The biomedical model of disease, developed in the postindustrial Western world, defines disease as a derangement of normal function that can be described in biochemical or structural terms, detected by objective measurements, and that can be approved improved by appropriate chemical or surgical intervention. This scientific approach has led to evidence-based medicine whereby new information is evaluated and integrated into healthcare practices. The changes in mortality and morbidity in countries that basically follow this process have been well-documented. For example, in Australia, the male death rate from infectious diseases fell from 283 deaths per 100,000 population in 1907 to around 6 in 1980, after which it almost doubled to 11 in 2000, mainly due to an increased mortality from sepsis. In the same period, the average life expectancy at birth in Australia increased by 23.6 years for

**Therapeutic Interventions: an Islamic Perspective**

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**Abstract**

Disease and its healing in most of the therapeutic strategies are mainly based either on physical or metaphysical aspects. Therapeutic strategies in Islam, on the other hand, are based on a combination of spiritual, psychological, and material means. It is, therefore, important to analyze current therapeutic strategies according to the Qur’an and Sunnah and their relation to other medical models, as many options aiming at better health outcomes are now being used throughout the world. This paper examines how the guidelines and principles of the Qur’an and Sunnah may contribute to the understanding and evaluation of different therapeutic interventions. A successful activation of the Islamic therapeutic model and its furtherance apart from the use of limited therapeutic strategies on the individual level can take place only within a reactivation of an authentic Islamic way of life.

**Key words:** Modern medicine, complementary medicine, alternative medicine, Islamic medicine, prophetic medicine, Islam.

**Introduction**

The biomedical model of disease, developed in the postindustrial Western world, defines disease as a derangement of normal function that can be described in biochemical or structural terms, detected by objective measurements, and that can be approved improved by appropriate chemical or surgical intervention. This scientific approach has led to evidence-based medicine whereby new information is evaluated and integrated into healthcare practices. The changes in mortality and morbidity in countries that basically follow this process have been well-documented. For example, in Australia, the male death rate from infectious diseases fell from 283 deaths per 100,000 population in 1907 to around 6 in 1980, after which it almost doubled to 11 in 2000, mainly due to an increased mortality from sepsis. In the same period, the average life expectancy at birth in Australia increased by 23.6 years for

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men, from 53.8 years in 1900 to 77.4 years in 2000, and by 25.1 years for women, from 57.5 to 82.6 years. In spite of this improvement in health outcomes, there has been a recent increase in community acceptance of complementary or alternative therapeutic strategies based on holistic and spiritual approaches. Such interventions combine approaches to support physical, social, psychological, emotional, and spiritual well-being to help achieve optimal health (wellness) including health-promoting advice on dietary changes, stress management, exercise, and the environment. Complementary and alternative medicine can be grouped as alternative medical systems including naturopathy, traditional Chinese medicine, Ayurveda, and homeopathy; mind-body interventions such as patient support groups, meditation, prayer, mental healing, and creative arts; biologically based therapies such as herbs, foods, minerals, vitamins, and dietary supplements; manipulative methods such as massage, chiropractic, and osteopathy; and energy therapies such as acupuncture, therapeutic touch, electromagnetic and magnetic fields, reiki, and qi gong.

A separate medical model developed by implementing the guidelines from Qur’an and Sunnah has been defined as the Islamic medical tradition. This tradition started with various Qur’anic verses and instructions from the Prophet concerning sickness, its prevention, and cure. Within the framework of these guidelines and the wider macro-framework of Islamic society, the following generations of Muslims provided important contributions to the biomedical sciences, including outstanding physicians of medieval times. The Muslim medics incorporated the knowledge and medical traditions of Greek, Persian, and Indian medicine and, in turn, constituted a major foundation for the development of biomedical science. The intellectual rationalism of these mediaeval Muslim medics extended the frontiers of science and medicine and formed the basis for medical advances in Western Europe.

It is important to analyze current therapeutic strategies according to the Qur’an and Sunnah and their relation to other medical models as many options aiming at better health outcomes are now being used throughout the world. This paper examines how the guidelines and principles of the Qur’an and Sunnah may contribute to the understanding and evaluation of different therapeutic interventions.

**Approaches to Healing and Cure in Different Forms of Medicine**

Analyses of the causes and manifestations of diseases have resulted in diverse schools of thought leading to unique principles of therapeutic intervention. Application of these principles differs depending upon the definition of different stages in the pathogenesis of disease (progression of symptoms of disease), the type and use of drugs and medicines, and the way of dealing with diseased individuals and their levels of tolerance. In all these schools of thought, therapeutic interventions deal either with the material or the metaphysical and spiritual aspects of health and disease. Major therapeutic approaches are discussed below.

According to writings attributed to Hippocrates in the 4th century BC, personality and illness are dependent upon four humors (yellow bile, black bile, phlegm, and blood) usually present in the body and matching the four seasons (summer, autumn, winter, and spring, respectively). Each is associated with one of the four equal and universal elements (fire, earth, water and air, respectively) and in turn with certain qualities (hot and dry, cold and dry, cold and moist, and hot and moist, respectively). Because an imbalance in the humors was considered the central cause of personality problems or illness in this philosophy, interventions for healing were aimed at restoring this balance.

Traditional Chinese medicine considers the material world to be made of five elements (water, earth, metal, wood, and fire) with four bodily humors (qi, blood, moisture, and essence) balancing the energies that is essential for health. Acupuncture is an important therapy in the traditional medicine of China, Japan, and Korea and relies on contempla-

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For clarification, the term al-ṭibb nabawī or Prophetic medicine, usually designates the Prophet’s medical recommendations as narrated in his Sunnah, whereas the term al-ṭibb al-yūnānī, or Greek medicine, refers to the integrated approach developed by later generations of Muslims as described above. Islamic medicine refers to the practice of medicine under Islamic principles and guidelines.
tion and reflection on sensory perceptions to understand the human condition, including health and illness. Ayurveda, the major traditional medicine in India, considers five elements (ether, air, fire, water, and earth) that are coded into three forces or doshas (kapha, pitta, and vata) that govern all life processes. In both the Chinese and Indian systems, disease develops when the energies are not balanced, and interventions aim at restoring harmony.

These and other healing systems derived from the concept of a life-giving or vital force referred to as vitalism are based on two general principles (1) that the functions of a living organism are due to a vital principle distinct from physicochemical forces and (2) that biological activities are directed or influenced by supernatural force. Most of these therapeutic strategies prefer subjective experience to objective testing and are often rejected as pseudoscientific, nonscientific, or even antiscientific. The central concept of intervention in these healing systems is the reenforcement or activation of the vital force, in whatever form, thus retrieving the balance and the proper functioning of the body. However, these concepts are not limited to ancient sources or primitive societies, as shown by other examples, given below, developed in Europe over the last two centuries.

Austrian scientist Rudolph Steiner (1861-1925) founded anthroposophical medicine, which is based on the divine elements in nature: astral body, formative force, and ether body. Remedies (medicines) are derived from animal, plant, and mineral substances. Wilhelm Reich (1897–1957) founded Reichian psychotherapy, also known as orgone therapy, orgonomic therapy, and biopsychotherapy. It is based on the concept of orgone energy. Reichian therapy is a method for character transformation that recognizes the essential identity of the mind and body by recognizing how “armoring” against the free flow of life energy blocks full emotional expression. An orgonomic therapist works with the principles of psychodynamic psychotherapy to reveal to the patient the patient’s own character attitudes and character armoring.

Samuel Hahnemann (1755-1843) in the early 19th century introduced similia similibus curantur (like cures like) homeopathic doctrine of treatment. This is based on the concept that anything capable of producing detrimental symptoms (illness) in healthy individuals is capable of relieving the similar symptoms occurring as an expression of disease. The word homeopathy translates as “similar suffering”. Further, Hahnemann proposed that biological activity can be enhanced by dilution (the law of infinitesimals). A more recent concept, phytobiophysical philosophy, developed by Diana Mossop (1947-), uses formulas from selected flowers that contain the vibration energy of plants. The energy, blocked in the flowers, is released in the human body to reestablish all levels of consciousness: spiritual, emotional, mental, and physical balance.

These systems relying on the concept of a life-giving force clearly differ from the biomedical model in the generation of evidence as well as the translation into clinical practice. One example is the long process leading to the understanding of bacterial infections and the therapeutic use of selective antibiotics. Classical medical teaching by Hippocrates and, later, Galen supported the concept that infections were caused by chemical miasmas (unhealthful emanations) arising from swamps and unburied corpses. The discovery of bacteria as the causative agents of infection took several centuries. In 1683, Anton van Leeuwenhoek of Delft wrote to the Royal Society describing the appearance of minute “animalcules” under the microscope he had invented. Louis Pasteur in 1861 demonstrated that fermentation failed to take place when organisms from the air were excluded from heat-sterilized liquids. Robert Koch discovered the causative organisms for anthrax (1876), tuberculosis (1882), and cholera (1883).

The use of chemicals to selectively control infections is a relatively recent advance in medicine. The first successful synthetic drug against bacteria was the dye prontosil, developed in 1933 by Gerhard Domagk as an effective treatment against streptococcal infections in mice and later in humans (including his daughter as one of the first patients). The development of penicillin from Alexander Fleming in 1928 to Howard Florey and Ernst Chain at Oxford in the 1940s is widely known. The fundamental principle of antimicrobial therapy, that of selective death or inhibition of the disease-causing agents, is one example of the emphasis in the biomedical model on precise biomolecular targets, while other intervention strategies deal either with the metaphysical (spiritual) or the material aspects of health and disease.
The Islamic Perspective as an Approach to Cure and Healing

Within the fundamental framework of Islam, the therapeutic strategies in Islamic medical tradition reflect an integrated approach of spiritual, psychological, and material aspects of healing. Islam, the submission to the will of Allah, regulates all aspects of a Muslim’s life, including health matters. The primary source is the Qur’an, revealed by Allah to the Prophet Muhammad; the second source is the Prophet’s actions and precepts, collectively called the Sunnah. Medical research and treatment, as other human activities, are categorized under Islamic law as either wājib (compulsory), mandūb (recommended), mubāh (optional), makrūh (disliked) or haram (prohibited), according to their relation to the texts of revelation and the circumstances. The legal rule (hukm shar’i) on medical treatment and research is vital, as it establishes its acceptability or nonacceptability within the Islamic model. Therefore, the human being will be accountable for the ways of medical treatment as he is held accountable for all of his other actions.

Prophet Muhammad has declared that Allah has not sent down any disease without its cure, except aging and death.15

According to this hadith, we can surely hope to find the treatment or the means of therapy of any disease we may encounter. Furthermore, the Prophet has prescribed different forms of medicine (material, e.g., honey and psychological or spiritual, e.g., prayer) and followed suggestions of physicians for treatment. This approach not only ensures the availability of the cure for any form of disease but also justifies the search by Muslims for the necessary cure.

Nonetheless, Islamic guidelines deny that medicine is solely responsible for cure of disease. This is clearly stated in a verse from the Qur’an:

وَإِذَا مَرَّتِ فَهُوَ يُسْتَبْعِشَ

And when I am ill, it is He who cures me.16

Therefore, no disease can be cured without the kindness and approval of Allah the Most Merciful. Even with the proper application of the proven practices of treatment, the ultimate cure comes only after His approval. The curing effect of a medicine, if it is there, is given by Allah. Thus, medical treatment, even if recommended or compulsory in certain cases, cannot be considered as the cause of healing. Rather, it is a means that may lead to the appropriate result with the permission of Allah. This approach in line with the basic Islamic creed that Allah is the Creator of everything existing, the Master over cause and effect. In the Qur’an, Allah says:

وَتَنزَّلُ مِنِّ الْقُرْآنِ مَا هُوَ شَفَاءٌ وَرَحْمَةٌ لِّلْمُؤْمِنِينَ

We send down (stage by stage) of the Qur’an that which is a healing and mercy to those who believe.17

Moreover, the Prophet emphasized that the best supplication is to seek good health.18,19 This again explains the ultimate submission to Allah for health and disease.18,19

In human understanding, certain imbalances of physiological or psychological events are defined as diseases. From the Islamic perspective, sickness involves derangement of physical and psychological balance resulting in negative effects. Yet, it has a positive function as a test of the believer and an opportunity for expiation of sins. It is thus a benediction from Allah.20 All these approaches in Islam regarding health and disease describe a principle in diversity that includes the scope of finding the cure (both physical and spiritual) and submission to Allah for His kindness and mercy.

Islamic Guidelines of Healing Compared with Other Forms of Medicine

While disease and its healing in most of the therapeutic strategies are mainly based either on physi-
cal or on metaphysical aspects, therapeutic strategies in Islam are based on a combined dependence upon both i.e., the spiritual and psychological means as well as material means. Notably, Prophet Muhammad ﷺ did not claim to be a physician or expert in the field of medicine. He relied upon and sought Allah Almighty’s help in the prevention and cure of any disease. He practiced and advised a healthful lifestyle including proper cleanliness, controlled and balanced eating habits, avoidance of anxiety and stress, and even healthful ways of sleeping to maintain good health. He also acknowledged natural products having medicinal values and took advice from physicians. Physicians in the Muslim society then followed the concepts of the Prophet combined with the principles and practices of Greco-Roman medicine and those of Persian, Indian, and Chinese origins. Therefore, common overlapping domains exist between the guidelines of the Islamic medical model (Islamic medicine or prophetic medicine) and those of other forms of therapy despite the fundamental differences between them (Table 1).

Some Important Concerns Regarding the Islamic Medical Tradition

Table 1 obviously suggests that an appropriate knowledge of Islamic guidelines is necessary, for Muslims in particular, to avoid any misunderstanding and misinterpretation to accept or practice any other therapeutic strategy. Some of these guidelines are described below as examples.

Can Muslims Accept Treatment that in its Origin Denies God’s Power to Heal?

For practical reasons, modern medicine is usually the preferred option (when it is accessible along with other options) for the prevention or cure of a disease. This may be because applications of modern medicine—for instance, vaccinations—have reduced the incidence and mortality due to many infectious diseases.21-23 Further, gene therapists are confident that they can eliminate specific diseases using this therapeutic technology.24,25 Thus, confidence in the ability of a particular drug or vaccine is very high, often being considered as the one and only option especially when found to be effective. Because these therapeutic strategies do not acknowledge Allah ﷺ as the ultimate source for the cure of disease, they might be unacceptable to the Muslim. However, from the Islamic point of view, acceptance of the medicines for the purpose of healing would be permitted for those who take the medicines in addition to having tawakkul (reliance on) and hope for the blessings of Allah ﷺ for the ultimate healing, not as a substitution. In other words, so far as a Muslim’s faith is concerned, the use of medicine should not conflict with belief in the authority of Allah ﷺ as the sole cause of the effectiveness of the medicine.

Are Treatment Strategies Limited in Islamic Medical Tradition?

The number of practices and applications of drugs and medicines mentioned in the Qur’an and Sunnah are far fewer than those available in other therapeutic interventions. However, according to the Sunnah, we know that Allah ﷺ has not sent down any disease without the remedy for it.15 Therefore, although the therapeutic strategies prescribed either by Prophet Muhammad ﷺ or mentioned in the Qur’an are limited in nature, type, and number, this should not limit the discovery of new products and strategies of medicinal importance by Muslims. Furthermore, Muslim physicians in the period from the 7th to 15th century successfully collected and tested herbs and plants used for medicinal purposes from different parts of the world, including Greece, China, and India.26

Complementary or alternative therapeutic strategies such as acupuncture, yoga and herbal medicine are currently being widely practiced.3 These treatment methodologies are based on different combinations of metaphysical aspects of energy, vital force, matter, and chemical components of natural origin. Many of those are neither based on empirical evidences nor on the spiritual aspects directly linked to Islam. However, there is no reason to deny the use of these therapeutic strategies by Muslims if the following principles are met:

• These therapeutic strategies do not involve the sense of shirk (false-godhood or false partnership to Allah ﷺ) nor are they based on any practice related with shirk.
• These strategies do not deny the authority of Allah ﷺ in the cure or treatment of disease.
The therapy is not in contradiction to any text in the revelation and, therefore, categorized as ḥarām (prohibited).

Are Islamic Principles of Treatment too General to be Useful?

The Qur'an has been recognized as the source of cure for all kinds of diseases. Understanding the concept that the Qur'an is a source of cure for all diseases is not straightforward. Many diseases are related to lifestyle. The Qur'an as a complete code of life provides the basic principles of social, economical and many other aspects of life, including necessary guidelines for a healthful lifestyle of an individual with regards to eating habits, cleanliness, sexual habits, and controlling mental stress, impatience, greed and anger. Thus, the Qur'an can be considered as the cure for diseases. This notion is consistent with recent scientific evidence that explains the etiology of cardiovascular diseases, sexually transmitted diseases and diseases related to unhealthful eating and drinking habits.

In the Qur'an and the Sunnah, honey, dates, black seeds, olive oil, and vinegar are praised and recognized as powerful treatments for many diseases. Detailed investigation of the pathogenesis of disease is used to explain the requirement for a particular drug with a specific course of action for the treatment of a particular symptom. According to this view, the generalization of honey, dates, black seeds and olives as a source of healing for many diseases could be confusing. Recent investigations have shown that the ingredients of honey, such as sucrose, enzymes and minerals, either individually or in combination, minimize symptoms and improve health. Most important, the nutrient and mineral composition of those products strengthens the components of the immune system. An efficient immune system is an important requirement both for healthful living and disease prevention.

It was reported that Prophet Muhammad recommended to offer prayers to heal a stomachache.

The Prophet had asked Abu Hurayrah:

'Does your stomach ache?' He said: 'Yes, O Messenger of Allah'. The Prophet said: 'So stand up and pray, as there is healing in prayer.'

<table>
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<th>Distinguishing features</th>
<th>Principles and Guidelines of Islam</th>
<th>Other Strategies</th>
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<td>Treatment (cure)</td>
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<td>Stress control</td>
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<td>Surgical treatment</td>
<td>Largely permissible (within the guidelines of Islamic law)</td>
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Table 1. Differences between Islamic guidelines of healing and other therapeutic strategies.
A stomachache could be the symptom of several different underlying causes, such as food poisoning, intoxication, and many other different pathophysiological conditions including pancreatitis, hepatitis, and colon or stomach cancer. Accepting prayer as a means of healing stomach pain might be confusing while the underlying requirement to relieve the pain requires specific treatment. However, the purpose of the prayer is to submit oneself to Allah. A successful submission thus accomplished helps to achieve minimum or zero influence of the bodily processes on the mind. Thus, a Muslim can achieve minimal response of the mind to any bodily pain through submission of oneself to Allah during prayer. Therefore, suggesting prayer for healing of a stomachache could be significantly meaningful at both the psychological (mind) and spiritual level. Nevertheless, suggesting prayer as a source of healing of a stomachache of any kind would not be well accepted when there is a lack of specific information about the kind of stomachache for which prayer was suggested by Prophet Muhammad as he advised neither to escape from nor to enter into plague-inflicted areas.

The prioritization of prevention over cure is a common principle in every school of thought, offering therapeutic strategies to ensure healthful living, including Islam. Practitioners—whether they deal with energy or spirit of the body or soul, cellular or molecular events of the life form, or power of the natural and herbal products—all have their guidelines to keep the body fit and balanced and protect it from any potential cause of disease. In the Qur'an and Sunnah, we find the guidelines of cleanliness, balanced food and nutrition, and physical and mental stress control, which too are aimed at providing physical and mental balance for good health. For the Muslim, following the guidelines from the Qur'an and Sunnah for an Islamic way of healthful life can be considered as 'ibāda (worship).

**Things to Be Done**

Despite the notable contributions of Muslim medical practitioners in the Middle Ages, most of the tremendous developments in medicine in the last century have occurred independently of intellectual input from countries with Muslim majorities. Further, the benefits of these advances to these populations have been markedly less than in Western countries. A possible reason for this might be that the Muslims neglected the foundations of Islamic teaching and thereby distanced themselves from actualizing their understanding of the Qur'an and Sunnah. In addition, science in the Muslim countries is being taught and practiced detached from the Islamic beliefs and value system, perhaps partly due to the postcolonial influence and partly due to an inclination to imitate the rapid (material) advancement of the Western secular societies. A decline in rigorous intellectual pursuit along with the political weakness and disintegration of the Islamic world resulted in the uprooting of the Islamic medical model developed within the Islamic macroframework.

The efforts of scholars, physicians, and even
philosophers from different ethnic, religious, and national identities for centuries have expanded the indepth mechanistic foundation of different branches of medicine. Muslim scientists, researchers, and physicians in the contemporary context are engaged in the advancement of modern medicine either in their native countries or elsewhere. The Islamic medical model with its guidelines on prevention, control, and cure provides a combined approach. Based on the principles of īmān (faith) and developed within the framework of Qur’an and Sunnah, the Islamic medical model is nevertheless open to forms of therapeutic strategy as developed within other models. Provided that there is no contradiction to the bases of faith or to any textual evidence or Islamic legal rule, Muslims do indeed have the option to choose from other medical models.

A successful activation of the Islamic therapeutic model and its furtherance from the use of limited therapeutic strategies on the individual level can take place only within a reactivation of an authentic Islamic way of life. The first step to improvement would be for Muslims to realize the relationship between the state of affairs in the medical, educational, and other sectors; the historical background; and their responsibility. For the further development of the Islamic therapeutic model, research has to take place to design strategies to evaluate empirical evidence for the analysis of guidelines from the Qur’an and Sunnah describing health-related issues. Serious epidemic health concerns such as acquired immune deficiency syndrome (AIDS) and its relation to sexual practices as well as psychological stress as an obvious issue of modern life and its relation to heart disease are two examples that can be be studied in the context of the lack of an Islamic way of life in modern times.

Qualified Muslim researchers should work out guidelines on medical therapy as developed outside of the Islamic model, specifying what is permissible or not permissible in use and research. It is hoped that the furtherance and holistic activation of the Islamic medical model will be of benefit to mankind in providing major inputs to the global issues on health and disease. The responsibility to enact the Islamic way of life needed for this is upon the Muslim world.

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