

7. The reasons for creating the Prophet's medicine

7.1. Justification for medicine

The early books on the Prophet's medicine consisted of uncommented hadiths reporting the Prophet's advice on various medical issues. At a later stage these hadith compilations were augmented by a medical interpretation that explained their content in the light of Graeco-Islamic medical theory. The final stage was the formulation of fairly comprehensive medical books, which united the hadiths and the Graeco-Islamic theory. The existence of the Prophet's medicine as a literary tradition raises the question of the authors' motives. The authors of the Prophet's medicine were mainly hadith scholars and therefore naturally interested in all aspects of the Prophet's sayings. But why did they want to compile special *al-Ṭibb al-nabawī* books? And further, why did they continue developing the Prophet's medicine including more and more general medical issues, even exceeding the bounds of the hadith material?

Fazlur Rahman discussed the motives behind the Prophet's medicine in his book *Health and medicine in the Islamic tradition*. In his opinion the major motive was "to spiritualize medicine, to set a high religious value on it".²⁷³ Unfortunately he did not clearly explain what he meant by that. However, the hadiths and quotations from the books on the Prophet's medicine which he gave as illustrations can be used as an indication. It appears that by 'the spiritualization of medicine' he meant the religious sanction of medication and good health. His main motive seemed to be the desire to prove that the preservation of health and the curing of illnesses were religious obligations and that medication was not incompatible with *tawakkul*.²⁷⁴

If Fazlur Rahman's view is accepted, it means that the main purpose of the Prophet's medicine was to legitimize medical treatment, to show that acceptance of medication did not mean lack of faith in God. As I have explained above, there were Muslims who had their doubt about the permissibility of medicine. They saw the use of medicine as an act incompatible with *tawakkul*. Some Muslims did not consider medications effective. They denied causality and maintained that there was no causal nexus between medication and cure. In their opinion it was God who directly caused health and illness.

With the help of quotations from the hadiths the authors of the Prophet's medicine

²⁷³ Rahman 1987, p. 42.

²⁷⁴ Rahman 1987, pp. 42-49. In his review of Rahman's book, Michael Dols assumed—in my opinion mistakenly—that Fazlur Rahman meant "the promotion of the spiritual/psychological aspect of health and healing" (Dols 1988, p. 420).

showed that medical treatment was the Sunna of the Prophet. But if the Prophet's medicine is only seen as a reaction to the anti-medical opinions, does it explain the emergence of a whole genre of literature on the subject? The early compilers of medical hadiths may have intended to expel any doubts there might be about the Prophet's generally positive attitude to medicine, but did legitimization continue to be a major motive? In particular, does that motive explain the later development of the Prophet's medicine represented by the texts of al-Dhahabī, Ibn al-Qayyim and Ibn Mufliḥ?

These three authors, who wrote their books in the 7th-8th/13th-14th century, referred to the anti-medical views, but was opposition to medicine really a relevant issue in the Mamluk period? I would argue that their discussion of the permissibility of medicine was not so much a reaction to an active and broad anti-medicine opposition as a formal recital of old arguments with only little up to the minute relevance. My argument finds support in Ibn Mufliḥ's text when he states that all the Sunni legal schools accepted the use of medicaments. The Shafi'ites and the Hanbalites preferred medication to its rejection. The Hanafites held medication to be a duty (*wājib*), whereas the Malikites considered both medication and rejection equally acceptable.²⁷⁵ Also al-Dhahabī maintained that the lawfulness of medicine was unanimously accepted.²⁷⁶

al-Dhahabī stated that there was a group favouring *tark al-tadāwī*, but he did not indicate how common a phenomenon the rejection of treatment was in his time. All his references were to Muslims of earlier generations: Aḥmad ibn Ḥanbal and Abū al-Dardā' (d. 32/652). The only contemporary reference was to Ibn Taimīya quoting Aḥmad ibn Ḥanbal's opinion that medication was obligatory.²⁷⁷ Neither did Ibn al-Qayyim specifically name any contemporary supporters of *tark al-tadāwī*. On the other hand, the length and enthusiasm of his argumentation might be an indication that he felt the issue relevant in his time and surroundings.

If there were opponents to medicine, they could be found among the Sufis. al-Kaḥḥāl Ibn Ṭarkhān defined the opponents of medicine as being "exaggerating Sufis, who deny treatment saying that everything is faith and predestination and there is no need for treatment".²⁷⁸ In Mamluk society there was an increase in the popularity of Sufism, partly in extreme forms. Shādhilīya Sufis had taken up the classical Sufi teachings and considered the total rejection of one's own actions as one of their ultimate goals. According to them the believer had to submit himself to God's will and be grateful and content with it. Ibn Taimīya opposed their excessive reliance in God, because it led them to disregard the *sharī'a*.²⁷⁹ There were also other Sufi groups that enjoyed popularity, particularly the Rifā'īya, who attracted the attention of the

²⁷⁵ IM, vol. 2, p. 359. Ibn Mufliḥ did not mention the Hanbalite school by name, but I assume that he included them in 'the later generations' (*al-khalaf*) who followed the example of 'pious ancestors' (*al-salaf*). Both of these groups had favoured medication. The Hanbalite scholar Ibn al-Jauzī was specially mentioned as a supporter of this view.

²⁷⁶ DH, p. 150.

²⁷⁷ DH, pp. 152.

²⁷⁸ al-Kaḥḥāl Ibn Ṭarkhān, *al-Aḥkām al-nabawīya*, p. 14.

²⁷⁹ Meier 1981, pp. 79f.

masses by their thaumaturgical exercises. Sufi ideas were also popular among the upper classes of society, among the rulers and religious scholars.

Even though the extreme practices of *tawakkul* belonged to an earlier, more ascetic phase of the Sufi movement, some of the Sufis might have been inclined to practise *tark al-tadāwī* as a sign of their piousness. Therefore a reminder of its permissibility may have been needed. On the other hand, the fact that the Sufi *khānqāh* at Siryāqūs, north of Cairo, founded by the Mamluk sultan al-Malik al-Nāṣir Muḥammad ibn Qalāwūn maintained a resident physician, surgeon and oculist²⁸⁰ shows that the Sufis did not necessarily reject medical treatment.

Apart from the Sufis, anti-medical views had earlier been also held by speculative theologians, who denied causality. This type of opposition cannot have been very prominent in the Mamluk period. The major school of speculative theology of the time was Ash'arism and the Ash'arites did not denounce the use of medicaments, though according to their theoretical view it was God who caused the drug to be effective.

All in all I find it likely that even though there might have been individuals rejecting medical treatment, medicine had gained a legitimate position, and opposition to it on religious grounds was marginal. The motive of legitimization could apply only to the early hadith compilations and even there it cannot have been the sole motive. Other motives have to be sought to explain more satisfactorily the interest the scholars took in assembling and analysing the Prophet's medical sayings.

7.2. *The Prophet's medicine as an Islamic form of medicine*

Some earlier studies on Graeco-Islamic medicine have briefly dealt with the Prophet's medicine and given motives for its creation. Christoph Bürgel and Manfred Ullmann considered it a competitive medicine that challenged Galen's position as a medical authority.²⁸¹ Bürgel called the Prophet's medicine "the Islamic dethronement of Galen ... in favor of Bedouin quackery and superstition".²⁸² In contrast, Fazlur Rahman did not consider the idea of confrontation to have been a central motive. According to him the challenge of Galenism was only apparent at a late stage in the development of the Prophet's medicine.²⁸³ This argument was rejected by Michael Dols in his review of Fazlur Rahman's book. Michael Dols supported the view that the authors of the Prophet's medicine wanted to confront Galen's authority, but he gave it a more positive valuation than Bürgel or Ullmann. He suggested that the Prophet's medicine should not be seen as a reaction against Galenic medicine but as a response to it, a kind of domestication of medicine.²⁸⁴

The medical hadiths in the early compilations of the Prophet's medicine, such as

²⁸⁰ Petry 1981, p. 341.

²⁸¹ Bürgel 1976, pp. 46f and 59f. Ullmann 1970, p. 185.

²⁸² Bürgel 1976, pp. 59f.

²⁸³ Rahman 1987, p. 42.

²⁸⁴ Dols 1988, p. 420. The same idea is expressed in Dols 1992, p. 248.

Ibn al-Sunni's and Abū Nu'aim's books, were arranged in chapters according to their medical subjects. This does not justify Fazlur Rahman's view that the challenge to Galen's authority was a late development. The arrangement of the material implies that already the very early authors of the Prophet's medicine wanted to indicate how well informed the Prophet had been on various medical issues. The hadiths were meant to show that Muslims could refer to his instructions which were at least as valuable as those of Galen and Hippocrates.

The Prophet's medicine was, as has been said, from the beginning intended to transfer the medical authority from Galen to the Prophet. But in contrast to the opinion expressed by Manfred Ullmann and Christoph Bürgel, I do not think that the idea was to discard Galen or deny the merits of Graeco-Islamic medicine. The constant references to Hippocrates, Galen, Ibn Sīnā—especially in the later texts—show that the medical opinions of these authorities were valued by the authors. The Prophet's medicine was an attempt to bring forth a new form of medicine, that would combine Islamic teachings and Graeco-Islamic medical theory. This is particularly apparent in the books representing the latest stage in the development of the Prophet's medicine. The books of al-Dhahabī and Ibn al-Qayyim were no longer mere specialized hadith collections but presented a discussion of all the major issues of medical theory and practice. Ibn Mufliḥ's text belongs to the same category although it is not as comprehensive as the texts of Ibn al-Qayyim and al-Dhahabī.

As shown before, the theologically argued rejection of medicine had never been the generally accepted rule in the Muslim community. The ascetics had refused medicaments and possibly some speculative theologians had followed their theoretical views in practice, but the majority of Muslims must have been assured of the permissibility of medicine by the many hadiths proving that the Prophet had himself been treated and allowed others to be treated for illnesses. By the 7th-8th/13th-14th century, when Ibn al-Qayyim, al-Dhahabī and Ibn Mufliḥ wrote their contributions, medication was not met with any wide opposition, but had gained general acceptance as a God-given means, the use of which was not in conflict with religion. Therefore medication in itself was not a problematic issue, but the medical theory and its origin could worry the pious scholars.

The established medicine in Islamic society was Graeco-Islamic medicine, which was of a foreign, non-Islamic origin. In the pious circles the study of Hellenistic sciences had never been regarded positively.²⁸⁵ The pious seem to have felt that these sciences formed a threat to the position of the religious sciences and might even expel them from the centre of scholarly interest. This suspicion had been expressed by Yāqūt (d. 626/1229), who had been worried that the Muslims might give up the sciences of al-Shāfi'ī and Mālik and let the opinions of Empedocles be their law.²⁸⁶ The problematic nature of the sciences can be further illustrated by the prohibition issued in 626/1229 by the Ayyubid ruler of Damascus, al-Malik al-Ashraf against the study of Hellenistic sciences and encouragement for the study of the sciences of hadith, *tafsīr*

²⁸⁵ About Muslim prejudices see Goldziher 1916.

²⁸⁶ *ibid.*, p. 4.

and *fiqh* instead.²⁸⁷ The same attitude prevailed in the Mamluk era and was expressed by Ibn Taimīya when he wrote that only the sciences inherited from the Prophet were useful and could be called sciences (‘*ilm*’).²⁸⁸

As a practical art medicine was not necessarily regarded as negatively as the other foreign sciences, but it was viewed with suspicion by the pious because of its links with Greek philosophy. Medical education did not only acquaint the student with Galenic medicine but also with Hellenistic philosophy. The ideal was that a doctor was a philosopher-physician, who was able to treat both the body and soul. The prominent physicians—such as Ibn Sīnā and Muḥammad ibn Zakarīyā’ al-Rāzī—had also been well-known philosophers. Their connection to Hellenistic philosophy aroused suspicions of their religious affiliation. Ibn Qayyim al-Jauzīya condemned Ibn Sīnā as an unbeliever (*kāfir*), because of his religious opinions. Ibn al-Qayyim blamed Ibn Sīnā for wanting to reduce the importance of *sharī‘a* into being a set of worldly rules intended to give guidelines on moderate behaviour and improvement of self. This meant a denial of *sharī‘a* as the divine law that had to be followed to gain salvation in the hereafter.²⁸⁹ Ibn al-Qayyim also expressed his disagreement with the Neoplatonism of al-Rāzī and characterized him as a heretic (*zindīq*). al-Rāzī had himself claimed that he had been influenced by Sabian views, atheism, philosophy and Hinduism. Ibn al-Qayyim commented on this by saying that al-Rāzī had obviously taken the worst out of every religion.²⁹⁰ The criticism was not only directed at old authorities, but also more contemporary physicians could be sources of disapproval. ‘Izz al-dīn Ibrāhīm al-Suwaidī (d. 690/1292), who had been the chief of physicians in Damascus, was criticized by Ibn Kathīr for his lack of faith, evidenced by al-Suwaidī’s neglect of ritual prayers, opposition to the prohibition of wine and opinion that Ramaḍān was too long.²⁹¹

The physicians’ faith and philosophical world view was regarded with suspicion by the ‘*ulamā*’, but this did not mean that their medical knowledge was rejected. Even though Ibn al-Qayyim strongly opposed the religious views of Ibn Sīnā and al-Rāzī, he often referred to their medical opinions treating them as authorities in his book on the Prophet’s medicine. Also in the texts of al-Dhahabī and Ibn Muflīḥ there are numerous references to the medical views of various Graeco-Islamic physicians. The three authors of the Prophet’s medicine did not deny the merits of the established medicine but wanted to improve it by excluding non-Islamic philosophy and including the wisdom of the Prophet.

According to Ibn al-Qayyim a perfect doctor should possess full knowledge not only of natural cures but also of the spiritual cures given by God to the prophets.²⁹² He stressed the importance of taking into account the medical instructions of the Prophet

²⁸⁷ Ibn Kathīr, *al-Bidāya*, vol. 13, p. 124.

²⁸⁸ Ibn Taimīya, *Majmū‘at al-rasā’il al-kubrā*, quoted in Goldziher 1916, p. 6.

²⁸⁹ Ibn Qayyim al-Jauzīya, *Miftāḥ* (ed. 1358/1939), pp. 455f.

²⁹⁰ Ibn Qayyim al-Jauzīya, *Ighātha*, vol. 2, pp. 241f.

²⁹¹ Ibn Kathīr, *al-Bidāya*, vol. 13, p. 325.

²⁹² IQ, pp. 7, 114f.

seriously:

The medicine of the Prophet is not like the medicine of the physicians. The Prophet's medicine is sure, definite, and divine. It originates in revelation, light of prophecy, and perfect intellect.²⁹³

The texts of Ibn al-Qayyim, al-Dhahabī and Ibn Mufliḥ were inspired by the works of their predecessors, ‘Abd al-Laṭīf al-Baghdādī and al-Kaḥḥāl Ibn Ṭarkhān. The analyses of the Prophet's medical sayings presented by the two practising doctors had proved the relevance of these traditions and that they could serve a practical purpose. These hadiths and appropriate Koranic verses could be used to show that the actual foundation of medical science lay in the eternal revelation and not in the texts of Hippocrates and Galen. This aspect is particularly clear in Ibn al-Qayyim's book, where he shows that the basic principles of medicine—preservation of health, protection against the harmful, and removal of the corrupt substances—are all mentioned in the Koran. This proved that «we have neglected nothing in the Book» (6:38). Ibn al-Qayyim paraphrased this by saying that the words of the Koran on illnesses prove that the Koran alone suffices anyone who understands and comprehends it. The source of all sciences was God's intellect, His commands and His creation. Like earlier prophets Muḥammad had also received divine wisdom, but because he was the Seal of prophets, the wisdom given to him was the most complete and correct. Those who adhered to his teaching learned from him and therefore their medicine was the most beneficial.²⁹⁴

The view that medical science was given by God was also held by Ibn Mufliḥ. According to him medicine was part of *sharī‘a* and all necessary medical information could be found in the sources of *sharī‘a*—i.e. the Koran and Sunna—either directly or through analogy. *Sharī‘a* had been given through the Prophet to all people so that they could benefit from it in issues pertaining to this world and the hereafter. *Sharī‘a* was complete and contained the guidance for the well-being of both body and soul. This perfection was expressed in the verse: «Today I have perfected your religion for you, and I have completed My blessing upon you, and I have approved Islam for your religion» (5:3).²⁹⁵

By attesting that the foundation of medicine lay in the divine wisdom given by God to His prophets and particularly to the last prophet, Muḥammad, the authors were able to sever its links to non-Islamic philosophies. The medicine practised by the Muslims could and should be based on Islamic norms. When medicine was set in an Islamic framework, it was possible to reject curing methods that were against *sharī‘a*. But, on the other hand, it was also possible to accept ways of medication that were not specifically recommended by the Prophet, provided that they could be based on analogical conclusions. Methods of *fiqh* could be extended to cover medical science.

²⁹³ IQ, pp. 27f.

²⁹⁴ IQ, pp. 1-3, 325.

²⁹⁵ IM, vol. 3, p. 141.

The development of the Prophet's medicine into a comprehensive medical system was presented in the works of the three religious scholars, al-Dhahabī, Ibn al-Qayyim and Ibn Mufliḥ. The three authors belonged to the vigorous traditionalist circles of Damascus. Furthermore, they were all associates or disciples of Ibn Taimīya, who advocated the stricter application of *sharī'a* in all aspects of social life. The Prophet's medicine can be seen as an expression of the traditionalists' wider interest in diminishing the gap between the norms set by *sharī'a* and actual social practices.

The traditionalists were concerned with the corruptive effects of *bid'a* on social customs. They interpreted the attacks of the Mongols as expressions of God's anger roused by the Muslims' deviation from the Islam that had been expressed in the Revelation. To avoid further punishment, it was necessary to stress the importance of rejecting all innovations and following the example of the Prophet and the pious ancestors. The demand for adherence to Sunna could also be extended to medical practices, because medicine was known to be a haven for non-Islamic ideas. Many physicians were either *dhimīs* or Muslims whose religious affiliation was doubtful and who did not hesitate in prescribing treatments not accepted by *sharī'a*.

Traditionally the Graeco-Islamic physicians did not restrict themselves to treating only physical symptoms but were also aware of the influence of the patient's way of life on his physical well-being. Therefore the physicians also gave advice on general behaviour, habits, emotions, etc. Their advice did not necessarily tally with the norms set by the Islamic tradition. This was a further incitement for the authors to provide Muslims with a medicine that would take care of their physical and mental well-being without endangering their final salvation.

Apart from being concerned with the content of medical treatment, the authors of the Prophet's medicine were also concerned about its quality. In Mamluk society the major scholarly effort was directed towards the religious sciences. Other sciences, among them medicine, did not get the same financial support as traditional Muslim scholarship. The bulk of the funds the Mamluk elite spent on supporting scholarship was channelled to the religious institutions providing stipends for religious scholars and students. The prestige of studying medicine was not very high in a society that gave the highest value to religious education and knowledge. This must have affected the standard of medical education and the level of the services that were available. The authors of the Prophet's medicine expressed their concern by exhorting Muslims to shun quacks and resort to qualified medical help.²⁹⁶ Ibrāhīm al-Azraq stated it explicitly:

When I saw that [today] there are very few people who concern themselves with medicine but those who seek help from it are many, and this art being buried under the great and common need for it on the part of the people, it appeared to deserve special devotion since no human being can avoid it.²⁹⁷

²⁹⁶ IQ, pp. 105-107 and DH, p. 153.

²⁹⁷ Ibrāhīm al-Azraq, *Tashīl al-manāfi'*, pp. 2f. The passage is translated in Rahman 1987, p. 45.

However, it was not irrelevant what type of medicine should be promoted. Ibn al-Qayyim showed his preference by setting a scale of ranks: the lowest value was given to the medicine of the old women, i.e. to folk medicine, then came Graeco-Islamic medicine and then the most valued, the medicine of the Prophet.²⁹⁸ A similar valuation was also given by Ibn Mufliḥ.²⁹⁹ Therefore the scholars' effort to give medical information was not only an act of piety, "a pious hobby to earn the reward in the hereafter" as Fazlur Rahman has expressed it,³⁰⁰ but it was also an attempt to impose a certain type of medicine on the people, to make them to reject those medical theories and practices that could not find support in the Koran or the Sunna.

The desire to create a truly Islamic medicine emerges as the central motive for the creation of the Prophet's medicine. In order to provide the Muslims with a medicine that suited their world view and answered to their needs, the scholars wanted to build it on an Islamic foundation. Its basic authority should lie in the Koran and Sunna and not in old foreign masters, even though their views on illnesses could be accepted as long as they were not in conflict with the teachings of Islam. The texts of al-Dhahabī, Ibn al-Qayyim and Ibn Mufliḥ are much more than hadith compilations. They are attempts to formulate a new type of medicine that included elements from the Islamic tradition and the authoritative medical theory. In order to show how the Prophet's medicine reflected the teachings of Islam, I will in the following chapters present the medical theory and some details of the treatment of physical and moral illnesses as they were expressed by Muḥammad al-Dhahabī, Ibn al-Qayyim al-Jauzīya and Ibn Mufliḥ.

²⁹⁸ IQ, p. 6: the medicine of the Prophet relates to the medicine of the doctors as that relates to the medicine of the old women.

²⁹⁹ IM, vol. 3, p. 141.

³⁰⁰ Rahman 1987, p. 45.