

The Role of the Islamic Organization for Medical Sciences in Reviving Islamic Medicine

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Abstract

The Islamic Organization for Medical Sciences (IOMS) was formed to fill a need for the Muslim "Ummah" (worldwide nation), to clarify the Islamic point of view of certain medical practices, to collect Islamic medical heritage and determine how to apply it to modern day medical practice. IOMS was successful in including the spiritual component in the definition of the human being at World Health Organization (WHO). It issued an Islamic document on the code of medical professionals. IOMS organized several medical juristic symposia to discuss and provide the Islamic point of view on several issues e.g. the sacredness of human life, genetics and genetic engineering, assisted reproductive technologies, organ transplantation, cloning, AIDS, etc. IOMS also held several symposia about the great medical scholars of the Muslim Ummah. Its library has copies of several thousand manuscripts and is working hard to collect more. IOMS is planning to have these manuscripts available on the Internet to preserve the legacy of Islamic medicine and make it available for further study and research.

Key words: Islamic medicine, Islamic jurisprudence, manuscripts, Islamic medical ethics.

Three occasions have greatly contributed to the emergence of the idea of establishing the Islamic Organization for Medical Sciences (IOMS). The first was

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in Cyprus in 1976, during a symposium on ethics and medicine. Among the topics presented was "The Islamic Concept on Some Medical Problems." The job of preparing a working paper for this topic was assigned to a non-Muslim American professor, who failed to be honest in presenting and documenting the topic. The participating Muslims, who were not more than three, discussed the case with the organizers. No qualified Muslim was available to express the Islamic point of view.

The second was in Paris, where "The World Union for the History of Sciences" held one of its conferences in the University of Sorbonne. One of the sessions was about 'abū Bakr al-Rāzī. The speaker was an Iraqi professor of medicine. When he started to introduce al-Rāzī as an "Arab" physician, the hall roared with the voices of the Iranian participants protesting that al-Rāzī was Persian born in al-Rāi. The chairman tried in vain to calm down the Iranians. The

session on al-Rāzī ended up being cancelled. We tried to mediate, but each side was insisting on its claim. The conference was held during the Iran-Iraq war, a time when emotions ran high. Was it not wiser to say that al-Rāzī was a Muslim physician, regardless of the ethnic considerations, which were a source of the tragedies that we have suffered and still do up until now?

In another session about the historical sequences of the world peoples and the roles of different civilizations in world progress, when we came to the role of Islamic civilization, we started to hear expressions of disapproval and accusation. Only a few attendees from Morocco spoke fairly and defended it, but their voices were not heard among the anti-Islamic roars.

The third occasion was connected with the advent of the 15th Hijri century and its celebration by the Muslim world. We wanted the celebration to embody our concepts of Islam and our "Ummah," the Muslim nation. We wanted it to be appropriate to that great "Din" (religion) whose committed followers, thanks to its guidance, were men of deeds. They led mankind out of darkness to light and provided it with a bountiful source of guiding knowledge that heals hearts and minds.

Out of our deep faith that Islam must be working in all aspects of life and our desire to see our profession as one aspect of Allāh's mercy to his creatures, the IOMS was born with a global objective to search for the truth, support it, and throw light upon it. Seeking Allāh's acceptance of our efforts and intentions, among its numerous objectives are the following:

1. Clarifying the Islamic point of view of certain medical practices.
2. Collecting Islamic medical heritage, clarifying it, removing doubts and misconceptions ascribed to it and attracting young generations to be interested in studying and defending it in international forums.
3. Collecting data about the application of the Islamic medical heritage, specifically in the area of the use of medicinal plants, an application that IOMS believes is important. It urges all Arab and Muslim countries to contemplate the use of medicinal plants in treatment instead of chemical means, which forms a heavy burden on Muslim countries because foreign companies monopolize the production of those medicines. Allāh has endowed the Muslim world with a huge wealth of these medicinal plants, which can provide cures for all diseases prevailing among Muslims. Our previous medical scholars have studied and tested these plants. We want to have them evaluated according to 21st century scientific criteria and requirements. It is not an exaggeration to say that the Muslim Ummah will definitely face a critical shortage of medicines after the international organizations dictate trade rules and giant pharmaceutical companies monopolize this industry. Surely, prices will multiply and leave the Muslim individual's share of medicine decreasing and the whole Ummah stricken by more disease.

Before going into a detailed presentation of our activi-

ties, I deem it important to consider the meaning of "Islamic medicine." While some completely refuse this concept, others limit its meaning to herbal medicine that is practiced by many Ḥakims all over the world, who unfortunately call it "Yūnānī" medicine even though the texts they use are written by Muslim scholars such as ibn Sīnā, al-Bīrūnī, al-Rāzī, and many others. On the other hand, our organization decided to define it as a very comprehensive system that covers human health in all of its aspects such as:

1. Preventive aspects: Islam orders its followers to adhere to cleanliness as encompassed by the rules of "Ṭahārah," such as to consume only good and clean food, to abstain from alcohol, and not to eat pork. There are many other orders: to live in a clean house, drink clean water, as well as dress in a modest way, observing and practicing "Ḥishmah" (modesty) between man and women in all daily relations, and the best way of raising children and safeguarding their health. All these rules add up to a healthy lifestyle.

2. The holistic approach: Islam looks at the individual in three major dimensions that integrate the body with the psyche and the soul. When we achieve the equilibrium among these three dimensions, the tranquility for the human being is attained and he can live a very comfortable life, described in the Qur'ān as "al-Nafs al-Muṭma'nah," which cannot be translated to other languages and given the full meaning of the Qur'ānic words. The disturbance of this interaction is the major cause of most of the psychosomatic diseases that face man in our present civilization that mainly depends on allopathic medicine.

The utilization of all medical treatment that is available to medical practitioners. A "Ḥadīth" (saying) of Prophet Muḥammad [PBUH] states there is no disease that does not have a treatment, except for aging, which has no cure. Accordingly, Islamic medicine scholars have prescribed many medicines that can be applied to many diseases. These classic prescriptions need proper scientific evaluation so that we can assure their safety and efficiency.

In addition, Islamic medicine stresses certain strict and ethical standards that all medical practitioners should observe when they are dealing with patients. On the above three major principles, our organization has developed its activities. Some of them follow.

The revival of Islamic teachings in the field of medicine is to restore for the Muslim heart its spirit that was lost after science had been detached from religion and the whole Muslim Ummah has become an Ummah of consumption importing everything, including medicine, from the West. The Muslim physician finds no nourishment for his heart, and the patient in his hands turned into a collection of separate systems and organs. He no longer thinks of his patient comprehensively as a human being of one entity who consists of body and soul. Due to the absence of that comprehensive view, many physical diseases appeared while they are mere reflections of psychological disorders, but the physician is unaware of that.

The IOMS concentrated on the necessity of including the spiritual component in the definition of human being at the World Health Organization (WHO). In spite of the opposition of others, we succeeded in introducing this spiritual dimension.

Also, we issued an Islamic document on the code of medical professions. The document is divided into the following chapters:

1. Defining the medical profession
2. The attributes of the physician
3. Doctor-doctor relationship
4. Doctor-patient relationship
5. Confidentiality in the doctor-patient relationship
6. Physicians' duties during war
7. Sacredness of human life
8. Physicians' responsibilities
9. Physician and the society
10. Physicians' attitude toward scientific research and its modern findings
11. Medical education
12. The physician's oath. This oath is derived from the Qur'an and "Sunnah" (traditions of Prophet Muhammad [PBUH]) and is to be used instead of the Hippocratic Oath.

To clarify the Islamic view on modern medical issues, we held a number of medical juristic symposia in which we adopted a new scientific approach. We invited medical specialists in the various fields along with scholars of "Shari'ah" (Islamic jurisprudence) to study together the issues and to clarify the Islamic view on each problem. It was a surprise for non-Muslims and even those Muslims who lack faith in Islam, that the Islamic Shari'ah appeared so great to hold not only the modern concepts, but to exceed all boundaries conceived by the enemies of Islam. It proved capable of providing clear opinions based upon the Qur'an and Sunnah.

We tried to address many contemporary issues such as:

1. Genetics and genetic engineering and related juristic studies
2. Gynecological diseases and related juristic studies
3. The Islamic concept on human life
4. Transplantation of human organs
5. The utilization of aborted fetuses
6. Transplantation of genital organs: medical and juristic aspects
7. Health policy concerning human ethics and values from an Islamic perspective
8. The sacredness of human life
9. Islamic values: morals and behavior
10. Medical and juristic aspects of skin grafting

The details of these issues are found in the appendix. In addition, we address pressing issues that face Muslims in their daily lives, especially those living outside Islamic countries. These issues include the following:

1. Medical aspects of prohibited and impure materials in food and medicine.

- a. Impure and prohibited materials in food and medicine.
 - b. Food, drinks, and gelatin lawfulness and prohibition.
 - c. The problem of using prohibited materials in food, medical products, and treatment in dentistry.
2. The juristic aspects of additive materials:
 - a. The extent of lawfulness of adding to food and medicine materials derived from impure sources
 - b. The juristic position on additive materials.
 3. Transformation:
 - a. Meaning and regulations of transformation and their effects on lawfulness and purity of impure materials.
 - b. Meaning and juristic regulation of transformation.
 4. Cloning:
 - a. Human cloning: Its scientific aspects and horizons.
 - b. Cloning between venturing and refraining.
 - c. The impact of human cloning on different human aspects:
 - Human being and his identity in Islam.
 - Social effects of human cloning.
 - Psychological effects of human cloning.
 - d. Legal effects of human cloning.
 - e. Juristic aspects of human cloning.
 5. AIDS
 - a. Medical aspects of AIDS:
 - Basic information about AIDS, methods of prevention, and some related judgments.
 - b. Juristic aspects:
 - The judgment on isolating AIDS infected persons in the following cases:
 - Mature infected persons.
 - Infected children in schools.
 - The penalty of AIDS infected persons who deliberately infect others:
 - The penalty of AIDS patients or HIV-positive individuals who caused others to get infected.
 - The penal responsibility of AIDS infected persons.
 - The Islamic view on the social problems of an AIDS infected person.
 - c. AIDS infected wife. Her rights and duties:
 - The judgment on aborting AIDS-infected fetus.
 - Permission for AIDS-infected mother to raise and suckle her noninfected child.
 - Her right in association.
 - d. Can AIDS be considered a death disease?

Conclusions

In this way, IOMS has become the faithful voice of the Islamic Shari'ah without partiality to any sect. It has acquired the respect and trust of all and represented for the

Muslim world the main center responsible for studying such topics and issuing legal opinions in this domain.

In these activities, IOMS cooperates with the Honorable al-Azhar al-Sharif in Egypt, the academy of Islamic jurisprudence in Jeddah, The Muslim World League, and several other Islamic authorities, corporations, and organizations interested in this field. OIMS has also become a member of WHO and CIOMS. In these gatherings, IOMS expresses the Islamic view, which is of interest to all.

IOMS has also succeeded in drawing attention to these topics. It encourages a number of universities in the Arab world to participate and contribute to these areas. It held conferences with many medical societies in the Arab world aimed at arousing energies to adopt Islam as the principal catalyst, and to make physicians believe that they are among the channels of Allāh's mercy to His creatures.

As for the second field, which is the theme of this conference on the Islamic medical legacy, IOMS has done a lot to serve it. Since the early thinking on the activities of this organization, the legacy has been the focus because its role for the Ummah is equal to that of the roots for a tree, a source of nourishment, growth, and production. The deeper, the Ummah goes back into its history, the firmer it comes in front of storms. Our perspective of studying history is not either that of boosting or of lamenting the glories of the past. Our objective is to know the reasons behind the power and flourishing of our Ummah in order to adopt them and the reason of their decline to avoid them.

In addition, our youth is in need of good examples. Our young people are confused when they compare the present state of decay of their Ummah to what they know from their history about its flourishing and its great scholars in every field. What are the reasons of that boom and this decline? Only history can answer such questions. It tells us that the great scholars of our Ummah, who enlightened the world, were men of the Qur'an and Sunnah. They used to learn the texts of both and turn them into real life. Their deeds conformed to their words. They were fully dedicated to worship at night and "Jihād" in the day. They learned from the Qur'an and Sunnah that reading was a must, and they fulfilled this duty in full. Through these tireless endeavors, they deserved to be leaders of the world. But when they turned to this world as their main interest and neglected priorities and vital objectives, they turned down to the present regrettable position.

In line with its deep interest in legacy, IOMS held a number of symposia and conferences about the great medical scholars of the Muslim Ummah, such as al-Rāzī, ibn Sīnā (Avicenna), al-Zahrāwī, ibn al-Nafīs, and ibn Rushd.

In cooperation with ISESCO, IOMS will hold a conference about ibn al-Haytham, the author of the treatise "al-Manadhīr" and the originator of the theory of seeing.

The IOMS library was provided with more than 5,321 copies of medical manuscripts that will be made available through the Internet in order to attract interested world historians, Muslim scholars, and other researchers.

IOMS is working on a plan for cooperating with various authorities and centers all over the world in order to collect medical manuscripts on microfilm in order to make them available at its library and at the request of interested specialists.

Appendix

On genetics and genetic engineering:

1. Mixed human milk banks.
2. Juristic studies on controlling the gender of a fetus.
3. Shari'ah and controlling the genetic potentialities.

On abortion:

1. Abortion in religion, medicine and law.
2. Abortion between juristic laws and medical aspects.
3. Abortion in the Islamic law.

On other gynecologic issues:

1. Surgical contraception.
2. Test tube babies and surrogate motherhood.
3. Looking at the genitals by the opposite gender in medical practice.

On the Islamic concept on human life:

1. The Islamic and juristic concepts on the beginning of human life.
2. The medical and Islamic concepts on the end of human life.
3. The end of human life: juristic discussions.

On transplantation of human organs:

1. Transplanting brain cells: present practice and future horizons.
2. The juristic aspects of amputating an organ from a live anencephalic infant.
3. The juristic aspects of transplantation of neural system cells, particularly brain cells.

On utilizing aborted fetuses:

1. Anencephalic infants as a source for vital organ transplantation.
2. What is a fetus? Can it be utilized in transplantation and scientific experiments?

On transplantation of genital organs:

1. Medical and juristic aspects of male and female transplantation of reproductive organs and glands.

On the health policy concerning human ethics and values from an Islamic perspective:

1. Why the Islamic perspective?
2. Human itself is a value.

On the Islamic opinion on sacredness of human life:

1. Old age problems.
2. Mercy killing.

On Islamic values: morals and behavior

1. Alcohol, drugs, and addiction.
2. Health and Islamic behavior.
3. Spiritual values, morals, and sciences.

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4. Justice in distribution in face of shortage in resources.
 5. The influences of Islamic civilization on the European civilization in medical sciences.
 6. The Islamic view on life and death.
 7. Knowledge, perspective, and practice: The three foundations of wisdom, excellence and values that enrich health care from the Islamic perspective.
 8. Prenatal diagnosis of fetal malformities.
 9. Fetus: its life and rights in Islamic law.

10. The Islamic view on brain death and organ donation.

The medical and juristic aspects of skin grafting:

1. Skin grafting.
2. The decision on skin grafting.
3. Juristic regulations of medical technicalities of skin grafting.
4. Skin grafting and its regulations in Islamic law.
5. Skin grafting and skin banks.
6. To what extent is it legal in Islam to establish human skin banks?