

11. Conclusions

The Prophet's medicine developed gradually from collections of uncommented hadiths to medical books where traditions were placed within the framework of medical theory. This latest stage in the development is apparent in the three texts that have been the object of this study. Two of the texts were written by Hanbalite scholars, Ibn al-Qayyim and Ibn Mufliḥ. The authorship of the third text has been disputed, but on the basis of the text itself, al-Dhahabī—a contemporary of Ibn al-Qayyim and Ibn Mufliḥ, and a Shafi'ite-Hanbalite scholar—emerges as the most likely author. This places all the texts in the same intellectual environment: the traditionalist circles of Damascus during the rule of the Turkish Mamluks in the first half of the 8th/14th century. The three authors were further all pupils and close companions of Ibn Taimīya, one of the most influential and famous scholars of the period.

Damascus was at that time a centre for traditionalist learning. The scholars saw themselves as guardians of Islamic values in a society corrupted by innovations in faith and social customs. They were worried about the future of their society. The recent Mongol attacks had been expressions of God's anger at this development. The way to heed the warning given by God was to reform the society by enforcing a closer adherence to *sharī'a* and rejecting all innovations.

The interest of the scholars was not only directed towards influencing the policies of the rulers, but they also wanted to remind the common people that they were expected to live their daily life so that it was in accordance with the teachings of the Prophet. The scholars wrote books in order to instruct people in correct behaviour. Ibn al-Qayyim's *Zād al-ma'ād* and Ibn Mufliḥ's *al-Ādāb al-shar'īya* belonged to this genre of literature. The texts not only dealt with proper ways to arrange marriages, give names to children, celebrate Muslim holidays, etc. but they also presented the Prophet's guidance in the treatment of illnesses and the preservation of health—in other words they instructed the people in the Prophet's medicine.

The scholars were particularly interested in medicine, because it was known to be a haven of non-Islamic ideas and practices. Many of the medical practitioners were *dhimmi*s and the piety even of the Muslim doctors was doubtful. It was well-known that medical studies did not only acquaint the students with diagnostic and curing methods but also with Hellenistic philosophy. The current medical theory demanded that the good physician was not only concerned with the patient's body but also with his soul. A good doctor was a physician-philosopher, who was able to instruct his patient how to lead an optimal life. The advice of the physicians was not necessarily in

⁵⁷¹ al-Rāzī, *al-Ṭibb al-rūḥānī*, p. 48. The English translation: Arberry 1950, p. 52.

accordance with the teachings of Islam. If the patient followed these instructions, he might have a good life in this world but his salvation could be in jeopardy. Therefore it is not surprising that the scholars of religious sciences felt the need to reform medicine by advocating the acceptance of the Prophet's guidance in issues of health and sickness.

It is significant that the three scholars, whose texts on the Prophet's medicine I have studied, were all traditionalists and not speculative theologians. The basic idea in medication was that medicaments had special curative characteristics and that there was a causal nexus between the drug and the healing. It was easy for the traditionalist scholars to accept this idea, because they recognized the existence of causality. In contrast, the speculative theologians rejected causality and claimed that the causal nexus was only apparent. It was in fact God who created each occurrence of cause and effect.

The texts of Ibn al-Qayyim, Ibn Muflīḥ and al-Dhahabī show that the authors did not reject the established Graeco-Islamic medicine, but wanted to add an Islamic dimension to it. They showed that God had guided believers in preventive and curative medicine. God had created the illnesses but He had also created the cures. Hippocrates and Galen devoted themselves to the study of medicine and could be credited with profound knowledge of diagnosing and treating illnesses. Similarly Ibn Sīnā and al-Rāzī were accepted as medical authorities. However, their knowledge in medicine was not perfect, because they lacked the guidance God had given to His prophets and particularly to the Prophet Muḥammad.

The special knowledge that the Prophet had was apparent in his instructions to use divine medicaments—prayer, fast, incantations, etc. The Prophet had also recognized the existence of evil spirits and their role in causing illnesses. Neither the divine medicaments nor the influence of spirits were accepted by the established medicine. This lack of knowledge was in the authors' opinion one of the reasons why the physicians had to admit their inability to cure some illnesses.

In addition to the special treatment with divine medicaments, the Prophet had also given advice on the use of natural medicaments—drugs and foodstuffs. The authors accepted the Prophet's guidance on the divine medicaments without hesitation. In contrast, they treated the Prophet's instructions on natural cures with certain reservations. They compared them carefully to the opinion of the Graeco-Islamic medicine and then often either restricted the application of the recommended cure to certain narrowly defined illnesses or claimed the method to be applicable only in the environmental conditions of al-Ḥijāz. The generally accepted medical principle that the environment influenced both the patient and the illness enabled the authors to reject the general acceptance of the Prophet's guidance without diminishing his authority or casting doubt on the correctness of his advice.

The authors found contagion—the transmissibility of illnesses—to be a problematic subject. Their traditionalist view on causality contained the idea that God had created medicaments with special qualities. Similarly the authors could accept that

God had created some illnesses with a contagious quality. The issue became problematic because of the contradictory hadith material. According to some hadiths the Prophet had denied contagion and according to others he had recognized its existence. All three authors accepted the existence of contagion in the sense that it was understood in Graeco-Islamic medicine. Their explanation of the Prophet's denial of contagion was that he had not rejected the contagion recognized in medicine, but had rejected a pre-Islamic belief connected to contagion. According to this belief, contagion—like bad luck—was seen as a characteristic of an individual not of a disease. Of the three authors Ibn al-Qayyim was the most straightforward in his acceptance of contagion, which he preferred to characterize as the transmittable quality of an illness.

Religion played an important role in the moral guidelines given by the authors of the Prophet's medicine. The ideal life was lived in accordance with the teachings of Islam. This ensured the salvation of the soul. Misfortunes and illnesses should be borne patiently without anger or grief. It is in these guidelines that the difference between the Prophet's medicine and Graeco-Islamic medicine is most clear. The Graeco-Islamic authorities gave advice on how to avoid suffering, both physical and mental: a person had to live a balanced life avoiding emotional or physical upheavals. According to them it was possible to achieve the perfect life in this world. The authors of the Prophet's medicine considered suffering a trial sent by God, which it was important to endure patiently without losing faith. Physical suffering in this world was temporary and therefore of only secondary importance. The main goal was to remain faithful to God and attain eternal happiness in the hereafter. This did not mean that the authors wanted the believers to neglect their health. Quite the contrary, they considered continuous physical well-being essential to the fulfilment of the religious duties.

These books on the Prophet's medicine were written for the common people to instruct them about Islamic norms in questions of health and illness. There was broad interest in hadiths, and the people attended sessions where the Prophet's words were quoted and explained. For the common people the memorizing of hadiths was both an act of piety and a way to gain practical knowledge about the teachings of Islam. For the scholars the education of the common people gave an opportunity to popularize their knowledge and to fight against innovations in social life. The authors of the Prophet's medicine considered it necessary to point out how the teachings of Islam affected the choice of medical treatment.

In the medieval period there was a variety of medical services available: Graeco-Islamic physicians, spiritual healers, popular medicine, charms, etc. None of these had the absolute authority among the population. The authors of the Prophet's medicine were aware of this pluralism and attempted on their part to guide the people to use the services of trained physicians and avoid charlatans and miracle makers. However, they did not recommend an unconditional acceptance of Graeco-Islamic medicine. Instead they promoted a new type of medicine, which combined the foreign Graeco-Islamic medical theory with the familiar religious concepts of Islam. The Prophet's medicine—as it appears in the works of Ibn al-Qayyim, Ibn Muflih and al-Dhahabī—

was an Islamic medicine, which not only gave advice on the treatment of physical illnesses but also responded to the spiritual needs of the believers.

