by Ibn Qutaiba (d. 276/889) in his book $Ta^{\gamma}wil$ mukhtalif al-ḥadīth. In his opinion the contradiction was only apparent. If the various hadiths were put into their context, the contradiction disappeared. According to Ibn Qutaiba the hadiths referred to two types of contagion. The first type was the contagion of diseases such as leprosy $(judh\bar{a}m)$, consumption (sill), hectic fever (diqq) and mange (nuqb). He wrote: "The doctors forbid one from sitting together with persons suffering from consumption or leprosy, but they do not mean by this contagion $({}^{\prime}adw\bar{a})$, but they mean by it the change of odour which makes a person ill if he continues to smell it". And then, by connecting contagion to the belief in omens, he continued: "The doctors are the last persons to believe in good luck (yumn) and evil omen $(shu^{\gamma}m)$ ".

Ibn Qutaiba did not deny that a healthy person could get ill if he was in contact with sufferers of certain illnesses. Agreeing with the Graeco-Islamic medical view, he accepted that transmission of illnesses took place, but he refused to call this sequence of events contagion in the sense that the Prophet had meant it and denied it. What the Prophet had denied was, according to Ibn Qutaiba, the second type of contagion, namely the contagion of plague $(t\bar{a}^c\bar{u}n)$. The Prophet had said: "If there occurs a plague in the country where you are, do not leave it. If there occurs a plague in another country, do not enter it." This Ibn Qutaiba explained as follows:

When the Prophet forbids one from leaving a country in which there is a plague, he means that you should not do it thinking that your escape from God's predestination will save you from God. When the Prophet forbids you to enter a country in which there is a plague, he means that residing in a place free of plague calms your soul and makes your life more pleasant.³⁵⁰

Ibn Qutaiba continued by presenting a tradition according to which the Prophet had been aware of a belief in ill-omened houses and women. According to this belief a woman who had lost several husbands was unlucky, and it was a risk to marry her. Similarly if the inhabitants of a house suffered from exceptionally frequent deaths or from severe economic losses, the house was considered unlucky. In Ibn Qutaiba's view the Prophet had denied contagion in order to reject the belief in evil omens that allowed a man who had suffered from an infliction to say of a woman: "She has infected me with her evil omen" ($a^c datn\bar{\iota} bi\text{-}shu^2mih\bar{a}$). Ibn Qutaiba connected this belief to the belief in contagion in the case of plague. In his opinion, to believe that a person could infect others with plague was actually to claim that the person was ill-

³⁴⁸ IQ, p. 116, DH, p. 167 and IM, vol. 3, p. 381.

³⁴⁹ Ibn Qutaiba, Ta'wīl mukhtalif al-ḥadīth, pp. 102-106.

³⁵⁰ ibid., p. 104.

omened. The fact that the Prophet had allowed people to stay away from plague-infested areas was comparable to his decision to allow people to get rid of an illomened house or woman. This permission did not mean that the Prophet believed the house or the woman to be unlucky, but it only showed that the Prophet realized the psychological effects of the belief on people. The Prophet had understood that the persons involved would not be calmed and made to feel safe only by saying that their belief was unfounded, but they had to be allowed to get rid of what they believed was unlucky.

It seems that what prevented the general acceptance of contagion was its close connection to pre-Islamic beliefs. Ibn Qutaiba accepted the contagious character of some diseases and he did not want to interpret the words of the Prophet "there is no contagion" as an outright denial of contagion. In explaining what the Prophet had meant with his words, Ibn Qutaiba came to deny the contagiousness of plague. The reason why he did not include the plague in the group of illnesses that he characterized as contagious may have been the existence of the hadith that forbade fleeing from plague. He possibly considered that the only way to explain the Prophet's prohibition to leave a plague-stricken country was to deny its contagious character. Therefore he lumped together the belief in the contagiousness of the plague and the belief in evil omens and bad luck. Another reason may have been the fact that he did not have any immediate experience of plague. On the evidence of historical sources there were no plague epidemics in the 'Abbasid state until an epidemic broke out in Baghdad in 301/913-4, well after Ibn Qutaiba's time. This lack of personal experience must have made the denial of its contagiousness easier.

The Ash arite theologians had varying opinions on the issue. al-Ghazālī accepted contagion in the sense that it was understood in medieval medical theory. He dealt briefly with the issue when he discussed the permissibility of treatment in his book $Ihy\bar{a}$ ulum al-dīn, which he introduced by presenting the story about 'Umar's decision not to enter Syria, where there was a plague. Some of 'Umar's companions agreed with him saying that to enter a pestilential area was suicidal. Others considered that it was better to go to Syria in spite of the plague and to trust in God rather than flee from God's predestination and death. In 'Umar's opinion their situation could be compared to the situation of a herdsman who comes to a valley with two parts, one fertile and one barren. If the herdsman takes his flock to the fertile part, it was predestined by God and if he takes the flock to the barren part, it was also predestined by God. Nothing happens except what has been predestined by God.

The dispute was solved when someone quoted the above-mentioned tradition according to which no one should enter a country hit by plague. To this al-Ghazālī commented that the story proved that it was not against reliance in God to avoid danger. Why then did the Prophet forbid leaving a country where there was a plague? In answer to this question, al-Ghazālī explained that when a person kept inhaling corrupted air, the corruption entered his lungs, heart and intestines, but the disease became apparent only after some time. Thus when a person escaped from the plague-

³⁵¹ Conrad 1982, p. 289.

infested area, he had probably already been affected by the corruption and his escape was futile. But there was, according to al-Ghazālī, another reason for the prohibition. If the healthy were allowed to leave, only those suffering from the disease would remain. There would be no one to care for the sick, to give them water and to feed them. If the healthy ones stayed, it would not necessarily mean that they would die and if they left, it would not mean that they were saved for sure. But if they left, it meant that the sick who stayed would certainly die. 352

Not all of the Ash'arites shared al-Ghazālī's view. For example, the Ash'arite scholar, Ibn Ḥajar al-'Asqalānī (d. 852/1449) rejected contagion. Instead of laying importance on the hadiths that could be interpreted in favour of contagion, he chose to stress the hadith: "There is no contagion, no augury, no owl and no snake" and other hadiths containing the rejection of contagion. Ibn Ḥajar also denied the theory that corrupted air caused plague epidemics. Instead he supported the ancient theory of the *jinn* as the agents of plague.³⁵³

The Hanbalites also tried to solve the controversies of the hadiths. Abū Yaʻlā Ibn al-Farrā' (d. 458/1066) discussed the issue of controversial hadiths concerning contagion in his book al-Muʻtamad fī uṣūl al-dīn. He concluded that, as the Prophet had said, there was no contagion. Diseases were not contagious by nature, but God had created a custom that seemed like contagion. It was therefore advisable to refrain from being in close contact with persons suffering diseases for which God had instituted this custom. In wanting to eliminate the controversies in the hadiths, he came to accept the Ashʻarite view on causality, which was rejected by other representatives of the Hanbalite school, who generally accepted causation. The Ashʻarite view maintained that God had instituted a custom, which looked like cause and effect, but each occurrence was in fact created by God. However, it seems that Abū Yaʻlā's acceptance of God's custom in connection with the problem of contagion did not mean that he totally denied causation. Following the Hanbalite view on causation, he accepted that it was the poison that killed and fire that destroyed a person who threw himself into it.³⁵⁴

8.3.1. The views of al-Dhahabī, Ibn al-Qayyim and Ibn Muflih

The problems connected with contagion were recognized by the three authors of the Prophet's medicine. As has been presented above, the existence of contagion was seen to be in conflict with the belief in predestination. The acceptance of contagion was further made difficult by the conflicting hadiths and by the view that it was a pre-Islamic belief comparable to a belief in evil omen or bad luck. The problems that this caused to the scholars of religious sciences are clearly visible in al-Dhahabī's

³⁵² al-Ghazālī, Iḥyā', vol. 4, p. 250.

³⁵³ Dols 1977, pp. 116-119. Also Sublet 1971, p. 145.

³⁵⁴ Abū Ya'lā Ibn al-Farrā', Kitāb al-mu'tamad, pp. 169f.

treatment of the subject. He dealt with contagion very briefly and rather confusingly in connection with leprosy (judhām).³⁵⁵

al-Dhahabī began his discussion by first presenting hadiths that admitted the existence of contagion, such as "Flee from a leper like you flee from a lion". Then he related the story according to which the Prophet had taken a leper by the hand and invited him to eat from his plate by saying: "Eat, in the name of God, trusting in God and relying on Him". al-Dhahabī explained that the advice of the Prophet to avoid contact with lepers indicated caution, whereas the fact that he had shared his food with a leper indicated that it was permissible to be together with the sick.

According to al-Dhahabī's interpretation of the hadiths, it was desirable to be cautious of contagion. At least leprosy could be transmitted from a sick person to a healthy one. Like Ibn Qutaiba, al-Dhahabī also considered that the agent of transmission was the smell, thus accepting the theory of Graeco-Islamic medicine that the individual miasma of the sick person transmitted the illness to others. al-Dhahabī's opinion on the contagiousness of leprosy seems clear, but it appears to be contradicted by his explanation of the hadith that forbids mixing sick animals with healthy animals. al-Dhahabī gave the reason for this prohibition:

If the healthy cattle then get ill by the predestination of God, the owner of the previously healthy animals starts to think that this is contagion ($^cadw\bar{a}$) and he feels convinced of it. The Prophet said: "There is no contagion and no augury", and he instructed people to shun it. 356

In al-Dhahabī's opinion the Prophet had denied contagion in order to prevent anyone from believing more in contagion than in predestination. Like Ibn Qutaiba, al-Dhahabī also connected the belief in contagion with the belief in omens. Instead of fearing omens Muslims should remember that nothing befalls them except what God has predestined.

al-Dhahabī's discussion of leprosy shows that he did not deny the actual transmissibility of illnesses but accepted the contagiousness of some illnesses. In the case of leprosy, al-Dhahabī accepted the view that the smell caused the spreading of the illness and he wrote: "smell is one of the reasons for contagion". This discussion on plague al-Dhahabī showed further that he admitted the existence of contagion. He gave two advantages to following the Prophet's prohibition on entering a plague-infested area. The first benefit was that the one who stayed away did not inhale the putrefied air and avoided getting ill. The second was that the one who stayed away did not come into contact with the sick. 358

All in all it can be concluded that even though al-Dhahabī did not take an unambiguous stand in favour of contagion, neither did he categorically deny it. He

³⁵⁵ DH, pp. 167f; the chapter has been given the title "The disapproval of bringing the sick into contact with the healthy".

³⁵⁶ DH, p. 168.

³⁵⁷ DH, p. 168.

³⁵⁸ DH, p. 187.

rejected contagion in the same way as Ibn Qutaiba did, not rejecting the actual occurrence of contagion as defined in medical theory, but rejecting the old beliefs connected with it. al-Dhahabī was obviously trying to find a way to reconcile the controversies between various contradictory traditions and the current medical theory, but his discussion of the problem is unfortunately not very lucid and it remains open to different interpretations.

Ibn al-Qayyim expressed his views more clearly than al-Dhahabī. He treated the issue in a chapter about contagious diseases. He introduced the subject by quoting several traditions showing that the Prophet had been aware of contagion: "When you talk to a leper, keep a distance of one or two lances between yourself and the leper". According to Ibn al-Qayyim these hadiths proved that the Prophet had recognized contagion and had therefore warned against close proximity to lepers. Ibn al-Qayyim stated that leprosy was transmissible (naqqāla). The agent of transmission was the smell that reached the healthy one and made him ill, an occurrence that could be observed in connection with some illnesses. As has been mentioned earlier Ibn al-Qayyim accepted the existence of causality. There was true causal nexus between the medicament and cure, because God had placed certain characteristics in the medicament. Similarly, Ibn al-Qayyim seems to have seen contagion as a characteristic of a disease. This view enabled him to unequivocally accept contagion.

Ibn al-Qayyim supported his acceptance of contagion with suitable hadiths, but he was well aware of the problematic nature of the hadith material dealing with the issue. He admitted that some people saw the content of the various hadiths as conflicting. However, he shared Ibn Qutaiba's opinion that there could not be contradiction between sound hadiths, but that the apparent contradiction was based either on insufficient ability to distinguish between sound and false traditions or on an imperfect understanding of the meaning of the hadiths. He then proceeded to give a total of eight different solutions to the problem, the first of which was the one given by Ibn Qutaiba that has been presented above.

The other solutions were ascribed to unidentified groups. Among these was the view that the Prophet had been addressing different groups of people and had given advice that suited the needs of each group. Thus his words indicating the denial of contagion had been meant for people with strong faith and a strong feeling of reliance on God. The strength of their tawakkul conquered the contagion as the strength of constitution conquered the strength of illness. Knowing that not everybody could rise to this ideal, the Prophet had instructed believers with weaker faith to be aware of contagion and to be cautious. This did not mean that Muslims of strong faith denied contagion, rather that they ignored it. They preferred to put their faith in God and if God caused them to contract the illness they obviously accepted it with patience. This solution of dividing the population into ascetically oriented pious and ordinary believers appealed to Ibn al-Qayyim, and he commended it as an excellent way to solve this and other controversies in the hadith material.

³⁵⁹ IQ, pp. 116-121; the chapter bears the title: "Guidance of the Prophet on caution in the case of illnesses that have a contagious character".

The solution was also present in his legal treatise al-Ṭuruq al-Ḥukmīya fī al-siyāsa al-shar ʿīya, in which he discussed the problem of whether persons suffering from contagious diseases were a danger to their families. The disease he dealt with was leprosy, but also ophthalmia (ramad) was mentioned as having a contagious $(naq-q\bar{a}la)$ character. After explaining that the Prophet's words were intended for two different groups of people, he wrote: "If the members of the leper's household want to eat, drink and have sexual intercourse with him, it is permissible. If they want to avoid the afflicted and keep their distance from him, it is also permissible." 360

The apparent contradiction of the hadiths could also be explained if some of them were found to be unreliable. The strongest hindrance to a general acceptance of contagion was the hadith "there is no contagion, no augury". If this hadith was found to be unreliable, it would not be difficult to explain away the seemingly anti-contagious character of some other hadiths. Ibn al-Qayyim presented the view of a group that considered the tradition "there is no contagion" to be inauthentic. They claimed that Abū Huraira had first reported it, but then he had doubted it and had finally rejected it. Their opinion was based on the report of Abū Salama ibn 'Abd al-Raḥmān:

Abū Huraira had related the Prophet's words "There is no contagion" to us. Then he said that the Prophet had said: "The sick should not be brought to the healthy". al-Ḥārith ibn Abī Dhi'āb, nephew of Abū Huraira said: "Abū Huraira, I have heard you to quote another hadith you now pass over. You have quoted from the Prophet that there is no contagion." Abū Huraira denied this and repeated: "The sick should not be brought to the healthy". al-Ḥārith argued until Abū Huraira got angry and jabbered in Ethiopian. Then he said to al-Ḥārith: "Do you know what I say?" al-Ḥārith answered: "No". He said: "I say that I deny it, I deny it". I do not know, whether Abū Huraira had forgotten the hadith or whether he abrogated it. 362

Ibn al-Qayyim also dealt with the issue of contagion in his book *Miftāḥ dār al-sa ʿāda*, in which he rejected this solution saying that the hadith "there is no contagion" was also reported by others than just Abū Huraira and therefore it could not be deemed false. S63 Instead it could be said that the problematic words of the Prophet did not have divine sanction and therefore were not binding. According to Ibn al-Qayyim, there was a group that held this hadith to be equal to the Prophet's prohibition of pollinating palm-trees. When the Prophet found that this prohibition spoiled the date harvest, he withdrew it and said that it had been based on his assumption and did not have divine origin. He further told the people to rely on themselves in the things of the world. Similarly the words "there is no contagion" could only be the Prophet's assumption, which was proved false by practice. Ibn al-Qayyim considered this solution acceptable. S64

³⁶⁰ Ibn Qayyim al-Jauzīya, Kitāb al-ṭuruq al-ḥukmīya, p. 286.

³⁶¹ IQ, p. 121.

³⁶² IQ, p. 121 gives only the gist of this tradition, but I found this complete form in Ibn Qayyim al-Jauzīya, Miftāḥ (ed. 1945), vol. 1, p. 264.

³⁶³ Ibn Qayyim al-Jauzīya, Miftāḥ (ed. 1945), vol. 1, p. 264.

Ibn al-Qayyim presented all these different ways of explaining the apparent conflict in the content of the hadiths. He preferred some of the explanations to others, but the main thing is that none of the explanations precluded rejection of contagion. They all sought to assess the hadiths so that contagion could be accepted.

The third author, Ibn Muflih, was like al-Dhahabī less straightforward in expressing his opinion on contagion. He presented the conflicting hadiths and quoted various authorities as to how the conflicts could be reconciled. His presentation closely followed that of Ibn al-Qayyim, but in contrast to Ibn al-Qayyim, he avoided expressing his partiality for any of these solutions. However it can be assumed that he did not reject the idea of contagion, because all his references were to authorities who had tried to show that the Prophet's words were in accordance with the medical view. It seems that he did not find it impossible to accept contagion through miasma, but he refused to give his opinion on whether the contagion expressed true causality or whether the causal nexus was only apparent and it was God who created each occurrence. 365

For Ibn Muflih, as for Ibn al-Qayyim and al-Dhahabī, contagion was problematic only when it was connected to pre-Islamic beliefs. According to the scholars, the Arabs had in the Prophet's time believed that some people could have shu^3m , evil omen or bad luck. It was a characteristic of a person. Similarly contagion had been seen as a characteristic of an individual, not of a disease. Ibn Qutaiba pointed this out when he claimed that when talking about contagion, the physicians do not mean 'adwā, because they are the last ones to believe in evil omens. By making a distinction between 'adwā and medically defined contagion, the three authors of the Prophet's medicine were able to accept that illnesses could be transmitted. A similar distinction was intended by Ibn al-Jauzī when he wrote that the transmission of illnesses did not belong to "the chapter on contagion" (bāb al-'adwā) but to "the chapter on medicine" (bāb al-tibb). 366

A further problem was that the hadith "there is no contagion" ($l\bar{a}$ ' $adw\bar{a}$) made it difficult to claim the opposite. In a sense the Prophet's words tainted the word ' $adw\bar{a}$. I think that Ibn al-Qayyim's use of the word $naqq\bar{a}la^{367}$ when characterizing the nature of the transmittable illnesses was a conscious attempt to avoid using the word ' $adw\bar{a}$. It may have been his intention to restrict the use of ' $adw\bar{a}$ to indicate the pre-Islamic belief that the Prophet had rejected, whereas $naqq\bar{a}la$ was the characteristic that could be observed in some diseases.

Even though the authors accepted the existence of contagion, they did not want to forget God's role in illnesses. This was most clearly expressed by Ibn al-Qayyim in Miftāḥ dār al-sa ʿāda, which stressed that contagion was a cause created by God and to deny its existence was to deny God's law. But he further pointed out that believers should not think that contagion was the sole cause of an illness. This would be idolatry

³⁶⁴ ibid., pp. 267f.

³⁶⁵ IM, vol. 3, pp. 378-383.

³⁶⁶ Ibn al-Jauzī's words are quoted in IM, vol. 3, p. 383.

³⁶⁷ IQ, p. 117 and Ibn Qayyim al-Jauzīya, al-Turuq al-hukmīya, p. 286.

(*shirk*), because the contagion would take the place of God. Even in admitting the existence of contagion believers should remember that it was God who made people ill or allowed them to stay well. He had created the causal nexus between the cause of illness and illness, but He could remove the causality if He so desired. Everything that happened, also contagion, was ultimately subject to God's will.³⁶⁸

Both Ibn al-Qayyim and Ibn Muflih held the opinion that it was better not to fear contagion. According to them, fear of contagion may in itself be a reason for contracting the disease, because: "imagination may rule the faculties and natural dispositions". The fear of contagion weakened a person's resistance and made him susceptible to the disease. Furthermore, the fear of contagion might damage the soul, because if fear was strong it could take the place of God in the soul. To feel a greater fear towards contagion than towards God not only endangered future salvation but could also be detrimental to the health:

If a person fears something else than God, the object of fear is imposed on him and the main reason for it being imposed on him was his fear of it ... In the same way, if a person hopes for something else than God, he does not get what he hopes for and the main reason for this is his hope for other than God.³⁷⁰

Therefore it was inadvisable to have too strong a fear of contagion and to forget that nobody could avoid what God had predestined.

8.4. Prevention of illnesses

Graeco-Islamic medicine emphasized prevention of illnesses, and doctors attached much importance to the proper diet and lifestyle of the healthy.³⁷¹ Similarly the authors of the Prophet's medicine stressed the importance of preventive treatment. Ibn al-Qayyim quoted the saying ascribed to al-Ḥārith ibn Kalada: "Prevention is the main part of medicine".³⁷² Ibn al-Qayyim divided the prophylaxis into two groups: first the healthy should be prevented from becoming ill, and second the ill should be prevented from aggravating their illness. If the doctor succeeded in preventing the illness getting more serious, the patient would gain strength to overcome the illness. According to Ibn al-Qayyim God had guided believers towards preventive medicine when He gave special instructions to the sick regarding ablutions: «... but if you are sick ... then have recourse to wholesome dust and wipe your faces and your hands» (4:43). According to Ibn al-Qayyim, God in this verse denied the sick the use of water and the reason was that the water might harm the sick. Also the Prophet had recognized the impor-

³⁶⁸ Ibn Qayyim al-Jauzīya, Miftāḥ (ed. 1945), vol. 1, p. 269.

³⁶⁹ IQ, p. 117 and IM, vol. 3, p. 380.

³⁷⁰ Ibn Qayyim al-Jauzīya, Miftāḥ (ed. 1945), vol. 1, p. 273.

³⁷¹ Dols 1984, pp. 71f.

³⁷² IQ, p. 82 gives the saying in two forms: "al-Ḥimya ra's al-dawā'" and "Ra's al-tibb al-ḥimya".

tance of prophylaxis. When 'Alī was recovering from an illness, the Prophet forbade him to eat ripening dates, but ordered him to eat food prepared of barley and beet, in order not to endanger his convalescence.³⁷³

The six non-naturals that affected the body's humours were, according to the Graeco-Islamic theory, central to practical prophylaxis. Securing proper air and a balance in food and drink, motion and rest of the body and soul, sleep and wakefulness, excretion and retention of superfluities was necessary for the preservation of health. All this was acknowledged by Ibn al-Qayyim, al-Dhahabī and Ibn Mufliḥ. Partly due to the abundance of hadith material concerning dietary instructions and partly due to the importance of diet in the humoral system, the sections dealing with food and drink were given extensive treatment by the three authors. The basic dietary rule, according to Ibn al-Qayyim, was given in the Koran: «Eat and drink but be you not prodigal» (7:31). In Ibn al-Qayyim's view, these words formed the foundation for retaining health and according to al-Dhahabī they contained the whole medical science.

The medical opinion advocated moderation in eating and drinking. This was in accordance with the Islamic view expressed both in the Koran and Sunna. Ibn Mufliḥ illustrated this by quoting a story, according to which the Christian physician serving in Hārūn al-Rashīd's court had claimed that there was nothing in the Koran about medicine. A Muslim scholar present at the court contradicted this by saying that the whole of medicine was expressed in half a verse of the Koran. The verse was the above-quoted «Eat and drink but be you not prodigal» (7:31). The Christian continued by claiming that the Prophet had not said anything about medicine. This was refuted by the scholar who quoted the saying: "The stomach is the house of illness and prevention is the main part of medicine. Give to the body what it is accustomed to get" as the Prophet's words. These quotations convinced the Christian and he said: "Your Koran and your Prophet have expressed the whole science of Galen."

The above saying is usually ascribed to al-Ḥārith ibn Kalada and not to the Prophet. However, the basic dietary instruction on moderation was also expressed in several other hadiths which were considered more authentic. Among these was the tradition: "The sons of Adam do not fill any vessel in a worse manner than they fill their stomachs. Morsels are sufficient for a man's body, but if he must have more, he should fill one third of his stomach with food, one third with drink and leave one third to itself (li-nafsihi)." Ibn al-Qayyim commented that if a man filled his stomach with food and drink, without leaving any space, he would suffer from distress and exhaustion. This would lead to the corruption of the soul, negligence of religious duties and concentration on lust. Therefore it was better for the body and the soul, if a man followed the instruction of the Prophet. Ibn al-Qayyim further stated that the major cause for illnesses was eating food before food previously taken was digested. This opinion was

³⁷³ IQ, pp. 81f. The same tradition is also quoted in DH, pp. 154f.

³⁷⁴ Dols 1984, p. 71 and Ullmann 1978, pp. 99-102.

³⁷⁵ IQ, p. 167 and DH, p. 26.

³⁷⁶ IM, vol. 2, p. 365.

also expressed by al-Dhahabī, who gave it the authority of al-Ḥārith ibn Kalada and Ibn Sīnā, whereas Ibn Mufliḥ referred to Galen as the source of this view.³⁷⁷

Also motion and the rest of the body had to be in balance. Physical exercise promoted good health, because it heated the organs and dissolved waste products. The exercise should not be too severe, but it should give a red colour to the skin and bring out sweat. al-Dhahabī quoted hadiths to show that the Prophet had in accordance with the medical view obliged the believers to keep their bodies and souls healthy by exercise: "Raid and get rich, travel and get healthy", "Fasting is healthy" and "Digest your food by mentioning God's name and by praying." According to Ibn Muflih the movements of the prayer pushed the food down to the bottom of the stomach improving the digestion. Prayer was suitable exercise, because it was not too strenuous. Both al-Dhahabī and Ibn Muflih indicated that the fulfilling of religious duties could be regarded as beneficial to the body as well as the soul. This view was also expressed by Ibn al-Qayyim, who pointed out that prayer, fasting, *jihād* and pilgrimage do not only improve the soul but also strengthen the body.

A moderate amount of sleep was necessary to allow the sensory and psychical faculties to rest and to quieten the voluntary functions. Sleep was also necessary for the completion of digestion.³⁸¹ According to Ibn al-Qayyim and al-Dhahabī, the sleep was most beneficial if the sleeper followed the Prophet's example. The Prophet had not denied himself sleep, but he had only slept as much as was necessary. He had not slept on a full stomach and he had lain on a leather couch stuffed with fibres, his head on the pillow and his hand sometimes placed under the cheek. It was best to start sleeping on the right side as the Prophet had done, then turn to the left side for a short time and then continue sleeping on the right side. This advice was clarified in medical terms. Laying on the right side gave the food in the stomach a settled position. Turning to lie on the left side accelerated digestion, because then the stomach came to tilt towards the liver. Then it was best to return to lie on the right side, because to sleep too long on the left side pressed the organs towards the soul and that was not healthy. Both Ibn al-Qayyim and al-Dhahabī advised against sleeping in the day-time, except during the midday heat, and against sleeping in the sun or with part of the body in the sun and part in the shade. All these instructions were confirmed by the Prophet's words, 382

In the Graeco-Islamic medical theory, food and drink were transformed into substances that nourished the various organs in the digestion process. The organs retained the suitable nourishment and excreted the waste material. The waste that the organs could not use was evacuated from the body in the form of different secretions: nasal phlegm, saliva, sweat, urine, stools, semen and menstrual blood. To preserve health it

³⁷⁷ IQ, pp. 12f, DH, pp. 27f and IM, vol. 2, p. 390.

³⁷⁸ DH, p. 32.

³⁷⁹ IM, vol. 2, p. 388.

³⁸⁰ IO. p. 193.

³⁸¹ Ullmann 1978, p. 101. IQ, p. 187 and IM, vol. 2, p. 388.

³⁸² IQ, pp. 187-189 and DH, pp. 32f.

was important to secure the necessary flow of these secretions. It was unhealthy if the body retained waste material, but it was equally unhealthy if the excretive faculty was too active and thus made the body weak. Therefore it was necessary to find a balance between retention and excretion.³⁸³

According to Ibn al-Qayyim, the importance of evacuation of the waste materials was stated in the Koran in the verse about pilgrimage: «If any of you is sick or has an ailment of the head, ³⁸⁴ then redemption by fast, or freewill offering, or ritual sacrifice» (2:196). Ibn al-Qayyim interpreted the verse to mean that although the ones who had an ailment of the head, i.e. lice or an itch, did not take part in the actual pilgrimage, they were allowed to shave their heads like pilgrims. When the hair was shaved, the pores in the head opened up and the waste material that had congested below the hair and had caused the ailment was released. According to Ibn al-Qayyim the verse contained the general principle of releasing waste materials that endangered health. Ibn al-Qayyim listed ten things, which were damaging to the body if they were retained in the body: agitated blood, semen, urine, stools, wind, vomit, sneezes, sleep, hunger and thirst. ³⁸⁵ Of these, the last three cannot really be considered as matters that have to be evacuated, but obviously the reason why Ibn al-Qayyim included them in the list was that they were physical needs that could be sensed and their retention was as detrimental to health as retaining waste materials.

Also al-Dhahabī and Ibn Mufliḥ stated that a balance between excretion and retention secured health. A healthy person could improve the evacuation of waste matter by bathing, sexual intercourse and fasting, which were all recommended for Muslims. Al-Dhahabī indicated that fasting had been imposed on the believers by God as a duty at least partly because of its influence on health. The medical aspect of fasting was attested by Hippocrates, who had said: "A person whose flesh is humid should fast, because fasting dries the body." Here the authors of the Prophet's medicine once again showed that the fulfilment of religious duties also influenced the physical well-being.

Further, the preservation of health also required emotional balance. Excessive emotions could cause illnesses, and therefore the moods of the soul had to be controlled and extremes avoided. The emotions that should be controlled are listed by al-Dhahabī as anger (ghaḍab), joy (faraḥ), worry (hamm), grief (ghamm), and shame (khajal). The necessity of restraining anger was recognized by the Prophet, who had forbidden the believers to act under its influence. Control of anger was

³⁸³ Dols 1984, pp. 10f. Ullmann 1978, pp. 61 and 102.

Here I have deviated from A. J. Arberry's translation: «or injured in his head». The Arabic words «au bihi adhan min ra'sihi» are usually interpreted to refer to lice or other vermin or headache, cf. al-Ţabarī, Jāmi' al-bayān, vol. 2, pp. 134-136.

³⁸⁵ IQ, pp. 2f.

³⁸⁶ DH, pp. 22 and 34. IM, vol. 2, pp. 373f, 389 and 403f.

DH, p. 34: in this edition it is printed "fa-inna al-jū' yukhaffifu al-abdān", but in the context it should be *yujaffifu* (dries) instead of *yukhaffifu* (weakens). In the text ascribed to al-Baghdādī the word is rendered *yujaffifu* (dries) (al-Baghdādī, al-Tibb min al-kitāb wal-sunna, p. 31).

³⁸⁸ Ullmann 1978, p. 102.

further recommended and praised in the Koran: «a garden whose breadth is as the heavens and earth, prepared for the godfearing who ... restrain their rage» (3:133-134). The positive aspect of joy was that it strengthened the innate heat, but excessive joy was harmful, even lethal. Therefore excessive joy was forbidden in the Koran: «God loves not those that exult» (28:76), but rejoicing in faith was commendable and the believers could be «rejoicing in the bounty that God has given them» (3:170). Worry and grief could cause fevers³⁸⁹ and were therefore harmful. They could both be avoided by remembering that nothing occurs except what God has decreed.³⁹⁰ Ibn al-Qayyim and Ibn Mufliḥ did not discuss the emotional balance, but they recognized the influence of emotions on physical well-being. According to them grief was harmful, because it cooled the temperament and weakened the innate heat, whereas joy strengthened the innate heat.³⁹¹ Ibn al-Qayyim also presented a thorough discussion of worry, grief (ḥuzn), and passionate love ('ishq). Also Ibn Mufliḥ expanded on this last subject, but neither of the authors stressed the physical effects of these emotions. Instead they concentrated on their religious or moral aspects.³⁹²

As mentioned above, Graeco-Islamic medicine attached importance to the air that a person inhaled, because it affected his humours: putrid air caused illnesses and clear, pure air assured health. The character of the air changed in different seasons and that had to be taken into account in establishing a suitable diet and determining the physical exercise required. In agreement with this view, al-Dhahabī wrote that every season produced its own type of illnesses. As an example he stated that summer air agitated the yellow bile and caused hot bilious illnesses, but on the other hand summer air cured cold diseases. ³⁹³ al-Dhahabī did not give a detailed account on the effects of air on the health, but confined himself to a few cursory remarks. Ibn al-Qayyim mentioned the air only in connection with contagious diseases, but he did not discuss the role of the air in the prevention of illnesses. Neither did Ibn Muflih give any general theoretical views on how air influenced the health. He merely quoted Galen's advice on avoiding dusty, smoky or putrid air.³⁹⁴

8.5. The methods of curing

The prevention of illnesses was an important aspect of Graeco-Islamic medicine, but when prevention failed and an illness occurred, it had to be treated. Because the diseases were caused by the imbalance of humours, the goal of the treatment was to

DH, p. 46: the term here is al-hummayāt al-yaumīya (daily fevers), which could be either hummā afīmārūs (febris diara) also known as hummā al-yaum (fever of a day) or it could be hummā al-fikr wal-ghamm (fever due to worry and grief). Both of them are listed among Arabic medical terms in Siddiqi 1959, p. 152.

³⁹⁰ DH, pp. 45-47.

³⁹¹ IQ, p. 96 (grief) and p. 92 (joy). IM, vol. 2, p. 372 (joy) and p. 376 (grief).

³⁹² These will be discussed in Chapter 10 below.

³⁹³ DH, p. 22.

³⁹⁴ IM, vol. 2, p. 391.

restore the balance. The humoral balance was achieved by changing the patient's diet or—if a new dietary regime was not enough—by giving him drugs that countered the superfluous or corrupted humour and by evacuating it from the body. The evacuation could be effected by increasing the flow of secretions in various ways or by venesection (faṣd), and cupping (hijāma). Cautery (kayy), burning with a hot iron or needle, was used for treating certain illnesses, pains, tumours and bleeding wounds.

8.5.1. Cupping, venesection and cautery

Cupping was also a recognized method of treatment in the Prophet's medicine. There were several reports proving that the Prophet had allowed his companions to be cupped and had even been cupped himself.395 The Prophet's attitude towards venesection was not as clear. al-Dhahabī admitted the existence of contradictory reports but stated as his own opinion that the Prophet had accepted venesection by saying: "The best of medicine is cupping and venesection". 396 According to Ibn al-Qayyim, the Prophet had only referred to cupping and not to venesection.³⁹⁷ Also Ibn Muflih took up the issue referring to reports of the Prophet's dislike of venesection. As a solution he then quoted the words of the scholars who held the opinion that the Prophet had rejected venesection only when it might have harmed the patient. Therefore the Prophet must have accepted it when it was not harmful but beneficial for the patient.³⁹⁸ A similar view was expressed by Ibn al-Qayyim. According to him, the Prophet had been concerned for the people living in al-Ḥijāz, where the climate was hot. Referring to the authority of physicians, Ibn al-Qayyim explained that in such climatic conditions cupping was preferable to venesection. A person who lived in a hot climate had thin blood flowing close to the surface of the body. In such cases cupping was enough to cause the necessary evacuation, whereas venesection might prove dangerous. In Ibn al-Qayyim's opinion the Prophet had not rejected venesection, but only warned against using it in specific circumstances. There was nothing wrong with resorting to venesection in cooler climates.³⁹⁹

A similar analysis of the conflicting hadith material was required before the authors could accept cautery as method of curing. The Prophet had said: "There is health in three things: drinking of honey, incision made by the cupper's knife and cautery with fire; I forbid my people to cauterize". 400 This clear rejection of cautery was contradicted by other traditions, according to which the Prophet had allowed it. It was even reported that the Prophet had himself cauterized the wound of Sa'd ibn

³⁹⁵ IQ, pp. 38 and 41-44. DH, pp. 41-44. IM, vol. 3, pp. 79 and 85f.

³⁹⁶ DH, p. 41.

³⁹⁷ IQ, p. 42.

³⁹⁸ IM, vol. 2, pp. 480f.

³⁹⁹ IQ, pp. 41f.

⁴⁰⁰ DH, p. 180 and IM, vol. 3, p. 79. Ibn al-Qayyim quoted only the end of the hadith: "I forbid my people to cauterize" (IQ, p. 49).

Mu'ādh in order to stop the bleeding. According to Ibn Mufliḥ the Prophet's rejection was based on his dislike of a pre-Islamic belief that cautery was effective in preventing all kinds of illnesses. The Prophet had not forbidden the Muslims to use cautery as a treatment. Also Ibn al-Qayyim considered cautery to be permissible, because the Prophet had himself resorted to it. The Prophet's rejection of cautery on another occasion was not absolute, but was directed at those who practised it, because they believed that it protected them against illnesses. Also al-Dhahabī took a similar attitude to the traditions and claimed that the cautery of bleeding wounds was permissible. It was also acceptable to use cautery when it was known to be the best possible cure for a particular illness, but it was forbidden as a preventive measure.

8.5.2. Lists of drugs and foodstuffs

As in Graeco-Islamic medicine also in the Prophet's medicine dietary therapy was a central method of curing. The character of the patient's humoral imbalance was determined and then he was advised to include drugs or foodstuffs in his diet that would correct the imbalance. The drugs were administered in accordance with the allophatic principle: the required drugs should have the quality opposite to that of the disease, i.e. a hot drug was used to cure a cold disease etc. In this the Prophet's medicine closely followed the principles of Graeco-Islamic medicine.

al-Dhahabī, Ibn al-Qayyim and Ibn Muflih devoted considerable space in their books to an alphabetic list of drugs and foodstuffs, including an assessment of their qualities and influence on a person's humours. al-Dhahabī's list of drugs is longer than that of Ibn al-Qayyim or Ibn Muflih, because the latter only listed items that were mentioned in the hadiths, whereas al-Dhahabī included drugs that were generally known but had not been referred to by the Prophet. Among these were drugs such as anise $(an\bar{\imath}s\bar{\imath}un)$, poppy $(khashkh\bar{a}sh)$, cinnamon $(d\bar{a}r\ s\bar{\imath}n\bar{\imath})$ and jasmine $(y\bar{a}sam\bar{\imath}n)$, which were all present in al-Bīrūnī's $Kit\bar{a}b\ al-saidana$.

The medicaments listed by the authors were practically all drugs accepted by Graeco-Islamic medicine, too. Also the information the authors gave about these medicaments tallied well with the views of established medicine. For example, ginger $(zanjab\bar{\imath}l)$ was defined by Ibn al-Qayyim to be hot and mildly humid. It aided digestion, dissolved wind and was a moderate laxative. It was helpful against obstructions in the liver and cured dimness of vision both as a draught and as a collyrium. It also

⁴⁰¹ IQ, p. 49 and DH, pp. 181f. The verb used here is hasama (cut off, terminate), which Ibn al-Qay-yim explained to be the synonym for kawā (cauterize). al-Dhahabī explained it as meaning: "qaṭa'a al-dam 'anhu bil-kayy" (to stop him from bleeding by cautery) (DH,p. 182).

⁴⁰² IM, vol. 2, pp. 359 and 479.

⁴⁰³ IQ, p. 50.

⁴⁰⁴ DH, pp. 182f.

⁴⁰⁵ These drugs are listed in DH, pp. 57, 83, 85 and 142 respectively. They are found in al-Bīrūnī, Kitāb al-şaidana, pp. 44, 145, 156 and 340 respectively.

increased sexual desire. 406 In partial disagreement, al-Dhahabī and Ibn Mufliḥ gave ginger's temperament as hot and dry, but they added that it contained some humidity. Ibn Mufliḥ's list of the uses for ginger was the same as Ibn al-Qayyim's, whereas al-Dhahabī listed fewer uses, but those he mentioned were in agreement with Ibn al-Qayyim's and Ibn Mufliḥ's information. 407 Ibn Sīnā included ginger in his list of drugs and, as al-Dhahabī and Ibn Mufliḥ, said it was hot and dry with some humidity. The uses of ginger were the same as mentioned by Ibn al-Qayyim and Ibn Mufliḥ. 408

Anise (anīsūn) was said by al-Dhahabī to be hot and dry. It cured pain in the stomach, dissolved wind, increased menstrual flow, milk and semen, and prevented the effects of poisons. Further, as a collyrium it improved vision. 409 Ibn Sīnā's opinion of the temperament of anise was in agreement with al-Dhahabī's. Also most of the effects al-Dhahabī listed were mentioned by Ibn Sīnā: the curing of pain, dissolving of wind, increasing of milk and preventing the effects of poisons. Ibn Sīnā did not mention anise's positive effect on eyesight. However, another representative of Graeco-Islamic medicine, al-Bīrūnī, mentioned that anise could be used to cure inflammation of the cornea (vascular keratitis, al-sabal al-'āriḍ lil-'ain). 410 It could be that anise was generally considered to be good for the eyes and not only used to cure a particular eye complaint. Anise was not listed by Ibn al-Qayyim and Ibn Mufliḥ, because anise was not mentioned in the hadiths.

Very few of the traditions that the authors quoted in their lists had a content that had something to do with treatment of illnesses. But some of the hadiths did give specific medical advice, such as: "Treat pleurisy with marine costus and oil"411 or "Use Indian aloe, because it includes seven cures, one of which is a cure for pleurisy".412 Some of these medical hadiths did find the approval of the doctors. For example, the Prophet had, as confirmed by several hadiths, recommended that the sick should eat a thin gruel of barley flour, *talbīna*, which he had considered beneficial to them. This gruel was also appreciated by the doctors as a suitable food for the sick.413

Most of the traditions quoted in the lists of drugs and foodstuffs had a non-medical content. For example of lemon (utrujj), the Prophet had said: "The believer, who recites the Koran, is like a lemon, pleasant to taste and pleasant to smell". Instead of the nut, the Prophet had spoken of the pine tree (arz / sanaubar): "The hypocrite is like a pine tree which remains standing firm until it once is uprooted". These hadiths were probably reported, because they were the only ones known to contain the names of the drugs or

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<sup>406</sup> IQ, p. 246.
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⁴⁰⁷ DH, p. 92. IM, vol. 3, pp. 28f.

⁴⁰⁸ Ibn Sīnā, al-Qānūn, vol. 1, p. 302 (zanjabīl).

⁴⁰⁹ DH, p. 57.

⁴¹⁰ Ibn Sīnā, al-Qānūn, vol. 1, pp. 243f (anīsūn) and al-Bīrūnī, Kitāb al-şaidana, p. 44 (anīsūn).

⁴¹¹ DH, p. 116.

⁴¹² IQ, p. 273.

⁴¹³ IQ, p. 95.

⁴¹⁴ IQ, p. 218 and DH, p. 52.

⁴¹⁵ IQ, p. 220.

foodstuffs. Even though their content was irrelevant in a medical context, they could be used to demonstrate that the Prophet had not denied or abominated the use of the items mentioned.

In their lists of medicaments Ibn al-Qayyim and Ibn Muflih presented traditions that they did not consider sound. Some of them were also quoted by al-Dhahabī but without any comment on their soundness or weakness. Among the unsound traditions there were two hadiths about rice (aruzz): "If rice were a man, he would be gentle" and "Everything the earth brings out has an illness except rice. Rice is health and there is no illness in it." Ibn al-Qayyim and Ibn Muflih judged both of them invalid ($b\bar{a}til$, $maud\bar{u}^{\bar{i}}$). The hadith could also be deemed to be unsound ($l\bar{a}$ yasihhu). About raisins ($zab\bar{i}b$) Ibn al-Qayyim and Ibn Muflih presented two hadiths, both of them unsound: "Raisins are excellent food; they sweeten the breath and remove phlegm" and "Raisins are excellent food; they remove fatigue, strengthen the nerves, stifle anger, give a clear complexion and sweeten the breath". In some cases Ibn al-Qayyim only added that the reliability was unsettled ($f\bar{i}$ thubūtihi nazarun) as in the case of a hadith on eggs (baid): "al-Baihaqī mentioned in $Sha^{\bar{i}}b$ $al-\bar{l}m\bar{a}n$ the words of the Prophet: 'One of the prophets complained to God of his weakness and God ordered him to eat eggs.' "418

In all these cases the unsound hadiths were the only hadiths quoted, but their lack of authenticity did not prevent Ibn al-Qayyim and Ibn Mufliḥ from listing the medical properties of the foodstuffs mentioned in them. The valuation of the hadith was only given as a necessary hadith criticism, or as Ibn al-Qayyim explained his inclusion of the invalid hadiths: "We mentioned them as a counsel and warning for those who connect them to the Prophet". The hadiths were probably widely known and often quoted. Ibn al-Qayyim and Ibn Mufliḥ wanted it to be known that the attribution of these sayings to the Prophet was false. However, even though the hadiths proved to be false, there was nothing wrong in using these foodstuffs, which were generally accepted and which were also included in al-Bīrūnī's *Kitāb al-ṣaidana*. Further, although the sayings could not be attributed to the Prophet, that did not mean that the message of these sayings was untrue: nobody could deny that eggs were nutritious or that raisins sweetened the breath.

Ibn al-Qayyim and Ibn Muflin noted that the Prophet had only given instructions on the use of simple drugs and never of compounds. They saw that in this the Prophet

⁴¹⁶ IQ, p. 220 (bāṭil). IM vol. 3, p. 10 (mauḍū'ī). The latter hadith is also quoted in DH, p. 54, on the authority of 'Alī: 'Rice is health, there is no illness in it'. al-Dhahabī did not comment on its soundness.

⁴¹⁷ IQ, p. 245. IM, vol. 3, p. 27. al-Dhahabī quoted the hadith without comments on its soundness: "Eat raisins, because they are excellent food; they remove fatigue, stifle the anger, strengthen the nerves, sweeten the breath, remove phlegm and give a clear complexion" (DH, p. 91).

⁴¹⁸ IQ, p. 222f. The tradition is also quoted in DH, p. 62 and IM, vol. 3, p. 11. Also al-Dhahabī and Ibn Muflih gave al-Baihaqī's Sha'b al-īmān as the source, but they did not comment on the soundness of the hadith.

⁴¹⁹ IQ, p. 220.

⁴²⁰ al-Bīrūnī, Kitāb al-ṣaidana, p. 19 (aruzz), p. 82 (baiḍ) and p. 163 (zabīb).

differed from the practice of Byzantine and Greek doctors, who often treated illnesses with compound medicines. Even though the Prophet had favoured simple drugs, Ibn al-Qayyim and Ibn Mufliḥ did not regard it as a prohibition against administering compound drugs. They accepted the medical view that the patient's habits should be considered together with the nature of the illness when the treatment was selected. The Prophet and the Muslims of the early community had led a simple life and had been accustomed to a simple diet, therefore it had been enough for the Prophet to concentrate on simple medicaments. In contrast, the city dwellers were used to a complex diet and suffered from complex diseases, which had to be treated with compound drugs. All al-Dhahabī did not take up the discussion but merely stated that the use of compound drugs was necessary to cure more complicated or severe illnesses. Pinally, all three authors stressed that a competent doctor always followed the generally recognized principle of rejecting the use of drugs when a diet was sufficient and not to administer compound drugs where simple drugs would suffice.

8.5.3. Forbidden medicaments

The authors also discussed the use of medicaments that were forbidden to Muslims. The forbidden substances that they mentioned were wine, silk, frogs and she-ass' milk. The prohibition of silk was not absolute. The hadiths allowed women to wear silk whenever they wished, but for men silk garments were forbidden. But if a man did not have anything else to cover himself with, he was allowed to use clothes made of silk. The Prophet had also allowed men to wear silk garments if they suffered from itch (hikka) or lice. al-Dhahabī commented that Ibn Sīnā had not agreed with the teaching of the Prophet, but had maintained that lice throve on silk. He was wrong in attributing this view to Ibn Sīnā, whose instructions for getting rid of lice actually included the wearing of silk clothing. 424 Moreover, Ibn al-Qayyim and al-Dhahabī held the opinion that silk delighted and strengthened the soul and was therefore beneficial in curing illnesses, especially illnesses that were caused by excessive black bile. 425 Ibn Muflih did not mention silk.

As for frogs, al-Dhahabī, Ibn al-Qayyim and Ibn Mufliḥ quoted a hadith according to which a doctor had told the Prophet that frogs were medicine. The Prophet had denied this and had forbidden the killing of frogs. 426 The authors were able to justify the Prophet's view by referring to Ibn Sīnā's view on the flesh and blood of the frog as deadly poisons if eaten. 427 However, Ibn Sīnā listed some external uses of the burned

⁴²¹ IQ, pp. 5f and 57. IM, vol. 2, p. 430.

⁴²² DH, p. 143.

⁴²³ IQ, pp. 6 and 115. DH, p. 50. IM, vol. 2, p. 475.

⁴²⁴ Ibn Sīnā, al-Qānūn, vol. 3, p. 298.

⁴²⁵ IQ, pp. 60-63 and DH, p. 73.

⁴²⁶ IQ, pp. 122 and 259f. DH, p. 75. IM, vol. 2, p. 484.

⁴²⁷ IQ, p. 260. DH, p. 103. IM, loc. cit. Ibn Sīnā, al-Qānūn, vol. 1, p. 466.

body of a frog. These were also mentioned by Ibn Mufliḥ without any further comment that the Prophet had forbidden the use of frogs as medicine. 428 Ibn al-Qayyim and al-Dhahabī accepted the Prophet's rejection of frogs fully, whereas Ibn Mufliḥ compromised with the current medical view and only rejected the eating of frogs but accepted the external use of their charred bodies or ashes. He reached a similar compromise over she-ass' milk. After quoting a tradition that the Prophet had forbidden it, he proceeded to list its medical properties and uses. 429 al-Dhahabī and Ibn al-Qayyim did not include she-ass' milk among the forbidden medicaments.

The prohibition on the use of wine was problematic. Even though the prohibition of wine in Islamic law was drawn from the text of the Koran and was therefore seen to originate from the highest authority, many Muslim physicians approved of the drinking of wine and used it as a medicament. Their positive attitude to wine was based on the opinion of their Greek authorities, who considered wine to have a high nutritional value. 430 The fact that the doctors did not reject wine forced the authors of the Prophet's medicine to discuss the prohibition more thoroughly. Ibn al-Qayyim, al-Dhahabī and Ibn Muflih quoted a tradition saying that the Prophet had been aware that wine was used in the treatment of illnesses, but he had forbidden its use and said: "Wine is not a cure, it is a disease". 431 Ibn al-Qayyim further explained that wine was forbidden because it was injurious. God had not forbidden it to punish the Muslims but to protect them from the harm it caused. He recognized the curing qualities of wine, but claimed that even if it benefited the body, it harmed the soul. 432 The same view was also proposed by al-Dhahabī, who admitted that wine cured some illnesses, but its use endangered the salvation of the Muslim: "The Prophet transferred wine from being an issue pertaining to this world to being an issue pertaining to the hereafter". 433 Ibn Muflih said that the damage caused by wine was greater than its benefits, especially because wine was often drunk for other purposes than strictly medical ones. He quoted Hippocrates' word that wine damaged the brain. Thus wine was forbidden because it was dangerous to both the soul and body of man. 434

Ibn al-Qayyim added some general remarks on the use of forbidden substances as medicine to his discussion of wine. Ibn al-Qayyim stated that in order to be effective, a medicament had to be accepted by the patient and he had to have faith in its curing effect. God had created the medicaments and blessed them with the quality to cure. Therefore, a true believer could not trust in being cured by a substance which God had not blessed but forbidden. If he used a medicament that he knew to be forbidden, he could not believe in its curing effect and the medicament would not cure his illness but make it worse. 435

⁴²⁸ IM, loc. cit. Ibn Sīnā, op. & loc. cit.

⁴²⁹ IM, vol. 2, pp. 484f.

⁴³⁰ Dols 1978, p. 91 and note 12. Ibn Sīnā listed the medical properties of wine in al-Qānūn, vol. 1, p. 442 (sharāb).

⁴³¹ IQ, p. 122. DH, p. 75. IM, vol. 3, p. 102.

⁴³² IQ, p. 123.

⁴³³ DH, p. 76.

⁴³⁴ IM, loc. cit.

8.5.4. Divine medicaments

In addition to drugs and foodstuffs the authors recommended the use of divine medicaments ($adwiya\ il\bar{a}h\bar{i}ya$) or—in al-Dhahabī's terminology—the Prophet's medicaments ($adwiya\ nabaw\bar{i}ya$). These were prayer ($sal\bar{a}t$), patience (sabr), fast (saum), sampleihad, Koran and incantations (salva). Ordinary physicians were ignorant of the use of these medicaments, and therefore their medicine was inferior to that of the Prophet. Ibn Muflih further claimed that divine cures were more effective and perfect than the natural ones. The person who used divine cures turned towards God and this was, according to Ibn Muflih, more effective than the use of medicinal plants.

The divine medicaments were indispensable in reaching spiritual well-being, but they could also be used to cure physical disorders. The Prophet had instructed Abū Huraira to cure his stomach pain with prayer: "Rise to pray, for prayer is a cure." al-Dhahabī and Ibn al-Qayyim explained that the curing effect of the prayer was based partly on the physical activity it demanded and partly on the mental state it created. When praying, a person moved most of his joints and relaxed the internal organs. These movements accelerated the digestion and helped to expel the superfluities that caused the illness. Furthermore, remembering the hereafter strengthened the believer's faculties and his soul and this enabled the body to fight against the illness and finally defeat it. Prayer was also effective against feeling pain, because when concentrating on prayer a person forgot his pain. According to al-Dhahabī, the physical exercise of prayer also improved the condition of a person suffering from a cold: the prostration opened the blocked nose. 438

By stressing the physical aspects of the ritual prayer, the authors rationalized the Prophet's statement in a way that was acceptable even to the doctors. Ibn al-Qayyim expressed this aim as follows:

If the breasts of the heretic doctors $(zind\bar{\imath}q\ al-atibb\bar{a}^{\,2})$ do not expand to this treatment, they must be spoken to in medical terms. They must be told that prayer is an exercise for both the soul and body. It consists of various movements and positions: straightening up, bowing, prostration, the movement of the hips, shifting of positions, etc. In all these positions most of the joints are moved and most of the internal organs are squeezed. Among these organs are the stomach, bowels, respiratory and digestive organs. It cannot be denied that these movements are strengthening and that they dissolve the substances. In particular, prayer strengthens the soul and expands it and this strengthens the constitution and the pain is expelled. 439

⁴³⁵ IQ, p. 124.

⁴³⁶ IQ, p. 7.

⁴³⁷ IM, vol. 2, p. 367 and vol. 3, p. 110.

⁴³⁸ IQ, pp. 163f and 256. DH, pp. 200f.

⁴³⁹ IQ, p. 164.

In his reference to heretic doctors Ibn al-Qayyim used the expression 'expanding of the breasts' (*inshirāḥ al-ṣadr*), which is often used in a religious context to mean the opening of the soul to receive divine knowledge, as in the Koran:

«Whomsoever God desires to guide, He expands his breast to Islam; whomsoever He desires to lead astray, He makes his breast narrow, tight, as if he were climbing to heaven. So God lays abomination upon those who believe not.» (6:125)

By using the expression *inshirāḥ al-ṣadr* Ibn al-Qayyim wanted to indicate that religious cures were knowledge that God had given to the believers, but the heretic doctors did not possess this knowledge. In order to make them understand the positive effects of these cures, it was therefore necessary to use vocabulary acceptable to them.

Ibn al-Qayyim further presented patience (*sabr*) as a curing method. He claimed that the majority of the illnesses of the body and soul were caused by lack of patience. A believer had to be patient in three things: in fulfilling his religious duties, in avoiding what is forbidden, and in not resenting God's decrees. 440 Ibn al-Qayyim did not explain how patience could cure or prevent illnesses, but obviously its effect was analogical to that of prayer, i.e. patience strengthened the soul and faculties so that the body became stronger and the disease was evicted. Similarly the faculties were strengthened, if the Koran was used as medicine. The Koran could be placed on the spot were the illness was located as Ibn al-Qayyim suggested or contemplated as advised by the Prophet. 442 The success of this treatment depended largely on the patient: only if he truly believed in the cure, accepted it fully and was firmly convinced that it was effective, could the disease be defeated. There was no disease that could resist the word of God. If the Koran proved to be ineffective in spite of strong faith, then it was God's will not to cure the patient. 443

The authors accepted recited and written charms (ruqya) as cures, although there was some confusion regarding the Prophet's attitude towards them. Some of the hadiths seemed to indicate that the Prophet had restricted the use of incantations to some particular occasions, but there were other hadiths that spoke for a more free usage. According to the restrictive hadiths, the Prophet had said: "There is no incantation, except for evil eye or poisonous stings (huma)". In other versions bleeding $(dam\ l\bar{a}\ yarqa\ ^{3}u)$ or herpes (namla) were added to the list. Ibn Muflih also included headache among the ailments. The idea of restriction was contradicted by a hadith reporting that the Prophet had recommended a specific charm for all complaints. 445

⁴⁴⁰ IQ, p. 257.

⁴⁴¹ IQ, p. 272.

⁴⁴² DH, p. 202.

⁴⁴³ IQ, pp. 272f.

⁴⁴⁴ IM, vol. 2, p. 476.

⁴⁴⁵ IO, p. 136: The incantation contained a part of the Christian prayer starting 'Our Father, who art in

Another tradition related how the angel Gabriel had healed the Prophet with an incantation that cured all illnesses. Ibn al-Qayyim resolved the contradiction by claiming that the Prophet had not intended to forbid the use of charms for other purposes than the ones mentioned in the restrictive traditions, but had merely stated that the most effective incantations were the ones recited for evil eye or poisonous stings. 446

al-Dhahabī and Ibn Mufliḥ quoted a hadith that Ibn al-Qayyim had chosen to ignore, namely the words of the Prophet: "Incantations $(ruq\bar{a})$ and amulets $(tam\bar{a})im$) are polytheism (shirk)". al-Dhahabī did not, however, interpret these words to be an absolute prohibition against all types of incantations, but in his opinion the Prophet had merely prohibited the use of incantations with a non-Islamic content. This he proved by quoting hadiths showing that the Prophet had himself used incantations. He further quoted the Prophet's answer to a question regarding their permissibility: "Whosoever among you is able to help his brother, he should do so". 447 Ibn Mufliḥ held a similar view and stated that it was permissible to use incantations, if they were written or recited in Arabic and thus comprehensible to the users. 448

The authors referred to Aḥmad ibn Ḥanbal and Ibn Taimīya, who had both considered it permissible to use written sentences of the Koran as medicaments. Aḥmad ibn Ḥanbal had accepted the following method: a sentence of the Koran was written on some material that was then washed in water and the sick person was given the water to drink. 449 Ibn Taimīya had written a sentence of the Koran on the forehead of a man who suffered from nosebleed $(ru \, ^c \bar{a}f)$ and the man had been cured. 450

The opinion of the Muslim scholars was divided regarding the wearing of amulets. Some scholars held the opinion that no amulets whatever their content—even if the text was from the Koran—should be attached to clothes or worn by a person. According to these scholars the wearing of amulets indicated that the person relied on its power and this was idolatry. Some were more lenient and accepted the wearing of amulets if the bearer was suffering from an affliction. They only considered the custom of wearing amulets in the hope of preventing misfortunes from occurring as idolatrous. The three authors of the Prophet's medicine all accepted the wearing of amulets for curing illnesses, but rejected their use for prevention. They referred to the authority of Aḥmad ibn Ḥanbal, who had been lenient towards the practice. He had based his view on the traditions reporting that the Prophet's wives had worn amulets and that the Prophet had not forbidden them from doing so. 452

heaven, hallowed be Thy name...' In the version quoted by Ibn al-Qayyim, the word Father was replaced by the word Lord (*rabb*), because the idea of God as a father was unacceptable to Muslims. The use of this prayer as a charm is also mentioned in Kleir.-Franke 1982, p. 24. The same prayer is also quoted by al-Dhahabī as an incantation to improve the flow of urine (DH, p. 204).

⁴⁴⁶ IQ, pp. 136f.

⁴⁴⁷ DH, pp. 160 and 195f.

⁴⁴⁸ IM, vol. 2, p. 476.

⁴⁴⁹ DH, p. 197. IM, vol. 2, p. 477.

⁴⁵⁰ IQ, p. 278 and IM. vol. 2, p. 478.

⁴⁵¹ IM, vol. 2, p. 480 and vol. 3, pp. 75-77.

⁴⁵² DH, p. 199, IQ, p. 277 and IM, vol. 2, p. 480.

Magic was taken seriously in the medieval Muslim world. Ibn Khaldūn considered sorcery, the art of talismans and letter magic as sciences. The use of charms and amulets for curing illnesses was a common practice. Even though authoritative medical books, such as Ibn Sīnā's al-Qānūn fī al-ṭibb, did not contain references to charms and amulets, practising physicians used them in their treatment of illnesses. al-Kaḥḥāl Ibn Ṭarkhān, one of the authors of the Prophet's medicine, recommended an amulet against sciatica. It consisted of numbers and letters without diacritic marks. He had seen one of the senior physicians at the Nūrī hospital in Damascus write it for the treatment of that ailment. 454

Also the later authors of the Prophet's medicine, Ibrāhīm al-Azraq and al-Ṣanaubarī—both of them physicians—recommended various amulets for the treatment of illnesses. They contained letter combinations, geometric symbols and numbers. al-Ṣanaubarī depicted the magic square and the symbols belonging to the Seal of the Ineffable Name, i.e. the secret name of God. These various types of charms were also very often depicted by the authors of plague treatises written during and after the Black Death. Many of these amulets belonged to the ancient magical traditions of the Middle East and Asia. Asia.

Ibn al-Qayyim, al-Dhahabī and Ibn Mufliḥ wanted to reform the current practice by insisting that all the non-Islamic elements had to be rejected. Amulets or incantations containing incomprehensible words were abominations and forbidden. Ibn Mufliḥ referred to Mālik ibn Anas, who had abhorred the use of the Seal of Solomon—a sixpointed star—as an amulet. The content of the incantations, whether written to be used only once or worn as amulets, had to be in agreement with the teachings of Islam. Ibn al-Qayyim preferred that the text of the incantation was taken from the Koran, because God's words surpassed all other words and contained the perfect cure. al-Dhahabī also wanted the text to be taken from the Koran or at least to be devoid of heresy. He further stressed that the person using amulets or treated by incantations should not believe in the curing effect of the writing itself, but should consider the charm as a way of seeking refuge in God. A similar opinion was expressed by Ibn Mufliḥ.

⁴⁵³ Ibn Khaldūn, The Muqaddimah, vol. 3, pp. 156-227.

⁴⁵⁴ al-Kaḥhāl Ibn Tarkhān, al-Aḥkām al-nabawīya, p. 40.

⁴⁵⁵ Ibrāhīm al-Azraq, Kitāb tashīl, a letter combination p. 177. al-Şanaubarī, Kitāb al-raḥma: e.g. a row of repeated letters and/or numbers e.g. pp. 121, 149 153, 158, 162 and 169; figures made of letter combinations, e.g. pp. 108, 119, 152, 171, 218 and 252; symbols of the Seal, pp. 119, 147, 150, 230 and 276; magic squares e.g. pp. 121, 204, 208, 250, 251, 252 and 280. The symbols of the Seal of the Ineffable Name have been presented in Ittig 1982, p. 85.

⁴⁵⁶ Illustrations can be found in Dols 1977, pp. 129-140.

⁴⁵⁷ For the background to and origin of the symbols see Camman 1968-69 and Winkler 1930.

⁴⁵⁸ IM. vol. 2, p. 479. The Seal of Solomon is described in Ittig 1982, p. 86.

⁴⁵⁹ IO, p. 138. DH, pp. 195f and 199.

⁴⁶⁰ IM, vol. 3, p. 78.

8.6. The position of the doctor

Both Ibn al-Qayyim and al-Dhahabī accepted that the trained physician was the best person to diagnose and treat a disease. The doctors had through study and experience gained a knowledge of the various diseases and their cures. The Prophet's widow, 'Ā'isha had been recognized as having extensive medical knowledge. When she was asked how she had got it, she answered: "I used to listen to people describing cures to each other and I memorized what they said". The Prophet's words: "God did not give an illness without giving it a cure" were seen as an encouragement to study medicine and were considered to contain a promise that there was indeed a cure for every illness, which could be found if enough effort was put into study. 462

Among the Prophet's traditions the two authors also found an instruction to always invite the best physician to treat an illness. The Prophet had once asked two men who had been called to attend a wounded person: "Which of you is the best doctor?" This hadith was commented on by Ibn al-Qayyim and Ibn Muflih, who stated that when a person needs the help of a professional, be that a physician or someone else, he should always go to the most skilful. Also al-Dhahabī urged people to follow the advice of the Prophet given in the hadith and warned against ignorant doctors. As a further authority he quoted Galen, who had said about the effects of unqualified treatment: "If an ignorant doctor attends a person suffering from fever, he leaves the patient suffering from two fevers". Ibn Muflih quoted Ibn 'Aqīl's words: "Ignorant doctors are a plague".463

The authors' interest in questions of jurisprudence becomes apparent in their discussion of the doctor's responsibility in cases when the patient's condition worsened or resulted in death. They quoted the words of the Prophet: "If a person who has not previously been known as a doctor practises medicine, he is held responsible". 464 al-Dhahabī also quoted the more detailed variation: "If a person who is not known as a doctor treats a patient, and the patient dies or is injured, he is held responsible". 465 In accordance with these traditions, the general legal opinion was that if a doctor exceeded the limits of his knowledge and damaged the patient, he was held to be responsible. Similarly a person who pretended to have medical knowledge that he in fact did not possess, was responsible for the damage he caused. To this Ibn al-Qayyim and Ibn Muflih added that if the patient had agreed to be treated by a doctor whom he knew to be ignorant of medicine or whose knowledge he knew to be defective, the doctor was not liable for the damage he caused. 466

Ibn al-Qayyim treated this legal issue in more detail than al-Dhahabī and Ibn Mufliḥ. In addition to the case of the charlatan, he took up three other cases of a

⁴⁶¹ DH, p. 158.

⁴⁶² DH, p. 156 and IQ, p. 12.

⁴⁶³ IQ, p. 105. DH, p. 153. IM, vol. 2, p. 473.

⁴⁶⁴ IQ, p. 107. DH, p. 158. IM, loc.cit.

⁴⁶⁵ DH, loc. cit.

⁴⁶⁶ IQ, pp. 110f and IM, vol. 2, p. 474.

doctor's responsibility for the worsened condition of the patient. Firstly, there was the case where the doctor was known to be competent, but in spite of the fact that he had not committed an error in his treatment, his patient died or was injured. In this case the doctor was not held responsible, but it was admitted that all treatments involved a risk that the patient had to take. In the second case presented by Ibn al-Qayyim, the competent doctor had committed an error. In this case he was held responsible and had to pay indemnities either from his own purse or the money was to be given from the state treasury. The third case dealt with a competent doctor who treated a patient without his permission or the permission of his guardian. If the treatment damaged the patient, the doctor was in Ibn al-Qayyim's own opinion liable, because he had exceeded his authorization by acting without permission.

Ibn al-Oayyim further presented the requirements for a competent doctor. A perfect doctor should be experienced in recognizing and treating not only physical illnesses but also those of the soul and spirit. A doctor who was competent only in dealing with the diseases of the body was imperfect in his profession. A competent doctor should know how to use natural drugs, divine medicaments and he should be able to make use of imagination in his treatment. By the term natural drugs he obviously referred to the plants and foodstuffs that were used as corrective diets or as drugs, whereas the divine medicaments were religious observances such as prayer, the mentioning of God's name and others that have been referred to above. To these Ibn al-Oayvim added treatment with the help of imagination ('ilāj bil-takhayyul), which he did not, in contrast to the natural and divine medicaments, discuss elsewhere in the book. As an explanation to the term he only added that doctors can with the help of imagination gain results where the drugs fail. 468 By this he most probably meant the psychological treatment that was practised by the doctors of the Graeco-Islamic school. For example the famous doctor al-Rāzī treated a patient suffering from paralysis of his legs by suddenly threatening the patient with a knife as if intending to kill him. The shock made the patient spring to his feet and the paralysis was cured. 469

In their search for cures, physicians should not ignore or despise the medical knowledge of the Prophet. According to Ibn Muflih, the doctors were not aware that in the Prophet's medicine they could find cures to many diseases that baffled them. 470 Ibn al-Qayyim maintained that especially in the medicine of the soul (tibb al-qulūb) the knowledge of the prophets was indispensable: they were the only authorities in this field. 471 God had also revealed to the prophets the benefits of spiritual medicaments. He had taught them how reliance on God, turning towards him in prayer cured illnesses. This was, according to Ibn al-Qayyim, information that even the wisest of the doctors could never attain. The lack of this knowledge made the medicine of the

⁴⁶⁷ IQ, pp. 109-112.

⁴⁶⁸ IQ, pp. 113f.

⁴⁶⁹ Bürgel 1976, p. 51.

⁴⁷⁰ IM, vol. 3, p. 116.

⁴⁷¹ IQ, p. 3.

doctors inferior to that of the prophets.⁴⁷² With this evaluation Ibn al-Qayyim wanted to show that, in order to improve their general medical knowledge, the doctors had to pay attention to the words and deeds of the prophets and benefit from their teaching. It was not enough to rely on standard medical literature and teaching.

In al-Dhahabi's opinion the special knowledge of the prophets was not restricted to the religious medicaments, but the prophets had also been given information on natural cures. As an example he presented Solomon, who had gained medical knowledge from the plants themselves. According to the story a green tree had grown in front of him while he was praying in the temple:

After Solomon had finished praying the tree asked him: "Do you not ask me who I am?" Solomon asked: "Who are you?" The tree answered: "I am such and such a tree, a medicine for such and such a disease and I contain such and such a malady". Solomon ordered the tree to be cut. When he came the next day, a similar thing occurred. Every day when Solomon entered the temple he saw a tree and the tree told him about itself. Solomon ordered the scribes to write down the information.⁴⁷³

The motive for presenting this anecdote just before the list of drugs and foodstuffs is obvious. Even though no similar stories are known of the prophet Muḥammad, the story of the earlier prophet, Solomon, lends authority to the medical instructions of the Prophet. If the plants had imparted their knowledge to Solomon, they could have done it to Muḥammad as well, or at least the Prophet could be in possession of the knowledge given to his predecessors. It was also obvious that the ordinary doctors could not compete with the knowledge that had been revealed to the prophets in this way. Therefore also al-Dhahabī wanted Muslims, both doctors and ordinary people, to pay more attention to the medical instructions of the Prophet.

In choosing a doctor, professional qualifications were important but religious affiliation was not an issue to be overlooked. There were some scholars who took a very strict attitude against the *dhimmī* doctors. As I mentioned above, the Malikite scholar Ibn al-Ḥājj strongly disapproved of the fact that Muslims sought the medical advice of *dhimmī* doctors. The issue was discussed fairly extensively by Ibn Mufliḥ. A Muslim should not accept a treatment that prevented him from fulfilling his religious duties. Neither should he take a compound medicament prescribed by a *dhimmī* if he did not know what it consisted of. A *dhimmī* doctor might have included substances forbidden to Muslims in it. According to Ibn Mufliḥ, some scholars accepted that a Muslim should consult a *dhimmī* doctor only if he could not find one who was Muslim. Other scholars were more lenient. Among them was Ibn Taimīya, who had considered it permissible to consult *dhimmī* doctors, if they were known to be competent. Ibn Taimīya had based his opinion on the verse «And of the People of the Book is he who, if thou trust him with a hundredweight, will restore it thee; and of

⁴⁷² IQ, p. 7.

⁴⁷³ DH, p. 52.

⁴⁷⁴ Ibn al-Ḥājj, Madkhal, vol. 3, pp. 89f.

them is he who, if thou trust him with one pound, will not restore it thee ...» (3:75). He also stated that the Prophet had sought the advice of al-Ḥārith ibn Kalada, who had been an unbeliever $(k\bar{a}fir)$.⁴⁷⁵

Similar views were expressed by al-Dhahabī who, on the authority of Aḥmad ibn Ḥanbal, stated that it was permissible to use the services of a *dhimmī* doctor. A Muslim patient should, however, ignore the advice of the non-Muslim doctor if it contained elements that were forbidden or prevented him from fulfilling his religious duties.⁴⁷⁶

Ibn al-Qayyim did not directly discuss the religious affiliation of the physicians. However, in his list of the qualities of a competent doctor, he mentioned that he should be able to use divine medicaments. This implies that only a Muslim could be a fully competent physician, because no *dhimmī* could administer the divine medicaments that had been revealed by God to the Prophet Muḥammad. Also Ibn Mufliḥ and al-Dhahabī maintained that physicians would improve the standard of their treatment if they accepted the guidance of the Prophet in medical matters. Therefore, for all three authors, to consult a *dhimmī* physician—or a Muslim physician who was ignorant of the Prophet's medicine—was to consult a second rate physician.

⁴⁷⁵ IM, vol. 2, pp. 462f.

⁴⁷⁶ DH, pp. 153f.