

The Medical Profession — An Islamic Perspective*

Hassan Hathout, M.D.
Kuwait City, Kuwait

DOI: <http://dx.doi.org/10.5915/20-1-13078>

Introduction

Current progress in medical and life sciences has acquired revolutionary features, and heralds breathtaking developments in medical technology and human engineering. Like any force, bio-sciences tend to stray to be a destructive power, as happened to nuclear fission in the near past.

In the wake of application of modern discoveries in human reproduction, heredity, recombinant DNA and synthesis of behavior-influencing drugs, our generation is witnessing a radical shaking of our heritage of moral values and codes of behavior.

In an attempt to keep human knowledge on the proper track prescribed by Allāh (SWT) as He declared Man as His viceroy on this planet, colonizing earth, searching for Allāh's laws and putting them to beneficial use, this paper is presented to all Muslim physicians. Hopefully they will find in it the guiding light to maintain their professional behavior within the boundaries of Islamic teachings.

Medical and paramedical students should find in it a window over the future so that they enter their professional life conversant with what to do and what to avoid, well prepared to face pressures or temptations or uncertainties.

To medical scientist it subserves the function of a rudder to the ship, directing their efforts to harness science and technology to the welfare of humanity and not to its destruction.

It is in Allāh (SWT) that we trust, and Him that we seek guidance from.

Definition of medical profession

"Therapeusis" is a noble profession. Allāh (SWT) honored it by making it the miracle of Prophet Jesus (PBUH) the son of Mary. Prophet Abraham (PBUH) when enumerating his Lord's gifts upon him, included

"...and when I fall ill it is He Who cures me."¹

Like all aspects of knowledge, medical knowledge is part of the knowledge of Allāh (SWT)

"...taught man that which he knew not".²

The study of Medicine entails the revealing of Allāh's signs in His creation.

"And in your own selves, will you not then see?"³

The practice of Medicine brings Allāh's mercy unto his subjects. Medical practice is therefore an act of worship and charity on top of being a career to make a living.

Allāh's mercy (cure) is available to all people; good and evil, virtuous and vicious, and friends and foes, as are the rays of His sun, the comfort of His breeze, the coolness of His water and the bounty of His provision. This should be the basis upon which the medical profession operates, i.e., along the single track of Allāh's mercy, never adverse and never punitive, never taking justice as its goal but mercy, under whatever situations and circumstances.

In this respect the medical profession is unique. It shall never yield to social pressures motivated by enmity or feud, be it personal, political or military. Enlightened statesmanship will do good by preserving the integrity of the medical profession and protecting its position beyond enmity or hostility.

The provision of medical services is a religious dictate upon the community, i.e., "Farḍ Kifāyah", that can be satisfied on behalf of the community by some citizens taking up medicine. It is the duty of the state to ensure that there are enough doctors in the various needed specialities. In Islam, this is a duty that the ruler owes the nation.

Need may arise to import from a far such medical expertise that is not locally available. It is the duty of the State to satisfy this need.

It also behoves the State to recruit suitable candidates from the nation's youth to be trained as doctors. An ensuring duty therefore is to establish relevant schools, facilities, clinics, hospitals and institutions that are adequately equipped and manned to fulfill that purpose.

"Medicine" is a religious necessity for society. In religious terms whatever is necessary to satisfy the "necessity" automatically acquires the status of a "necessity". Exceptions shall therefore be made from certain general rules of jurisprudence for the

Author's address: Department of Obstetrics and Gynecology, College of Medicine, Kuwait University, Kuwait.

*Original article published under the title of "Islamic Code of Medical Ethics"—Bulletin of Islamic Medicine, Kuwait, 1981; 1:731

sake of making medical education possible. One such example is the intimate inspection of the human body in life and death, and always in a climate of piety and awareness of the presence of Allāh (SWT)

The preservation of man's life should embrace also the utmost regard of his dignity, feelings, tenderness and the privacy of his sentiments and body parts. A patient is entitled to full attention, care and feeling of security while with his doctor. The doctor's privilege of being exempted from some general rules is only coupled with more responsibility to carry out his duties in conscientiousness, and with excellence in observing Allāh (SWT) in all actions.

"... Excellence (Iḥsān) is that you worship Allāh as if you can see Him. For even though you do not see him, He sees you"⁴

Characteristics of the physician

The physician should be amongst those who believe in Allāh (SWT), fulfill His rights, are aware of His greatness, are obedient to His orders, and those who refrain from His prohibitions, and observe Him in secret and in public.

The physician should be endowed with wisdom and graceful admonition. He should be cheering, not despiriting, smiling and not frowning, loving and not hateful, tolerant and not edgy. He should never succumb to a grudge or fall short of clemency. He should be an instrument of Allāh's justice and forgiveness, not punishment, an instrument of coverage not exposure.

He should be so tranquil as never to be rash even when he is right, chaste of words even when joking, tame of voice and not noisy or loud, neat and trim and not shabby or unkempt, conductive of trust and inspiring of respect, well mannered in his dealings with the poor or rich, modest or great, in perfect control of his composure, and never compromising his dignity, however modest and forebearing.

The physician should firmly know that "life" is Allāh's, awarded only by Him and that "death" is a solid truth, and it is the end of all but Allāh. In his profession the physician is a soldier for "life" only, defending and preserving it as best as it can be, to the best of his ability.

The physician should offer the good example by caring for his own health. It is not befitting for him that his "do's" and "do not's" are not observed primarily by himself. He should not turn his back on the lessons of medical progress, because he will never convince his patients unless they see the evidence of his own conviction. Allāh (SWT) addresses us in Qur'ān by saying:

"And make not your own hands throw you into destruction."⁵

The Prophet (PBUH) says:

"... Your body has a right on you..."⁶

Also there is the well-known dictum in Islam, "No harm or harming."

The physician is truthful whenever he speaks, writes or gives testimony. He should be invincible to the dictates of creed, greed, friendship or authority pressuring him to make a statement or testimony that he knows is false. Testimony is a grave responsibility in Islam.

The Prophet (PBUH) once asked his companions, "shall I tell you about the gravest sins?" When they said yes, He (PBUH) said:

"claiming parterns with Allāh, being undutiful to one's parents..." and after short pause, He repeatedly said; "And indeed giving a false talk or false testimony."⁷

The physician should be in possession of a threshold of knowledge of jurisprudence, worship and essentials of "Fiqh" enabling him to give counsel to patients seeking his guidance about health and bodily conditions with a bearing on the rites of worship. Men and women are subject to symptoms, ailments or physiological situations like pregnancy, and would wish to know the religious rulings pertaining to prayer, fasting, pilgrimage, under such conditions. The Muslim physician should be able to guide them.

Although "necessity overrides prohibition", Muslim physicians-nevertheless-should spare no effort in avoiding the recourses to medicine or ways of therapy-be they surgical, medical or behavioral-that are prohibited by Islam.

The role of the physician is that of a catalyst through whom Allāh (SWT), the Creator, works to preserve life and health. He is merely an instrument of Allāh (SWT) in alleviating people's illnesses. For being so designated, the physician should be grateful and forever seeking Allāh's help. He should be modest, free from arrogance and pride and never fall into boasting or hint at self glorification through speech, writing or advertisement whether direct or subtle.

The physician should strive to keep abreast of scientific progress and innovation. His zeal or complacency, his knowledge or ignorance, directly bears on the health and well-being of his patients. Responsibility for others should limit his freedom to expend his time. As the poor and needy have a recognized right to the money of the capable, the patients own a share of the doctor's time, that has to be spent in study and in following the progress of medicine.

The Physician should also know that the pursuit of knowledge has a double indication in Islam. Apart from the applied therapeutic aspect, pursuit of knowledge is in itself worship, according to the Qur'ānic guidance.

"...And say, O My Lord! advance me in knowledge."⁸

“... Among His worshippers the learned fear Him most...”⁹

“... Allāh will raise up the ranks of those of you who believed and those who have been given knowledge...”¹⁰

Doctor-doctor relations

A doctor is a brother to every doctor and a fellow companion in the noblest mission that is a direct answer to Allāh's commandment in the Qur'ān:

“... And help you one another in righteousness and piety, but help you not one another in sin and rancour...”¹¹

Physicians are jointly responsible for the health care of the nation. They complement one another through the variety of their medical specialization be they preventive or therapeutic, in the private sector or in State employment, all abiding by the ethics and rules of their profession.

As a professional group in the nation, doctors are collectively responsible for drawing plans and taking measures and developing traditions and regulations that are necessary to enable them collectively and individually to carry out their duties as best as possible.

Within their fraternity, a doctor should respect his fellow doctors in their absence. He should offer the advice and/or help whenever sought. A doctor shall not “eat of his brother's flesh” by speaking ill of him behind his back nor shall he pursue his shortcomings or tarnish his reputation or exhibit his deficits. He shall never extend a harming hand to his brother. This does not absolve the doctor however, from absolute honesty when giving legal testimony or aiding in the prevention of a crime according to the dictates of the Law.

The mutual relation between physicians is additive and competitive. Collaboration in good faith for the best interest of the patient is implied.

If more than one doctor handle the patient, medical data should not be withheld from other treating doctor(s).

These data should be kept in confidence, within the boundaries of the medical circle, without leakage.

If in doubt, it is the duty of the doctor (and the right of the patient) that consultation should be arranged or the case referred to a specialist. This is also inspired by the Qur'ānic saying:

“Ask of the people who possess the message if you do not know.”¹²

The specialist will take whatever steps he deems necessary but he shall keep the referring doctor informed about the current and subsequent happenings.

It is a doctor's duty to avail his juniors of the fruits of his experience, knowledge and acumen. He should provide for their education and training. This is dictated by the fact that the “concealer of knowledge is

curse”, and because it is in response to the rights of colleagues, patients and the profession at large from one generation to another. In this context it is worthy to remember Prophet's (PBUH) saying:

“When the son-of-Adam dies he is completely cut off except from three things: a running charity, knowledge that he had taught and remains put to good use and virtuous progeny praying Allāh for him”¹³

Doctors shall be also mutually cooperative and shall promptly rally to the aid of one another if sickness affects a colleague or a member of his family, as well as under conditions of stress, need, disability or death.

At present, the doctor is hardly the individualist he was in old times. Medical care nowadays is given by a team, comprising in addition to the doctor, nursing, laboratory, physiotherapy, social service and other personnel. The doctor shall foster the team spirit and perfect cooperation so that the team achieves best results in patient care.

Doctor-patient relationship

For the sake of the patient the doctor works and not the other way round. Health is the goal and medical care is the means. The patient is the “master” and the doctor is at his service. The Prophet (PBUH) says:

“The strongest should follow the pace of the weakest, for he is the one to be considered deciding the pace of travel.”¹⁴

Rules, schedules, timetables and services should be so manipulated as to revolve around the patient and comply with his welfare and comfort as the top and overriding priority, other considerations come next.

That top-priority status is conferred on the patient because and as long as he is a patient, no matter who he is. A patient is in the sanctuary of his illness and not of his social eminence, authority or personal relations. The way a doctor deals with his various patients is a perfect portrayal of his personal integrity.

The sphere of a doctor's charity, nicety, tolerance and patience should be large enough to encompass the patient's relatives, friends and those who care for or worry about them, without of course compromising the dictates of professional confidentiality.

Health is a basic human necessity and is not a matter of luxury. It follows that the medical profession is unique in that the client should not be denied the service even if he cannot afford the fee. Medical legislature should ensure medical help to all in need, by issuing and executing the necessary laws and regulations.

In private practice doctor's fees are their lawful right, their earnings are legitimate, and their conscience is the censor, being aware that Allah's eye is ever watching. If medical necessity or emergency,

however, puts a needy person under a physician's care, it is his/her duty to be considerate and kind, and forfeit his fees-if they will be a further burden atop of the ailment. For when you give the poor, you are actually giving Allāh and alms giving is not only due on material possessions but also on knowledge and skills. The medical profession is fundamentally that vocation to help Man under stress and not to exploit his need.

Fully entitled to make a decent living and earn a clean income, a doctor shall always honor the high standards of his profession and hold it in the highest regard, never subscribing to activities of propaganda, receiving a commission or similar misdoings.

Professional confidentiality

Keeping other persons' secrets is decreed on all the faithful...the more so if these were doctors, for people willfully disclose their secrets and feelings to their doctors, confident of the time old heritage of professional confidentiality, that the medical profession embraced since the dawn of history. The Prophet (PBUH) described the three signs of the hypocrite as:

"He lies when he speaks, he breaks his promise and he betrays when confided in."¹⁵

The doctor shall put the seal of confidentiality on all information acquired by him through sight, hearing or deduction. Islamic spiritit also requires that the law should stress the right of the patient to protect his secrets that he confides to his doctor. A breach thereof would be detrimental to the practice of medicine, beside precluding several categories of patients from seeking medical help.

Doctor's role during war

Since the earliest battles of Islam it was decreed that the wounded is protected by his wound and the captive by his captivity. The Faithful are praised in the Qur'an:

"They offer food - dear as it is - to the needy, orphan or captive, (saying) we feed you for the sake of Allāh alone without seeking any reward or gratitude from you."¹⁶

The Prophet (PBUH) encouraged his companions to bestow charity on the captives. The Muslims did, and gave them priority over themselves. They shared with them the best of food. It is of interest to note that this teaching and practice was at least thirteen centuries prior to the Geneva Convention and the Red Cross.

Whatever the feelings of the doctor and wherever they lie, he shall stick to the one and only duty of protecting life and treating ailment or casualty.

Whatever the behavior of the enemy, the Muslim doctor shall not change his course, for each side reflects his own code of behavior. Allāh made it clear

in the Qur'an:

"... Let not the wrong doing of others sway you into injustice..."¹⁷

As part of the international medical family, Muslim doctors should lend all support on a global scale to protect and support this one-track noble course of the medical profession, for it is a blessing to all humanity if this humanitarian role is abided to by both sides at the battle front.

The medical profession shall not permit its technical, scientific, or other resources to be utilized in any way to harm, destroy, or inflict upon man physical, psychological, moral or other damage, regardless of all political or military considerations.

The doings of the doctor shall be unidirectional aiming at the offering of treatment and cure to ally and enemy, be this at the personal or general level.

Responsibility and liability

The practice of medicine is lawful only to persons suitably educated, trained and qualified, fulfilling the criteria spelt out in the law. A clear guidance is the Prophet's (PBUH) tradition:

"Who-so-ever treats people without knowledge of medicine, becomes liable."¹⁸

With the availability of medical specialization, problem cases shall be referred to the relevant specialist. "Each one is better suited to cope with what he was meant for."

In managing a medical case the doctor shall do what he can to the best of his ability. If he does, without negligence, taking the measures and precautions expected from his equals then he is not to blame or punish even if the results were not satisfactory.

The doctor is the patient's agent on his body. The acceptance by the patient of a doctor to treat him is considered an acceptance of any line of treatment the doctor prescribes.

If treatment entails surgical interference the initial acceptance referred to should be documented in writing, for the sake of protecting the doctor against possible eventualities. If the patient declines or refuses the doctor's prescribed plan of treatment, this refusal should also be documented by writing, witnesses or patient's signature as the situation warrants or permits.

When fear is the obstacle preventing the patient from consent, the doctor may help his patient with a medicine such as a tranquilizer to free his patient from fear but without abolishing or suppressing his consciousness, so that the patient is able to make his choice in calmness and tranquility.* By far the best

*Editor's Note: One has to be certain that the medications will not interfere with the patients' understanding and/or judgement. Certain hospitals' regulations may disqualify consent.

method to achieve this is the poise of the doctor himself and his personality, kindness, patience and the proper use of the spoken word.

In situations where urgent and immediate surgical or other interference is necessary to save life, the doctor should go ahead according to the Islamic rule "necessities override prohibitions." His position shall be safe and secure whatever the result achieved, on condition that he has followed established medical methodology in a correct way. The "bad" inherent in not saving the patient outweighs the presumptive "good" in leaving him to his self destructive decision. † The Islamic rule proclaims that "warding off" the "bad" takes priority over bringing about the "good".

The Prophetic guidance is:

"Help your brother when he is right and when he is wrong." Concurring with helping a brother if he is right; but surprised at helping him when he is wrong, the Prophet (PBUH) answered his companions: "Prevent him from being wrong, for this is the help he is in need of."¹⁹ In conclusion, the basic religious criteria protecting the medical practitioner are 1) recognized certification 2) acceptance of the doctor by his patient 3) good faith on part of the doctor and sole aim of curing his patient 4) absence of unacceptable fault as defined by medical by-laws, and practice.

Sanctity of human life

Allāh says:

"On that account we decreed for the Children of Israil that whoever kills a human soul for other than manslaughter or corruption in the land, it shall be as if he killed all mankind, and who-so-ever saves the life of one, it shall be as if he saved the life of all mankind . . ."²⁰

Human Life is sacred and should not be willfully taken except upon the indications specified in Islamic jurisprudence.

A doctor shall not take away life even when motivated by mercy. This is prohibited because this is not one of the legitimate indications for killing. Direct guidance in this respect is given by the Prophet's (PBUH) tradition:

"In old times there was a man with an ailment that taxed his endurance. He cut his wrist with a knife and bled to death. Allāh was displeased and said "My

subject hastened his end. I deny him paradise."²¹

The sanctity of human life covers all its stages including intrauterine life of the embryo and fetus. This shall not be compromised by the doctor save for the absolute medical necessity recognized by Islamic jurisprudence.

This is completely in harmony with modern medical science which lately has embraced a new speciality called Maternal Fetal Medicine striving to diagnose and treat affliction of the fetus in utero.

Modern permissive abortion policies are not sanctioned by Islam, † which accords several rights to the fetus. There is a money ransom on abortion in Islam. A fetus has rights of inheritance and if aborted alive and dies, it is inherited by its legal heirs. If a pregnant woman is sentenced to death for a crime, execution is postponed until she delivers and nurses the baby, even if that pregnancy is illegitimate. The basic right to life of the fetus is therefore self-evident.

In his defense of life, however, the doctor is well advised to realize his limit and not transgress it. If it is scientifically certain that life cannot be restored, † then it is futile to diligently keep on the vegetative state of the patient by heroic means of animation or preservation by deep-freezing or other artificial methods. It is the process of life that the doctor aims to maintain and not the process of dying. In any case, the doctor shall not take a positive measure to terminate the patient's life.

To declare a person dead † is a grave responsibility that ultimately rests with the doctor. He shall appreciate the seriousness of his verdict and pass it in all honesty and only when sure of it. He may dispel any trace of doubt by seeking counsel and resorting to modern scientific gear.

The doctor shall do his best that what remains of the life of the incurable patient will be spent under good care, moral support and freedom from pain and misery.

The doctor shall comply with the patient's right to know his illness. The doctor's particular way of answering should however be tailored to the particular patient in question. It is the doctor's duty to thoroughly study the psychological acumen of his patient. He shall never fall short of suitable vocabulary, if the situation warrants the use of frightening nomenclature, of coinage of new names, expressions, or descriptions.

In all cases the doctor should have the ability to bolster his patient's faith and endow him with tran-

†Editor's Note: It is universally accepted that when a patient cannot give consent e.g. while in a state of shock or coma, the physician can proceed with treatment, if considered essential/life-saving. The other aspect i.e. proceeding with a treatment against a patient's will, because in the doctor's judgement it is best for the patient, is debatable. Insh'allah this will be the subject of a future publication.

†Editor's Note: There are other opinions on the issue of "Early" pregnancy termination. Insha'llah we will attempt to publish a more detailed discussion of this subject in the future.

† Editor's Note: The issue of when a person is declared dead will - Insha'llah - be a subject for a future issue.

quility and peace of mind.

Doctor and society

The doctor is in every sense a member of society, fully acting, interacting and caring for it. The Prophet (PBUH) says . . .

“Religion is to give honest advice in the way of Allāh and of His apostle, to Muslim leaders and public.”²²

The doctor's mission exceeds the treatment of disease and includes taking all measures to prevent its occurrence, in compliance with the Qur'ānic teaching.⁵

The hint to a “preventive policy” is evident in the saying of the Prophet (PBUH):

“When pestilence is rampant in a locality do not go inside it, but if you are already inside do not come out if.”²³

The medical profession shall take it as duty to combat such health-destructive habits as smoking, uncleanness, etc. Apart from mass education and advertisement, the medical profession should relentlessly pressurize the judiciary to issue necessary legislation. The combat and prevention of environmental pollution falls under this category.

The venereal disease epidemic that is rampant in western societies is the direct result of moral decadence and the so-called “sexual revolution or liberalization.”

The natural prophylaxis against these diseases and their serious complications lies in revival of the human values of chastity, purity, self-restraint and in refraining from advertently or inadvertently inflicting harm on self or others. To preach these religious values is “Preventive Medicine” and therefore lies within the jurisdiction and obligation of the medical profession.

In certain developed countries gonorrhea and syphilis, † have reached epidemic proportions inducing health authorities to request the declaration of a natural emergency situation. Yet all medical preaching regrettably goes on the tone of: “it is alright, it is no shame, it is normal, but please seek medical advice promptly if you suspect catching the disease.” No pamphlet or other message over the media has dared to recommend chastity even as one of several prophylactic alternatives. In contrast with anti-pollution, anti-smoking, anti-saccharin, anti-fat and several other “anti's”, sexual morality has been singled out as the area where “a doctor should not moralize, but just treat.” This should be a duty for Muslim physicians.

†Editor's Note: Genital Herpes and AIDS joined these as venereal diseases of epidemic or pandemic proportion since the publication of the original article.

The Muslim medical profession should be conversant with Islam's teachings and abide by them. It should also thoroughly study first hand, the data, facts, figures and projections of various parameters actually existent in Muslim societies. Upon this should be decided what to take and what to reject from the experiences and conclusions of other societies. Reconciliation with a policy of uncritical copying of alien experience should be stopped.

Society owes the doctor the right to be trusted, to live comfortably, to earn an adequate income and to keep his dignity. A doctor should prove worthy of these rights, or else he/she should be vulnerable to punishment.

The Doctor and modern biomedical advances

There is no censorship in Islam on scientific research, be it academic - to reveal the signs of Allāh (SWT) in His creation or applied, aiming at the solution of a particular problem.

Freedom of scientific research shall not entail the subjugation of Man, harming him or subjecting him to definite or probable harm, withholding his therapeutic needs, defrauding him or exploiting his material needs.

Freedom of scientific research shall not entail cruelty to animals, or their torture. Suitable protocols should be established for the uncruel handling of experimental animals during experimentation.

The methodology of scientific research and the applications resultant thereof, shall not entail the commission of sin prohibited by Islam such as fornication, confounding of genealogy, deformity or tampering with the essence of the human personality, its freedom and eligibility to bear responsibility.

The medical profession has the right and owes the duty of effective participation in the formulation and issuing of religious verdicts concerning the lawfulness or otherwise of the unprecedented outcomes of current and future advances in biological science. The verdict should be reached in togetherness between Muslim specialists in jurisprudence and Muslim specialists in biosciences. Single-sided opinions have always suffered from lack of comprehension of technical or legal aspects.

The guiding rule in unprecedented matters falling under no extant text or law, is the Islamic dictum: “Wherever welfare is found, there exists the statute of Allāh.”

The individual patient is the collective responsibility of society, that has to ensure his health needs by any means inflicting no harm on others. This comprises the donation of body fluids or organs such as blood transfusion to the bleeding or a kidney transplant to the patient with bilateral irreparable renal damage. This is another “Farḍ Kifāyah”, a duty that donors fulfill on behalf of society. Apart from

the technical procedure, the onus of public education falls on the medical profession, which should also draw the procedural, organizational and technical regulations and the policy of priorities. Organ donation shall never be the outcome of compulsion, family embarrassment, social or other pressure or exploitation of financial need. Donation shall not entail the exposure of the donor to harm.

The medical profession bears the greatest portion of responsibility for laying down the laws, rules and regulations organizing organ donation during life or after death by a statement in the donor's will or the consent of his family; as well as the establishment of tissue and organ banks for tissues amenable to storage. Cooperation with similar banks abroad is to be established on basis of reciprocal aid.

‘Umer Ibn al-Khaṭṭāb, the second caliph, decreed that if a man living in a locality died of hunger being unable of self-sustenance, then the community should pay his ransom money (Fidyah) as if they had killed him. The similitude to people dying because of lack of blood transfusion or a donated kidney is very close.

Two traditions of the Prophet (PBUH) seem to be quite relevant in this respect.

“The faithful in their mutual love and compassion are like the body. If one member complains of an ailment all other members will rally in response.”²⁴

“The faithful to one another are like the blocks in a whole building, they fortify one another.”²⁵

Allāh (SWT) described the faithful in the Qur’ān, saying:

“... They give (others) priority over themselves, even though they are needy...”²⁵

This is even a step further than donating a kidney, for the donor can dispense with one kidney and live normally with the other, as routinely ascertained medically prior to donation.

If the living are able to donate, then the dead are even more so: and no harm will afflict the cadaver if heart, kidneys, eyes or arteries are taken to be put to good use in a living person. This is indeed a charity and directly fulfills Allāh's words:

“And whosoever saves a human life, it is as though he has saved all mankind.”²⁰

A word of caution, however, is necessary. Donation should be voluntary by free will otherwise the dictatorships will confiscate people's organs, thus violating two basic Islamic rights: the right of freedom and the right of ownership.

In the society of the faithful, donated organs and/or tissues should be in generous supply and should be the fruit of faith and love of Allāh and His subjects. Other societies should not beat us on this noble goal.

On medical education.

Medical education, despite being a speciality, is but one fiber in a whole mesh founded on the belief in Allāh (SWT), His oneness and absolute ability, and that He alone is the creator and giver of life, knowledge, death, this world and the hereafter.

In planning the making of a doctor, the principle goal is to make him a living example of all Allāh (SWT) loves, free from all that Allāh (SWT) hates, well saturated with the love of Allāh (SWT) of people and of knowledge.

The medical teacher owes his students the provision of the good example, adequate teachings, sound guidance and continual care in and out of classes and before and after graduation.

Medical education picks from all trees without refractoriness or prejudice. Yet it has to be protected and purified from every activity, leaning toward atheism or infidelity.

Medical education is neither passive nor authoritarian. It aims at sparking mental activity, fostering observation, analysis and reasoning, development of independent thought and the evolution of fresh questions. The Qur’ān blamed those who said:

“... As such we have found our fathers and we will follow on their foot steps.”²⁷

This attitude is only conducive to stagnation and arrest of progress.

“Faith” is remedial, a healer, a conqueror of stress and a procurer of cure. The training of the doctor should prepare him to bolster “Faith” and avail the patient of its unlimited blessings.

Medical school curricula should include the teaching of matters of Islamic jurisprudence and worship pertaining to or influenced by various health aspects and problems.

Medical school curricula should familiarize the student with the medical and other scientific heritage of the era of Islamic civilization, the factors underlying the rise of Muslim civilization, those that lead to its eclipse, and the way(s) to its revival.

Medical school curricula should emphasize that medicine is worship, both as an approach to belief by contemplation on the signs of Allah, as well as from the applied aspect by helping Man in distress.

Medical school curricula should comprise the teaching and study of this “Islamic Code of Medical Ethics.”

References

1. Glorious Qur’ān, Chapter 26, verse 80
2. Glorious Qur’ān, Chapter 97, verse 5
3. Glorious Qur’ān, Chapter 51, verse 21

4. Ṣaḥīḥ Muslim, Abridged version, (Arabic), Book of Faith, p 7, number 2, al-Ḥāfīz al-Mondherī, Islamic Bureau, Damascus, 3rd edition, 1977.
5. Glorious Qur'ān, Chapter 2, verse 195
6. Ṣaḥīḥ al-Bukhārī, Division 31, Book of Fasting, Chapter 56, vol 3, p 110, M.M. Khan, editor, Dār al-'Arabiah, Publishing, Printing and Distribution, Beirut, Lebanon
7. Ṣaḥīḥ al-Bukhārī, Division 48, Book of Witnesses, Chapter 10, vol 3, p 499, number 822, M.M. Khan, editor, Dār al-'Arabiah, Publishing Printing and Distribution, Beirut, Lebanon
8. Glorious Qur'ān, Chapter 20, verse 114
9. Glorious Qur'ān, Chapter 35, verse 28
10. Glorious Qur'ān, Chapter 58, verse 11
11. Glorious Qur'ān, Chapter 5, verse 3
12. Glorious Qur'ān, Chapter 16, verse 43
13. Ṣaḥīḥ Muslim Abridged version, (Arabic), Book of Trust, p 264, number 1001, al-Ḥāfīz al-Mondherī, Islamic Bureau, Damascus, 3rd edition, 1977
14. Sunan Abū Dāwūd (Arabic), Division 2, Book of Ṣalāh, Chapter 40, 'Izzat al-Da'ās and 'Ādil al-Sayyid, editors. Published by Muḥammad 'Āli al-Sayyid, Ḥimṣ, Syria, 1972
15. Ṣaḥīḥ al-Bukhārī, Division 2, Book of Faith, Chapter 25, Vol 1, P 31, number 32, M.M.Khan, editor, Dar al-'Arabiah, Publishing, Printing and Distribution, Beirut, Lebanon
16. Glorious Qur'ān, Chapter 76, verses 8-9
17. Glorious Qur'ān, Chapter 5, verse 9
18. Sunan Abū Dawūd (Arabic), Book of Diyyāt, Chapter 23, 'Izzat al-Da'ās and 'Ādil al-Sayyid, editors. Published by Muḥammad 'Āli al-Sayyid, Ḥimṣ, Syria, 1972
19. Ṣaḥīḥ al-Bukhārī, Division 43, Book of Oppressions, Chapter 5, vol 3, p 373, number 624, M.M. Khan, editor, Dār al-'Arabiah, Publishing, Printing and Distribution, Beirut, Lebanon
20. Glorious Qur'ān, Chapter 5, verse 35
21. Ṣaḥīḥ al-Bukhārī, Division 23, Book of Funerals, Chapter 82, vol 2, p 251, number 445, M.M. Khan, editor, Dār al-'Arabiah, Publishing, Printing and Distribution, Beirut, Lebanon
22. Ṣaḥīḥ al-Bukhārī, Division 2, Book of Faith, Chapter 43, vol 1, p 48, M.M. Khan, editor, Dār al-'Arabiah, Publishing, Printing and Distribution, Beirut, Lebanon
23. Ṣaḥīḥ al-Bukhārī, Division 71, Book of Medicine, Chapter 30, vol 7, p 418, number 624, M.M. Khan, editor, Dār al-'Arabiah, Publishing, Printing and Distribution, Beirut, Lebanon
24. Ṣaḥīḥ al-Bukhārī, Division 73, Book of Manners, Chapter 27, vol 8, p 26, number 40, M.M. Khan, editor, Dar al-'Arabiah, Publishing, Printing and Distribution, Beirut, Lebanon
25. Ṣaḥīḥ al-Bukhārī, Division 43, Book of Oppressions, Chapter 6, vol 3, p 374, number 626, M.M. Khan, editor, Dār al-'Arabiah, Publishing, Printing and Distribution, Beirut, Lebanon
26. Glorious Qur'ān, Chapter 59, verse 9
27. Glorious Qur'ān, Chapter 43, verse 23