

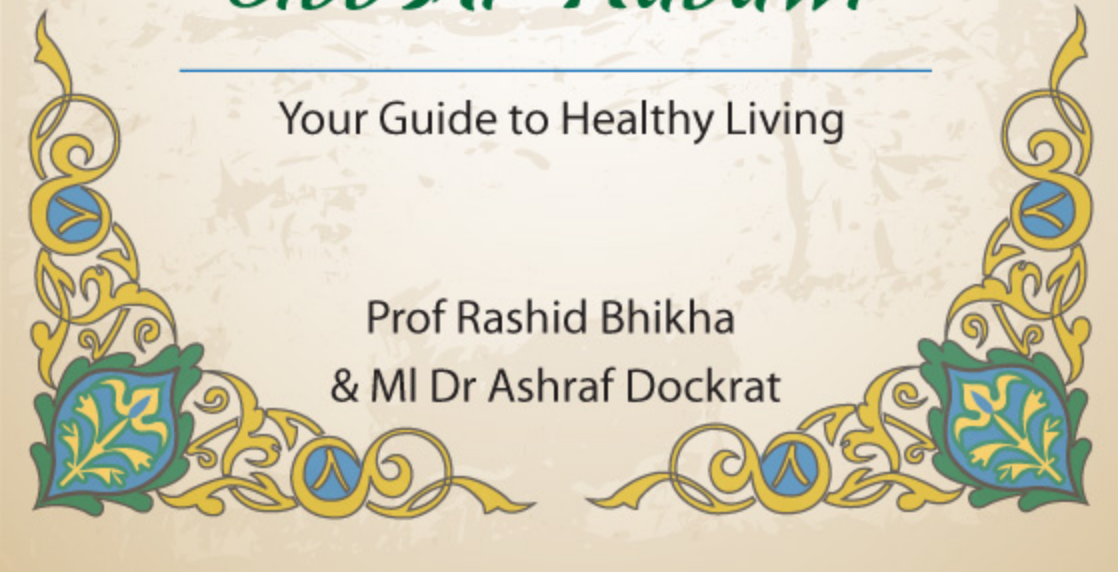
Medicine
of the
Prophet

صلى الله عليه
وسلم

Tibb Al-Nabawi

Your Guide to Healthy Living

Prof Rashid Bhikha
& MI Dr Ashraf Dockrat





Medicine of the Prophet

Tibb al-Nabawī

Your guide to healthy living

Prof Rashid Bhikha and MI Dr Ashraf Dockrat

A PRODUCT OF THE IBN SINA INSTITUTE OF TIBB

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Dedication:

To all the narrators of the Prophetic Traditions. May Allah ﷻ bless and reward them for preserving the Sunnah of Prophet Muḥammad ﷺ.

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Foreword



My journey of being a proponent of Islamic Medicine began with the establishment of the Islamic Medical Association (IMA) in South Africa in the late seventies. In subsequent years I researched and presented, amongst others, papers on *'The diet of a Muslim'* and *'Black Seed: A cure for all illnesses except death'*, wherein the significance of the prophetic traditions in healthcare is evident.

In 1990 my youngest daughter was diagnosed with fibrosing alveolitis (a life threatening condition of the lungs), requiring 24 hour oxygen support and taking 50mg of cortisone daily. This was quite a turning point for me, having qualified as a pharmacist, and always asking *'what is the mode of action'*, I realised the limitations of conventional medicine especially in understanding the causes of illness conditions. In desperation I studied other systems of healing and set my heart on *Tibb* for two important reasons. Firstly, *Tibb* is the foundation on which modern conventional medicine is based as it traces its roots to Hippocrates, Galen and Ibn Sīnā. Secondly, and more importantly, its philosophy, based on the temperamental and humoural theory, is in keeping with the Qur'ān and Sunnah.

To learn about this holistic system of medicine, I studied Unani-Tibb at Hamdard University in Pakistan, whereafter, inspired by the late Hakim Mohammed Said, I established the Ibn Sina Institute of Tibb in 1997, to promote the training and practice of *Tibb*. The first challenge was to establish the training of Unani-Tibb doctors as well as obtain formal recognition of the discipline in our country. *Alḥamdulillāh*, the training of Unani-Tibb doctors at the University of the Western Cape (UWC) commenced in 2003 and a register for Unani-Tibb doctors, to practice, was approved by the Allied Health Professions Council in 2007. This is indeed a milestone in that South Africa is the only country outside the Indian subcontinent where the training and practice of Unani-Tibb is officially recognised.

During the past fifteen years, the Institute has developed and conducted numerous workshops at consumer level with the emphasis on the role of lifestyle in health promotion and managing illness conditions including amongst others, hypertension, diabetes, HIV & AIDS. In 2006 a *Tibb* Schools Programme was launched at UWC's Health Promoting School's Conference. This Life Orientation programme, aimed at grades 10-12 has been taught in more than sixty schools in the Western Cape, and is currently being redrafted to comply with the latest Department of Education requirements.

In addition to the above, the Institute has facilitated the training of Lifestyle Advisors in partnership with NGO's working in the health sector, including the Islamic Medical Association, Islamic Relief and local organisations such as Soweto Footprints. The role of the Lifestyle Advisor is to provide lifestyle and wellness support to patients, particularly those with chronic conditions and to further support clinical nurses and doctors within the framework of existing clinics, extending to home-based care and home visits.

Lifestyle is by and large a huge component of health maintenance as well as the management of illness conditions. Years of research have highlighted that this is ultimately the foundation on which '*Tibb al-Nabawī*' is based.

With this in mind the Institute developed a training module '*Tibb al-Nabawī: A Practical Guide to Health Promotion based upon Prophetic Medicine*'. This module was incorporated into the Higher Certificate in Islamic Studies as well as Bachelors of Arts in Islamic Studies at the International Peace University of South Africa in Cape Town in 2009 and 2010.

After the successful completion of this piloted module, and in consultation with MI Dr Ashraf Dockrat, we decided to write a book on '*Tibb al-Nabawī*: that would serve as both a reference for students of Islamic Studies as well as be a resource for consumers interested in Prophetic Medicine.

The preparation of the book was interrupted by the request from ITV to record a series of 20 episodes on '*Medicine of the Prophet*' which we undertook during 2012. Upon completion of the twenty episodes that were aired, we decided to continue with the book, following similar themes that were covered on the ITV series.

Alḥamdulillāh, with the grace of Allah ﷻ this humble effort has now reached fruition.

My sincere gratitude to Mr Farhad Omar and his team at ITV for inviting us to participate in the TV series, as well as Mr Farouk Hoosen who hosted the TV programme, and MI Dr Ashraf Dockrat, Dr Mujeeb Hoosen, Dr Joy Saville and Dr John Glynn for their contribution both on and off the set.

Thank you also to Ms Magdalene du Sart for her patience in typing and retyping the contents of this book and Sh.Fayyaadh Mohamed for the invaluable contribution of the transliteration.

Very special thanks to my daughter, Nasira, for the many hours, and late nights of editing, and to my wife Mariam and the rest of my family for their continuous patience and support.

I am also thankful to Mr Farhad Vallee for the typesetting, formatting and design of the book.


Finally on behalf of MI Dr Ashraf Dockrat, and myself, I wish to thank you, dear reader, for aspiring to learn more about *Ṭibb al-Nabawī*. I hope this book will inspire you in adopting a lifestyle in accordance with the Qur'ān and Sunnah which will Insha'Allah, benefit you in this world with an even greater reward in the hereafter.

Rashid Bhikha

April 2015

Symbols , glossary of terms used, tables and charts

Symbols used

 = Subhānahu wa Ta'āla


Used after the name of Allah ﷻ translated as “Glory be to Him, The Exalted

 = Ṣallalāhu 'Alayhi Wasallam

Used after the name of Prophet Muḥammad ﷺ translated as “May the peace and blessings of Allah ﷻ be upon him”

 = Raḍi'allāhu Anhu

Used after the name of a male companion of Prophet Muḥammad ﷺ translated as “May Allah ﷻ be pleased with him.

 = Raḍi'allāhu Anhā

Used after the name of a female companion of Prophet Muhammad ﷺ translated as “May Allah ﷻ be pleased with her.

 = Alayhis Salām

Used after the name of a prophet of Allah ﷻ, translated as May Allah's peace be upon him.

Glossary of Terms

| | |
|----------------------|--|
| <i>adhān</i> | The call to prayer |
| <i>aḥādīth</i> | (plural of <i>ḥadīth</i>) Sayings and Traditions of Prophet Muḥammad ﷺ |
| <i>Al-‘ayn</i> | evil eye – illness of misfortune inflicted from negative looks |
| ‘ <i>Asr</i> | Mid-afternoon <i>ṣalāh</i> . |
| <i>amānah</i> | a sacred trust given to us for which we are responsible |
| <i>Badr</i> | The first major battle between the Muslims and the Meccans, in the second year after the migration to Madina. |
| <i>dhikr</i> | Remembrance of Allah ﷻ |
| <i>du‘ās</i> | Supplications to Allah ﷻ |
| <i>Fajr</i> | Early morning <i>ṣalāh</i> , anytime from the breaking of dawn to just before sunrise. |
| <i>farḍ</i> | Compulsory, obligatory. |
| <i>fitrah- Allah</i> | Every human being is born with a natural inclination to submit to the will of Allah ﷻ |
| <i>ghusl</i> | A ceremonial bath for purification of the body and soul. |
| <i>ḥadīth</i> | Saying and Traditions of Prophet Muḥammad ﷺ |
| <i>ḥajj</i> | The greater pilgrimage, one of the five pillars of Islam. |
| <i>Ḥakīm</i> | In classical times a title for someone learned as a doctor. At that time medicine was part of philosophy and a <i>Ḥakīm</i> was versed in both fields. |

| | |
|--------------------|---|
| <i>ḥalāl</i> | Act, practice or food and drink allowed in Islam. |
| <i>ḥarām</i> | Act, practice or food and drink forbidden in Islam. |
| <i>ḥijāmah</i> | Cupping |
| <i>ʿibādah</i> | A single act of worship, adoration, acts of devotion, e.g. <i>ṣalāh</i> , recitation of Qurʾān, <i>dhikr</i> |
| <i>iblīs</i> | A personal name of the devil, otherwise called <i>shayṭān</i> . |
| <i>Imām</i> | Leader of the congregation. |
| <i>īmān</i> | This is faith itself, defined as faith in God, His angels, His books, His Prophets, and the day of Judgement. |
| <i>Inshā-Allah</i> | Allah ﷻ willing, with the permission of Allah ﷻ |
| <i>iqāmah</i> | <i>Iqāmah</i> is another call to prayer that is said just before the actual start of <i>ṣalāh</i> . |
| <i>istinjāʿ</i> | <i>Istinja</i> refers to the cleaning of the private parts after urinating or elimination. |
| <i>ʿiṭar</i> | perfume, scent, essential oil. |
| <i>ithmid</i> | Collyrium is a silvery dark grey stone, which is crushed into a very fine powder and used to darken the eyes. |
| <i>Jibrāʾīl</i> | Arch Angel Gabriel. |
| <i>jinns</i> | From which the English word <i>genie</i> comes, The inhabitants of the subtle and immaterial world. |
| <i>Jumuʿah</i> | Friday midday <i>ṣalāh</i> , a compulsory <i>ṣalāh</i> for all Muslims above puberty, during which a sermon is delivered. |
| <i>kuḥl</i> | kohl - a black powder, usually antimony sulphide or lead sulphide, used as eye make-up especially in Eastern countries. |

| | |
|-------------------|---|
| <i>Maghrib</i> | <i>ṣalāh</i> performed a few minutes after sunset until the redness on the horizon disappears. Must not be delayed. |
| <i>masāʾ</i> | Wiping the top of the head with moist hands during <i>wuḍūʾ</i> . |
| <i>miswāk</i> . | A part of a tree used for cleansing the mouth and teeth. |
| <i>munāfiq</i> | (plural <i>munāfiqūn</i>) is a hypocrite who outwardly practices Islam while inwardly concealing his disbelief. |
| <i>Nafs</i> | <i>Nafs</i> (pl. <i>anfus</i>) lexically means, the psyche, the ego, the self or the mind. |
| <i>qaʿdah</i> | Sitting position after the <i>sajdah</i> (prostration). |
| <i>qadar</i> | <i>Qadar</i> means that Allah ﷻ has decreed everything that happens in the universe according to His prior knowledge and the dictates of His wisdom. |
| <i>qawmah</i> | Standing position after the <i>rukūʿ</i> (bowing). <i>qiblah</i> The direction that Muslims face when performing the <i>ṣalāh</i> toward the Kaʿbah in Mecca. |
| <i>rakaʿah</i> | (Plural <i>rakaʿāt</i>) Series of movements of standing, bowing, standing again, prostrating, sitting, prostrating again and either standing again or sitting again depending on the cycle of the <i>ṣalāh</i> . |
| <i>rukūʿ</i> | The act of bowing in the sequence of <i>ṣalāh</i> . |
| <i>Ramaḍān</i> | The ninth month of the Islamic calendar, during which fasting is obligatory for all Muslims who are sane and past puberty. |
| <i>Rasūlullāh</i> | The last and final messenger of Allah ﷻ, Prophet Muḥammad ﷺ |
| <i>ruqyah</i> | spiritual cures or spiritual healing. Ruqyah in Islam is the recitation of Qurʾan, seeking of refuge, remembrance and supplications that are used as a means of treating sicknesses and other problems. |

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| <i>Ṣaḥīḥ</i> | Collections of authentic <i>aḥādīth</i> which are highly authoratative. |
| <i>sharī'ah</i> | The canonical law of Islam as put forth in the Qur'ān and the Sunnah and elaborated by the analytical principles of the four orthodox schools of Islamic jurisprudence. |
| <i>shayṭān</i> | The devil (also see <i>Iblīs</i>). |
| <i>sajdah</i> | Prostration by placing forehead on the ground. |
| <i>ṣalāh</i> | A form of prayer for Muslims in which there is a sequence of standing, bowing, standing again, prostration, sitting and prostration again and sitting again. This is done facing the direction of the <i>Ka'bah</i> in Makkah. |
| <i>Siḥr</i> | Witchcraft or Black Magic |
| <i>Sūfī's</i> | Adherents of the mystic or esoteric form of Islam |
| <i>sūrahs</i> | A chapter of the Qur'ān of which there are 114, e.g. al-Falaq, al-Nās, al-Fātiḥah. |
| <i>surma</i> | Antimony |
| <i>ṭabī'ah</i> | Also known as <i>Physis</i> – the body's natural ability to heal itself. |
| <i>ṭahārah</i> | The act of purification, spiritual and physical. |
| <i>taqwā</i> | The knowledge, fear and being conscious of the presence of Allah. |
| <i>ta'wīz</i> | Amulets, talismans or charms |
| <i>tawḥīd</i> | The acknowledging of the Oneness of God, the Indivisible, Absolute. |
| <i>tharīd</i> | Broth (soup) made up of meat, vegetables and barley |

| | |
|--------------|--|
| <i>ummah</i> | The followers of Prophet Muḥammad ﷺ until the day of Judgement. |
| <i>Unānī</i> | Persian word meaning Greek. |
| <i>wuḍū'</i> | A physical and spiritual cleansing before certain acts of worship, like <i>ṣalāh</i> and recitation of Qur'ān. |
| <i>zakāt</i> | The compulsory payment of 2.5% of wealth of a Muslim, calculated annually, to be given to deserving, indigent Muslims. |

Tables:

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Chapter 1

Introduction to Ṭibb al-Nabawī

1. What is Prophetic Medicine – Ṭibb al-Nabawī?

Ṭibb al-Nabawī refers to the words and actions of Prophet Muḥammad ﷺ with reference to disease, the treatment of disease, and the care of patients. It also refers to: a) the actual words of the Prophet ﷺ on medical matters; b) medical treatment practiced by others on the Prophet ﷺ; c) medical treatment practiced by the Prophet ﷺ on himself and others; d) medical treatment observed by the Prophet ﷺ with no objections, and e) medical procedures that the Prophet ﷺ heard or knew about and did not prohibit.

Ṭibb al-Nabawī also includes guidance on physical and mental health that is universally applicable to patients, at any time, and under all circumstances. It covers preventive medicine, curative medicine, mental well-being, spiritual cures (*ruqyah*), and medical treatments. It seeks to integrate body and soul in the quest for optimum health.

Recent scholars have, in their definitions of *Ṭibb al-Nabawī*, tried to be as comprehensive as possible. Consider the following definition posited by Muḥammad Nazzār al-Daqr:

“Ṭibb al-Nabawī may be defined as the science which combines all that has come to us from the Messenger of Allah ﷺ related to the subject of

medicine. This would include the verses of the Qur'ān, the blessed Prophetic Traditions (aḥādīth) and will also include the prescriptions of the Prophet ﷺ as he administered treatment to some of his Companions (may Allah ﷻ be pleased with them all) when they asked him for cures, or when he instructed them in some remedy. Likewise, this definition encompasses the advice which concerns the healthy living of a human being pertaining to his food and drink, his dwelling and marriage. It also covers the injunctions related to medicine and medication, the etiquettes to be observed and the legal responsibilities of the practitioner¹”

In recent times scholars have preferred more comprehensive definitions, such as the one above, to sketch a picture of what is meant when we use the term *Tibb al-Nabawī*. It is well known that Muslims have used *Tibb al-Nabawī* for many centuries. Anthropologists and students of cultures, ancient and modern, will argue that healing and medical care is an integral part of all societies. This is something Muslim societies and others share. The difference is that in the case of *Tibb al-Nabawī*, it was Islam, as a religion spanning various historical contexts, cultural settings and geo-political variety, which was able to offer its adherents guidance on health and healing directly from the texts of the Qur'ān and the sayings and instruction of Prophet Muḥammad ﷺ. Muslims throughout the Islamic world and of every generation have adhered to these teachings, and assimilated them into their own contexts.

2. Impact of the Prophet Muḥammad ﷺ on the development of medicine

To appreciate the impact of the Prophet Muḥammad's ﷺ contribution to the development of medicine, it is important to review the different philosophies that were prevalent during his time.

Medicine in the pre-Islamic era.

Prior to the advent of Islam, there were three main philosophies associated with the practice of medicine; namely, Greek, Chinese and the Ayurvedic healing systems².

From these three basic systems a number of variations arose, either as branches from one of the systems, or as a combination of these different systems. Although these systems have much in common, there are a number of meaningful and fundamental differences. These originate from the particular belief system, or *worldview*, associated with each system. A *worldview* is the sum total of the religious, cultural, moral, traditional and social influences embedded within a system. Table 1 highlights the similarities and differences between the three medical systems, in the context of their worldview.

| Criteria | Ayurvedic Medicine | Chinese Medicine | Greek Medicine |
|--|---|--|---|
| 1. Religious influences | Hinduism/Buddhism | Taoism/ Confucianism/ Buddhism | Ibrāhīm ﷺ and previous prophets. (Abrahamic origin) |
| 2. Inherent wisdom that maintains and restores homeostasis | Prana | Chi energy | <i>Physis (vis medicatrix naturae; ṭabī'ah)</i> |
| 3. Biologic/metabolic (<i>internal</i>) force | Doshas (<i>energy dominance</i>) | Yin and Yang (<i>energy dominance</i>) | Humours (<i>metabolic dominance</i>) |
| 4. Health/disease indicators | Homeostasis Imbalance in <i>doshas</i> | Homeostasis Imbalance in <i>Yin and Yang</i> | Homeostasis Imbalance in <i>humours</i> |
| 5. Concept of creation (<i>Elements</i>) | Elements: <i>earth, water, air, fire and space</i> | Elements: <i>earth, water, fire, wood and metal</i> | Elements: <i>earth, water, air and fire</i> |

Table 1

It is evident from this that the three healing systems have similar concepts with respect to:

- a) A strong *spiritual influence*, which is often infused with superstition and magic.
- b) The presence of an *inherent wisdom* that is responsible for health preservation and restoration.
- c) The maintenance of *equilibrium* by an active force (either *metabolic or energy based*) within the human body.
- d) A *concept of creation* that interprets the relationship between man and the universe (that is, the interaction between *macrocosm* and *microcosm*).

These concepts provide a firm basis for understanding and interpreting the specific causation, or *aetiology*, of different diseases, the pathological processes underlying these diseases, and the application of treatment emerging from the respective disciplines within a holistic worldview.

Although there are several similarities between the three healing systems, there are also a number of fundamental and important differences. One in particular relates to the concept of creation. According to their respective models, the Chinese and the Ayurvedic systems believe that everything in the universe – including human beings – are created from *five elements*. However, in Greek medicine only *four* primary elements are identified. These primary elements should not be interpreted as physical states of earth, water, etc., but rather as *metaphysical states* from which the basic elements necessary for the existence of matter are formed.

The *concept of creation* is the foundation on which different belief systems are built. It interprets where we come from, what we are made up of (our *constitution*), what our purpose is in this world, and what happens to us after death. Our approach to these issues helps to shape our worldview.

Having examined the different healthcare systems prior to Islam, we can now turn our discussion more specifically on the impact of *Tibb al-Nabawī* on the development of medicine.

Development of medicine in the context of the Qur'ān and Sunnah

The birth of Prophet Muḥammad ﷺ heralded the culmination and perfection of the guidance from Allah ﷻ to mankind, as mentioned in the Qur'ānic verse:

“This day I have perfected your religion for you, completed my favour upon you, and have chosen for you Islam as your religion”³

Qur'ān 5:3

This ‘*perfection*’ is embodied in the Qur'ān (the source of all knowledge) and the Sunnah (manifestations and interpretations of the Qur'ān). It refers to the guidance that began with the Prophet Ādam ﷺ the approximate 120 000 Prophets ﷺ that followed, and all of Allah's revealed books. The revelation of the Qur'ān and Sunnah is the culmination of this guidance, and provides unequivocal direction and insights into all fields of knowledge, including healthcare.

In addition to providing guidance to mankind, the Qur'ān and Sunnah catalyse the seeking of knowledge and scientific enquiry within the context of the Islamic ethos. In fact the ‘*Golden Age*’ of Muslim civilisation reached its peak purely because of this guidance that provided insight into every field of knowledge, ranging from the basic physical and social sciences through to philosophy and medicine⁴.

The Qur'ān and Sunnah wielded a great formative influence on the development of medicine and health sciences. Muslim scholars and physicians in the early days critically examined all available medical philosophies and practices in the light of their own belief system⁵.

It was not surprising, therefore, that they adopted the Greek (Unānī) model, because it shared common roots with the Abrahamic teachings of the Torah, the Bible and the Qur'ān within the context of the creation of the universe, creation of Ādam ﷺ and Hawā ﷺ, and man's responsibility as vicegerent on earth, however staying within the Islamic ethos of tawḥīd. Muslims amplified and developed the theoretical principles of Greek medicine into a comprehensive and practical system of healing.

This was achieved by many physicians, including al-Rāzī (d. 317/930), al-Zahrāwī (d. 403/1013), Ibn Sīnā (d. 428/1037), Ibn Rushd (d. 594/1198) and Ibn Nafīs (d. 686/1288)⁶.

The Muslim contribution to medicine, especially in basic life sciences, was developed within the scope of medical practice as we know it today. Moreover, it emerged in the context of social, philosophical and associated disciplines, which influenced the theory and practice of medicine.

Incidentally, many of the contributors in the field of medicine were also experts in other fields of study. Ibn Sīnā, known as the '*Prince of Physicians*' was also a renowned philosopher and polymath, contributing extensively to the body of knowledge regarding astronomy, mathematics, metaphysics and logic. Ibn Sīnā's *al-Qānūn fī al-Ṭibb* (The Canon of Medicine) was the reference medical text-book used for more than six hundred years all over the world, including Europe.

The Canon of Medicine comprises five volumes, and covers all aspects of medicine from the philosophical principles of medicine (*Ṭibb*), anatomy, pathology, diagnosis and treatment using natural ingredients. The first volume deals specifically with the principles of both theoretical and practical aspects of *Ṭibb* (literally, medicine) based on the temperamental and humoral theories parameters⁷. These theories, expanded upon by subsequent Muslim physicians, provide a comprehensive elucidation of the *Ṭibb* approach to the key medical disciplines of aetiology, pathology, diagnosis and treatment, within scientific parameters.

Although the Prophet ﷺ was not a healer *per se*, his Sunnah, together with the Qur'ān, provides definitive and clear guidelines in the theory and practice of medicine. It is acknowledged that the examples of Prophetic Traditions, mentioned in the books written by early Muslim scholars with respect to a number of illnesses and their treatment, might not be particularly relevant to the 21st century, where new challenges of health provision and illnesses are evident. However, the rationale and wisdom behind the medicine of the Prophet ﷺ, based on the temperamental and humoural theories, requires renewed consideration in the maintenance and restoration of health. The temperamental and humoural theory of Greek Medicine is in keeping with the Sunnah of the Prophet ﷺ, as well as with specific verses from the Qur'ān.

This time-tested system of medicine that was developed through revelation and inspiration, and perfected with the religion of Islam, was practiced well into the 19th century, not only where Islam was practiced, but also in the Christian regions of Europe, where it was embraced during the European Renaissance. This is clearly evident in Graeme Toby's '*Culpeper's Medicine: A Practice of Conventional Holistic Medicine*'⁸ which describes the role of Nicholas Culpeper (d. 1654 C.E) in popularising the *Tibb* system of medicine in England during the 17th century. The very same principles embodied in the Canon of Medicine form the basis of Culpeper's medicine.

Whilst the European Renaissance adopted the Muslim contribution to healthcare, it also ushered in a secular dimension in healthcare, which laid the foundation of modern conventional medicine. A system of medicine that originated from Hippocrates and was known by many different names over the centuries was destined to make an abrupt and complete quantum change in direction.

3. The development of conventional medicine

Although conventional (also known as allopathic or Western) medicine can trace its roots back to Hippocrates, the practice of conventional medicine today is not strictly in line with the principles of the founders of medicine⁹.

Conventional medicine as practiced today is just over a century old. It originated during the period of the Renaissance, during which the objective thinking of the newly described causative theory of modern science slowly replaced the earlier holistic models which had predominated for nearly two thousand years. The new paradigm is often termed the '*Cartesian model*', being named after the French philosopher, René Descartes (1596-1650). This model, it was claimed, invalidated the humoural concepts of the holistic principles of *Tibb* and promoted the ideology that man was separate from nature, and could be viewed objectively through experiment¹⁰.

This heralded the birth of conventional medicine, and was reinforced by Rudolph Virchow (1821-1902), who demonstrated that disease begins with changes in living cells, and by Louis Pasteur (1822-1895) whose role in the development of a different theory of infection was of key importance¹¹.

According to the new paradigm, the so called '*Germ Theory of Disease*', every disease is associated with a specific micro-organism. Another pillar on which conventional medicine is based is the '*Doctrine of Specific Aetiology*', whereby most diseases are reduced to a simple cause - a micro-organism, an inborn error of metabolism, or one or other physiological or biochemical malfunctions. This simplistic approach presupposes that illnesses are associated with or linked to specific causes. The holistic attitude to disease was rejected in favour of the doctrine of specific aetiology, reductionism, and a tendency to view the body as a machine. The spiritual component of illness was effectively suppressed and eliminated.

In practice, conventional medicine relies heavily on the use of synthetic, new-to-nature, drugs, which are chemicals alien to the body. These generally work intrusively, and often suppress the body's normal self-healing processes, known in *Tibb* as *physis*¹².

Drugs usually act by interfering with the body's normal and natural metabolic processes. The normal functioning of the body is disrupted, at a time when *physis* is trying to restore equilibrium in the ailing patient. Some drugs, such as antibiotics and steroids, are known to actually degrade the patient's

immune system¹³. The occurrence of a myriad of side effects typical of many drugs is a predictable result.

A major component of conventional medicine is surgery. This has developed exponentially as modern technology has improved surgical techniques and post-operative care, and provided better imaging and highly effective anaesthetics and analgesics. However, leaving aside the controversies relating to the excessive use or abuse of particular surgical interventions, many procedures override the intrinsic self-healing processes of *physis*.

The philosophy of conventional medicine

The philosophy of conventional medicine is based exclusively on the physical world, and rigorously excludes any explanation that goes beyond this: *'If it can't be measured, it doesn't exist'*. It considers irrelevant any suggestion that involves the intervention of any agent from outside the natural, totally physical system perceived by the practitioners of conventional medicine. Furthermore, conventional medicine regards the body in purely mechanistic terms, modelled on the complex physiological machine described by Descartes. In this model, health and illness are seen in terms of relationships between the body's components and substructures. Furthermore, the mind is considered independent of the body, and therefore irrelevant in the context of health and disease.

The causes of disease are accordingly presented in terms of such concepts as chemical imbalance, virus replication, serum levels, enzyme malfunction, systems overload and so on¹⁴.

Conventional medicine refers to the knowledge, practices, organisation, and social roles of medicine in conventionalised cultures. In such a culture disease is viewed as a physical or mechanical disorder with little relationship to a person's psychological, social and spiritual experiences. Treatment usually involves reacting to and suppressing symptoms, rather than encouraging self-healing or disease prevention¹⁵.

In support of conventional medicine it should be acknowledged that without a doubt the past two decades have seen astonishing advances in the diagnosis of disease, clinical investigations, pharmacotherapy and emergency treatment. It is differentiated from other medical care systems by quickly adopting innovations based on research and development in the scientific and technological fields. In addition, conventional medicine has followed the specialisation route, which has led to a plethora of specialists in disorders of specific organs and tissues¹⁶.

Although this has advantages regarding the nature of specific diseases, it is unfortunately based on the premise that patients should be regarded as collections of separate body parts and organ systems. The traditional concept of the holistic nature of the body is rejected.

Differences between conventional medicine and *Tibb al-Nabawī*

There are numerous differences between conventional medicine and *Tibb al-Nabawī* in their interpretation of health as well as in the practice of medicine. In conventional medicine, the World Health Organisation (WHO) defines health as¹⁷:

“A state of complete physical, mental and social well-being and not merely the absence of disease, or infirmity”

This definition does not pay attention to the emotional and more importantly the spiritual aspects of a person’s life. Muslims are aware that the human being is a combination of body and soul. *Tibb al-Nabawī* emphasises the importance of maintaining a healthy body and a healthy soul, and provides guidance for both physical and spiritual health, the latter including emotional wellbeing. The practice of *Tibb al-Nabawī* not only focuses on treatment, or the absence of disease but also places equal emphasises on maintaining or preserving health. This is evident in Ibn Sīnā’s definition of medicine.

“Tibb (medicine) is a branch of knowledge that deals with the states of health and disease in the human body for the purpose of adopting suitable measures for the preservation or restoration of health”¹⁸

In addition to this fundamental difference between conventional medicine and *Tibb al-Nabawī*, the following table lists additional differences between these two systems in their worldviews and practice of medicine.

| Ṭibb al-Nabawī | Conventional Medicine |
|---|--|
| <p style="text-align: center;">Worldview</p> <ul style="list-style-type: none"> • Concept of creation in accordance with the Abrahamic scriptures. • Belief system in accordance with the Abrahamic scriptures, an Islamic ethos that emphasizes the responsibility of vice-gerency which determines social and moral values in accordance with the <i>sharī'ah</i>. <p style="text-align: center;">Medical Practice</p> <ul style="list-style-type: none"> • Based on the principles of physis, humours, temperament and <i>lifestyle factors</i> • Illnesses are the result of temperamental and humoral imbalance • The objective of treatment is to support physis in restoring homeostasis with minimal side effects. | <p style="text-align: center;">Worldview</p> <ul style="list-style-type: none"> • Creation based on the 'big bang theory' and to a certain extent on Darwin's theory of evolution. • Does not consider religious or spiritual aspects significant; a secular approach based on materialism and existentialism that determines social and moral values. <p style="text-align: center;">Medical Practice</p> <ul style="list-style-type: none"> • Based on the doctrine of specific aetiology, and the germ theory. • Illnesses are the result of physiological or bio-chemical malfunctioning or from microbial infection. • The objective of treatment is addressing symptoms, restoring bio-chemical imbalances and destroying microbes resulting in extensive side effects. |

Table 2

4. Seeking knowledge about Prophetic Medicine

Learning is the pursuit of Muslims. For this reason it is important to learn about *Ṭibb al-Nabawī*. As the Islamic scholar Imām Shāfi'ī said¹⁹:

“After the science which distinguishes between what is permissible and what is impermissible, I know of no science which is more notable than that of Ṭibb”

Muslim scholars in the past have written extensively on this subject and have collected, from the major works of those aḥādīth which pertain to *Ṭibb al-Nabawī*.

Two scholars whose works on the subject have become famous are Ibn Qayyim al-Jawziyyah (d. 751/1350) and Jalāl al-Dīn al-Suyūṭī (d. 911/1505). Both authors refer extensively to the Sunnah of the Prophet ﷺ and draw from the classical aḥādīth compilations.

Today with an increased awareness in medical healing, which is underpinned by a deeper spiritual consciousness than the material world has to offer, there has been renewed interest in *Ṭibb al-Nabawī*. The knowledge which was always present with Muslims is being rediscovered in many quarters. This book aims to make a contribution to this renewal and growth.

There is however a higher purpose: Muslims adopting *Ṭibb al-Nabawī* in their lives is a way of practicing on the Sunnah of the Prophet Muḥammad ﷺ. This will *Inshā-Allah*, result in good health, and also obtain the reward of the *ʿibādah*.

5. Relevance of *Ṭibb al-Nabawī* today

Healthcare is one of the greatest challenges of the new millennium. Not only are we faced with many infectious diseases such as HIV & AIDS, tuberculosis and meningitis, but also an unprecedented increase in diseases of lifestyle. Diseases such as hypertension, diabetes and obesity have reached alarming proportions. *Ṭibb al-Nabawī*, with its emphasis on a healthy lifestyle both physically and spiritually, underpinned with the understanding that *'prevention is better than cure'* can play an important role in addressing issues of current healthcare.

6. Conclusion

Muslims are duty bound to live their lives according to the Sunnah. Prophetic Medicine or *Tibb al-Nabawī* is an integral part of the Sunnah. There can be no better way of achieving and maintaining good health than by adopting *Tibb al-Nabawī* in our lives.

References

1. Al-Daqr, M.N. Online at: <<http://draldaker.wordpress.com/>>
2. Bhikha, R.A.H. (2007). *Islamic Medicine Revisited: Journal of Islamic Medical Association of South Africa*, 14: 6–10.
3. *al-Mā'idah* verse 3.
4. Ahmad, Y. A. H. (2010). *Islamic Medicine: the Key to a better Life*. Darussalam. Riyadh, Saudi Arabia.
5. Bhikha, R.A.H. (2007). *Islamic Medicine Revisited: Journal of Islamic Medical Association of South Africa*, 14: 6–10.
6. Bakhtiar, L. (1999). *Avicenna on Medicine and its Topics*, pp. 78-81. Great Books of the Islamic World, Inc, Chicago, USA.
7. Bakhtiar, L. (1999). *The Canon of Medicine*. Great Books of the Islamic World. Chicago, USA.
8. Toby, G. (1997). *Culpeper's Medicine: A practice of Western Holistic Medicine*, pp. 96-97. Singing Dragon, Great Britain.
9. Le Fanu, J. (2011). *The Rise and Fall of Modern Medicine*, pp. 215-263. Abacus, UK.
10. Ledermann, E K. (1997). *Medicine for the Whole Person*. pp. 23-27. Element, USA.
11. *Ibid.*, pp. 12-13.
12. Bhikha, R.A.H. and Haq A. H. (2002). *Tibb - Traditional Roots of Medicine in Modern Routes to Health*, p. 44. Mountain of Light South Africa.
13. Le Fanu, J. (2011). *The Rise and Fall of Modern Medicine*, p. 34. Abacus, UK.
14. *Ibid.*, p. 288.
15. *Ibid.*, pp. 34, 283.
16. *Ibid.*, pp. 34, 288.

17. Grad, F.P. (2002). "*The Preamble of the Constitution of the World Health Organization*". Bulletin of the World Health Organization 80 (12): 982.
18. Bakhtiar, L. (1999). *Avicenna's The Canon of Medicine*, p. 106. Great Books of the Islamic World Inc, Chicago, USA.
19. As-Suyuti, J. A. *Medicine of the Prophet*,(Trans) p.129. Ta-Ha Publishers Ltd, London, UK 1994.



Chapter 2

Pursuit of good health – with faith in the Decree of Allah ﷻ

1. Introduction

Chapter One introduced the concept of *Ṭibb al-Nabawī* and emphasised that its roots were in the Qur’ān and Sunnah. This chapter will discuss the importance of pursuing good health and accepting the decree of Allah ﷻ with gratitude and patience.

As Muslims we believe that everything in the universe happens by the Decree and Will of Allah ﷻ. His Knowledge and Power encompasses all affairs. Man cannot, with his limited knowledge, fathom Allah’s plan for the universe. It is therefore in our best interest to accept the Decree (*qadar*) of Allah ﷻ in all matters. This does not mean that we should be fatalistic in our understanding of life’s events. What it does mean is that we accept what is in the dominion of Allah ﷻ as belonging to Allah ﷻ, and what is in the finite and limited power of man as being of man. We have to continue to make our own plans and use all the means at our disposal to achieve our ends. This applies equally to the pursuit of good health, as it does to all our other affairs.

2. Pursuing good health

Central to the teachings of *Tibb al-Nabawī* is to conserve human life, preserve health and to eliminate or minimise the suffering of the people. From the early years of the Islamic era to the present day, the importance of achieving and maintaining good health has been the major healthcare objective of the community, and a central tenet of the Islamic way of life. Perhaps less important is the need to cure ailments as they develop, and restoring the sufferer to good health. It does not mean that therapeutic medicine is not important, but that it is a secondary aim, and not at the forefront of health issues. This approach that emphasises maintaining good health is in harmony with a major objective of Islamic law, where maintaining health is deemed better than the treatment of disease.

A person who is in good health enjoys the greatest of blessings. Without good health, a person is not able to effectively carry out the many important activities of daily life. Being ill can have seriously deleterious effects on the person's relationship with family and friends, and diminish ones relationship with Allah ﷻ. It also brings in uncertainty about the future, and makes planning less assured and difficult. Good health is a major factor in a person's individual prosperity, and that of his family. At a higher level, the success of a community and a nation depends to a large extent on the general health of its people. It is not possible to have a successful and harmonious family, community or nation without people who are of healthy body, mind and spirit.

Good health is not merely the absence of disease. It is the physical, mental and spiritual expression of a state of equilibrium that exists in a person's life, between his or her nature, the lifestyle followed, and the environment in which he or she exists. It is necessary for the person who seeks good health to take measures that contribute to establishing this equilibrium. In many ways, illness is the inevitable outcome arising from pursuing a poor, toxic or unwise way of life. People in the main tend to develop poor health because they adhere to an imprudent lifestyle.

This may not necessarily be one of deprivation, like starvation or malnutrition. It can be from excess, as with many aspects that characterise the present Western culture: overconsumption of energy-dense food, lack of exercise, poor sleep, high stress levels and a toxin-laden environment.

Everyone therefore, has a major responsibility to adopt a health-affirming lifestyle, not only to oneself, but to their greater community. As Muslims, this means living a lifestyle in accordance with the Qur’ān and the Sunnah. Our bodies are a blessing and an *amānah* – a sacred trust given to us for which we are responsible in making suitable and appropriate lifestyle choices.

3. Ṭibb al-Nabawī perspective on illness conditions

Whilst we recognise that we are obliged to maintain good health, we are also aware that during our lifetime we will be afflicted with some or other illness condition. How should we respond to this? The ḥadīth narrated by Abū Dardā’ provides us with the answer.

“O Prophet, if I am cured of my sickness and I am thankful for it, is it better than if I were sick and bore it patiently?” And the Prophet ﷺ replied: “Truly the Prophet ﷺ loves good health, just as you do”¹

The above ḥadīth highlights the importance of maintaining health and seeking treatment when we are ill. Only with good health can we perform our activities of earning a living, performing *‘ibādah* and living a meaningful life.

However we should be aware that chronic and/or life threatening illnesses will affect most of us at some time or other. During this difficult period, the ḥadīth quoted below offers comfort and hope.

Muslim narrated in his *Ṣaḥīḥ* that the Prophet ﷺ said:

“Every illness has a cure, and when the proper cure is applied to the disease, it will end it, Allah willing”²

Ibn Qayyim elaborates on the ḥadīth on the previous page:

“For when the sick person is aware that for his illness there is a remedy, which will make it cease. His heart clings to the spirit of hope, so he is cooled from the heat of despair and the door of hope is opened to him”³

Whilst it is important to seek proper treatment during illnesses, a person should guard against resorting to therapy that is not in keeping with the Qur’ān and Sunnah.

We have it on the authority of a ḥadīth narrated by Abū Hurayrah ﷺ who said that the Prophet ﷺ said:

“Whoever is treated with a remedy that Allah ﷻ has made permissible will be cured, but whoever is treated with a remedy that Allah ﷻ has made impermissible will certainly not be allowed by Allah ﷻ to be cured”⁴

From the above ḥadīth, we are clearly instructed that permissible remedies that are in keeping with Qur’ān and Sunnah, are the only treatments to be used.

There is, however, one disorder for which treatment is not effective, and that is old age, highlighting that ultimately death is inevitable. Concerning this Usāmah ibn Shuraik narrates that the Prophet ﷺ said:

“For Allah ﷻ, has not created a disease except that he has also created its cure, except for one illness...old age”⁵

4. Faith in the decree of the Almighty

As mentioned previously, everything that happens in the universe does so at the decree (*qadar*) of Allah ﷻ. This is also true when it comes to the treatment of illness and the promotion of health. Absolute power to bring about healing and good health is with Allah ﷻ and at the same time man is responsible for his actions and has the freedom to choose the lifestyle

he would like to adopt. Ultimately, the source of health and healing is Allah ﷻ.

Sickness and ill-health are trials that have to be accepted with patience. The Prophet ﷺ is reported to have said:

“Of the good fortune of man is his contentment with what Allah ﷻ has decreed for him”⁶

This teaching demands total submission and contentment with the Decree of Allah ﷻ. One should neither by word or deed object to fate. Contentment with fate is commanded and exhorted so as to inculcate in one the qualities of perseverance and satisfaction when afflicted with adversity and hardship. When contentment has been inculcated, adversity will be taken in stride with ease and without feeling any undue hardship. This is because the intelligence alerts one to the superior results of such contentment in the face of adversity. The result of such contentment is future reward.

This will be better understood by means of an illustration. A physician prescribes a bitter remedy to a patient or may even insist on an operation. The patient, bearing in mind his future recovery and health, willingly submits to the treatment. He is not only pleased with the physician but feels indebted to him.

Similarly, he who firmly believes that Allah ﷻ will grant a reward for every difficulty and sorrow experienced on earth will most certainly be filled with pleasure and happiness. The reward for contentment is of such a nature that all difficulty fades into nothingness. It is improper to desire anything contrary to what Allah ﷻ has willed and decreed for the servant. When Allah ﷻ considers adversity and difficulty appropriate and advantageous for us, then we as His servants have no valid reason for displeasure and grief. Whatever state Allah ﷻ chooses for a servant, is indeed best for him.

Supplication is not contrary to contentment with the Decree of Allah ﷻ. Muslims resort to supplication because of the divine command. In this way

they profess their state of total submission and surrender to Allah ﷻ. They therefore do not insist on the attainment of what is being supplicated for. In all states and circumstances, they are fully pleased with the choice of Allah ﷻ, whether their supplication is accepted or not. Non-acceptance of supplication never causes dissatisfaction in them. This is the sign of true contentment.

5. Conclusion

The purpose of *Tibb al-Nabawī* is to protect the health of those who are healthy, and restore health, as far as possible, to those who are ill. It should be a feature of daily life, as it allows people the opportunity to identify, treat and prevent the common and regular ailments that affect us all. It accepts that Allah ﷻ encourages healing from within, and that He has the absolute power to bring about good health.

At the end of the day, the pursuit of good health can be summed up in the words of the popular prayer:

“God grant me the serenity to accept the things I cannot change; courage to change the things I can; and wisdom to know the difference”⁷

References

1. As-Suyuti, J.A. *Medicine of the Prophet*. (Trans) p. 6. Ta-Ha Publishers Ltd, London, UK. 1994.
2. Al-Jauziyah, I.Q. *Healing with the medicine of the Prophet*, (Trans J. A. Rub), p. 24. Darussalam. Riyadh. 1999.
3. Al-Jawziyya, I.Q. *Medicine of the Prophet*, (Trans P. Johnstone) p. 12. The Islamic Texts Society, UK. 1998.
4. As-Suyuti, J.A. *Medicine of the Prophet*, (Trans) p. 143. Ta-Ha Publishers Ltd, London, UK. 1994.
5. Al-Jauziyah, I.Q. *Healing with the medicine of the Prophet*, (Trans J. A. Rub), p. 25. Darussalam. Riyadh. 1999.
6. Musnad Ahmad *ḥadīth* No. 1444.
7. Niebuhr K. P. R <http://en.wikipedia.org/wiki/Serenity_Prayer>



Chapter 3

Types of illnesses

1. Introduction

Now that we have a clear understanding on the acceptance of illness as part of faith, let us explore the types of illness conditions that may afflict us.

“Sickness is of two kinds: sickness of the heart and sickness of the body”¹

Al-Jawziyyah

Both are mentioned in the Qur’ān.

Tibb al-Nabawī emphasizes that there is both sickness of the heart and sickness of the body. Sickness of the heart does not refer to the physical heart but rather the soul, which is resident in the heart. The heart contains two worlds within itself, the physical and the spiritual; it is a point of union where the body and soul unite. An important feature of *Tibb al-Nabawī* is the fact that it regards the human being as a sacred entity consisting of body and soul.

In contrast, secular Western scholars describe the human being as being comprised of body, mind and soul, with the mind/consciousness being the centre of existence. In Islam consciousness resides in the soul².

Sūfī's regard the heart as the essence of the self, an immaterial principle that controls the conscious life of the human being by which reality is perceived and interpreted. When seen as self, it symbolizes the whole human personality or personality in its wholeness. It is the heart that makes the human being, human, and separates him from all other creatures. This is what enables mankind to have knowledge of Allah ﷻ, to accept or reject His counselling to the positive and prevention of the negative³.

The heart is thus the seat of consciousness of Allah ﷻ and is capable of progressing the self towards perfection. It is called '*qalb*' meaning '*turning, revolving, inverting*' because it contains two worlds within its self – the physical or material, and the spiritual, constantly turning from one to the other.

The material aspect of self can be described as '*passion*'. This attribute is a common trait between human beings and animals. Passion encompasses the basic physical needs of both humans and animals that is described within the context of '*preservation of the individual*' and '*preservation of the species*'. This is illustrated in the pursuit of pleasure, avoidance of pain, fulfilling the needs of the body with food, shelter and sexual activity.

Animals submit completely to passions in an instinct to survive. Animals '*know*' when and how much to eat, are aware of the environment with respect to living off it, are intuitive to danger, and more particular when to procreate. In other words their actions are instinctive and programmed by Allah ﷻ. They have no choice⁴.

However, when the human being was gifted by Allah ﷻ with consciousness, he also received two responsibilities of consciousness: conscience and free will. With the appearance of free will, human beings, unlike animals, become free to choose a life of conscience and Allah consciousness or succumb to passion and be led astray. Uncontrolled passion in human beings, leads to envy, pride, greed, malice and lust.

As Muslims we should remember that when all the souls of mankind were created, a covenant was made between the souls and Allah ﷻ.

“And when your Lord took the seed of the children of Ādam from their loins and (asked), ‘Am I not your Lord?’ and they bore witness, ‘Yes, we do bear witness...’ so that they not respond on the Day of Judgment by saying, ‘We were unaware of this’⁵”

Qur’ān 7:172

This covenant of submission is testimony that every human being is born with a natural inclination, a ‘*fitrah- Allah*’ – to submit to will the of Allah ﷻ, and the human being’s propensity to do good⁶.

Whilst the *fitrah-Allah* is inherent within the human being, the opposing forces of *Iblīs (shayṭān)*, our *ego* or *nafs*, lead to the diseases of the heart.

These diseases of the heart are more damaging and serious than diseases of the body. Restoration of the body without restoration of the heart is of no benefit, whereas damage to the body while the soul is at peace, brings limited harm, for it is a temporary damage which can be followed by a permanent and complete cure⁷.

2. Sickesses of the heart

Sickness of the heart is of two kinds: sickness of uncertainty and doubt, and sickness of desire and temptation. The first is known as *shubuhāt* or *obfuscations*, diseases that relate to impaired understanding. For instance, if somebody is fearful that Allah ﷻ will not provide for him or her, this is considered a disease of the heart because a sound heart has knowledge and trust, not doubt and anxiety. *Shubuhāt* alludes to aspects closely connected to the heart: the soul, the ego, Satan’s whisperings and instigations, caprice, and the ardent love of this ephemeral world. The second category of disease concerns the base desires of self and is called *shahawāt*. This relates to our desires exceeding their natural state, as when people live merely to satisfy these urges and are led by them⁸.

Sickness of the heart can be avoided if we are able to conquer arrogance with humility and intelligence, uncontrolled ambition with conscience and selflessness, and envy with compassion and patience⁹.

Submitting to the will of Allah ﷻ and living according to the Qur'ān and Sunnah will enable us to avoid succumbing to *nafs al-ammārah* (excess of passion with negative traits of envy, jealousy and lust etc.) and toward *nafs al-lawwāmah*, wherein reason controls the passions with Allah ﷻ consciousness¹⁰.

3. Conclusion

As Muslims we must remember that there are two types of illnesses, illnesses of the body and illnesses of the soul. Illnesses of the soul are far more important as our time in this world is only a fleeting moment compared to the hereafter wherein a soul that has lived in accordance with the Qur'ān and Sunnah will find everlasting success.

References

1. Al-Jawziyya, I.Q. *Medicine of the Prophet* (Trans P. Johnstone), p. 3. The Islamic Texts Society, UK. 1998.
2. Hamza, Y. (2004). *Purification of the Heart*, p. 4. Starlatch, USA.
3. Bakhtiar, L. (1994). *Moral Healers Handbook: the Psychology of Spiritual Chivalry*, Vol. 2: God's will be done, pp. 21-22. Institute of Traditional Psycho-ethics and Guidance, USA.
4. Bakhtiar, L. (1994). *Moral Healers Handbook: the Psychology of Spiritual Chivalry*. Vol. 3: *The practice of Spiritual Chivalry*, pp. 83-84. Institute of Traditional Psycho-ethics and Guidance, USA.
5. *al-A'raf* verse 172.
6. Hamza, Y. (2004). *Purification of the Heart*, p. 4. Starlatch, USA.
7. Al-Jawziyya, I.Q. *Medicine of the Prophet* (Trans P. Johnstone), p. 3. The Islamic Texts Society, UK. 1998.
8. Hamza, Y. (2004). *Purification of the Heart*, p. 5. Starlatch, USA.

9. Friedlander, S. (1992). *When you hear hoofbeats, think of a Zebra*, p. 24. Mazda Publishers, USA.
10. *al-Fajr* verse 28; *Yusuf* verse 53; *Qiyamah* verse 2.



Chapter 4

Healing comes from Allah ﷻ

1. Introduction

This chapter deals with the realization that healing comes from Allah ﷻ:

“I entered the tent of the Prophet ﷺ with my father, who was a physician. My father diagnosed that the Prophet ﷺ had a back infection, so he said, ‘Please let me treat this back infection of yours, for I am a physician’. The Prophet ﷺ replied, ‘You are my friend. Allah ﷻ is my physician’¹”

The above ḥādīth reported by Abū Ramthah رضي الله عنه, a Companion of the Prophet ﷺ, highlights that whilst treatment may be provided by a healthcare professional, the outcome is dependent on the will of Allah ﷻ. As Muslims, we accept that Allah ﷻ is in control of every aspect of our lives including our health, whether in health maintenance or in the treatment of disease. Allah ﷻ has bestowed a divine intelligence in each of us; this is embedded in the genetic makeup of every cell in our body. This intelligence works in a pre-determined, instinctive manner with a capacity of self-healing and for the perpetuation of life. This inherent wisdom is not only part of our genetic makeup, but also in every living entity, from the smallest life form to the perfection of creation, the human being. In man this inherent wisdom, is called ‘Physis’².

Physis is controlled by Allah ﷻ, the Creator who created the human body to perfection with self-regulating and self-healing mechanisms.

Ibn Qayyim al-Jawziyyah said:

“The innate nature is the power which God,... has entrusted with managing the affairs of the body, its preservation and its health, and guarding it for the whole length of its life”³

This confirmation of Allah’s mercy in healing is evident in the many reports of people recovering from illnesses, including life-threatening conditions, which medical doctors are unable to explain. Many of these incidents have been attributed to acceptance of *duās*. In fact, conventional medical doctors such as Andrew Weil, have written extensively on this subject⁴.

2. Concept of Physis

The concept of *physis* comes originally from Hippocrates, who described it as ‘*vis Medicatrix Naturae*’ or ‘*the ability of the body to heal itself*’. The concept is not limited to *Tibb*, but is found in most traditional systems of medicine. Chinese medicine describes it as ‘*Chi*’, Naturopathy calls it ‘*Nature*’ while Homeopathy calls it ‘*Life Force*’. Most traditional systems recognize the bodies self-healing ability and the role of the physician is to support this inherent wisdom⁵.

It is interesting to note that traditionally, whenever a *Hakīm* wrote out a prescription, they began with the words ‘*Huwa al-Shāfi - He is the Healer*’. This is in keeping with the understanding that ultimately healing comes from Allah ﷻ, and the role of the physician is to assist *physis*, the ‘*doctor within*’ each of us.

Physis operates at every level of human existence, from the moment of fertilization in the mother’s womb, continuing after birth, and persisting until death. Every action, reaction or response - be it physical, emotional, spiritual, bio-chemical - internal or external, is responded to by *physis* to ensure homeostasis or equilibrium. *Physis* operates during every second of

existence to maintain good health, and especially when sickness develops. It supports the body during convalescence, and is very active following injury. It acts to repair wounds, to overcome infection, and to eliminate the cancers which form constantly in our bodies. By doing so, it safeguards a person's state of good health against a hostile environment, and actively promotes wellness if he or she is suffering from any ailment. *Physis* is the sum total of all the body's natural, instinctive reactions and responses given to the human being to stay well and healthy.

When it comes to restoring health, the following quotation, appropriately describes the working of *physis*:

"In fact, no herb, no food or any other substance or procedure can do anything on its own to heal. It can only assist the body in its own self-healing. If your finger is cut, it is not the stitches or the bandage or the iodine that causes it to heal, it is the skin itself that performs the miracle"⁶

3. How are the workings of Physis recognised?

Everyone is confronted by many stresses and physical insults during the course of the day. They can arise in the environment, from chemical toxins, poor quality air, or air-borne disease-causing microbes, or *pathogens*. They can lurk in the food we eat and the beverages we drink. They can originate in anxiety related to money matters, or as a result of domestic, occupational or social strife. Whatever their source, if they are not neutralised, the stresses build up and can lead to a serious deterioration – often slowly but maybe rapidly – in health and wellbeing. Protecting us from these threats is *physis*⁷.

The existence of *physis* can be recognised simply by looking at how a person's body normally responds when it is under threat. When, for example, someone ingests something that does not agree with him or her, as in a case of food poisoning, *physis* responds typically by causing vomiting, sometimes with diarrhoea. When *physis* detects a threat to a person, it acts swiftly and effectively to neutralise it, by expelling the toxic

pathogen forcefully, using a physiological reflex specially designed for the purpose of survival. During pregnancy, this reflex is particularly well-tuned, in order to protect the unborn child, and this explains the phenomenon of morning sickness, familiar to most mothers-to-be⁸.

This is a well-developed reflex, designed to protect us from hostile disease-causing agents. As such, it should not be suppressed, but encouraged, as it is operating in the person's best interest. However, practitioners of modern medicine view vomiting and diarrhoea as signs and symptoms of a disease, and administer anti-emetics and anti-diarrhoeal drugs to oppose and contain them⁹.

Another example of *physis* in action is abnormally high body temperature, or fever. Practitioners of natural medicine see this as a normal *physis* response to an infection. By raising body temperature, the body's immune system is more effective in counteracting the invading micro-organism, and so eliminating it as a threat. This is another example of the correct working of *physis*; fever is a defence mechanism, not a symptom of illness. In contrast, modern medicine invariably deals with a fever as a sign of bodily distress, and actively and aggressively lowers body temperature with anti-pyretic drugs.

Hakīms have always recognised the value of the *physis* responses. The aim of therapy is not to suppress these responses, but to support and encourage them. In the case of food poisoning, diarrhoea and vomiting needs to be managed and not immediately stopped, because the body wants to get rid of the toxins. Likewise, in fever, the higher body temperature is a help, not a hindrance, and should be supported. Whenever *physis* is halted or suppressed, as in chemotherapy or long-term drug use, the condition often returns in a more severe or aggressive form.

It may happen that the *physis* response is too vigorous, or lasts too long. In these cases the healer is justified in dampening down vomiting and diarrhoea in instances of food poisoning, or fever in infection. In these circumstances managing the symptoms with either medication or other therapeutic interventions become necessary.

It is interesting to note that the word ‘*physician*’ is derived from the word *physis* where the role of the physician is to work with *physis* and not against *physis*.

“Each person carries his own doctor inside him. We are at our best when we give the doctor who resides within each patient, a chance to go to work”¹⁰

Albert Schweitzer

4. Is Physis the same as the immune system?

The immune system is only one aspect of *physis*. *Physis* can be viewed as an overall administrator of man – body, mind and soul, whereas the immune system can be likened to the body’s principal defence mechanism or army that deals with foreign invaders.

These days, much of the emphasis on the promotion of health and fighting disease is invariably placed on the shoulders of the immune system. Apart from the immune system, *physis* controls every function of the living body; whether awake, asleep, active, or when resting. *Physis* is reactive and instructive, controlling every action of the body, in both space and time. It regulates survival, repair and detoxification mechanisms, body metabolism, internal communication, reproduction and many other functions¹¹.

5. Why is recognizing physis important in health promotion?

Simply put, being aware of *physis* and, more importantly, supporting *physis* is essential in both health promotion and in treatment. Fortunately, we tend to assist *physis* on a daily basis without even thinking. For instance, if a person enters a cold environment, the body tries to capture and retain heat, so the person instinctively puts on more clothing. If the person gets too hot, he begins to sweat, and removes some clothing. If you are aware of the power of *physis*, you can live your normal day-to-day life, taking into account the role that it is playing.

6. Conclusion

When it comes to staying healthy, the earlier that one adopts a practical and sensible lifestyle, the better. A healthy lifestyle actively supports *physis*. If a person follows the advice endorsed by the Qur'an and the Sunnah, then achieving a balanced and desirable state of health is most likely. In essence, this means leading a life of moderation by eating as naturally as possible, especially avoiding potentially damaging fast foods, being more physically active, trying for good quality sleep ('*early to bed, early to rise*'), actively managing stress, and keeping a reasonable balance between work, leisure, domestic and social life.

References

1. As-Suyuti, J.A. *Medicine of the Prophet*, (Trans) p. 132. Ta-Ha Publishers Ltd, London, UK. 1994.
2. Bhikha, R.A.H and Haq, A.H. (2002). *Tibb - Traditional Roots of Medicine in Modern Routes to Health*, p. 44. Mountain of Light South Africa.
3. Al-Jawziyya, I.Q. *Medicine of the Prophet* (Trans P. Johnstone), p. 67. The Islamic Texts Society, UK. 1998.
4. Weil, A. (1997). *Spontaneous Healing*, p. 3. Warner Books, UK.
5. Bhikha, R.A.H. (2006). *4 Temperaments 6 Lifestyle Factors*, p 9. Ibn Sina Institute of Tibb, South Africa.
6. *Ibid.*, p. 9.
7. Chishti, G.M. (1991). *The Traditional Healer's Handbook. A Classic Guide to the Medicine of Avicenna*, p. 12. Healing Arts Press, USA.
8. Nuland, S.B. (1997). *The Wisdom of the Body*, p. 278. Alfred A Knopf. New York, USA.
9. Bhikha, R.A.H. and Haq, A.H. (2002). *Tibb - Traditional Roots of Medicine in Modern Routes to Health*, p. 44. Mountain of Light South Africa.
10. Cousins, N. (2005). *Anatomy of an Illness as Perceived by the Patient*, p. 78. WW Norton, New York, USA.
11. Leviton, R. (2000). *Physician: Medicine and the unsuspected Battle for Human Freedom*, pp.3; 79-80. Hampton Roads Publishing Inc, USA.



Chapter 5

Temperament

1. Introduction

This chapter under the heading of temperament deals with the perfection of creation and how Allah ﷻ has created everything in the universe through his infinite wisdom:

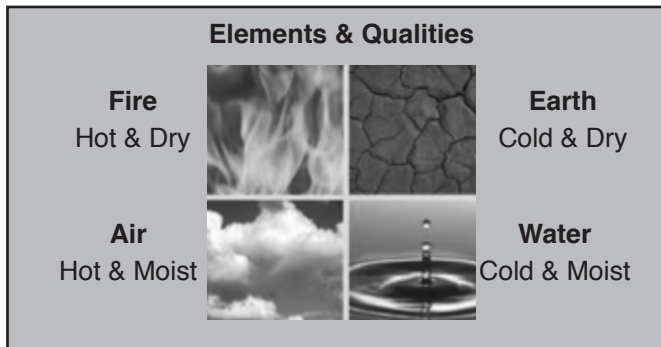
“It is He who created the heavens and the earth in true (proportion), the day He said, “Be,” and it came to be ¹”

Qur’ān 6:73

According to the ancient wisdom of Graeco-Arab philosophers, temperament is an integral part of Creation. Graeco-Arab philosophers such as Aristotle and Ibn Sīnā believed that everything in the universe is created from four elements, which are symbolically represented by Earth, Water, Air and Fire and with respective qualities associated with each of them. For example, the Earth element is associated with the quality of *cold* and *dryness*, Water with *cold* and *moistness*, Air with *heat* and *moistness*, and Fire with *heat* and *dryness* ².

Everything in the universe, from the smallest to the largest of Creation, is made up from a combination of the four elements, with their respective qualities. The result of this is that each and everything created has an

overall quality (a combination of heat, coldness, moistness and dryness) associated with it. This overall quality is called '*temperament*'³.



Every level of creation is associated with a specific temperament. From atoms to compounds, cells to tissues, tissues to organs, organs to the whole body, every living creation is indeed a unique manifestation of Allah's creative attribute. Each level of organisation is characterised by distinct compounds with specific temperaments, and these become the building blocks for all materials in existence. Each step on this ladder of progression manifests greater sophistication. Minerals are followed by plants, and lower animal forms are followed by higher ones. Human beings, the *ashraf al-makhlūqāt* – Allah's most honoured creation, stand at the top of the ladder⁴.

The splendour of Allah's creation can be best appreciated if we consider that Allah ﷻ has created everything with a suitable structure having an ideal temperament to perform a specific function. Innumerable creatures inhabit our planet yet each living entity has a unique and specific form and shape that allows it to exist, thrive and procreate. The wings of birds enable them to fly, the four legged animals to run, and the fins and tails of fish to swim. Plants of varied and differentiated shapes and sizes grow in different biospheres, habitats and climates. All plants, insects, animals and humans have a particular and unique structure with an assigned temperament enabling them all to perform specific functions. See chart on next page⁵.

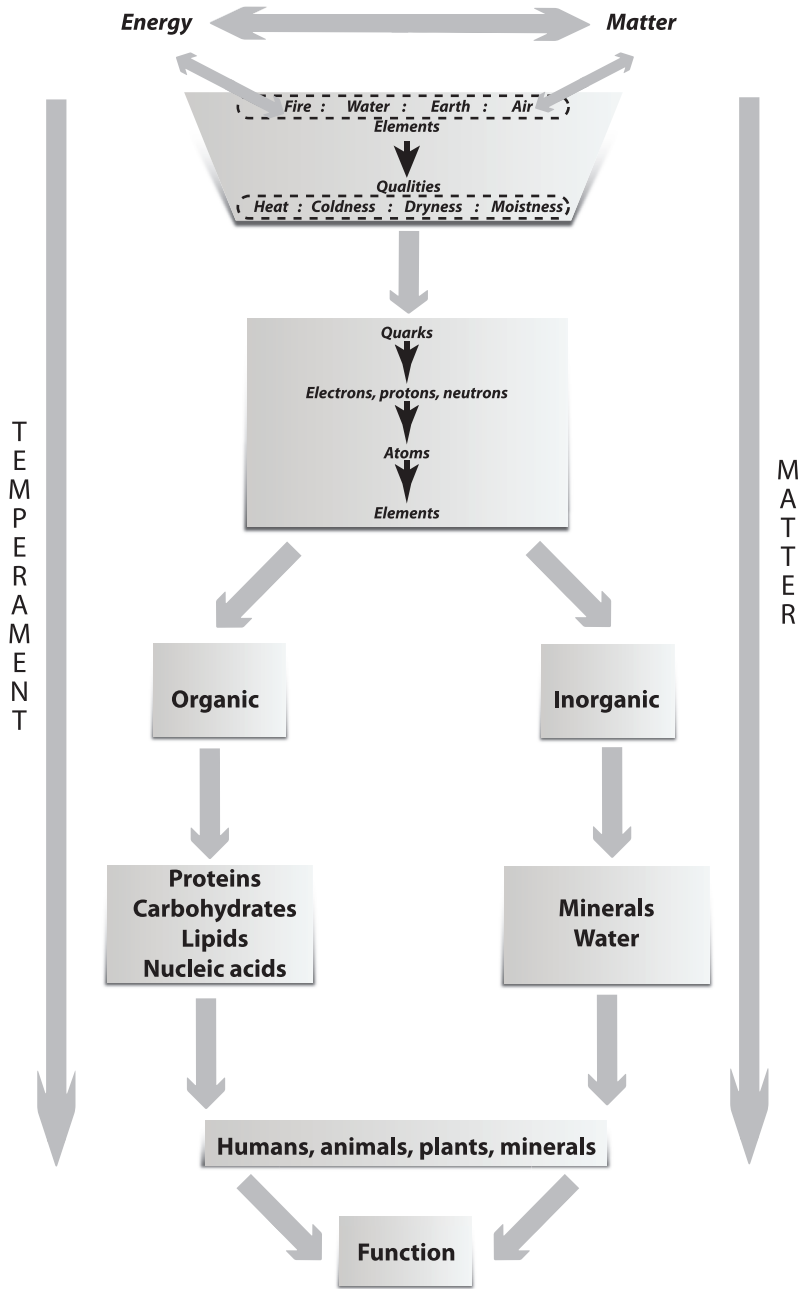


chart 1

2. Qualities associated with temperament

All of the universe in its variety of different shapes and structures, each with a unique temperament, may be described in terms of the four qualities of heat, coldness, moistness and dryness. For example the temperament of human beings, is associated with *Hot & Moist* qualities. This is understandable, considering that the human body is maintained at an average temperature of 37°C, and consists of approximately 70% water. This explains the overall quality of the human being's temperament as being *Hot & Moist*. Similarly, animals have an overall temperament of either *Hot & Dry* or *Dry & Hot*. Plants have a temperament of *Cold & Moist*, while minerals have a temperament of *Cold & Dry*, as is obvious when touched⁶.

3. Temperament in human beings

Temperament is one of the most important principles in *Tibb al-Nabawī*. The combination of a person's physical characteristics with mental, emotional and spiritual attributes is temperament.

“The most evenly balanced of all temperaments in mankind is the temperament of the believer. The most evenly balanced of all temperaments among the believers are the temperaments of the Prophets ﷺ. The most evenly balanced of temperaments among all the Prophets are the temperaments of the Messengers of Allah ﷺ. And the most evenly balanced of those is the temperament of the Prophet Muḥammad ﷺ”⁷

As-Suyuti

According to the ancient wisdom of the Graeco-Arab philosophers, a person's temperament is fixed and cannot be changed⁸. Just as one cannot change one's fingerprint; one cannot change one's fundamental unique temperament: you are the way you are. The concept of the individual's uniqueness epitomises the power and grandeur of the Almighty. Although there are more than seven billion people presently living in the world, in

addition to the billions who have passed away, each person is and was a unique individual.

We are all aware of the many differences between ourselves. Where someone may never feel cold, someone else may always be wearing a jersey. One person may hate mornings and can stay up all night, while another may love getting up at dawn. Each of us has our own habits, likes, dislikes, interests and skills. All of these features, characteristics and quirks make up our unique disposition or temperament.

There are numerous factors, that determine the temperament of the individual. Amongst these are: the time and place of birth, conditions within the uterus, the mother's diet during pregnancy, and most importantly, hereditary factors - the parent's temperaments.

Although each person is a unique individual, the Greek philosopher Galen, classified people into one of four main temperamental types – *Sanguinous*, *Phlegmatic*, *Melancholic* and *Bilious* (or *Choleric*).

The poem by Florence Littauer⁹ identifies the key personality traits of the four temperamental types:

God could have made us all Sanguinous.

We could have lots of fun but accomplish little.

He could have made us all Melancholics.

We would have been organized and charted but not very cheerful.

He could have made us all Choleric.

We would have been set to lead, but impatient that no one would follow!

He could have made us all Phlegmatics.

We would have had a peaceful world but not much enthusiasm for life. We need each temperament for the total function of the body.

Each part should do its work to unify the action and produce harmonious results.

This poem makes us realize that each of the temperamental types has distinguishing personality traits. For example, the Sanguinous is a typical extroverted, fun loving person (*get acknowledged type*) the Bilious person is an achiever and go-getter (*get it done type*), Melancholics are more organized and serious (*get it right type*) whereas the Phlegmatic is carefree, goes with the flow (*get along type*)¹⁰.

The poem also tells us that each of us will also have some personality traits of the other temperaments to a lesser extent. In reality, there is a dominance of one type of temperament, and a sub-dominance of a second type. There is also a smaller percentage of a third type, and even less of the last.

Tibb associates each of the four Temperamental types listed above with *qualities*. Simply put, this means that each temperamental type has a combination of the four qualities of *heat, moistness, coldness and dryness*.

For example the Bilious temperament is associated with qualities of Hot & Dry as their temperament is inclined towards a fiery nature and heat (a hot natured person). Similarly, the Phlegmatic temperament is associated with the qualities of Cold & Moist as their temperament is predisposed to being cool and calm (described as being as cool as a cucumber).

The chart below illustrates the qualities associated with the four temperamental types.

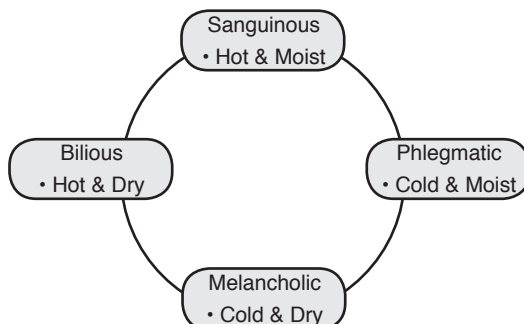


chart 2

In the chart on the previous page, it is interesting to note the position of the four temperamental types. It reflects that the Sanguinous temperament, with qualities of Hot & Moist, is opposite to the Melancholic temperament with qualities of Cold & Dry. Likewise, the Phlegmatic temperament, Cold & Moist is opposite to the Bilious temperament, Hot & Dry.

In nature, extremes (Hot & Cold; Dry & Moist) do not exist together in harmony. It is not possible, therefore, for a person who has a dominant Sanguinous (Hot & Moist) temperament to have a sub-dominant Melancholic (Cold & Dry) temperament. What is possible, however, is that a Sanguinous person may have a sub-dominant of Phlegmatic (Cold & Moist) or Bilious (Hot & Dry) temperament. Similarly a person with a dominant Phlegmatic temperament will have a sub-dominant temperament which is either Sanguinous or Melancholic. A person's dominant and sub-dominant temperament will always have one quality in common.

4. The importance of temperament in health

Knowing temperament is essential for the maintenance of health¹¹. In the words of Hippocrates, the *'Father of Medicine'*:

"It is more important to know what sort of person has a disease, than to know what sort of disease a person has"

If a person is aware of his or her temperamental type, then it provides guidance on living according to his/her temperament for optimum health maintenance and disease prevention. It certainly helps in choosing a suitable and appropriate lifestyle.

Knowing the temperament empowers a person to select and adhere to a lifestyle that is in keeping with his/her unique self. This knowledge provides guidelines for healthy living. Some people require a lot of sleep; others relatively little. Some people react badly to high stress situations; others thrive on them. Therefore each person's lifestyle requirements will be different.

By adopting a lifestyle which is in harmony with temperament, the chances of leading a long and healthy life are greatly enhanced. Temperament is a major factor in a person's predisposition to a whole range of diseases. The ways of selecting a suitable lifestyle are embodied in the Qu'rān and the Sunnah.

5. Identifying temperament

As mentioned previously, everyone has a dominant (primary) temperament as well as a sub-dominant (secondary) type. Individual temperament can be identified by looking at, amongst other criteria, physical appearance, behavioural tendencies, personality, and emotional traits¹². The table that follows lists a number of categories that need to be evaluated to identify the temperament of an individual.

Identifying the dominant and sub-dominant temperament is easily achieved by looking at a few characteristics and analysing responses. Remember, nobody fits perfectly into only one temperament; they may have characteristics of other temperaments as well. However, every individual will have a dominance of one and a sub-dominance of another temperament. These will be alongside each other, not opposite.

When completing the table, note the following:

- Each individual is a combination of all four temperaments. There is a dominant one in particular, and, to a lesser extent, a '*sub-dominant*' temperament.
- Do not be alarmed if more than one description fits. Generally, one is more accurate than the other. If a decision cannot be reached for a certain category, then that category should be ignored. However pay special attention to personality and emotional traits, as they are important indicators in the evaluation.
- Once the table has been completed, the number of ticks should be counted in each column. The column with the most ticks is

the individual's dominant temperament. The column with the second most ticks will be the individual's sub-dominant temperament.

- Remember that the dominant and sub-dominant temperament should be adjacent to each other, not opposite.

6. Additional guidelines to complete the table:

Additional guidelines in identifying temperament include looking at the following¹³:

Body frame: A true reflection of physical stature is determined by the person's appearance as they are in their early twenties. With age, most people increase in weight. Also, certain medications such as corticosteroids may unduly influence a person's frame. If the person's build is medium to large, he/she is most likely to be Sanguinous or Phlegmatic in temperament. If the person's physique is lean, the person is likely to be Bilious. A person with a thin, bony frame is most likely to be Melancholic.

Gait/walk: Someone who walks anxiously, or appears deep in thought, is likely to be Melancholic. On the other hand, someone with a confident gait/walk is probably Sanguinous, and one who walks at a slow or measured pace is likely to be Phlegmatic. A person with a Bilious temperament usually walks with a fast and firm stride.

Size and shape of the eyes: People with Sanguinous and Phlegmatic temperaments usually have moderate to large eyes. Bilious people, however, usually have moderate to small eyes, and Melancholic people tend to have small, sunken eyes.

Skin texture: How does a person's skin feel to the touch? A soft, warm and moist skin suggests a Sanguinous temperament. Cool, soft and moist skin, however, indicates a Phlegmatic person. If the skin is warm and dry, the individual is probably Bilious, and a dry, rough, cold skin is usually a feature of a person with a Melancholic nature.

Complexion: Is the skin reddish or shiny in appearance? If so, the person is likely to be Sanguinous. Phlegmatic people, however, tend to be paler.

Preference of weather: What kind of weather does the individual feel most comfortable in? Sanguinous people favour cold and dry weather, as in winter or autumn. Phlegmatic people, on the other hand, prefer hot and dry weather, as in summer. Bilius people prefer cold and wet conditions, like rainy days in winter. Melancholic people tend to prefer hot and wet weather, as during rainy days in summer.

Drinks: Persons with Sanguinous and Bilius temperaments tend to prefer cold drinks, whilst Phlegmatic and Melancholic individuals prefer hot drinks.

Appetite: Sanguinous and Bilius individuals usually possess healthy appetites, whereas with Phlegmatic persons it is slow and steady. People of a Melancholic nature tend to have variable and irregular appetites.

The quality and amount of sleep: If a person sleeps soundly for 6 to 8 hours a night, they are most likely Sanguinous. If they sleep deeply, and need at least 8 hours a night, they are most likely Phlegmatic. Bilius people need 5 to 6 hours of sleep, but do not sleep deeply. Melancholic people usually have interrupted sleep, and commonly suffer from insomnia.

Speech pattern: Sanguinous persons tend to speak clearly, but slow and soft speech belongs to the Phlegmatic temperament. Someone who talks sharply and loudly is most likely Bilius in nature, whereas those who speak softly yet quickly are probably melancholic in temperament.

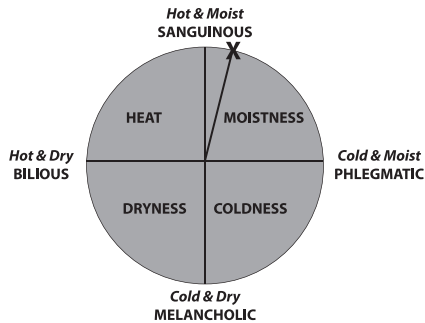
Personality, emotional traits and mental activity: When evaluating these, consider how the individual is seen by other people. For example, someone who usually has a calm nature might become angry when seriously provoked. This outburst does not automatically categorise this person as having a Bilius temperament, which typically includes short-tempered behaviour.

| FEATURE | SANGUINOUS (HOT & MOIST) | PHLEGMATIC (COLD & MOIST) | BILIOUS (HOT & DRY) | MELANCHOLIC (COLD & DRY) |
|-----------------------------------|---|--|---|--|
| PHYSIQUE and GAIT | Medium to large frame More muscle 'Macho' stride Moderate to large eyes | Medium to large frame more fat Slow pace Moderate to large eyes | Medium frame Lean Firm stride Small to moderate eyes | Thin, bony frame Can be short or tall Quick, anxious pace Small eyes |
| COMPLEXION and SKIN TEXTURE | Reddish or shiny Moderate in softness and moistness Warm | Whitish / pale Cool, moist, soft | Warm, dry | Dry Rough Cold |
| CLIMATIC PREFER- ENCES | Prefers cold, dry conditions Winter and Autumn | Prefers hot, dry conditions Summer and Spring | Prefers cold and moist conditions Winter and wet weather | Prefers hot and moist conditions Summer with wet weather |
| FOOD and DRINK | Healthy appetite with a moder- ate to excessi- ve thirst Prefers cold drinks | Slow, steady ap- petite, low thirst Can skip meals Prefers hot drinks | Healthy appetite, Excessive thirst, Cannot skip meals Prefers cold drinks | Irregular and variable appetite and thirst Prefers hot drinks |
| HEALTH PROBLEMS | Hypertension Diabetes | Phlegm-related disorders | Stress Anxiety Hay fever | Indigestion Gas- related disorders |
| SLEEP PATTERNS | Moderate to deep 6 to 8 hours | Heavy, At least 8 hours | Low but sound 5 to 6 hours | Interrupted Tendency to insomnia |
| SPEECH | Clear Moderate to loud | Slow Soft | Sharp Talkative Loud | Fast Less vocal Soft |
| PERSONALITY TRAITS | Persuasive Sociable/ outgoing Talkative | Calm Accommodating Patient Good listener | Resourceful Outspoken Dominant- driver May be short tempered | Thin, bony Thoughtful Logical Analytical Tend to be perfectionists |
| EMOTIONAL TRAITS | Playful Cheerful Excitable Disorganised Tend to exaggerate | Shy Self-contained Indecisive | Aggressive Angry Irritable Impatient | Fearful Insecure Suspicious Anxious |

Table 3

7. Qualities associated with a temperamental combination

What will be the combined quality associated with the temperament of an individual when we take into account his/her dominant/sub-dominant temperaments? In an individual with a combination of Sanguinous (Hot & Moist), and Phlegmatic (Cold & Moist) temperament, this individual will have an overall quality of moistness, as this is the common quality. (See diagram).



Also in this diagram, the line marked with an X reflects a person with a dominant Sanguinous and sub-dominant Phlegmatic temperament. Whilst this person has an overall quality of moistness, the next dominant quality will be heat. This will be followed by coldness, and the least amount of dryness. This ratio of qualities will be the ideal qualitative state of this individual in relation to his/her temperament¹⁴.

Any change to this ideal qualitative combination will have a negative influence on this person's health. This applies especially to an increase in the dominant quality associated with this person's temperament. In the diagram above, as moistness is the dominant quality associated with this individual, an excess of moistness will affect this individual negatively, the fastest and the most. On the other hand, an increase in the quality of dryness (which is the lowest in concentration), will be beneficial.

In summary from the above discussion, we understand that people can be categorised into four temperamental types, with a dominance of one and a sub-dominance of another. In addition, each temperamental combination has an ideal qualitative state (combination of heat, coldness, moistness and dryness) that, if not maintained, will have a negative effect on their health.

8. Conclusion

The significance of temperament is an important pillar of *Tibb al-Nabawī*, as indicated in the ḥadīth describing the temperament of the Prophet ﷺ.

“The Prophet ﷺ, was the best of men in physical appearance and constitution and the best of men in character”¹⁵

As-Suyuti

The relevance of each person’s temperament and the qualities associated with it in relation to health maintenance is discussed in the next chapter, *‘Principles of Health Promotion and Treatment’*.

Reference

1. *al-An‘ām* verse 73.
2. Abu-Asab M, Amri H, Micozzi M (2013). *Avicenna’s Medicine*, pp. 47-49. Healing Art Press, USA.
3. Avicenna. Bakhtiar, L. (1999). Volume 1. *The Canon of Medicine*, p. 17. Great Books of the Islamic World, Inc, USA.
4. Avicenna. Bakhtiar, L. (1999). Volume 1. *The Canon of Medicine*, p. xii. Great Books of the Islamic World, Inc, USA.
5. Ibn Sina Institute of Tibb [(2014). *Introduction to the Theory and Practice of Tibb*, Module 1, Philosophy of Tibb, p. 16. South Africa.
6. Ibn Sina Institute of Tibb (2011). *Tibb Training Manual*. Lifestyle Advisor Training Course (revised). pp. 25-31 South Africa.
7. As-Suyuti, J.A. *Medicine of the Prophet*, (Trans) p.3. Ta-Ha Publishers Ltd, London, UK. 1994.
8. Bhikha, R.A.H. and Haq, M.A. (2000). *Tibb – Traditional Roots of Medicine in*

Modern Routes to Health, p.60. Mountain of Light South Africa.

9. Littauer, F. Online at: <http://en.wikipedia.org/wiki/Florence_Littauer>
10. Bhikha, R.A.H and Saville, J.G. (2014). *Healing with Tibb*. p 10. Ibn Sina Institute of Tibb. South Africa.
11. Bhikha, R.A.H. (2006). *4 Temperaments, 6 Lifestyle Factors*, pp. 9-10. Ibn Sina Institute of Tibb, South Africa.
12. Bhikha, R.A.H. (2006). *4 Temperaments, 6 Lifestyle Factors*, pp. 11-12. Ibn Sina Institute of Tibb, South Africa.
13. Ibn Sina Institute of Tibb (2012) *Tibb Lifestyle Advisors*. p. 36-37. Johannesburg.
14. Bhikha, R.A.H. (2006), *4 Temperaments 6 Lifestyle Factors*, p 14. Ibn Sina Institute of Tibb, South Africa.
15. As-Suyuti, J. A. *Medicine of the Prophet*. (Trans) p. 4. Ta-Ha Publishers Ltd, London, UK. 1994.



Chapter 6

Principles of health promotion and treatment

*“... Amongst the seven constituents of the (human) constitution ...
come the four humours ¹”*

As-Suyuti

1. Introduction

In his book, *‘Medicine of the Prophet’*, As-Suyuti discusses the seven constituents of the human constitution, the first of which are the four elements (fire, air, water and earth), the second, temperament in human beings, and thirdly humours. This chapter describes the role of humours in maintaining the ideal qualitative state of an individual’s temperament in health promotion and treatment.

Humours are the primary fluids that are produced from the digestion of food and drink, which are processed and transformed in the liver. Historically, the concept of humours was originated by Hippocrates, expanded by Galen, and formalised by Ibn Sīnā and his medical contemporaries, who completed the final classification, codification and application of the practice of *Tibb* (medicine). The theory of humours fits comfortably into the physics of four elements (air, water, earth, and fire) and four qualities (heat, coldness, moistness and dryness)².

2. Description of Humours

There are four humours, each with different qualities:

| | | |
|--------------------|-------------------|---------------------------|
| Sanguinous humour | [Arabic: dam] | (Qualities: Hot & Moist) |
| Phlegmatic humour | [Arabic: balgham] | (Qualities: Cold & Moist) |
| Bilious humour | [Arabic: safrāʾ] | (Qualities: Hot & Dry) |
| Melancholic humour | [Arabic: sawdāʾ] | (Qualities: Cold & Dry) |

The humours, produced from food and drink, provide the body with its nutritional and energy needs. More importantly humours maintain the ideal qualitative state of an individual in relation to his/her temperament³.

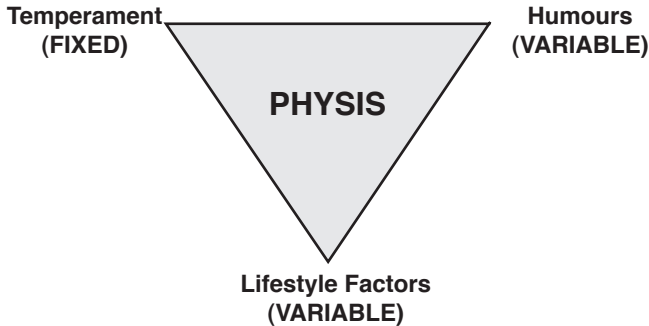
Just as each person has a unique temperament, each will have a unique ratio of humours and qualities to match the ideal temperament of the individual. For example, a person who has a dominant Sanguinous temperament (Hot & Moist qualities) will have slightly more of the Sanguinous humour (also with Hot & Moist qualities) to maintain the ideal heat and moisture associated with that temperament. Similarly, this is the case with the other temperamental types⁴.

Whilst the qualities associated with the temperament of an individual are fixed, the qualities of humours are constantly changing – either due to the food and drink from which humours are produced or from other *lifestyle factors* such as air and breathing, exercise, sleep patterns, emotions, and elimination. All of these *lifestyle factors* affect us, either by increasing or reducing the levels of heat, coldness, moistness and dryness in the body. For example when looking at environmental conditions – we see that weather can be hot, cold, moist or dry. The effect of sleep is also interesting as sleep increases moisture in the body.

Exercise, produces heat – so does becoming angry. Changes in qualities as a result of our *lifestyle factors* influence the qualities of the humours in relation to the ideal qualitative state required by our temperament.

3. Relationship between physis, temperament, humours and lifestyle factors

The diagram below describes the relationship between temperament, humours and *lifestyle factors* where *physis* is continually aiming to maintain balance (homeostasis).



Health will only be maintained as long as the overall quality of the humours is in harmony with the overall quality of the temperament of an individual.

Expounding on this principle of homeostasis, Ibn Qayyim al-Jawziyyah provides the example of the Prophet's use of cucumber (cold) and dates (hot) in order to show the need to combine foods with opposite qualities in order to provide rectification and adjustment for each other.

He writes:

*"In short, the one is hot and the other cold. Each of them contains rectification for the other and can prevent most of its ill effects. This is the basis of all treatment, and a basis for the preservation of health; even more the whole science of medicine makes use of this principle. The use of it and similar principles in foods and medicine contains their rectification and a moderating action, and it repels any harmful qualities they may contain, through what opposes them. In this medical principle there is assistance for their body's health, strength and well-being"*⁵

Ṭibb al-Nabawī aims at repelling harmful effects of cold with hot, hot with cold, or the moist with the dry and the dry with the moist. Moderating and maintaining the homeostasis, is the most effective means of treatment and preservation of health.

The Prophet's advice to Sayyidinā 'Alī ﷺ when he was ailing, not to take dates and to eat barley instead, is indicative of this principle. It is related in Ibn Mājah's *Sunan* and elsewhere, from Umm al-Mundhir bint al-Qays al-Anṣāriyyah:

“The Messenger of God ﷺ came into my room accompanied by 'Alī ﷺ, who was then convalescing from conjunctivitis, a condition resulting from excess heat. In the room we had some dates (produces a heating effect) clusters hanging. The Messenger of God ﷺ got up to eat some of them, and so did 'Alī ﷺ. The Messenger of God ﷺ said to 'Alī ﷺ, 'You are convalescing'. Then she continued: I made some barley and chard, (which has a cooling effect) and brought it; and the Prophet ﷺ said to 'Alī ﷺ : 'Take some of this, for it is more beneficial for you' ⁶”

The guidance of the Prophet ﷺ to Sayyidinā 'Alī ﷺ reflects the principle that lost health may be restored through maintaining homeostasis by repelling the illness through its opposite and precautionary measures.

The *Ṭibb al-Nabawī* approach to treatment of any ailment where the disturbance in qualitative harmony has been detected is to initiate measures to restore normality with opposite and balancing therapy. If a certain quality, say moistness, is deficient, then foods that contain much moisture are given, or herbs administered which encourage the build-up of moistness in the body. If the quality of heat is at low levels, then the patient is encouraged to consume hot foods and spices, and keep warm.

When treating a sick person, treatment revolves around measures that boost deficient qualities, or suppress qualities which are in excess. In *Ṭibb* medical practice this is carried out with changes to diet and exercise, herbal medication, and therapies such as massage and cupping, all of which bring about changes to the bodies qualities and contribute towards healing⁷.

4. Conclusion

Central to the practice of *Ṭibb al-Nabawī* is the recognition that each individual has a specific temperamental combination with an ideal qualitative state, which is maintained by the humours/body fluids. The qualitative influence from *lifestyle factors* invariably influences the humours, with *physis* continually striving to restore homeostasis. The application of balancing qualities from *lifestyle factors* in health promotion and treatment, within the context of the individual and the environment is discussed in the next chapter.

References

1. As-Suyuti, J.A. *Medicine of the Prophet*, (Trans) p. 5. Ta-Ha Publishers Ltd, London, UK. 1994.
2. Abū-Asab M, Amri H, and Micozzi MS (2013). *Avicenna's Medicine*, pp. 46-49. Healing Arts Press, USA.
3. Bhikha, R.A.H. and Haq, A.H. (2002). *Ṭibb - Traditional Roots of Medicine in Modern Routes to Health*, p. 58. Mountain of Light South Africa.
4. Bhikha, R.A.H. (2006). *4 Temperaments 6 Lifestyle Factors*, p. 15. Ibn Sina Institute of Tibb, South Africa.
5. Al-Jawziyya, I.Q. *Medicine of the Prophet*. (Trans: P. Johnstone), p. 76. The Islamic Texts Society, UK. 1998.
6. *Ibid.*, p. 77.
7. Saad, B and Said, O. (2011). *Greco-Arabic and Islamic Herbal Medicine*, p. 128. Wiley, USA.



Chapter 7

Lifestyle factors – the person/ environment interaction

1. Introduction

Allah ﷻ has created everything in the Universe to perfection. More than that, the Almighty has decreed guidance for the maintenance and harmony of each of His creations, recognising the interdependency one has upon the other. This relationship between the individual and the environment is fully evident in the holistic approach of *Ṭibb al-Nabawī*.

“Glorify the name of your Guardian Lord, Most High, Who has created, and further, given order and proportion, who has ordained laws, and granted guidance¹”

Qur’ān 87:1-3

Everything in the universe, from the galaxies in space to all living entities in nature, from our own body to the invisible cells, has been created with a perfect temperament and structure divinely designed to perform appropriate functions. In addition Allah ﷻ has determined ‘laws’ for all of creation within which to function harmoniously, as is seen in the fixed movements of the planets, the changing of the seasons, alternating of night and day, as well as the interdependence between the plants and animals. The laws that govern the relationship between fauna and flora

are genetically programmed in the way they co-exist in nature and within the constraints of the limited free will that Allah ﷻ has bestowed upon them².

2. The person/environment interaction

In human beings, who have been blessed with the choice of free will, guidance has been provided from the creation of Ādam ﷺ, either through revelation to all of the Prophets or from inspiration to Allah's chosen ones. This guidance in all fields of human existence, culminated with the revelation of the Qur'ān and the traditions of the Prophet ﷺ. In healthcare this guidance is illustrated in *Tibb al-Nabawī*.

Hippocrates described this guidance, pertaining to the maintenance of health between a person and the environment, as a state of harmony between the person, the person's behaviour (or *lifestyle*), and the living environment, Chishti describes this relationship within the concept of '*pepsis*'.

"... Life entails a reciprocal relationship between the organism and its environment... the organism grows at the expense of the environment, taking from it what is necessary to sustain life and reject what is unnecessary"³

The above quotation explains the concept of *pepsis* as the ability of an organism to digest the outer environment, and to eliminate and release the by-products of the digestion back into the environment.

The concept of *pepsis* can be further understood if we take into account that all living entities grow at the expense of the environment, taking from it what is needed to survive, such as air, food and oxygen, and rejecting what is unnecessary or harmful such as toxins, carbon dioxide and waste in the body. It is the effective digestion, assimilation and elimination of this environment that predicts good health. When this is impaired, it often leads to disease.

Interestingly the medical term *dyspepsia*, which refers to indigestion, is still commonly used when a person has overeaten or ingested something that does not agree with them. However, when Hippocrates coined the concept of *pepsis* or *dyspepsia* he was referring to digestion of the entire environment, not only food and drink.

3. Lifestyle Factors

As-Suyuti, in his book '*Medicine of the Prophet*', interprets the environment to consist of *lifestyle factors*, which include environmental air and breathing, food and drink, movement and rest, emotions, sleep and wakefulness and elimination⁴.

It is interesting to note that these *lifestyle factors* correlate with the *lifestyle factors* as described in the *Canon of Medicine* by Ibn Sīnā⁵.

Lifestyle Factors

| As-Suyuti: Medicine of the Prophet | Ibn Sīnā: Canon of Medicine |
|---|--|
| <i>Air</i> | <i>Environmental Air and Breathing</i> |
| <i>Food and Drink</i> | <i>Food and Drink</i> |
| <i>Bodily Movement and Rest</i> | <i>Movement and Rest</i> |
| <i>Emotional Movement and Rest</i> | <i>Emotions and Feelings</i> |
| <i>Waking and Sleeping</i> | <i>Sleep and Wakefulness</i> |
| <i>Emission and Retention</i> | <i>Elimination</i> |

The above *lifestyle factors* affect each and every person by increasing or reducing the levels of heat, coldness, moistness and dryness displayed in the body. These changes in qualities further affect the overall qualities of the humours in relation to the temperament of a person.

The qualities of *lifestyle factors* are illustrated by looking at our daily conditions. For example when we consider our immediate environment we see that weather conditions have qualities of heat, coldness, moistness or dryness. The effect of sleep is also interesting as sleep increases moisture

in the body. Exercise, however produces heat. As individuals, we have to ensure that the above *lifestyle factors* are given appropriate attention thereby ensuring overall health, wellbeing and an improved quality of life.

4. Homeostasis: maintaining the balance of heat and moistness

Whilst the overall qualitative state of an individual's humour is a combination of the qualities of heat, coldness, moistness and dryness, two qualities are of supreme importance in the body – heat and moisture. This is because the human body has two important features. Firstly, it contains a large amount of water – up to 70%, present in the blood vessels, between the tissues, or in the cells themselves. This high proportion of water is necessary in order to let the many biological processes take place. The body's water amount is strictly controlled. Too little fluid can lead to dehydration, and too much can lead to oedema. Also, without moisture the body would become overheated. Disturbances in the body's water composition can lead to serious health problems.

Secondly, the human body has a normal temperature of around 37°C, which is maintained by *physis* in a very narrow range. This temperature is necessary for the myriad of enzymatic reactions essential for life. Too high a temperature, will result in damage to the body's metabolism and structures; too low and hypothermia will develop. Both of these extremes are potentially life-threatening. The body works best at this temperature⁶.

As a result of the above features, the dominant qualities in human beings are not surprisingly, heat and moistness. Heat is obtained in the body mainly from the metabolic energy locked in foods, from physical activity, and from the environment. Moistness in the body is obtained mainly from food and drink; so these two factors are immensely important in *Tibb al-Nabawi's* approach to both health maintenance and the treatment of disorders.

The other qualities have a minor role, mainly because coldness and dryness do not support life. However, in order to achieve good health, it is necessary to maintain homeostasis between all the qualities.

The body's state of equilibrium of the two main qualities (heat and moistness) is fundamental to a person's state of health. This equilibrium is not rigidly fixed, but varies throughout the day and changes with food intake, physical activities, elimination of toxins, etc. It is therefore important to maintain these two qualities within strict boundaries or limits through suitable lifestyle choices whenever possible.

In addition, these two qualities are mutually supportive, being intimately related within the body. Heat prevents moisture from changing excessively, and this avoids it corrupting the metabolic activities and body structures. A person's body needs the correct amount of moisture balanced with heat to ensure good health.

“Health, stability and the body's state of equilibrium are regulated through moisture which opposes the heat. Each of the two qualities upholds the other, and the body is upheld by them both. When one of them exceeds the other, the body becomes indisposed accordingly ⁷”

Al-Jawziyyah

5. Conclusion

Maintaining the correct qualitative humoural balance, as required by the temperament of an individual, is essential in the maintenance of health. The importance and relevance of *lifestyle factors* will be discussed in the following chapters, beginning with air, seasons and breathing.

References

1. *al-A'īā* verse1-3.
2. Bhikha, R.A.H. and Haq, A.H. (2002). *Tibb - Traditional Roots of Medicine in Modern Routes to Health*, p. 51. Mountain of Light South Africa.
3. Chishti, G.M. (1991). *The Traditional Healer's Handbook*, p. 12. Healing Arts Press, USA.
4. As-Suyuti, .J.A *Medicine of the Prophet*, (Trans) pp. 3, 7-8. Ta-Ha Publishers Ltd, London, UK. 1994.
5. Bakhtiar, L. (1999). *The Canon of Medicine by Avicenna*, pp. 185-253 Great Books of the Islamic World, Inc. USA.
6. Bhikha, R.A.H. and Haq, A. H. (2002). *Tibb - Traditional Roots of Medicine in Modern Routes to Health*, p. 54. Mountain of Light South Africa.
7. Al-Jawziyya I.Q. *Medicine of the Prophet*. (Trans P Johnstone), pp. 158-159. The Islamic Texts Society, UK. 1998.



Chapter 8

Air, seasons and breathing

1. Introduction

Tibb regards the air we breathe as our closest and most vital contact with the environment. It sees it as being supremely important to our overall health. Problems of quality and composition, and also the way we breathe, are known to underlie a number of chronic disorders. Furthermore, it is the source of our primary nutrition, and justly regarded as the first of the *lifestyle factors*.

“Air is the fount of life, and also provides the source for the activation of energies to form body fluids and maintain life”¹

Ibn Sīnā

Breathing is fundamental to survival and health. We can survive for many days without solid food, few days without water, even fewer days without sleep, but only minutes without air. Without air, and the oxygen it carries, the person will be dead in minutes.

The air we breathe is itself not constant. It changes according to the time of day, the season of the year, and in different regions and climates. It also varies according to the person’s habitat – agricultural or industrial, rural or urban, inland or coastal. The temperature, moisture and electrical nature of the air we breathe has a major influence on our state of health and risk of developing diseases².

The oxygen contained in air confers life to the whole body. It exerts its influence on the respiratory and blood circulation systems, and *physis* through the immune system. It also affects our humoural balance; thus poor quality air can lead to an imbalance which may progress to illness.

The brain in particular is a big consumer of oxygen. If its supply of these is compromised by polluted air, the brain will suffer greatly, and mental clarity and thinking will be impaired.

In the practice of *Tibb*, the nature of the person's environment is always a concern. Although air is generally taken for granted, poor quality air can have a significant deleterious effect on health, especially regarding respiratory and metabolic disorders.

2. Air pollution – the threat to health

In the time of the Prophet ﷺ, the air breathed was a great deal different from what it is now. There are a number of reasons for this. First, the population density was much lower, especially in the arid, desert regions, and so the degree of pollution was a lot lower. Second, the extent of urbanisation was also lower, so the airborne pollutants commonly encountered these days in towns and cities were very rare. Third, over the last 250 years, industrialisation, coupled with systematic habitat destruction in many parts of the world has led to the release of a myriad of toxic particles and new-to-nature chemicals into the atmosphere. Fourth, the increased globalisation in general, and spread of plant species in particular, means that modern people are more exposed to exotic air-borne allergens than in the time of the Prophet ﷺ. Generally, people at the time of the Prophet ﷺ were not exposed to anything like the present-day toxic environment.

Common ailments like headaches, tiredness and irritability are often the result of insufficient oxygen intake. This in turn will have a negative effect on *physis*. All bodily functions will be compromised to a greater or lesser degree. The risk of heart disease and stroke, for example, increases from regular exposure to air pollution.

The impact of air pollution on health is well documented³. Air polluted by chemical pollutants, combustion and other toxins irritates the mucous membranes of the eyes, nose, throat and lungs. The person's eyes burn and form tears, the nose becomes stuffy and congested, the throat becomes constricted, and the lungs become 'twitchy', often with difficult and laboured breathing. The risk of stroke is known to be higher in air polluted areas.

In pregnant women, air pollution has been shown to have a serious, deleterious effect on their unborn children, with more premature deliveries and lower birth weight reported. Both mothers and children suffer. Older people are particularly affected. Hospitalisation for heart problems, respiratory distress and even complications of diabetes increases significantly in older people in air polluted regions.

3. Negative effects of different seasons

Every season, by virtue of its different atmospheric qualities, has an effect on a person's health. Each season is associated with specific illness conditions. During winter, cold and flu's predominate whereas in summer conditions such as diarrhoea are common.

"Each season produces disease compatible with it, and expels what is incompatible. Thus, summer causes bile and results in bilious diseases, but cures cold diseases. And the like can be said of the other seasons"⁴

As-Suyuti

When there is a gradual change from one season into another, health is not seriously impacted, whereas sudden changes invariably lead to illness conditions.

Below is a description of the different seasons and the effect it has on our health and well-being⁵.

Spring: During spring, seasonal winds are prevalent, so need to be protected against. Warmer weather encourages the accumulation of toxins/

humours during winter to surface, resulting in excess of phlegm. This can be a problem when allergies like hayfever begin to manifest, as it aggravates them. Spring is a good time to initiate cleansing regimens, like fasting, detoxification and cupping.

Summer: Hot weather brings blood to the skin, in order to disperse excess heat. This excess of heat/bilious humour can lead to excessive sweating, fever, nausea and sometimes vomiting. It makes the person more vulnerable to infections, inflammatory disorders and eczema. The person's digestive tract is denied the normal blood supply, so disorders like indigestion, poor appetite and constipation often ensue. Light meals and easily digested foods are recommended. Plenty of fluids, especially water, should be taken to make up for fluid lost through perspiration.

Autumn: a feature of this season is fluctuating temperatures, as days remain warm, but nights become colder. This can put additional strain upon *physis* as it acts to maintain equilibrium. Health problems can arise from consumption of Cold & Moist foods, especially in the evening. These make an individual more susceptible to breathing ailments, such as colds and chills. The temperature changes may lead to typically melancholic complaints, namely dry skin, coughing and sore throat.

Winter: the cold, wet weather boosts *phlegm* production. This makes a person more susceptible to colds and flu, coughing and lung congestion. In addition, the need for energy increases, as keeping warm becomes more important. This means that a person needs to consume more energy-intense foods. Also, effective breathing needs to be encouraged, so that better circulation of blood, with its oxygen and nutrition content, is achieved.

4. Effects of seasons on different temperaments

The effects of seasons on the different temperamental combinations is dependent on the dominant quality associated with each combination⁶.

For example, a person with a dominant/sub-dominant Sanguinous/Phlegmatic temperament having a dominant quality of moistness, will be most uncomfortable in weather conditions where excessive moistness is prevalent. Similarly an individual with a dominant/sub-dominant melancholic/bilious temperament will be negatively affected during the dry season of autumn.

Whilst we have no control over the weather, the excess qualities in the different seasons, can be balanced from other *lifestyle factors* especially diet.

“Summer is the best time for cold foods which destroy bile (bilious humour), for restricting intercourse, for avoiding loss of blood and for increasing hot baths. A man should meet winter by wearing extra clothes and having strong thick foods, such as tharīd broth ⁷”

As-Suyuti

5. Domestic air and breathing

Ideally, the home should be well ventilated, free from fire smoke and cooking odours, and not exposed to wind or drafts. It should also receive a reasonable amount of sunshine, direct but not harsh, which helps maintain good air quality. A person’s home should be kept free of foul, noxious vapours, as this badly affects air quality.

The home’s temperature should be maintained during the cold months, and protected from chills. If too hot, fresh breezes should be encouraged.

6. Benefits of good breathing practice

There are many benefits to be gained from quality breathing. By improving the supply of oxygen, and nutrients to all parts of the body, it boosts the body’s metabolism, so improving physical energy and vitality. It rejuvenates

the deeper tissues especially, cells and organs, cleansing them of toxic material, particularly volatile chemicals and carbon dioxide. It also neutralises any excess heat, so helps maintain the body's ideal temperature. Regular breathing exercises can enhance a person's complexion markedly, by improving skin tone.

Good breathing techniques stimulate the mind-body interaction. As a result, it helps people deal better with mental and emotional stress, and helps relieve anxiety, partly by calming the heart. An excessive heart rate will be normalised, so reducing strain on the heart.

Cutting down urban pollution can reduce mortality significantly, as deaths linked to heart disease and respiratory illnesses fall dramatically when air pollution is reduced.

Breathing exercises are particularly effective in relieving stress and inner tensions. If these are not dealt with effectively, they can lead to chronic disorders, by disturbing the normal humoral balance. In addition, regular and appropriate breathing exercises have been successful in the treatment of headaches, anxiety, chronic fatigue and sleeping problems⁸.

7. Practical breathing techniques

Healthy breathing practice is essential for maintaining a person's good health, and helping keep a number of common ailments at bay. Breathing exercises have different effects on individuals, depending on the technique used. Slow breathing exercises, for instance, will produce less heat than exercises which involve rapid breathing⁹.

The following pages describes four different breathing exercises:

Always remember that it is best to perform breathing exercises at dawn as the pollution levels are low, the air is crisp and fresh and the psycho-spiritual benefits are more profound.

- a) **The Tibb Slow and Deep Breathing Exercise** - this exercise has a cooling effect, so is ideal for people with a Bilious or Sanguinous temperament.
- Sit either on the floor in a squatting position with hands on thighs or in the 'lotus' position, keeping a straight back in both cases. If either position is not possible due to a disability, then lie on the floor or sit on a comfortable chair. Select a protected time and space, free from interruptions. This exercise is best done outdoors in the early morning if quiet and warm.
 - Close eyes, focus on breathing.
 - Take slow and deep breaths, breathing in and out through the nose, distending and filling the stomach.
 - Continue breathing this way for 5 minutes.
- b) **The Tibb Fast and Deep Breathing Exercise** – this exercise has a heating effect, so is ideal for people with a Phlegmatic or Melancholic temperament.
- Assume the same position described in the previous exercise.
 - Take slow and deep breaths, breathing in and out of the nose, distending and filling the stomach for 1 minute.
 - Then breathe deeper and faster for 3 minutes. This time can be extended to 5 minutes as you become more experienced with the exercise.
 - Thereafter, take slow deep breaths again for 1 minute.
- c) **The Tibb Deep Rhythmic Breathing Exercise** is prescribed for all temperamental types. Try doing it on a regular basis, preferably in the early morning.
- Breathe in deeply and slowly through your nose. Push out your stomach and visualise air filling it up. This will fill the lower half of your lungs that often get neglected.

- Tilt your head onto your chest and hold your breath as long as possible.
 - Then raising your head, exhale forcefully through your mouth as if you are blowing air into the distance. Shape your mouth into an 'O'.
 - This exercise should be repeated 3 times but not more than 15 times.
- d) **The Ṭibb Mental/Emotional Breathing Exercise** also prescribed for all temperaments. This breathing exercise creates harmony in the two hemispheres of the brain.
- Use the right index finger to close the left nostril. After taking a long, deep breath through the right nostril, close the right nostril with the thumb and hold the breath for 15 to 20 seconds.
 - Release the finger closing the left nostril and breathe out through the left nostril.
 - Now breathe in through the left nostril and repeat the same process by holding the breath for 15 to 20 seconds and breathe out through the right nostril.
 - Start by doing 5 cycles, and build up slowly to 10.
 - After completing this exercise, rest for at least 5 minutes in the same position.
 - Do this exercise early in the morning and late afternoon.

Breathing exercises take little time, are simple to employ, require no equipment, and can be carried out by just about anyone. They can also be done anywhere and at convenient times. By filling the lungs properly with fresh air, it helps dispel old, stagnant air. The key to success is performing these exercises regularly, so it becomes an ingrained habit.

8. Conclusion

The environment and the air that we breathe is a vital component of our health. It is the first of the lifestyle factors advocated by *Ṭibb Al-Nabawī*

and as such needs to be addressed in the path to overall wellness.

Oxygen is of course vital to life and we need to ensure that we do our best to uphold good breathing practice and minimise exposure to pollution and airborne toxins. With regards to the weather and climate, although we are unable to control these, being aware of the dominant quality associated with our temperament will enable us to use other lifestyle factors such as diet and appropriate breathing exercises that can be beneficial to our health and well-being.

References

1. Bhikha, R.A.H. and Haq, A.H. (2001). *Tibb - Traditional Roots of Medicine in Modern Routes to Health*, p. 73. Mountain of Light South Africa.
2. *Ibid.*, pp. 73-74
3. Holgate, S.T. et al. (Ed). (1999.) *Air Pollution and Health*. pp. 589-592. Elsevier, Holland.
4. As-Suyuti, J.A. *Medicine of the Prophet*, (Trans) p.7. Ta-Ha Publishers Ltd, London, UK. 1994.
5. Avicenna. Bakhtiar, L. (1999). *The Canon of Medicine*, Volume 1, pp. 196-202. Great Books of the Islamic World, USA.
6. Bhikha, R.A.H. and Haq, A.H. (2000). *Tibb - Traditional Roots of Medicine in Modern Routes to Health*. P. 93-102. Mountain of Light South Africa.
7. As-Suyuti, J. A. *Medicine of the Prophet*. (Trans) p. 23. Ta-Ha Publishers Ltd, London, UK. 1994.
8. Jahnke, R. (2009). *The Healer within: value of breathing exercises*. Harper, San Francisco, USA.
9. Bhikha, R.A.H. (2006). *4 Temperaments 6 Lifestyle Factors*, pp. 30-32. Ibn Sina Institute of Tibb, South Africa.



Chapter 9

Food and Drink

1. Introduction

Food is undeniably the most important external influence in the maintenance of health. Our daily diet introduces a wide range of materials into the body, which consist largely of natural nutrients such as proteins, fats, carbohydrates and minerals, but also some alien substances, which may be certain plant substances, toxins, chemicals and increasingly unnatural food additives and preservatives.

It is thus not surprising that food has the potential to influence our state of health, for good or ill. Unlike breathing or the environment, we have the power to exert a high degree of control over our food consumption, whether it is the amount we ingest; limited by fasting or excess, or the selection of the type of foods and even when and where we eat.

2. Eating in moderation – a Ṭibb al-Nabawī perspective

The importance of moderation in diet is emphasized in the Qur’ānic verse:
“Eat and drink, but not excessively”¹

Qur’ān 7:31

This is further emphasized in the ḥadīth narrated by al-Musand where the Prophet ﷺ said:

“The son of Ādam only needs a few bites that would sustain him, but if he insists, one third should be reserved for his food, another third for his drink and the last third for his breathing²”

The above ḥadīth is emphatic in that it warns us to guard against overeating, highlighting that fact that all we need is a few mouthfuls to sustain ourselves. This ḥadīth is often misunderstood as many of us sitting on the table are of the opinion that we can enjoy a meal as long as we stick to the one-third ratio of our stomach divided into three equal portions of foods, liquids and air. However, emphasis of the hadith is actually placed on ‘a few bites to satisfy hunger’ – in fact it would be ideal to leave the table before your appetite has been satisfied. The emphasis of the ḥadīth is clearly on moderation.

Not only is it important to avoid overeating but to further ensure that adequate time is allowed for digestion between meals as reference below:

Hārith ibn Kalādah, the physician of the Arabs, was once asked, “*What is the best medicine?*” He replied, “*Necessity – that is, hunger.*” When he was asked, “*What is disease?*” He replied, “*The entry of food upon food*”

This was also emphasized by Ibn Sīnā, who said,

“Never have a meal until the one before it, has been digested³”

3. Consuming ḥalāl foods

The importance of eating ḥalāl foods is highlighted in the Qur’ānic verse

“Eat of the things which Allah ﷻ has provided for you, lawful and wholesome; and fear Allah ﷻ, in whom you believe⁴”

Qur’ān 7:31

The aspect of 'lawful' should be interpreted not only within the context of permissible foods but also the earnings with which the foods have been obtained. Whilst great care may be taken to refrain from pork or to abstain from alcohol, the importance of *ḥalāl* earnings is just as integral to our diet and should never be overlooked.

4. Spiritual effect of foods

A Muslim considers food and drink not as an indulgence or selfish pleasure, but instead eats and drinks in order to keep the body healthy and sound for the purpose of worshipping Allah ﷻ. This worship is ultimately for the pleasure of the Almighty so that we may be honoured with ultimate happiness in the hereafter. *Ṭibb al-Nabawī* details the basis of dietary regulations as well as the limits within which Islam teaches man to enjoy the pleasures of life, including food and drink. We are advised not to become slaves to our desires and to never lose sight of our ultimate spiritual goal. Overeating and excess leads to a sluggish and dull constitution thereby affecting us negatively, impacting on the performance of not only daily responsibilities, but also on our spirituality⁵.

The intention of eating should be to strengthen oneself for the purpose of worshipping Allah ﷻ and to be rewarded for one's eating and drinking. The permissible act then becomes an act of worship that is rewarded by Allah ﷻ due to the good intention. Since eating is a matter of worship, it must begin with the name of Allah ﷻ. Muslims are encouraged to begin their meal with the following supplication:

'Oh Allah ﷻ Bless the food you have bestowed upon us and protect us from the torment of hell. In the name of Allah ﷻ we start.' Or at the least say *'Bismillāhi ar-Raḥmāni ar-Raḥīm'*

Upon completion of a meal, Muslims are advised to pause and thank Allah ﷻ for the blessing that He has bestowed upon them. We are thus encouraged to end our meals with the following supplication:

'Praise be to Allah ﷻ the One who gave us the food and the drinks, and made us Muslims.' Or too at least say *'Alḥamdulillāh'*.

5. Prophetic advice on diet

Islam clearly identifies suitable etiquette during eating and drinking. The Prophet ﷺ made a point of developing remarkably well-mannered and healthy eating habits amongst his followers. The following are some of the Sunnah eating practices that had been encouraged and performed by the Prophet Muḥammad ﷺ.

It is interesting to note that many of the recommendations on diet are aimed at the balancing of qualities associated with foods:

"...hot food should be balanced with cold, sweet (increasing moistness) with sour and acid (increases dryness) with fat (increases heat) ⁶"

Al-Jawziyyah

Also advised is the possible interaction between different foods with emphasis on the negative effects of certain combinations as in the case of vinegar and milk, which tend to curdle.

Some dietary advice that will maintain harmony whilst simultaneously maintaining the balance in the qualities brought about by the foods we ingest are:

Avoid combining milk and fish, vinegar and milk, fruit and milk, dried meat and fresh meat, two cold dishes, two hot dishes, two wind producing dishes, opposing temperature of foods (Hot & Cold) as well as opposing tastes (sweet & sour)⁷.

The underlying principles of prophetic guidance with respect to diet, is to allow one's *physis* to maintain and restore balance during and after the consumption of different types of foods. This is also facilitated and better maintained with the practice of fasting.

6. Benefits of fasting

Fasting is one of the most advisable forms of creating harmony within the digestive system. In addition to the spiritual benefits associated with fasting, there are many health benefits to be gained⁸.

Fasting is a universal practice as old as mankind itself. The physical benefits of fasting are well documented and have been scientifically proven to improve health and extend lifespan. Today, many variations of fasting exist. From wet fasts that only allow the intake of fluids or fasting by only consuming fruits and vegetables, to dry fasting where both food and drink is abstained from completely, as is practiced in Islam, the limiting of foods to whatever degree is often a first step to detoxification of the body.

This is because fasting gives the digestive organs a rest, thereby allowing *physis* to detoxify and 'clean house'. This is often noticed physically, through the eradication of waste and toxins from the body. From a *Ṭibb al-Nabawī* perspective, we also understand that the body rids itself of excess/abnormal humours whilst in a state of fasting.

Added to that, the Islamic prescription of fasting, from dawn till dusk, with the abstinence of food and drink enables *physis* to restore balance by physical and spiritual cleansing. This in turn, enables the body to release higher levels of endorphins into the bloodstream, resulting in higher alertness and an overall feeling of mental clarity⁹.

Fasting is obligatory for all Muslims during the blessed month of *Ramaḍān*. However, in addition, it is recommended to fast on the 13th, 14th and 15th of the lunar month. There is great wisdom in this as the effect of the moon on the balance of body fluids allows for greater concoction of the *humours* during fasting, which in turn prepares the body for optimal elimination on the Sunnah cupping days of the 17th, 19th and 21st days of the lunar month¹⁰. This will be discussed in greater detail in the chapter on cupping.

Other dietary recommendations:

Listed below are other dietary recommendations from As-Suyuti's '*Medicine of the Prophet*'¹¹

- Eat some supper, even if it is only a handful of dry bread, for going without the evening meal makes you grow old.
- The abstention of foods for long periods of time increases qualities of coldness and dryness.
- Foods that are very sour hurries on old age. Sour foods increase coldness and dryness and these qualities are associated with old age.
- Wiping the dish clean helps improve digestion, and is also a request for forgiveness.
- Licking the fingers three times after one has completed his meal was a frequent practice of the Prophet ﷺ.
- Digest your food with right actions and prayer (i.e. *ṣalāh*), and do not go to sleep immediately after eating, for this will constipate you. Sleep increases qualities of coldness and moistness in the body, resulting in a slowing down of the peristaltic action of the colon, thereby negatively affecting the efficient digestion and elimination of foods.

From all that has been mentioned, the importance of healthy eating, a balanced diet and hygiene can be understood in the light of Qur'ān and Sunnah. Islam has stressed on the importance of diet from the time of revelation. Interestingly, modern medicine and research have only in the past hundred years or so begun to stress its importance. This could be counted as just another gem that manifest in the perfection of Islam.

7. Guidelines for healthy eating

The guidelines for healthy eating takes into account the qualities associated with different foods in relation to the qualities associated with the temperament of an individual. Unfortunately today's dietary advice does not take the aspect of qualities associated with foods into account.

Tibb classifies food, drinks and spices as heating and cooling with levels of moistness and dryness¹².

For example, watermelon is Cold & Moist and will therefore have a cooling and moistening effect whereas chicken, which has Hot & Dry qualities, will have a heating and drying effect when consumed. Charts that contain heating and cooling foods with corresponding qualities of dryness or moistness, are on the following pages.



| HEATING FOODS | WITH DRYNESS | WITH MOISTNESS |
|---------------------------------|--|---|
| MEAT, FISH & CHICKEN | Chicken, lobsters and prawns (all small bird meat) | Buck, goat, goose, lamb, liver, mutton, turkey |
| VEGETABLES | Bitter gourd, fenugreek, green pepper, garlic, leek, mustard, onion, parsley, red pepper. | Artichokes, asparagus, chives, ginger, olives, spinach, squash, spring onions, turnips, sweet potatoes |
| FRUITS & NUTS | Grapes, Cashews, hazel nuts, pecan nuts, walnuts, pineapple, avocado | Dates, mangoes, almonds, bananas, pistachios, apricot kernels, guavas, peaches, papaya, papino |
| GRAINS & SEEDS | Chickpeas, fenugreek seeds, gram flour, mustard seeds, papad | Bread, bulgar wheat, flour. pasta, rye bread, sunflower seeds, wheat |
| DAIRY & NON DAIRY PRODUCTS OILS | Egg yolk, Mustard oil | Condensed milk, cheese. cream cheese, clarified butter, lecithin, margarine. (mothers milk) Castor oil, olive oil, sunflower oil |
| SPICES, HERBS & SEASONING | Aniseed, cinnamon, cloves, celery seed (ajmo), chilli sauce, garlic, green chilli, lavender, mustard seeds, mustard sauce, nutmeg, oregano, paprika, parsley, peri-peri, red chilli, rocket, rosemary, saffron, tarragon | Bay leaves, black pepper, cayenne pepper, dill seeds, dried ginger, fennel, green masala, marjoram, mint, sage, salt, soya sauce, thyme, turmeric, watercress, white pepper |
| BEVERAGES | | Green tea, hot water, juices (see fruit) |
| CONDIMENTS & SPREADS | Mustard | Mayonnaise |
| SWEETENERS | | Honey, molasses, sugar |
| CONFECTIONARY & DESSERTS | | Biscuits, cakes, chocolate, liquorice, vermicelli |
| CEREALS | | All bran flakes, bran, honey smaks, muesli, nutri-k. nutritive, oats, puffed wheat, tastreet wheat, weetbix |

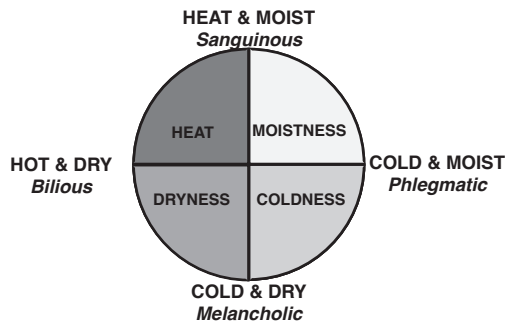
Table 4

| COOLING FOODS | WITH DRYNESS | WITH MOISTNESS |
|---------------------------------|--|--|
| MEAT, FISH & CHICKEN | Beef, biltong (beef), crabs, fish (all types), knuckles, mussels, ostrich. oysters, snails, tripe, veal | Duck, rabbit |
| VEGETARIAN | | Bean curd. soya, tofu |
| VEGETABLES | Brinjal (egg plant), cabbage, cauliflower, celery, green beans, mushrooms, peas, potatoes, sauerkraut, tomatoes | Beetroot, butternut, brussel sprouts, baby marrow broccoli, carrots, cucumber, gem squash, Indian ghourd, lady fingers, lettuce, okra, patty pans, pumpkin, radish, sprouts, soya beans, turnips, zucchini |
| FRUITS & NUTS | (All sour fruits), apples, , cherries, plums, coconut, granadilla, grape fruit, lemon, lime, naartjies, oranges, prunes, peanuts pomegranate, raspberries, strawberries, sultanas, pineapple | Apricot, cranberries, figs, kiwi fruit, litchis, melons, mulberries, paw-paw, pears, prickly pears, quince, spanspek, watermelon, macadamia nuts |
| GRAINS & SEEDS | Barley, bean (all types), corn, couscous, lentils, linseed, maize, mielie meal, mielies, millet, peas, popcorn, poppy seeds, samp, sesame seeds | Cornflour, cucumber seeds, melon seeds, pumpkin seeds, rice cakes, rice, sago, semolina, watermelon seeds |
| DAIRY & NON DAIRY PRODUCTS OILS | Egg white, milk (sour), yoghurt, coconut oil, corn oil, sesame oil | Coconut milk, cows milk, goats milk, buttermilk, butter, rice milk, soya milk |
| SPICES, HERBS & SEASONING | Basil, fenugreek, prunes, poppy seeds, tamarind | Cardamom, coriander, cumin, vanilla |
| BEVERAGES | Sour fruit juices, tea (black), coffee, ice, sourmilk | Green tea, hot water, juices (see fruit) |
| CONDIMENTS & SPREADS | Balsamic vinegar, pickles, tomato sauce, worcestershire sauce, vinegar, peanut butter | |
| SWEETENERS | | Fructose, glucose |
| CONFECTIONARY & DESSERTS | | Custard, ice cream, rose syrup, sago |
| CEREALS | Cornflakes, mielie meal, millet | Pronutro, rice crispies |

Table 5

Dietary advice on healthy living takes into account the dominant quality associated with an individual's temperament. *Any food with qualities similar to the dominant quality associated with an individual's temperament will result in an excess of that particular quality and so will negatively influence his/her health.* For example, a person with a dominant/subdominant, Bilious (Hot & Dry) - Sanguinous (Hot & Moist) temperamental combination will have an overall dominant quality of heat. The preferred diet for this combination will be mostly Cold & Moist and Cold & Dry foods and less of Hot & Moist and Hot & Dry foods.

Similarly a person with a dominant/subdominant, Melancholic (Cold & Dry) - Bilious (Hot & Dry) temperamental combination will have an overall dominant quality of dryness. The preferred diet for this combination will be mostly Hot & Moist and Cold & Moist foods and less of Cold & Dry and Hot & Dry foods.¹³



Qualities of food in relation to food groups

It is interesting to note that the *Tibb* concept of qualities of foods can also be interpreted to the food groups that we are familiar with i.e. proteins, fats, carbohydrates and minerals as indicated below:

- *Protein*: overall quality of dryness, but with degrees of heat or coldness, and the least amount of moistness.

- *Fats*: overall quality of heat, but with degrees of moistness, and the least amount of dryness and coldness.
- *Carbohydrates*: overall quality of moistness, but with degrees of heat and coldness, and the least amount of dryness
- *Water*: overall quality of cold and moistness
- *Minerals*: overall quality of cold and dryness¹⁴.

The Temperament of Recipes

Whilst the diet charts mentioned previously provide information on the quality of the different foods, dietary intake invariably consists of different ingredients in recipes, where each has a unique taste.

Listed below are the qualities associated with taste:

| | |
|-----------------------------|-------------------------|
| Salty | <i>Hot & Moist</i> |
| Inspid (bland, tasteless) | <i>Cold & Moist</i> |
| Pungent (strong spicy, hot) | <i>Hot & Dry</i> |
| Sweet | <i>Moist & Hot</i> |
| Sour | <i>Cold & Dry</i> |
| Bitter | <i>Dry & Hot</i> |

Being aware of the qualities associated with the different tastes also assists in the choice of foods for the different temperamental types. For example, a person with a Bilious temperament will be negatively affected by an excess of pungent and bitter foods, either as single ingredients or in recipes.

The rule to remember is that too much of the dominant quality associated with your temperament, will have a negative effect on you.

When selecting food, we need to consider:

- The temperament of an individual as this will impact on foods most suitable for that person.
- What foods will be most appropriate for an individual's age?
- The season and the climate in which an individual lives.

Bearing in mind foods that are ideal for one's temperament is of utmost importance, but we should also bear in mind that a balanced diet that includes heating and cooling foods is essential for the maintenance of good health.

Food and the maintenance of body heat

A diet inclusive of heating foods is absolutely essential for effective digestion and elimination. This is evident if we take into account that from the moment that food is chewed to the final assimilation of micronutrients in the liver, heat is created by friction, movement and countless bio-chemical reactions. If for any reason this innate body heat is reduced, then not only will digestion and assimilation be impaired but it will also result in an accumulation of toxic by-products¹⁵.

Research indicates that the addition of heating spices such as ginger, cumin and cinnamon dramatically increases the production of digestive enzymes, thus facilitating digestion and elimination.

The typical conventional western diet has many cold foods (yoghurt, salads), and often consists of red meat. This results in an excess of cold and dryness within the body. This cold and dryness is in contrast to the optimum requirements for maintenance of an ideal body temperament. (The human body is 60-70% moisture and is at a temperature of approximately 37°C). In *Tibb*, most serious diseases fall under the cold and dry excess, due to a lack of the maintenance of body heat¹⁶.

Importance of water

Undoubtedly, one of the body's most important requirements for the maintenance of an optimum 70% moisture content, is indeed water. Water plays an important role in the process of food digestion, nutrient metabolism, and elimination of waste products. It also ensures proper circulation of blood and the lymphatic system. Virtually every function of the body, from cell division, to food digestion, to tissue synthesis requires adequate moisture

levels. In light of this, the importance of maintaining ideal moisture content is essential¹⁷.

Our body is capable of dealing with an excessive intake of water but is not able to function efficiently without adequate water. In fact, illnesses such as kidney stones, dryness of the skin and dehydration result from low water intake. An adequate intake of water helps to reduce raised blood pressure and high levels of cholesterol, uric acid and glucose, amongst other benefits¹⁸.

A practice of the Prophet ﷺ was to drink water in three sips and not in a single gulp. From the *Tibb* perspective, water consumed all at once could negatively affect the '*heat of digestion*' in the stomach as water has qualities of coldness and moistness. The Prophet ﷺ instructed that water taken this way is '*more satisfying, healthier and more thirst quenching*'¹⁹.

Listed below are three additional important points regarding adequate intake of food and drink:

- Correct food and drink will have a positive effect in healing illnesses and will facilitate the healing process.
- Scientists say that bad eating habits and an unhealthy lifestyle can be a leading cause for many health problems. These include the majority of chronic diseases such as cardiovascular disorders, arthritis, obesity and cancer.
- For chronic diseases, the appropriate diet will address the root cause of the illness condition.

8. Conclusion

Today's lifestyle, especially in the developed world, pays scant attention to the importance of sensible eating. The celebrity-focused fashion is for the consumption of several radically different dishes at the same sitting. This results in the intake of many nutrients with different, often opposing, qualities. This invariably leads to digestive processes being impeded, an

imbalance in qualities, accumulation of toxins, and confusion of *physis*. Over a period of time, this behaviour may be responsible, in part, for the noticeable and alarming increase in cancers and chronic diseases. This chapter has highlighted the importance of food as medicine as propagated by scholars and most importantly as taught to us through the Qur'ān and Sunnah. Prophet Muḥammad ﷺ provided us with clear and in-depth guidelines on the type of food to eat, the importance of not mixing two opposing foods, and even the time to eat. Through his example we are adequately equipped to make healthy food choices that will positively impact our health.

References

1. *al-A'raf* verse 31
2. Al-Jauziyah, I.Q. *Healing with the medicine of the Prophet* (Trans J.A. Rub), p. 30. Darussalam, Saudi Arabia. 1999.
3. As-Suyuti, J.A. *Medicine of the Prophet*, (Trans) p. 12. Ta-Ha Publishers Ltd, London, UK. 1994.
4. *al-A'raf* verse 31.
5. As-Suyuti, J.A. *Medicine of the Prophet*, (Trans) p. 13. Ta-Ha Publishers Ltd, London, UK. 1994
6. Al-Jawziyya, I.Q. *Medicine of the Prophet*, (Trans. P. Johnstone), pp. 76-77. The Islamic Texts Society, UK. 1998.
7. As-Suyuti, J.A. *Medicine of the Prophet*, (Trans) p. 10. Ta-Ha Publishers Ltd, London, UK. 1994.
8. Cott, A. (1977). *"Fasting Is A Way of Life"*. Bantam Books, New York.
9. *Ṣaḥīḥ al Bukhārī*, Volume 3, Book 31, *ḥadīth* 127.
10. Ibn Sina Institute of Tibb. (2015). *The Sunnah of Hijamah*, p. 40. Johannesburg, South Africa.
11. As-Suyuti, J.A. *Medicine of the Prophet*, (Trans) pp. 9-11. Ta-Ha Publishers Ltd, London, UK. 1994.
12. Bhikha, R.A.H. and Vallee, N. (2006). *Cooking for your Body Type*, pp. 9-10. Ibn Sina Institute of Tibb, South Africa.
13. Bhikha, R.A.H. and Vallee, N. (2006). *Cooking for your Body Type*, p. 17.

Ibn Sina Institute of Tibb, South Africa.

14. *Ibid.*, p. 11.
15. Bhikha, R.A.H. and Haq, M.A. (2000). *Tibb - Traditional Roots of Medicine in Modern Routes to Health*. p. 74. Mountain of Light South Africa.
16. *Ibid.*, p. 76
17. Bhikha, R.A.H (2006). *4 Temperaments 6 Lifestyle Factors*, p. 27. Ibn Sina Institute of Tibb, South Africa.
18. Diamond, H. (2000). *Fit for Life*, pp. 331-351. Twin Streams, USA.



Chapter 10

Physical exercise and rest

1. Introduction

All human life, from birth to death, is in a constant state of movement, whether within cells or between tissues and organs. Activity is one of the defining features of life, and in the body this is under the control of *physis*. In humans, regular activity is needed to keep the body working properly, and if this is not done, then deterioration sets in. *Tibb al-Nabawī* recognizes that regular body movement in the form of physical activity or exercise, is a pre-requisite for wellness, and identifies it as one of the foremost *lifestyle factors*¹.

More and more evidence is accumulating which supports the many benefits that physical activity or exercise plays in maintaining good health, and assisting recovery from injury or disease. Regular physical exercise can, for example, reduce the risk of high blood pressure, diabetes, osteoporosis and depression. However, different people, with their individual temperaments, need different amounts and even types of exercise for the maintenance of health.

Rest, the partner of activity, is equally necessary to provide protected time for *physis* to carry out its repair and maintenance of the functions in the body. A reasonable balance between activity and rest is part of the foundation of good physical and mental health².

2. Exercise in the context of Ṭibb al-Nabawī

Ṭibb al-Nabawī considers that knowing when to exercise, and when to rest, is very important³. Everyone needs a certain amount of regular physical activity, above and beyond that which is expended in daily routine activities in order to remain in good shape. This must be balanced by sufficient rest, either when we are conscious or when we sleep.

Movement stimulates heat. Any physical activity or exercise produces heat, and the amount is based on the type of activity, the duration and intensity. Exercise is therefore a valuable part of therapy where an increase in heat is required. However, this property is limited by the fact that as exercise progresses, the qualitative balance changes in favour of dryness.

Ibn Qayyim al-Jawziyyah in his *‘Medicine of the Prophet’* describes the benefit of exercise:

“... physical activity immunizes the body against most ailments and mood changes... every organ has its own suitable sport or physical activity... horse riding, archery, wrestling and running are sports for the whole body⁴”

The above describes exercises such as horse riding, archery, wrestling and racing, which were all activities that were prevalent at the time of the Prophet ﷺ. Some of these activities may not necessarily apply in today’s times. However the importance of these exercises is that they benefited the whole body. The idea of exercise, is thus an overall benefit, and should not be restricted to only building muscle or losing weight.

It is advisable to exercise before eating, rather than immediately after a meal. However, by no means should any exercise be done on a full stomach. Only when food has passed through the stomach, and the liver is no longer producing humours from the nutrients, should a person start exercising. Any form of physical activity done immediately after a meal interferes with digestion and results in undigested food becoming a toxic residue.

3. Moderation in exercise

These days, exercise is regarded as any physical activity carried out voluntarily to improve overall health and wellness, enhance or increase physical fitness, weight loss, athletic prowess, or for personal enjoyment. It may be general in nature, or focus on, for example, the heart, circulatory system, the body's muscles or breathing.

Tibb al-Nabawī' focuses on exercising in *moderation*, taking into account the different needs as well as the temperament of the patient.

"Know that moderate exercise is a most efficacious means of preserving good health. It warms the organs (body) and dissolves waste products and makes the body light and active. It strengthens organs and inner faculties. By moderate exercise is meant exercise, which makes the skin red and glow. When sweating begins then that is the right time to stop. Whatever increases sweating is called 'heavy exercise' ⁵ "

As-Suyuti

The above interpretation emphasizes the need for moderate and regular exercise. As Muslims we are fortunate that the five daily prayers are a form of regular exercise. *Ṣalāh*, when performed meticulously, exercises virtually all muscles and increases circulation to the vital organs such as the brain and heart. Each *raka'ah* comprises a series of postures and movements, each of which having one or a number of physical benefits. The eye muscles contract and relax during *rukū'* and *qawmah*, whilst stretching the muscles of the back, thighs and calves.

The squat-like action stimulates the quadriceps muscles of the thighs upon going into *sajdah*. *Sajdah* also allows for an increase of blood to be carried to the brain. This posture provides for greater relaxation of all joints and muscles whilst gently massaging the internal organs of the abdominal cavity. The simultaneous concentration on prayer also benefits in relieving stress. There is wisdom in the number of *raka'āt* performed for each *salāh*, with fewer being offered in the morning (when the stomach

is empty), whereas additional *raka'āt* are offered in the evening (after meals). Whilst the physical benefits of *salāh* are important to note, it must not take away from the greater spiritual benefit of increasing *taqwah*.

4. Exercise for different temperament

Every person has a different temperament, and this is reflected in their attitude to physical activity and exercise. It is thus essential that an individual, who opts to exercise for whatever reason, selects the form that best suits his or her temperament. Below are the main forms of exercise, which are likely to be selected by people of different temperaments⁶.

Sanguinous people. Tend to select team sports. They are relatively high on cooperation and low on competitiveness. Leisure activities such as volleyball or basketball are often selected, especially if social interactions present themselves. This type may also favour weight bearing exercises. They can usually handle strenuous exercise, and have good stamina.

Phlegmatic people. Although being rather laid back, and not inclined to seek physical activity, if compelled to do so will select rather low-stress non-team pursuits such as leisurely walks, hiking, gardening or bicycling. This type has the capacity to handle much physical activity due to the qualities of coldness and moistness associated with their temperament. However, finding the motivation to exercise may be their biggest challenge.

Bilious people. This type is often a natural athlete, so will favour intense, competitive team and one-on-one activities. Team ball games like football and rugby, tennis, martial arts, athletics in general will feature in their range of selected activities or sports such as running and strength training. Bilious temperamental types should be cautious to not overdo it, or be so consumed in winning that it increases their levels of stress. Swimming is most beneficial for bilious temperaments as the cooling water balances the levels of heat.

Melancholic people. These tend to select single, skill-based activities like rowing, cycling or golf, personal challenge activities like road running or hiking, or strength building courses. This type usually derives much benefit from regular, yet light to moderate physical activity such as stretching exercises, pilates. These exercises promote balance and concentration, grounding the melancholic temperamental types.

The actual selection of a particular form of activity or exercise will to a large degree be decided by the sub-dominant type of temperament possessed by the person.

5. Benefits of exercise

Physical exercise improves digestion and increases blood flow through the arteries by stimulating their smooth muscles. The entire body as well as the mental well-being of a person is invigorated by physical activity⁷. The improved blood flow supply, due to increased breathing and heart rate, brings oxygen and nutrients to all tissues. This results in the body functioning better, as *physis* is able to operate more efficiently. Parts of the body, especially joints and muscles, which become more rigid with age, become more flexible. Overall, this leads to better body tone and an alert state of mind.

Regular physical activity, whether it be housework or gym-based exercise, boosts *physis*, especially the immune system component of it. This allows the body to remain in a good and healthy condition. Exercise is also known to delay the onset of lifestyle disorders like obesity, type 2 diabetes, hypertension, metabolic disorders and coronary heart disease. Furthermore, it reduces the likelihood of insomnia, anxiety and depression.

Exercise supports internal organs and faculties, and helps remove toxins from the body. Therefore any disorder caused in any degree by poor

digestion or accumulation of toxins should benefit from mild or moderate physical exercise.

The benefits of exercise are not simply confined to physical advantages, but, also go a long way to improve emotional and mental well-being. Endorphins are released during exercise helping individuals to cope with stress and anxiety.

6. Importance of rest

All people need to rest at some stage during the day, over and above regular sleep time. Rest is vital. It allows several processes in the body, such as digestion, breathing and immune protection to restore internal balance. It also lets physis work uninterruptedly on creating harmony within the body. This form of resting is in effect a '*mini-sleep*' phase, and confers to a lesser degree the benefits of a good night's sleep.

The need for rest is particularly important in those undertaking too much exercise. In the early stages the symptoms of overburdening the body with physical exercise include: sluggish body, disturbed sleep, sore muscles, aching joints, undue worrying and increased thirst. Later on, they become more serious, such as: general fatigue, irregular digestion, gauntness due to dehydration, and alarming loss of body mass.

Many symptoms of over-exercising are due to changes in qualitative balance. To start with, exercise leads to an increase in heat and moistness, but as the exercise intensifies, then increased dryness predominates. If taken to excess, this results in a loss of moisture, and even to dehydration. Rest, like sleep, leads to an increase in the qualities of cold and moistness. Proper rest, therefore, opposes the negative effects of over-enthusiastic exercise⁸.

7. Exercise for the soul

An important concept in *Tibb* is exercise that benefits a person on a spiritual level. What good is a healthy body without a healthy soul?

“... Among the greatest sorts of exercise for the soul is that of patience, love, bravery and beneficence, and the souls continue to be trained thereby, little by little, until these characteristics become well-established dispositions”⁹⁷

Al-Jawziyyah

This type of exercise is living a life in accordance with the Qur’ān and the Sunnah and fulfilling our role as vicegerent on earth. Through contemplation, searching for knowledge and striving to live a life that pleases the Almighty, we exercise an integral part of our role in this worldly life.

8. Conclusion

It is a fact of life that physical exercise, in common with other approaches to improving health and fitness, will achieve lasting benefits in the long term. The undesirable changes inflicted on a person’s body over many years cannot be rectified within a short period of time. There is no quick fix. However, once achieved, improved fitness leads to a much better quality of life. The harmful impact of numerous disorders is reduced; the onset of other disorders is delayed; general performance, both physically and mentally, is enhanced; and the risk of injury and accidents are minimized. Furthermore, the person’s protective systems are boosted, reducing the risk of infection and other disorders. And this can be gained for relatively little outlay in money, time and effort.

There is an abundance of ḥadīth and Sunnah that prove the benefits of exercise and rest patterns in *Tibb al-Nabawī*. If we are regular with physical activity and take time to give our body well needed breaks we would be upholding a lifestyle encouraged by the Prophet Muḥammad ﷺ.

References

1. Chishti, G.M. (1991). *The Traditional Healer's Handbook. A Classic Guide to the Medicine of Avicenna*, p. 33. Healing Arts Press, USA.
2. Bhikha, R.A.H. and Haq, A.H. (2002) *Tibb - Traditional Roots of Medicine in Modern Routes to Health*, p. 82. Mountain of Light South Africa.
3. Ayād, Amira. (2008). *Healing Body and Soul*, p. 71. International Islamic Publishing House, Riyadh, Saudi Arabia.
4. Al-Jauziyah, I.Q. *Healing with the Medicine of the Prophet*, (Trans J.A. Rub) p. 180. Darussalam, Saudi Arabia. 1999.
5. As-Suyuti, J.A. *Medicine of the Prophet*, (Trans) p. 16. Ta-Ha Publishers Ltd, London, UK. 1994.
6. Anon. *Exercise and Rest* <http://www.greekmedicine.net/hygiene/Exercise_and_Rest.html>
7. Bouchard C, Blair S.N. and Haskell W.L. (2007). *Physical Activity and Health*. Human Kinetics, USA.
8. Bhikha, R.A.H. and Haq, A.H. (2002). *Tibb - Traditional Roots of Medicine in Modern Routes to Health*, p. 83. Mountain of Light South Africa.
9. Al-Jawziyya, I.Q. *Medicine of the Prophet*; (Trans P. Johnstone) p. 180. The Islamic Texts Society, UK. 1998.



Chapter 11

Sleep and Wakefulness

1. Introduction

Good quality sleep is considered one of the cardinal *lifestyle factors* in *Ṭibb al-Nabawī*, for good reason. There is no greater source of good health than sound, restful sleep. We should therefore take all necessary measures to assure that we get enough sleep. We now know that a good night's sleep is necessary for consistent good health, and is known to contribute to increased life expectancy. Although the reason for sleep, the extreme form of natural rest is still a mystery, we know that it helps a person in several distinct ways. Sleep and wakefulness helps people maintain a balance in their daily routine and activities, in the same way as exercise and rest that we covered in the previous chapter. Sleep is a more profound state of rest, and wakefulness is the state within which exercise and activity can take place.

2. Sleep according to Ṭibb al-Nabawī

Ṭibb al-Nabawī acknowledges the importance of sleep both in maintaining good health, and in its role in restoring health when a person is suffering from a disease. *Ṭibb al-Nabawī* recognises that sleep is cooling and moistening. Wakefulness, on the other hand, increases dryness and heat. In addition, it depletes energies as a result of physical and mental activity.

“Sleep has two benefits: (a) repose from fatigue/exertion of wakefulness; (b) facilitates digestion of food and concoction of the humours (body fluids) – for the innate heat, during sleep, moves vigorously to the interior of the body... Therefore its exterior is cooled, and the sleeper needs a great deal of covering ¹”

Al-Jawziyyah

Tibb al-Nabawī sees sleep and the internal activities that take place, as a major example of *physis* in action. It allows the brain’s mental activities uninterrupted time in which to renew and maintain physical functions in digestion and metabolism, and prepare for the elimination of toxins. It allows the body to focus on tissue repair and restore good health where necessary. It also ensures that normal psychological performance is optimised.

While we sleep *physis* has uninterrupted time to restore balance. Heavy perspiration during sleep without an obvious cause means that undigested and unwanted fluids have accumulated in excess of normal bodily requirements. During sleep these unwanted matters are eliminated through the skin. Sleep, as one of the major *lifestyle factors*, is one of the routes by which *physis* is supported in maintaining harmony within the body. Disease arises when *physis* is unable to deal with influences outside its control. Among other reasons, this could happen when sleep is constantly disturbed, and/ or its quality is affected².

3. Sleep and Temperament

Although everyone needs sleep, the duration of sleep that is required varies from person to person³.

Generally, children need more than adults, and women need more than men. Although the elderly can manage on less than average, they usually benefit from extra sleep, as the moisture will overcome dryness associated with old age. The amount of sleep needed will also be affected by how busy the person has been physically or mentally during the day. For people with different temperaments, unique sleeping patterns emerge⁴ :

For those of a **Sanguinous** temperament, with Hot & Moist qualities, sleep is generally balanced and satisfying. A minimum of *6 to 7 hours nightly* is the norm, and excessive sleep is rare for those with bilious sub-dominance. Snoring may occur, but not too severe.

People of a **Phlegmatic** temperament, with Cold & Moist qualities, sleep quite heavily with frequent episodes of snoring. Excessive sleep often occurs in phlegmatic people. This type may require more sleep – *at least 8 hours nightly*.

Those of a **Bilious** temperament, with Hot & Dry qualities, have little trouble dropping off, but can have fitful or interrupted sleep thereafter, often waking in the early hours of the morning and then struggling to get back to sleep. They need little sleep – *5 to 6 hours nightly*.

Individuals with a **Melancholic** temperament, which is associated with Cold & Dry qualities, usually have a poor sleep quality that may be shallow and fitful. As this type is most prone to excessive thinking, it often interferes with good sleep. They should have at least – *5 to 6 hours nightly*.

Insomnia and other sleep disorders tend to affect the temperaments which feature the dry quality, namely, the bilious and more particularly the melancholic types.

4. Benefits of sleep

Normal, good quality sleep, allows a person's *physis* to organise physical and mental rest, and to repair and rejuvenate the physical, mental and spiritual domains. It is no surprise, therefore, that there are significant benefits from regular, quality good nights' sleep⁵. Summarised below are a number of benefits which have been confirmed:

At the **physical level** some of the benefits include a reduction in heart and blood circulatory diseases; prevention or delayed onset of type 2 diabetes; protection against some forms of cancer; the delayed formation of facial wrinkles; and markedly reduced vulnerability to infection.

The **mental** benefits include a decrease in the likelihood of developing depression; enhanced job performance; manual skills are picked up more effectively; and psychological performance is enhanced.

Sleep debt is often overlooked as an aggravating factor in many illnesses. Today's fast lifestyle can lead to chronic sleep debt, which may result in serious health problems. If a person does not get enough sleep, it will affect the person's mental, physical and emotional states. Troubled sleep indicates that a disease may be developing. Badly disturbed sleep could lead to headaches, nervousness, mood swings, irritability, lethargy, depression and lack of concentration.

Just as a lack of sleep can be harmful, excessive sleep, which increases the qualities of coldness and moistness, will also negatively affect health by causing a reduction in energy levels. Over long periods, this can lead to increased muscle weakness, and upset both digestion and metabolism. It can also dull the mind, build up phlegm in the body, lead to a slow heart rate, weaken the memory and lead to low blood pressure.

5. Guidelines for sleep hygiene

General advice to promote sleep and improve sleep quality includes partaking in moderate physical exercise in the morning or early afternoon. Light exercise such as stretching before bedtime may help initiate peaceful sleep. The avoidance of caffeine and nicotine late in the day can improve sleep quality. Food should be consumed at least 2-3 hours before bedtime. Smaller meals are preferable at night as digestion is impaired during sleep. Try to get enough exposure to natural light during the day and keep the room as dark as possible at night. This will help regulate the sleep-wake cycle by activating melatonin at the correct times. Establish a regular bedtime routine. This could include practicing deep breathing exercises, taking a hot bath and keeping your environment calm and free from stimulants⁶.

Prophetic guidance includes:

On avoiding sleeping on your stomach, Ya‘ish ibn Tighfat Gafari ﷺ narrates from his father, who mentioned:

*“I was reclining in the mosque on my stomach (due to chest pains), suddenly a person nudged me with his feet and said, ‘To lie down like this is disliked by Allah ﷻ’ When I turned to see who it was, I saw the Messenger of Allah ﷺ”*⁷

On the benefits of going to bed with *wuḍū’*, the Prophet ﷺ said:

*“Whilst sleeping in the state of wuḍū’, the reward of worship is being written for you in your book of deeds all night”*⁸

As-Suyuti in his ‘*Medicine of the Prophet*’, quotes different aḥādīth referring to: a) avoid sleeping between *Fajr* and sunrise and between ‘*Asr* and *Maghrib*; b) avoid sleeping during the morning as it hinders provision and c) also the importance of sleeping on the right side, facing *Qiblah*⁹.

‘Āishah ﷺ states that, “When the Prophet ﷺ would lie down every night on his bed, he would raise his hands in the supplication position and pray”

A *du‘ā* recommended by al-Jawziyyah in his ‘*Medicine of the Prophet*’ is:

*“O Allah! I surrender myself to You, turn my face towards You, entrust all my affairs to You and depend upon You for Your blessings both with hope (in You) and fear of You”*¹⁰

6. Conclusion

Tibb al-Nabawī has long regarded the balance of sleep and wakefulness as a major *lifestyle factor*, and one of the cornerstones of good health. It is vital in the optimum functioning of the human body not only physically but mentally and emotionally as well. Sleep has a cooling effect thereby

allowing healing to take place during times of illness and convalescence whilst revitalising the body's functioning in healthy individuals. Good sleeping habits will assist *physis* in the restoration and maintenance of health. More importantly practicing the Sunnah of sleep will provide spiritual benefits both in this world and in the hereafter.

References

1. Al-Jawziyya, I.Q. *Medicine of the Prophet* (Trans. P. Johnstone), p. 175. The Islamic Texts Society, UK. 1998.
2. Bhikha, R.A.H. and Haq, M.A. (2000). *Tibb - Traditional Roots of Medicine in Modern Routes to Health*. p. 84. Mountain of Light South Africa.
3. Sleep and Wakefulness. Online at: <http://www.greekmedicine.net/hygiene/Sleep_and_Wakefulness.html>
4. Bhikha, R.A.H. (2006). *4 Temperaments 6 Lifestyle Factors*, pp. 37-40. Ibn Sina Institute of Tibb, South Africa.
5. Epstein, Lawrence and Mardon, Steven (2006). *The Harvard Medical School Guide to a Good Night's Sleep*, McGraw-Hill, USA.
6. Bhikha, R.A.H. (2006). *4 Temperaments 6 Lifestyle Factors*, pp. 37-40. Ibn Sina Institute of Tibb, South Africa.
7. Abū Dāwūd, *ḥadīth* No. 5001.
8. Ibn Hibbān *ḥadīth* No. 1051.
9. As-Suyuti, J.A. *Medicine of the Prophet*. (Trans) p.17. Ta-Ha Publishers Ltd, London, UK. 1994.
10. Al-Jawziyya, I.Q. *Healing with the Medicine of the Prophet* (Trans. J.A.Rub), p. 216. Darussalam. Riyadh. 1999.



Chapter 12

Emotions and Feelings

1. Introduction

In the previous chapters, we addressed food, the environment, movement and rest patterns and sleep. Another of the *lifestyle factors* that we need to be mindful of is undoubtedly our emotional state. Emotions are the response of the body and soul to any given situation. They are the feelings a person experiences: perturbations of the mind, passions, subconscious affectations and any vehement or excited mental state. Emotions arise spontaneously, without conscious effort on the person's part. They are impulses upon which we may feel inclined to act, as they normally lead to some change in behaviour, whether it be minor and transient, such as facial expression, voice fluctuation, physical posture and bodily gestures, or long-term and more meaningful such as grief, depression or elation. Emotions are universal to human beings. No emotion is inherently good or evil, but it can become negative and destructive if overly indulged, or is left uncontrolled by the person affected.

2. Emotions in Ṭibb al-Nabawī

Ṭibb al-Nabawī considers emotions as the bridge between body and soul. It regards a person's emotional state to be equally important to other *lifestyle factors*, and accepts that uncontrolled or unchecked emotions can threaten a person's overall wellness.

From time immemorial, emotions and the heart have been intertwined. On a spiritual level, emotions are considered to be generated by the heart in response to a situation or event. In addition, the heart is seen to resonate with the soul, with input from a higher power. A person's emotional nature is thought to influence heart function thereby explaining changes to the heart's qualities in love (heat), rejection (dryness) and grief (coldness).

The status of the heart as the fount of many emotions is still as strong as ever, in spite of the modern scientific assertion that emotions arise only in a person's mind. There is much evidence that emotions have substantial effects on the heart, and that a number of diseases of this organ are initiated or aggravated by emotional turmoil. Anger, grief and irritability have been shown to have serious effects on the heart. From our own experiences, emotions are intuitively linked to the heart, and we experience strong emotions in our chest, and use heart-based language: heartfelt, heartache, bleeding heart, heart grows cold and so forth when referring to our emotional state.

There is now acceptance of the role of depression and anxiety as independent risk factors for mortality in cardiac patients. Sudden emotional shock can cause a heart attack even in healthy people. Popularly known as a '*broken heart syndrome*', this is usually related to the loss of a loved one, fear of an approaching event or activity, or to an unexpected accident¹.

3. Qualities of emotions

As with all *lifestyle factors* the aspect of qualities associated with emotions also applies, as is indicated below:

"Anger heats up the body and dries it up"²

As-Suyuti

From the aforementioned we recognize that anger is associated with Hot & Dry qualities. Other emotions also have qualities i.e. excitement (Dry & Hot), worry (Hot & Moist), fear (Cold & Moist), grief (Cold & Dry), depression (Cold & Moist or Dry)³. The emotions differ in their qualitative make-up, with heat common to some: anger; excitement and worry, whereas others are characterised by coldness such as fear; grief and depression.

A balance in the qualities of emotions appropriate for the person's temperament is essential for good mental health and emotional harmony. Moreover, emotions are not regarded as being positive or negative, or good or evil in themselves. It is only when they become uncontrolled or excessive that they can become threatening or destructive to the person, the family or the community.

4. Emotions and temperament

As we well know, temperament is an essential aspect of diagnosis, treatment and prevention of disease in *Tibb*. A person's temperament is also an important factor in the emotional context, as it definitely influences the form and intensity of the emotion experienced⁴. People of different temperaments respond differently under equivalent emotional stimuli. For instance, a person with a phlegmatic temperament will experience grief differently to a person with a bilious one, and someone who is predominantly bilious will rise to provocation more readily than a phlegmatic person. Whilst some people can handle stress reasonably well, others fail miserably. Some people are calm by nature, whilst others are easily ruffled, even under the same circumstances.

People with different temperaments tend to be associated with characteristic emotions:

Sanguinous - tend to have an optimistic outlook on life, experiencing '*positive*' emotions such as joy, enthusiasm and affection. On the '*negative*' side, uncontrolled or excessive emotions could manifest as: euphoria,

obsessive behaviour, narcissism and self-indulgence. *Tibb al-Nabawī* highlights that even so-called 'positive' emotions, if not controlled, or in excess can have detrimental effects. The Prophet ﷺ said:

"Love the one who is beloved to you in due moderation...⁵"

Phlegmatic – are slow to anger, and quick to forgive. Positive emotions appear as 'laid back' attitude, contentment, sensitivity, sentimentality and easy-going nature. Typical negative emotions are: anxiety, fear, apprehension and lethargy.

Bilious – typical emotions include: intolerance, being challenging, demanding or having an irritable and critical demeanour. In excess, emotions arise as: anger, hostility, frustration, irritability, and resentment. On a positive note, people with a Bilious Temperament are good leaders, reliable, organised and adequate problem solvers.

Melancholic – typical emotions for this temperamental type are: sadness, pessimism, worry and caution. They are also empathetic, analytical and intuitive. When excessive, these register as depression, guilt, fear, grief and panic.

Emotions are linked primarily to an individual's dominant temperament. Bearing in mind that everyone possesses a sub-dominant temperament as well, a person's true emotional profile is rather more complicated in the true sense. Emotions play an important part in identifying a person's temperament.

5. Importance of managing emotions

Tibb al-Nabawī views the mind and body as part of one, large interactive matrix. Any obstacle to healing that affects one part of the system feeds through and harms all others. Any improvement we can make in any part is also likely to feed through this matrix and improve well-being as a

whole. Resolving negative emotions such as chronic anxiety or sadness often restores harmony and improves an individual's general resistance to disorders.

Balancing and regulating our emotions is an important part of our daily social lives. Prophet Muḥammad ﷺ said:

“Whoever curbs his anger, while being able to act, Allah ﷻ will fill his heart with certainty of faith”⁶

Tibb al-Nabawī regards a person's emotions, although subtle and invisible, as one of the cardinal lifestyle factors, and essential for a person's wellbeing.

It views the activity of the mind within the Psychic faculty as a powerful way of supporting *physis* thereby maintaining a person's inner harmony and helping it during disease and convalescence. If we are not at ease in our emotional space, then not only does our quality of life begin to suffer, but we most likely will be affected health-wise. Many ailments have an emotional component, and good emotional health definitely supports good physical health⁷.

Tibb al-Nabawī advocates a stable and controlled emotional state which can benefit a person immensely, and extend to the upliftment of family and community. These are powerful motivators that subscribe to suitable emotional support when required. The value of encouraging good emotional health is enhanced when applied in synergy with other lifestyle factors, namely: healthy food and drink consumption, better breathing, good sleep, regular physical exercise, resolved emotional stress, and more efficient elimination processes.

Emotions can change the natural course of how the body functions on a daily basis⁸. Uncontrolled, negative emotions can apparently be as damaging to our health as smoking or high cholesterol are. Emotions affect our health in several distinct ways. Take stress for example. This increases the release of stress hormones from the adrenal gland, and over the medium to long

term can be damaging to organs and tissues. Another consequence is an inflammatory effect. Unresolved emotional conflicts, arising from anger or grief, can lead to low-level inflammation developing in parts of the body. It has been proven that this increases the risk of psychological and heart diseases. A stomach ulcer may develop when a person is angry or worried for some time, and depression may be provoked by unresolved grief.

How a person reacts to a particular personal, domestic or social experience results in emotions that can, paradoxically, lead to a beneficial effect on health. For example, if a person with a chronic disorder such as arthritis or HIV & AIDS maintains a positive attitude, this can improve the prognosis of the disorder. On the other hand, a negative attitude brought on by emotions such as anger, worry and frustration can lead to worsening of the illness condition.

There has been much hype about the positive effect of affirmations in recent health studies. As Muslims, this is equated to the power of *du'ā* and faith. Islamically, these '*affirmations*' have been proven time and again to have the power to overturn hearts, situations and even illness conditions if Allah ﷻ so wills.

6. Emotions and the immune system

Emotions are linked to the immune system, and so are directly influenced by *physis*. They have a powerful effect on the autonomic (or unconscious) nervous system, which in turn regulates a host of bodily functions. From a scientific perspective, emotions trigger the release of the stress hormones, cortisol, adrenaline and prolactin.

Over time, uncontrolled anxiety, fear and unchecked emotions result in an inefficient immune system. This means that the constant surveillance system of *physis* in detecting and destroying pre-malignant or cancerous cells is not as effective. As a result, cancer cells learn to survive, evade attack, and

grow. In addition, microbial infection can progress unchecked. The ultimate effect is that a person becomes more susceptible to the development and progress of malignant growths and more prone to infection by pathogenic micro-organisms.

We now know that our immune system, which is a major contributor to the many actions of *physis*, can be markedly influenced by our state of mind and the emotions that affect us. It is not surprising, therefore, that *Ṭibb al-Nabawī* healers consider maintaining and protecting the health of the mind, as equally important as that of the body⁹.

7. Exercises to manage emotions

Techniques or exercises to restore emotional balance often include meditation and visualization¹⁰.

Breathing is an important component in restoring emotional states and is always included as part of the meditation process.

The most appropriate breathing exercise when meditating is the *Ṭibb* Slow and Deep Breathing Exercise as it has a calming effect.

You can also try the following:

The *Ṭibb* Heart Meditation Exercise

- Sit straight up on the floor or chair, with a straight spine. Put the head down, close the eyes, concentrate on the heart and breathe in deeply.
- Hold the breath for a while; then breathe out slowly in the same manner.
- Continue this exercise for 10-15 minutes every night before going to bed.

The Ṭibb Pineal Body Meditation Exercise

- Sit in a relaxed state in a calm environment, with eyes closed.
- Concentrate on the area between the eyebrows, and breathe in deeply.
- Hold the breath for a while and breathe out slowly in the same manner.
- Repeat this exercise for 10 – 15 minutes.

8. Conclusion

As detailed above, emotions are an integral part of our overall state of health. In this chapter, we explored the reasons for checking our emotional state from a scientific as well as spiritual standpoint. According to *Ṭibb al-Nabawī*, our emotional state is as important to our overall state of well-being as the food we consume or the exercises we partake in. During times of illness, we are advised to maintain a positive attitude, turn to the Qur’ān and Sunnah for advice and aspire to a greater closeness with the Almighty through prayer. It is easy to succumb to negativity, especially within the constraints of the times in which we live and the stresses that we face. However, acceptance of fate and submission to Allah ﷻ is the greatest way to attain inner peace, and with that, an optimal emotional state of being.

References

1. Nancy, E.M. (1986). *The Broken Heart Syndrome: A Study in Psychosocial Isolation*. Univ. Calif., Berkeley: USA.
2. As-Suyuti, J.A. *Medicine of the Prophet*, (Trans) p. 24. Ta-Ha Publishers Ltd, London, UK. 1994.
3. Bhikha, R.A.H. (2006). *4 Temperaments 6 Lifestyle Factors*, p. 40. Ibn Sina Institute of Tibb, Gauteng, South Africa.
4. *Perturbations of the Mind and Emotions*. Online at: <http://www.greekmedicine.net/hygiene/Perturbations_of_the_Mind.html>
5. Tirmidhī, *ḥadīth* No. 6/123/2065.
6. Abū Dāwūd, *ḥadīth* No. 4777.

7. Bhikha, R.A.H. and Haq, A .H. (2002). *Tibb - Traditional Roots of Medicine in Modern Routes to Health*, p. 85. Mountain of Light South Africa.
8. Vingerhoets A.J.J.M., van Bussel, Frans and Boelhouwer, Jan. (1997). *Non Expression of Emotions in Health and Disease*. USA Cornell Univ. USA.
9. Di Stephano, V. (2005). *Holism and Complementary Medicine: Origins and Principles*. Allen & Unwin. Australia.
10. Bhikha, R.A.H. (2006). *4 Temperaments 6 Lifestyle Factors*, p. 45. Ibn Sina Institute of Tibb, South Africa.



Chapter 13

Elimination of toxins

1. Introduction

Although the elimination of toxins is the last of the major *Tibb al-Nabawi* lifestyle factors, it is by no means any less important than the others. Body waste is the inevitable consequence of the living process. Good health, and indeed life itself, is impossible if this body waste resulting from metabolic and energy producing activities is not removed completely and in good time. However, a fine balance has to be struck between waste retention, where useful material is salvaged from the waste, and waste evacuation itself. Elimination of body waste at too-rapid a pace can lead to health problems, in the same way as excessive retention of waste can threaten a person's optimum health¹.

Waste products are expelled from the body through bowel movement, urination, respiration and perspiration. Elimination via the bowels is one of the most important, and so requires special attention².

2. Why Elimination is vital

In the chapter on Food and Drink, we saw that the body takes from the environment what it can to maintain the many metabolic processes essential for life, and then discards the waste products and those materials it can no

longer use. This process is termed '*pepsis*'. As the end-product of *pepsis*, body waste is made up of a variety of substances with different chemical features. These may be gaseous in nature, water soluble or insoluble, acidic or alkaline. The body, acting through *physis*, is perfectly designed to deal with this range of features, and possesses a number of routes of elimination to deal with them. The bulk of excretory products are eliminated via the colon in the stool, water-soluble waste is excreted via the kidneys as urine, and gaseous metabolic waste via the breath and through the lungs. Several toxins and surplus electrolytes are removed via the skin as perspiration.

The colon, which carries the major portion of the waste product load, is thus more prone to problems of function. This may take the form of excess, as in diarrhoea and irritable bowel syndrome, or impacted and sluggish content, as in constipation. Any form of colon problem needs to be addressed, as it prevents proper activity from taking place.

3. Eliminative Routes

As mentioned, there are numerous natural eliminative routes that the body uses to remove unwanted waste as well as toxins³. Let us discuss some of these routes in detail:

Colon and faeces: Most body waste is removed via the colon as faeces. Many common disorders arise from poor elimination due to stagnation, resulting in constipation and cramping amongst other symptoms. Long-term and unchecked bowel constriction is a possible contributor to a number of chronic or degenerative ailments, which may include conditions such as rheumatism, haemorrhoids, insomnia and bad breath.

At the other extreme, excessive and repetitive evacuation of the bowels, as in severe diarrhoea, can be a serious threat to a person's health; it can be life-threatening. Diarrhoea is often due to bad eating habits, or infection of a part of the bowel, and occurs as a *physis* protective response to neutralize

toxic or irritating microbes or substances. The ensuing dehydration, due to excessive loss of body fluid and electrolytes, is often life-threatening.

The elderly are particularly affected by irregular bowel movements. This is due to progressive drying out of the body with the qualities of coldness and dryness predominating in adulthood and old age, often affecting the intestines and colon.

Kidneys and urine: The kidney are the body's main route for elimination of liquid waste, which appears as urine. Many water-soluble substances expelled from the body by this route are toxic in high concentrations, so if this elimination pathway begins to fail, toxic build-up occurs, resulting in the person's life being threatened. The kidneys also helps keep the body's electrolytes in balance by excreting excess sodium, potassium and other minerals or chemicals that build up in the body.

Breathing: The route from lungs to mouth and nose is the predominant route for excretion of gaseous and volatile toxic material. These may arise in the body as products of vital metabolism, from absorption of toxins through the skin, or from ingestion of substances in food and drink which themselves break down to volatile compounds. In addition, the loss of toxic metabolites such as carbon dioxide, from the body via the lungs is replaced with life-giving oxygen. This is essential for all energy generating activities in the body. If this route of elimination is hindered, the lungs can become congested from a build-up of fluid, and this can lead to coughing.

Perspiration or sweating: Also known as *diaphoresis*, sweating occurs in two forms: visible and invisible. Both forms are used to remove waste products of small molecular size, such as toxins, heavy metals and metabolites. As a great deal of moisture is lost from the body to help the skin perform this function, it needs to be replaced by regular and substantial amounts of water or other fluids, especially in those living in hot countries or during hot weather.

The skin is also a major regulator of body heat. During cold weather or in colder climates the skin changes structure and the sweat pores close to conserve heat. This could result in toxic build-up as toxins are not being excreted as efficiently as before.

In addition to the above main eliminative routes other minor routes include:

Coughing and **sneezing**; which expel toxic material such as irritant particles and allergens from the lower and upper respiratory tract respectively; **vaginal emission**, especially of blood and tissue which has accumulated on the wall of the womb during the years of ovulation; and **pus**, after an infection, when dead immune cells and pathogenic bacteria are removed. There are also a number of other routes, which make a small contribution to ensuring all potentially toxic material is removed: **sebaceous secretions** from the skin, **ear wax** and even **teardrops**⁴.

4. Elimination: The *Ṭibb al-Nabawī* perspective

Ṭibb al-Nabawī attaches great importance to the effective removal of body waste. If the body is unable to remove waste products efficiently, it may become susceptible to diseases.

“When food increases beyond the extent of dissolution... these turn into harmful substances... and bring about various types of illnesses according to various types of harmful substances and the susceptibility of organs and body”⁵

Al-Jawziyah

Of special significance as far as elimination is concerned is *Ṭibb al-Nabawī*'s emphasis of elimination from the colon. This has been highlighted in a narration of a ḥadīth by ‘Abdullāh ibn Umm-Huzam:

“Use Senna... it cures every disease... except death”⁶

Senna is a well-known laxative used for many centuries to facilitate effective elimination from the colon. Historically, senna was not only prescribed for the management of constipation, but also used for the general maintenance of health. Senna (*cassia angustifolia*) as a laxative is unique in that, if used moderately, it is beneficial and strengthens the digestive tract.

5. Temperament and waste elimination

People with different temperaments tend to be affected by disorders that affect different eliminative routes. For example, melancholic people are more likely to develop constipation, and phlegmatic people, diarrhoea. Conversely, different temperaments respond better to specific elimination therapies. Sanguinous and phlegmatic people seem to respond better than others to steam bathing or saunas, whilst bilious people should use saunas with caution.

A major principle of *Tibb al-Nabawī* is to approach elimination taking into account other aspects of the individual, including physique, age and sex, lifestyle habits, weather conditions and occupation⁷.

6. Guidelines for healthy elimination

The *Tibb al-Nabawī* approach to encourage healthy elimination processes generally involves dietary changes⁸. An increase in fresh fruit, vegetables and whole grain breads is recommended, as this provides more fibre, which bulks up the stool thereby assisting evacuation. This advice is supported by drinking more water through the day and reducing consumption of meats, especially those difficult to digest, such as beef and mutton. In addition, selecting foods which themselves have a natural laxative effect, like oats, figs, raisins and prunes help enormously. Often, a diet of fasting or limited foods may be recommended, as this gives the colon time to eliminate excess toxins without interruption. As a matter of general advice, cutting down on refined sugars, starches, and hard fats is beneficial.

This diet is much more digestible, and is less likely to cause build-up of waste in the gut.

Herbs also have a place⁹. The benefits of a change in food consumption can be amplified by introducing certain herbs into food, such as ginger and garlic, or by drinking peppermint or green teas afterwards. In addition, adherence to a change in diet is helped by including spices that are heating, such as, cinnamon, cumin, turmeric and black pepper.

In addition to dietary changes, the use of natural laxatives is not only encouraged, but essential. Modern medicine does not encourage the use of laxatives, but it is a known fact that most of the reabsorption of water in the body takes place through the colon. This process of reabsorption results in a film of matter accumulating on the sides of the colon. Normal peristaltic movement does not remove this, which impedes subsequent reabsorption and can become a reservoir for toxic accumulation. Although we may eliminate regularly, this build up can only be removed with an appropriate laxative taken on a regular basis. This helps the body keep the colon free of toxic waste, and is an important step to health maintenance.

Steambath

Hammāms, or steam baths, have been used for centuries to promote more effective elimination via the skin. The perspiration provoked is very effective in treating respiratory disorders, including colds and bronchitis, especially if combined with a body massage and the use of hot herbal teas. Promoting sweating is often a valuable prelude for deeper forms of toxin elimination. It is also an effective way of dealing with body odour, which arises from a build-up of morbid humours and volatile toxins¹⁰.

Massage

Traditionally, massage either alone or as part of the *ḥammām* treatment, was also an important eliminative practice. The use of appropriate aromatherapy oils, included as part of the massage, taking into account temperament of the individual, is now well proven to provide immense benefit in maintenance of good health.

Massage is also indicated to improve lymphatic drainage an important route for the elimination of toxins as well as other benefits including better blood circulation, relief of sore and aching muscles, and a more relaxed mental and emotional state¹¹.

A person's emotional state can have a substantial effect on natural routes of waste and toxin removal. Interestingly, the various mechanisms of elimination involving muscle and glands can be affected by worry, fear, anxiety, anger and other negative emotions. A good example of this is the way our breathing changes when we are anxious¹².

6. Conclusion

A large extent of our good health depends on the effective removal of both end products of the body's metabolism (*pepsis*), and the many toxins that the body accumulates daily, and over time from our food, drink, air and lifestyle habits. Once a build-up occurs and excretory mechanisms fail to operate properly, there is an increased risk of a person's wellness being jeopardised. As noted in this Chapter, there are a wide range of options available to assist *physis* in its excretory roles, and these are embodied as an important aspect of *Ṭibb al-Nabawī*.

References

1. Bhikha, R.A.H. and Haq, M.A. (2000). *Tibb - Traditional Roots of Medicine in Modern Routes to Health*. p. 90. Mountain of Light South Africa.
2. Chishti, G.M. (1988). *The Traditional Healer's Handbook*, p. 119. Healing Arts Press, Vermont, USA.
3. Bhikha, R.A.H. (2006). *4 Temperaments 6 Lifestyle Factors*, p. 46. Ibn Sina Institute of Tibb, South Africa.
4. Guyton & Hall. (2000). *Textbook of Medical Physiology*, 10th Ed. W. B. Saunders Company, New York, USA.
5. Al-Jawziyya, I.Q. *Medicine of the Prophet* (Trans. P. Johnstone), p. 158. The Islamic Texts Society, UK. 1998.
6. Al-Jauziyah, I.Q. *Healing with the Medicine of the Prophet* (Trans J.A.Rub), p. 76. Darussalam, Riyadh. 1999.
7. Therapeutics of Tibb (2009). pp. 57-62. Ibn Sina Institute of Tibb, South Africa.
8. Bhikha, R.A.H (2006). *4 Temperaments 6 Lifestyle Factors*, p. 18. Ibn Sina Institute of Tibb, South Africa.
9. Mabey, R. (1988). *The Complete New Herbal*. Penguin Books, South Africa.
10. Bhikha, R.A.H. (2006). *4 Temperaments 6 Lifestyle Factors*, p. 48. Ibn Sina Institute of Tibb, South Africa.
11. Ayad, A. (2008). *Healing, Body and Soul*, p. 68. International Islamic Publishing House, Riyadh, Saudi Arabia.
12. Sharp, T.J. (2001). *The Good Sleep Guide*, pp. 193-194. Penguin, South Africa.



Chapter 14

Cupping

1. Introduction

The art of cupping has been practiced from ancient times. It is depicted in a Persian carving as far back as 1500 years BCE. We know from surviving artifacts that it was applied by the Babylonians, the Egyptians during the time of the Pharaohs, and by ancient Chinese civilisations. Historic evidence shows that cupping was carried out using metal cups, bamboo tree sections or bulls' horn, from which the air was removed by vigorous sucking. Later, this technique gave way to the use of burning tapers or cotton to remove the enclosed air.

After a long period of neglect, cupping was revived in the Islamic Golden Age. The procedure was highly recommended by pioneers of Islamic Medicine such as Ibn Sīnā, al-Zahrāwī and al-Rāzī. These physicians demanded a more stringent rule of application and paid close attention to the practical aspects of the procedure, especially regarding timing, and the physical and mental condition of the patient. The Arabic word for cupping (*ḥijāmah*) is derived from the verb *ḥajama*, which means to suck out, and to restore to the previous condition. That is, cupping returned the patient to his or her original state of health¹.

2. What is Cupping?

Cupping is a therapy that stimulates certain points on the body by creating a vacuum in a suction cup. This leads to an increased flow of blood to the area. The cupping action draws impurities, toxins, pain and inflammation away from the deeper tissues and organs towards the skin where it can be eliminated. Cupping facilitates the healing process, and assists *physis* in restoring balance (homeostasis) to the body.

Cupping is part of the range of eliminative or hands-on therapies practiced in most traditional healing modalities including Chinese Medicine² as well as in African Traditional Medicine where it is known as *u ku-gcaba*. In *Tibb al-Nabawī* it is an important and effective treatment option.

3. Different types of cupping

There are three forms of cupping:

Dry Cupping: A vacuum is created in a glass/plastic cup, which is applied to the skin using a flame or a manual pump. The idea is to draw underlying blood and fluid to the surface of the skin, away from the area of inflammation. This method relieves congestion and also improves blood flow to the site being cupped, thereby facilitating the healing process³.

Wet Cupping: After the cups are applied, the skin just underneath the cup is cut very lightly several times so that a small amount of blood flows into the cup and can be removed. Wet Cupping is used to eliminate excess *humours* (body fluids) and toxins that cause disease. Between 20-100ml of blood may drain from the area⁴.

Sliding or Moving Cupping: This has an effect similar to certain massage techniques. The cups are moved along the surface of the skin while the suction of the skin is active, causing pulling of skin and muscle. This promotes local blood circulation, helps supply more oxygen to the tissues

and stimulates the nerves. This is the best method for promoting lymphatic drainage and can be used in the treatment of cellulite and water retention.

All three forms of cupping are well tolerated when practiced by an experienced practitioner. However, after cupping, especially wet and dry cupping, temporary discolouration of the skin (ecchymosis) occurs which may last for a few weeks. In the case of wet cupping, no scarring is left on the area that has been treated⁵.

4. Benefits of cupping

Cupping has been used to treat many illness conditions, but is also beneficial for healthy people who want to maintain their state of wellbeing⁶.

Of particular mention is the benefit that cupping promotes on the circulatory system. Many diseases and often painful conditions are due to poor blood circulation. Cupping encourages blood flow to these regions. In *dry* cupping, the toxins are brought to the underlying skin; in *wet* cupping, the toxins are brought out of the body, onto the surface of the skin. In this case the blood, which is diverted is replaced by healthy blood.

In both dry and wet forms of cupping, the partial vacuum causes the tissue below the suction cup to swell and become engorged with blood, as blood flow to this area increases. This enhanced blood flow under the cup draws impurities away from the nearby tissues and organs. The release of the vacuum redirects '*toxic*' blood that had pooled at the site to other areas of the body, thus allowing '*fresh*' blood to replace it, so restoring normal health. Localised and deep-tissue healing takes place. In addition, wet cupping provides an instant release of toxins and pressure. By doing so, cupping encourages and supports *physis* in maintaining harmony within the body.

Cupping also acts separately by stimulating the body's acupuncture points. In doing so, it leads to the release of *endorphins*. These are

natural mediators that act like *opioids* (substances similar to morphine), in relieving pain and counteracting stress. Another mechanism of pain relief is the stimulation of the pressure receptors in the brain created by the suction in the cup, which blocks pain receptors.

Cupping exerts a beneficial effect up to ten centimetres into the tissue it is applied to, so compelling them to release the toxins they hold. In addition, it stimulates local lymphatic circulation, so enhancing their primary effect, namely, the mobilisation and removal of toxic waste material.

5. Sunnah of cupping

There are numerous aḥādīth, which emphasises the use of cupping in both health promotion and in the treatment of illnesses.

“I did not pass by any group on the night of al-Isrā’ , unless they said to me, ‘Oh Muḥammad ﷺ tell your ummah to do cupping’”

Ibn Mājah

In keeping with the above ḥadīth, the Prophet ﷺ encouraged the use of cupping in the treatment of disease and more particularly in health maintenance. The health maintenance points included the back of the head, base of the neck, as well as between the shoulders, as indicated in the following three aḥādīth.

Reported by ‘Abdullāh Bin Bujaynah ؓ that Prophet Muḥammad ﷺ *“took Hijāmah on the centre of his head (yāfūkh) and he was in Iḥrām while his journey to Makkah”*⁸

The above cupping point is said to calm the mind and spirit and is therefore beneficial emotionally and spiritually. It is also used in the treatment of headaches, vertigo, mania and epilepsy⁹.

The relevant ḥadīth of cupping on the base of the neck is quoted below:

“Anas ibn Mālik ؓ reported that the Messenger ﷺ was treated with cupping (hijāmah) three times on the base of the neck”¹⁰

The above cupping site is also understood as being the acupuncture meridian in Chinese medicine. This meridian is said to be the meeting place of all yang meridians. It is indicated for seizures, asthma, pain in shoulders, neck pain and rigidity (flexion and extension), and any febrile disease. It also relieves excessive heat, stimulates the brain and nervous system and helps in the management of stress and emotional imbalances¹¹.

The ḥadīth below refers to cupping between the shoulder blades.

Abu Kabash al-Anmari ؓ narrates that Prophet Muḥammad ﷺ used to get himself cupped on his head and between the shoulders saying: *“Whoever lets out blood through hijāmah need never fear if he does not get himself treatment for any illness”¹²*

Cupping between the shoulders stimulates the autonomic nervous system points, which innervate the heart. The heart is considered one of the main organs of the body and is also the seat of the soul. Locally it also draws toxins away from the lungs.

When it comes to Sunnah cupping, which in essence is cupping for health maintenance and supporting *physis*, *Ṭibb al-Nabawī* recommends the 17th, 19th and 21st of the lunar cycle, as mentioned in the ḥadīth below.

“Those who have cupping on the 17th, 19th and 21st will be cured from every disease”¹³

Abū Dāwūd

It is interesting to note that the preferred dates for cupping comes after the recommended days of fasting which is on the 13th, 14th and 15th of the lunar cycle, when *physis* is most active in the concoction (preparation) of the humours for elimination.

“Cupping at the beginning of the month is not ideal as humours are not on the move...nor the end of the lunar month as the humours are less plentiful”¹⁴

In addition to the above days of cupping during the month, cupping for health maintenance is also recommended at the beginning of spring, when the body is emerging from the lethargy of winter, and the flow of body fluids is beginning to increase. Cupping at the beginning of autumn is also recommended as the levels of impurities and toxins in the body have reached their maximum levels¹⁵.

6. Conclusion

Cupping, or *hijāmah*, is a time-tested and effective Sunnah for assisting in the removal of toxins from the body. It is a safe, inexpensive and effective practice for the treatment of a range of ailments, and in the relief of intractable pain. It has been an important part of *Ṭibb al-Nabawī* for centuries, and is used in several traditional medical systems. The procedure has manifold actions, such as enhancing the immune system, boosting blood circulation, and improving lymphatic drainage. Cupping is usually well tolerated, and the adverse reactions are generally minor and pose no health threat if carried out properly. It can also be used for healthy people as a way of improving personal wellbeing.

References

1. Manz, Hedwig. (2009). *The Art of Cupping*, pp. 3-4. Thieme, Stuttgart, Germany.
2. Chirali, I. (2007). *Traditional Chinese Medicine Cupping Therapy*, pp. 1-3. Churchill Livingstone, China.
3. Bondok, S. (2010). *Cupping: The Great Missing Therapy*, p. 107. Darussalam, Cairo.
4. Ibn Sina Institute of Tibb, *Regimental Therapies in Tibb*, (2007). pp.17- 20. Johannesburg, South Africa.
5. Bondok, S. (2010). *Cupping: The Great Missing Therapy*, p. 116. Darussalam, Cairo.
6. *Ibid* pp. 28-29.
7. Tirmidhī, *ḥadīth* No. 2052.

8. *Hijama Cups: Sunna Points*. <<http://hijamacups.com/sunnah-points/>>
9. *Acupuncture*. <<http://www.acupuncture.com.au/education/acupoints/DU19.html>>
10. Abū Dāwūd, *ḥadīth* No. 3860.
11. *Islam Q & A*. <<http://theory.yinyanghouse.com/acupuncturepoints/gv14>>
12. Abū Dāwūd, *ḥadīth* No. 3859.
13. Abū Dāwūd, *ḥadīth* No. 4/4.
14. *Online at*: <<http://islamqa.info/en/3268>>
15. Bondok, S. (2010). *Cupping: The Great Missing Therapy*, p. 136. Darussalam, Cairo.



Chapter 15

Healthy practices

1. Introduction

A major route to personal wellness is via the *lifestyle factors* promoted by *Ṭibb al-Nabawī*. For Muslims, the Qurʾān and Sunnah of the Prophet ﷺ serve as the most important source for guidance regarding practices which are to be adopted in the believer's daily life, in order to promote healthy living. The Sunnah of the Prophet ﷺ which is a reliable record of the sayings, instructions, actions and approvals of the Prophet of Allah ﷺ is, for the Muslim, divinely sanctioned. The Prophet's life is no less than Allah's instruction for man's actions. A careful study of the prophetic traditions will reveal a number of health guidelines by which we can regulate our lives in order to live a healthy spiritual and physical life. Physical practices in Islam are intrinsically linked to the spiritual. It is, for example, only after ritual purity, through the teaching that '*cleanliness is half of faith*' that the believer enters into communion with Allah ﷻ through *ṣalāh*.

In this chapter we will highlight a few more common practices which are universally accepted as the hallmark of a believer's life and which should be part of his daily practice. When a Muslim introduces these health practices into his life, he does so not only because of their intrinsic benefit but more importantly because of his desire to implement the Sunnah and way of the Prophet Muḥammad ﷺ.

2. Importance of personal hygiene

Hygiene is defined as the ‘*science and art of preventing disease by deliberate, personal action.*’ The concept of hygiene goes back millennia, to the time of Hippocrates and beyond, and was incorporated into Islamic doctrine in its early days. In Islam, cleanliness of the body is the natural disposition (*fitrah*) of man in the promotion of good health. Hygienic practices which are in keeping with the Sunnah of the Prophet ﷺ include the trimming of nails, removing the hairs in the armpits and the groins, shortening the moustache, being circumcised and especially keeping the teeth clean¹.

The wisdom of these various hygienic practices has been reinforced by a myriad of scientific studies in recent times. For example, the practice of frequent and thorough hand-washing, advocated by the Prophet ﷺ, has been shown by modern clinical science to be the single most important personal activity to ward off illness arising from pathogens.

3. The cleansing practice of wuḍū’ and ghusl

Islam has provided clear directives on hygienic practices such as the ritual cleansing practice of *wuḍū’* and *ghusl*.

“O believers, when you stand for prayer, wash your face, and your hands up to the elbows, and wipe your heads, and wash your feet up to the ankles. If you are unclean, bathe and purify your bodies fully. But if you are ill or in the middle of travelling or ... you cannot find water, then take wholesome dust and wipe your faces and hands with that. For Allah ﷻ does not wish to burden you, rather He desires to purify you and to complete His blessing and favour upon you so that, perhaps, you may be grateful”²

Qur’ān 5:6

Medical science has proven that *wuḍū'* benefits the circulatory system, the immune system and the body's reaction to static electricity. A person who performs *wuḍū'* five times a day cleanses his nose from germs, dust and other airborne impurities. It was also confirmed that those who do not perform *wuḍū'* are more liable to a number of different kinds of germs³.

Other medical findings include:

- Washing the hands prevents the transmission of many contagious diseases.
- Washing the mouth removes food particles that could cause teeth and gum problems.
- Washing the nostrils removes germs trapped inside so they do not reach the respiratory system.
- Washing/massaging of the face, arms and feet invigorates the blood vessels, as well as the nerves and glands that are near the skin surface.
- *Masā'* of the head and neck is beneficial for the nervous system.

Wuḍū' also helps prevent skin cancer as the limbs washed during ablution are the parts of the body that are most prone to exposure to pollution. Ablution removes this pollution five times a day and therefore maintains a clean outer layer of the skin, which in turn assists optimum function properly. However, the worth and significance of *wuḍū'* does not end with these medical observations, as the sense of well-being and dignity derived from *wuḍū'* also contribute to the general health of the practising Muslim.

Wuḍū' and cleansing ablution is prescribed at various times and occasions. Upon awakening, before prayer, before recital of the Qur'ān, and after sexual intercourse, to name a few. When a person performs *wuḍū'* and is observant of all the Sunnah requirements, he feels invigorated with a sense of cleanliness that could promote overall good health.

4. Ṭibb al-Nabawī on Oral hygiene

Oral hygiene is immensely important for a number of reasons. Food debris that remains lodged in the spaces between teeth and gums will decompose, and this will give rise to several problems. First, the teeth will decay faster, causing toothache or, even worse, life-threatening tooth abscesses. Second, the breath will begin to smell offensively. Third, the gums will become damaged and inflamed, leading to serious health issues. Fourth, poor mouth hygiene is linked to serious heart problems. Finally, a build-up of dental plaque and tartar can occur, which makes the mouth feel uncomfortable, appear unsightly and, reduce self-esteem.

Ṭibb al-Nabawī strongly advocates scrupulous care of the mouth teeth and gums. One way is by using *miswāk*. This is a toothpick obtained from the ‘toothbrush tree’, or *Salvadora persica* which contains a number of compounds which act against pathogens, especially bacteria, present in the oral cavity.

Using *miswāk* regularly also strengthens the tissues of the gums, so delaying gum shrinkage which often accompanies the ageing process. Overall, the deterioration of teeth and the occurrence of toothache and other ailments of the mouth is much reduced. *Miswāk* compares favourably with typical tooth brushing and flossing as an oral hygiene practice. It has an important advantage in that it does not require a source of clean water for its use.

Siwāk and *miswāk* used for cleaning the teeth also have an aspect pertaining to worship. According to Imam Abu Hanīfa, using the *miswāk* is a Sunnah of the *wudū’*, whereas according to Imam Shāfi‘ī, it is a Sunnah of the *ṣalāh* itself. The importance of the use of *miswāk* is emphasized in the following ḥadīth:

“If it would not be difficult for my ummah, I would order them to use miswāk before every salāh”⁴

In another ḥadīth narrated by ‘Āishah ﷺ, the Prophet ﷺ stated:

“The merit of the ṣalāh performed after using a miswāk is seventy times of the salāh performed without using a miswāk”⁵

All these Prophetic traditions point to the fact that using the *miswāk* is not limited to *ṣalāh* and *wuḍū’* but is also prescribed for general oral hygiene. Scholars have identified, among others, five situations where using of the *miswāk* is recommended. These are:

- a) When the teeth become yellow;
- b) When the smell of the mouth changes;
- c) When someone wakes up;
- d) When someone stands up for prayer;
- e) While performing *wuḍū’*, and
- f) Upon entering the presence of company⁶.

The above emphasizes the need to practice this neglected Sunnah which carries such immense spiritual and medicinal benefit. In the absence of the *miswāk*, the teeth should be cleansed with a toothbrush and toothpaste. As a last resort the teeth may be rubbed by the finger.

“Whether at home or travelling The Prophet ﷺ always had five items with him; a mirror, a surma (antimony) container, a comb, hair-oil, and a miswāk”⁷

5. Caring for the eyes

The eyes are very sensitive and vulnerable organs, often acclimatising to harsh external conditions such as wind, dust, heat and dryness. Unlike living at the time of the Prophet ﷺ, we are also subjected to pollution from smoking, fire, electrical equipment and motor engines. In addition, the eyes themselves are more prone than other organs to infection from air-borne pathogens and inflammation from allergens. Also the structures of the eye

deteriorate rapidly with ageing, and the hormone changes that go with it, making them more vulnerable.

A ḥadīth relevant to preservation of healthy eyes is the application of *kuḥl*, usually made from antimony sulphide, also known as collyrium (in Arabic as *ithmid*).

In a narration from Ibn ‘Abbās رضي الله عنه, it is reported:

“Rasūlullah ﷺ had a small container for keeping collyrium, from which he applied in each eye three times before sleeping ⁸”

Abul Rub in his translation of Ibn Qayyim Al-Jawziyyah’s ‘*Medicine of the Prophet*’ describes *kuḥl* as being:

“...beneficial to the eye in that it strengthens it (the eye) and its nerves ⁹”

Interestingly a Sunnah that most of us practice inadvertently - is gently rubbing our eyes upon awakening. However, a practice that will be beneficial for the eyes and can easily be carried out is to focus our eyes at specific places for each of the *ṣalāh* postures. This provides one with exercises of the eyes which strengthen the eye muscles. Looking at the nose in *sajdah* and then at the lap in the *qa’dah* (sitting position), which follows, for example exercises the eye muscles. In addition to the caring of the eyes, focus will improve our concentration during *ṣalāh* with obvious spiritual benefits.

6. The Use of ‘Iṭar (Essential Oils)

A pleasant ‘iṭar (perfume) is an established Sunnah practice of the Prophet Muḥammad ﷺ.

“... perfumes are the most suitable and favourable remedy and substance for the soul. There is a close connection between the soul and scented

*perfumes. Perfume helps the brain ... and brings comfort to the heart and soul. This is why perfumes were among the dearest ... in this world to the heart of the Prophet ﷺ*¹⁰

Al-Jawziyyah

There is a difference between commercial perfumes and *īṭar*. Alcohol is the common solvent used in most perfumes. Its high concentration causes the first impression of the perfume to be overwhelming to human senses, but it also soon evaporates and loses strength. Given its natural derivation and extraction process, *īṭar* lasts a long time, with body heat intensifying its fragrance. Another major difference between synthetic perfumes and *īṭar* is that the oil-based *īṭar* may be worn directly on your body. Common practice includes the inside of the wrist, behind the ears, the inside of elbow joints, back of the neck and a few other parts of your anatomy are directly dabbed with *īṭar*.

Only a small quantity is enough to fragrance on the body. A few drops may also be added to water and used with aromatic vapour lamps. Certain *īṭars*, such as those derived from flowers, are often used with cold drinks such as milk, for enhanced flavour and aroma.

7. *īṭar* and temperament

As all *īṭars* have certain qualities, one should use a fragrance appropriate to the season and in accordance with one's temperament. *īṭars* such as musk, amber, saffron and oud have heating qualities whereas rose, jasmine and violet have cooling qualities. Based on the qualities of the four temperamental types we can thus deduce that cooling scents will be appropriate for sanguinous and bilious persons, whereas the heating *īṭars* will be better suited to the phlegmatic and the melancholic temperaments. This is an important consideration that people are generally unmindful of when choosing a scent. An *īṭar* with a strong heating quality could cause headaches in an individual inclined to heat, such as those with

a bilious or sanguinous temperament. It is therefore advised to choose an *'itar* that will have a positive effect on your temperament.

8. General hygienic practices

Listed below are a few general hygienic practices:

General: It is advisable to carry out ablutions (*wuḍū'*) and when necessary, ritual baths, before prayers, as this limits the spread of infection. Another practice is to avoid extremely close contact with strangers or in places of congregation.

Hand washing: If done regularly and systematically, this is, as mentioned earlier, perhaps the single most important hygiene measure a person can undertake. It decreases susceptibility to illness, and prevents the spread of pathogens. Washing before eating, after going to the toilet, playing with animals, after coughing and sneezing, and after handling raw meat is highly encouraged. The Sunnah is that one should wash the hands after visiting the toilet, before meals and whenever necessary.

Finger nails: Trimming these to the appropriate length will not only improve appearance and self-esteem, but will prevent pathogen transmission, especially if the person is involved in food preparation or distribution.

Toe nails: Keeping these clean, trim and undamaged lowers the risk of fungal infections, which can seriously affect walking and other activities. The Sunnah practice is that unwanted nails are paired on a Friday.

Hair: Washing and brushing hair is important. Not only does it approve appearance, so enhancing self-esteem, it prevents scalp disorders like dandruff and dermatitis. There are clear directives in the Sunnah regarding the correct grooming and caring of the hair. Men are required to keep well-kept beards. Hair is to be oiled and groomed. Unwanted hair of the

armpits and pubic region are to be removed thus promoting cleanliness and wellbeing.

Bathing: These are recommended in *Ṭibb al-Nabawī* after sexual intimacy, menstruation and childbirth. Muslims take a Sunnah bath on a Friday. The method of bathing is that one will begin by *istinjā'* (washing the private parts) and thereafter take *wuḍū'*, being particular to pass water deep into the throat and the nasal cavity. One will then wash the entire head. Next, one will pass water over the right side of the body thrice and then do the same for the left side. The correct way to do this is to massage the entire body with ones hands as the water passes over it. This practice ensures that the body is thoroughly cleansed and the circulation of the blood is improved.

The above general guidelines together with the ḥadīth narrated by Abū Hurayrah رضي الله عنه, highlights the importance of healthy practices in *Ṭibb al-Nabawī* that cleanliness and taking care of one's appearance is half of faith.

“Five things constitute the Fitrah (natural way of life/habits of the messengers), circumcision, shaving the public hair, trimming the moustache, clipping the nails, and removing the hair of the armpits”¹¹

9. Conclusion

Personal hygiene is an important emphasis in the Sunnah and has been taken up as a pillar of *Ṭibb al-Nabawī*. Regular attention to personal hygiene is recognised as being a vital component for maintaining good physical and mental health, both in the person and the community. Although it does not have the same obvious impact on health as does lifestyle changes when dealing with chronic disorders, it does nonetheless help create a sense of well-being, enhances self-esteem and most importantly serves to reduce infection. Personal hygiene is a form of empowerment that was recognised by the Prophet ﷺ, and the practice thereof is actively encouraged as a means of health promotion. The best practice for one who desires good

health (and blessings in this world and the hereafter) would be to seek out the actions of the beloved Prophet Muḥammad ﷺ and actualise this in one's life.

References

1. Muslim, *Ṭahārah*, 56.
2. *al-Mā'idah* verse 6.
3. Online at: <<http://www.nabulsi.com/english-nab/s.edicalwodo.php>>
4. Bukhāri, *Jumu'ah ḥadīth* No.8.
5. Musnad Aḥmad, *ḥadīth* No. 6/272.
6. Ibn 'Abidīn, (1984). *Rad al- Mukhtār*, Istanbul, I/116; al-Fatāwa al- Hindiyyah, Beirut 1400/1980, I7.
7. Jāmi' al-Saghīr, *ḥadīth* No. 6906.
8. At-Tirmidhī, *Shamā'il Tirmidhī*, (48) *ḥadīth* Number 1.(Trans. Muhammad bin Abdurrahman Ebrahim) p. 52. South Africa, Ilmi Publications. 1990.
9. Al-Jauziyah, I.Q. *Healing with the medicine of the Prophet*, (Trans J.A. Rub), p. 251. KSA: Darussalam. 1999.
10. *Ibid*, p. 246.
11. Muslim *ḥadīth* No. 257.



Chapter 16

Medication

1. Introduction

As in all medical systems, *Ṭibb al-Nabawī* advocates the use of medication when illnesses develop. However, prophetic medicine provides guidelines which limit us to medication that is in keeping with our integral beliefs, the Qurʾān and Sunnah.

Natural medication plays an important role in *Ṭibb al-Nabawī*. Plants, in particular, are significant as they not only provide mankind with food, clothing, shelter and cosmetics, but also supply us with medicinal herbs, which generously provide treatment for many of the ailments that afflict us. The use of plants for healing is probably the oldest known form of medicine¹.

Records of herbal medicine go way back to ancient Egypt and even earlier. People have used plants, which were not part of their normal food, as medicines for thousands of years, and over time built up a rich heritage of knowledge that became part of folklore, tradition and culture. Herb-based remedies are an essential part of traditional African and Chinese medicine, and of course *Ṭibb al-Nabawī*. Today there at least fifty thousand different herbal medicines in use globally.

Many herbal medicines have been analysed scientifically, and their active ingredients isolated, purified, modified and marketed as conventional drugs.

2. Where did the knowledge of medicinal plants come from?

Our knowledge of how herbs benefit people with maladies and illnesses, or how one herb will be a tonic, and another help a person sleep, comes from several sources².

One is by observation of animals which will often consume different herbs to, for example, encourage vomiting or remove intestinal worms. Also, observing someone who has inadvertently (or deliberately) consumed a certain herb, and noting the effects, will tell a lot about the herb. This is the empirical route to obtaining information, and is often tied into intuition, or gut feeling, about the benefits or otherwise of particular herbs.

Another is based on collective experience over the centuries. The effect of a plant or herb, or a part of it, such as the leaf, stem, flower, etc. studied over many years provides a huge body of information on specific herbs grown in a particular area. This has led to the creation of numerous *materia medica* or catalogues describing, often in exquisite detail, the nature of a herb or medicinal plant, the part used, the extractive process adopted, and the dose employed for a particular ailment³.

Tibb al-Nabawī considers that there is an additional source of information on herbs – divine revelation. Over the centuries, many herbal pharmacopeia have been produced, describing the physical characteristics and chemical properties of natural substances used for a wide range of ailments. Currently there are more than fifty thousand herbal or natural ingredients which are known to have a wide range of pharmacological actions, and these are often used to treat various illness conditions. An example of this is garlic (*allium sativum*), which is known to have many pharmacological actions, including anti-inflammatory, anti-spasmodic, carminative, expectorant, aphrodisiac, disinfectant and anti-microbial activities, as well as blood pressure and cholesterol lowering properties. Where did all this information come from?

Tibb al-Nabawī believes this knowledge was divinely inspired as mentioned in As-Suyuti's 'Medicine of the Prophet' :

“Traditionally Seth, son of Ādam ﷺ was the first to make knowledge of medicine known, Idrīs ﷺ evolved the science of Philosophy and medicine. more likely that (knowledge of medicine) was revealed by Allah ﷻ to His people. This much is certain, that guess-work and experience alone are not sufficient ⁴”

Also:

“Sulaymān ﷺ acquired knowledge of plants as they grew in front of him.... what is your name, what are you for.... cultivate the species... and record it ⁵”

To elaborate on the fact that knowledge of the use of medication could also have come from revelation or inspiration, we can look at the example of salicylic acid.

Salicylic acid, which is derived from the bark of the willow tree, was known to provide relief from pain, fever and inflammation for many centuries. This active ingredient was isolated over a hundred years ago, and changed chemically to acetyl salicylic acid, better known as '*aspirin*'. It has been the mainstay of pain relief and fever alleviation for many years.

In the last twenty years or so, aspirin has been found to prevent blood clotting, as it is now used as preventative treatment of disorders caused by blood clots, such as heart attack and some strokes. In addition, aspirin is now being investigated as a substance which may reduce the development of colon cancer. These additional uses of aspirin only became apparent after extensive research and using the latest available technology, which took more than twenty years⁶.

This begs the question; how does one explain the knowledge in the use of more than fifty thousand plants with respect to the pharmacological action of the numerous active ingredients that exist in each plant? Surely this information must have been divinely inspired.

3. History of herbal/natural medication

Schools of herbalism were in existence in the Egypt of the pharaohs, and much of the learning was transferred to the ancient Greeks. Hippocrates was allegedly trained by Egyptian tutors, and he referred to several hundred plants used to relieve maladies. Galen, another major figure in *Tibb*, was an enthusiast for herbal remedies, and introduced the first method for grading a plant's therapeutic effectiveness⁷.

This development of herbal medication that was accumulated from different parts of the world was rekindled, and improved upon during the Golden Age of Islamic Civilisation by medical pioneers such as Ibn Sīnā, al-Birūni, al-Zahrāwi, al-Rāzi. Much of this knowledge found its way back to Europe during the renaissance period.

Whilst there has been a decline in herbal medicine over the past few decades because of the development of modern conventional drugs, the future of herbal medicine is assured, as Nature has provided us with a myriad of plants most, if not all, of which have some form of biological activity, desirable or otherwise. At the same time, the research and development of new-to-nature conventional drugs has begun to dry up. In fact, there is a major resurgence of interest in the use of herbal medicines, especially in long-term treatment of chronic disorders such as diabetes. This is partly due to dissatisfaction with the extensive side-effects associated with conventional drugs.

4. Development of current conventional drugs

The '*Age of Drugs*' began two or more centuries ago when active ingredients in plants were isolated and purified scientifically. This coincided with increased technological advances and the formation of the synthetic chemical and dyestuff industries.

By the dawn of the 20th century, chemical medicine began to dominate, and continues to this day in the form of conventional or modern medicine. At the same time, advances in pharmacology lead to the isolation of active substances from natural sources: plant (e.g. vitamins, quinine, morphine and reserpine); animal (e.g. insulin, thyroxine and growth hormone); and mineral (e.g. calcium, magnesium and iron). In time many of the organic products were themselves produced completely by chemical synthesis.

The introduction of conventional medication over the last fifty years or so has moved hand in hand with increasing knowledge of the way in which drugs act. Receptor theory was the impetus to development of numerous drugs, which either stimulate or block these receptors as a prelude to pharmacological action. Receptors are distinct protein structures on the surface of cells that accept drugs or naturally occurring agents such as hormones. Different tissues and organs have different types of receptors, in different proportions. Unfortunately, the recently developed conventional drugs do not act specifically on selective cells/tissues, and invariably affect others in which these receptors are located. This results in the manifestation of a wide range of unwanted side effects.

Whilst conventional medication developed over the past fifty years has proved beneficial in many of the acute conditions, unfortunately the side effects and adverse drug reactions, especially for long-term use in chronic or recurring conditions is of major concern.

5. Safety of natural vs conventional medication

To illustrate how side effects are caused in conventional medicine, let us look at beta-blockers. The beta-blockers adrenergic receptors are present in many tissues – heart muscle and coronary blood vessels, the lungs, the blood vessels' endothelial tissue, adipose tissue, and certain anatomical structures within the brain. This broad distribution of beta-receptors allows a commonly used drug, the beta blocker, to be used therapeutically in conditions such as angina and hypertension.

This could prove to be beneficial, however, as mentioned above, if the drugs only act upon the '*target tissue*' receptors (on the heart muscles). However, they also act indiscriminately on a number of other tissues which also contain the receptors. This leads to unwanted pharmacological responses, described as '*collateral damage*'⁸.

The beta-blocker may act effectively as required on the heart to reduce the heart rate, but it also acts on other beta-receptors in different organs and tissues. This gives rise to poor tolerance or side effects, such as heart failure, abnormally slow heart rate (*bradycardia*), heart block, hypotension, muscular fatigue, bronchospasm, intermittent claudication, cold extremities, disturbances in the digestive system, unwanted effects on the nervous system, blood disorders (*dyscrasias*), skin reactions, psoriasis, alopecia, dry eyes and visual disturbances, impotence, and the masking of the symptoms of hypoglycaemia. The undisputed benefits of these drugs therefore come at a price; and this price may be an unreasonably heavy one to pay.

In addition, a certain drug may affect other types of receptors. An alpha-receptor blocker, for example, may also act on acetylcholine receptors. This is often the reason that patients suffer from a dry mouth and blurred vision when taking one or other cough and cold remedies.

Herbal medicines have a more complex way of working than do most conventional drugs. Individual active substances in herbs, such as alkaloids, have similar mechanisms of action to the conventional drugs, and act on specific active sites. However, herbal products contain many other active substances, such as adaptogens, immune system boosters and anti-oxidants, which confer different and distinct effects. They can make the product safer to use, reducing the risk of side effects. Herbal medicines act to restore imbalances in qualities, strengthen the body's vital organs, and ultimately bring inner harmony back to the body. They encourage and support the patient's *physis*, often by stimulating the immune system⁹.

6. Prescribing medication - Ṭibb al-Nabawī perspective

Ibn Qayyim in his *'Medicine of the Prophet'* provides guidelines on prescribing medication:

“No remedy must be used if it seems to contradict the Islamic law. Qur’ān and ḥadīth together give guidance which must always be preferred to secular [conventional] medicine; this latter can be resorted to, and indeed is recommended, once it is seen in accord with Islamic teachings”¹⁰

The above quotation bears testimony to the openness of Muslim physicians to incorporate any medication or therapeutic intervention irrespective of which healing modality it comes from, as long as it is in keeping with the Qur’ān and Sunnah.

Ṭibb al-Nabawī details the prescribing of medication on a scientific basis in that medication is classified according to its potency into different categories, similar to current scheduling that exists in conventional, allopathic medication. As-Suyuti’s *'Medicine of the Prophet'* describes different categories of medication which includes: a) medicines with no obvious effect on the body – foods with medicinal properties, b) medicines that have some effect – low potency medicine, c) medicines that can be potentially harmful – potent medicine and d) medicines that can be life threatening – very potent medicine¹¹.

A unique aspect in *Ṭibb al-Nabawī* is that, unlike conventional (allopathic) medicine, medication is not prescribed generically, as in a one size fits all approach. The prescription takes into account the temperament of the patient, the quality of the medication (whether it is hot or cold), and the qualities associated with the illness condition as quoted below:

“A medicine to combat a cold disease should predominate in warmth; for a mainly moist disease, there should be a dry quality, and so on... the

*disease with its characteristic qualities can be matched up with the appropriate drug to combat it*¹²

Al-Jawziyyah

There is a general rule in *Tibb al-Nabawī* that the temperament (or qualitative nature) of the medication prescribed is opposite to the qualities associated with the ailment. In fact the term ‘*allopathic medicine*’ (*allo* - opposite) originates from this understanding. The ingredients in *Tibb al-Nabawī* are therefore viewed in the context of not only pharmacological action but also the qualities associated with the illness being treated¹³.

7. Conclusion

The use of herbal medicines is an important and significant aspect of *Tibb al-Nabawī* treatment. The correct use of medication helps a patient when dealing with a particular ailment. In addition, herbal medicine can act as a tonic to prevent, or delay, the onset of disease, and to aid recovery from illness. Furthermore, herbal products can be used in conjunction with conventional medicine, especially in the treatment of chronic, recurring or intractable disorders. Conventional drugs are effective in relieving the patient’s symptoms, whilst the herbal remedy will deal with the underlying disorder. The herbal products used in *Tibb al-Nabawī* tend to be better tolerated than conventional drugs, being less prone to side effects and long-term metabolic abnormalities. In addition, they contain other active agents, which assist the principal active substance in regulating the end effect.

References

1. Bousset P, Bonnemann H, and Bove, F. (1982). *The History of Pharmacy*. Asklepios, Paris, France.
2. Mabey, R. (1988). *The Complete New Herbal*°. Penguin Books, South Africa.
3. Bousset, P *et al. Ibid.*
4. As-Suyuti, J.A. *Medicine of the Prophet*, (Trans) p. 130. Ta-Ha Publishers Ltd, London, UK. 1994.

5. Bousset P, Bonnemann H, and Bove F. (1982). *The History of Pharmacy*, p. 130. Asklepios, Paris, France.
6. Le Fanu, J. (2011). *The Rise and Fall of Modern Medicine*, p. 380. Abacus, UK.
7. Ody, P. (1993). *The Herb Society's Complete Medicinal Herbal*. Human & Rousseau Cape Town, South Africa.
8. Le Fanu, J. (2011). *The Rise and Fall of Modern Medicine*, p. 152. Abacus, UK.
9. Lorna R Vanderhaeghe and Patrick, J.B. (2000). *The Immune System Cure*, p. 276. Kensington Publishing Corp. USA.
10. Al-Jawziyya, I.Q. *Medicine of the Prophet*; (Trans P. Johnstone) p.xxiv The Islamic Texts Society, UK. 1998.
11. As-Suyuti, J.A. *Medicine of the Prophet*. (Trans) p. 33. Ta-Ha Publishers Ltd, London, UK. 1994.
12. Al-Jawziyya, I.Q. *Medicine of the Prophet*; (Trans P. Johnstone) p. 25. The Islamic Texts Society, UK. 1998.
13. Bhikha R.A.H. and Saville J. (2014). *Healing with Tibb*, p. 22. Ibn Sina Institute of Tibb, South Africa.



Chapter 17

Ethics within the context of Ṭibb al-Nabawī

1. Introduction

Simply put, medical ethics define what is right, and what is wrong in the general practice of medicine. It is the collection of principles which apply moral values to judgements made on medical and surgical practice. The practice of ethical medicine has always been a critically important aspect of medical practice, not only in the time of the Prophet ﷺ and earlier, but perhaps more so in today's climate, when tremendous changes in invasive diagnosis, treatment and follow-up are happening. Medical ethics is the expression of moral law in connection with the treatment and prevention of disease, any procedures which prevent disease, and processes aiding recuperation from disease. It is a major safeguard against dubious medical and surgical practice, and procedures which confuse and delude patients. *Ṭibb al-Nabawī* holds physicians accountable for their actions, and regards them in many ways as custodians of the patient's body, mind and the soul.

Classical works of *Ṭibb al-Nabawī* deal with a range of ethical issues. These range from medical treatment using the *Ḥarām* (unlawful), the doctor's responsibility to discussions on the ethic and etiquette to be followed by the practitioner.

2. Medical ethics

There are three basic facets to medical ethics¹. The first relates to the physician's responsibility to patients. The second concerns the physician's responsibility to him or herself. And the third focuses on the patient's responsibility to the physician.

3. The Hippocratic Oath

The best known statement of medical ethics, the '*Hippocratic Oath*', dates back to the time of Hippocrates, who lived in Ancient Greece about 2500 years ago. He is widely regarded as the '*Father of Medicine*' mainly because he, and his followers, brought medicine out of the realm of superstition, magic and witchcraft and into the sphere of modern, rational science. From this time, medicine was organised into a profession, with healers answering the call to this vocation. Regulations for training, practice and accountability became the norm, with the Oath occupying a central and enduring position.

There are many aspects of the Oath which still apply today. Hippocrates and his school recognised medicine as both an art and a science. His best known idiom was that '*the physician should do no harm*'. He stated that medical experience should be shared, and lessons from it applied in the future. The avoidance of both under- and over-treatment was advised, as these were not in the best interest of either healer or patient. Empathy for the patient was highly regarded, as this encouraged healing, especially in matters of life and death. He considered that it is better to know more about the patient rather than the disease affecting him or her. If confronted by an unusual case, then ignorance was not seen as a failing, but something to be discussed and solved with fellow physicians. Finally, he affirmed that prevention is better than cure.

Below is an extract from As-Suyuti's '*Medicine of the Prophet*' referring to the Hippocratic Oath and the responsibility of the practitioner:

"..... He (the physician) must not go in search of excess, idling away his time in pleasure, sleep, eating and drinking or play, but he must be eager to treat the poor and the people who have nothing. He must be gentle in his speech, kind with his words and near to God...²"

As-Suyuti

4. The physician-patient relationship

This is a complex area of personal interaction, but it is so important that it is central to the practice of healing. Medical ethics is a key aspect of this relationship. Physicians through the ages have been taught, ideally, to relate to their patients in a professional manner, respect their privacy, avoid damaging their dignity, and listen to their opinions³. To start with, the doctor or healer must always act in the '*best interest*' of the patient. This is based on true trust for the patient, and deep respect for his or her dignity. This is particularly important when treating a patient to relieve chronic pain, administering chemotherapy for cancer, and dealing with sexually transmitted diseases. If the healer is inclined to experiment with a new procedure or medication, then it is important for the patient to be aware of this, and give (or not give) permission. The physician should always remain frank and open with the patient, and listen respectfully to his or her concerns. Patronising attitudes or '*talking down*' to the patient should be avoided.

An important part of the physician-patient relationship is the need for confidentiality. The nature of the patient's ailment, especially if sensitive, embarrassing or alarming to the patient, the family and friends, remains confidential to all intents and purposes, and can only be disclosed with the express permission of the patient, under guidance from the healer. What is said in the consultation room stays in the room.

Another aspect refers to honesty of the doctor in relation to terminal illness, the prognosis for cancer, the nature and severity of drug side effects, and the likely outcome of drug treatment. Unduly raising patient expectations is not ethical, and can lead to major complications further down the line. If the healer is applying a technique or medicine which is not completely in the mainstream of therapy, or is part of an experimental procedure, then this has to be conveyed to, and agreed by, the patient.

An ethical malpractice is over-servicing of the patient's ailment. Although this is hugely important these days, the practice goes back to previous times too. This refers to the practice of burdening the patient with unnecessary tests, diagnostic investigations and even needless treatment. Whatever the treatment advocated by the physician, the patient should be fully informed of the procedure, what the likely outcome is, and the dangers if any associated with it. Once the patient is fully cognisant of these, then informed consent is most likely forthcoming.

The patient in turn has several ethical or moral duties in relationship to the physician. He or she must be completely honest and transparent when it comes to personal, family and medical history, the nature of the disease and the description of the symptoms. He or she is also obliged to adhere strictly to instruction from the physician, on matters of medicines prescribed lifestyle changes advised, and follow-up. Finally, just reward or payment for services rendered has to be offered in good time.

Finally, a patient has a right to refuse his or her treatment, and if so motivated seek a second opinion. This is an important aspect of the person's empowerment regarding his or her health⁴.

5. Ṭibb al-Nabawī and ethics

Muslim tradition regards human life as a glorious gift of Allah ﷻ, and should be both preserved and revered. From this it follows that saving life is a major obligation for practitioners of the healing arts. Conversely, the unjustified taking of a human life is considered murder, and is strictly prohibited.

Tibb al-Nabawī has laid down comprehensive guidelines on a medical practitioner's role and responsibility regarding competency and accountability⁵. The key feature influencing the doctor-patient relationship is that healing comes from Allah ﷻ, and that the doctor is merely the helper in the healing process. In addition, all medical procedures and medications administered must actively support the patient's physis, so any *non-ḥarām* forms of treatment are considered unethical. *Tibb al-Nabawī* is not silent on the nature of the cure. Medical treatment using *ḥarām* (unlawful) substances, such as wine or intoxicants, is prohibited by Islamic law. This is emphasized in the following two aḥādīth: Ibn Mas'ūd is quoted in this regard concerning intoxicants:

*"Allah ﷻ has not put your healing in that which He has forbidden to you"*⁶

When Wa'il al-Haḍramī ؓ explained to the Prophet ﷺ that the only reason he and his people fermented wine was to use it as a remedy, the Prophet ﷺ retorted that: *"It is not a remedy; rather it is a disease"*⁷

Tibb al-Nabawī strongly supports a mature, adult-adult relationship between patient and healer, rather than the parent-child, top-down approach that modern medicine often adopts. The patient's opinion on the disorder is very important, as it can offer clues to its nature and progress. The patient in many cases has endured the ailment for some time and probably seen other healers, so he or she has a good idea on the nature and even causes of the disorder. Listening to the patient will not only help towards an accurate diagnosis of the condition, but is ethically respectful and desirable. Empathy and a virtuous bed-side manner is integral to the healing process.

*"... Positive sentiments will invigorate the patient's soul, strengthen his constitution, revive his strength... and will have an effect in curing his illness"*⁸

Al-Jawziyyah

The practitioner must also bear in mind the dignity of the patient. This applies to physical examination, especially if the patient is of the opposite sex. The exalted status of the medical profession must always be upheld.

Tibb al-Nabawī requires that Muslim physicians are expected to combine scientific acumen and high moral qualities⁹. The physician must be a role model as well as a healer.

Tibb al-Nabawī treatment largely revolves around changes to an imprudent or unbalanced lifestyle. Any advice in this field proffered by the physician has to be ethical in both form and content. Advice on exercise, for example, should take the patient's background, temperament and age into consideration. This will reduce the likelihood of a mishap due to over-exertion, and maintain the respect and dignity of the patient.

Another ethical point to *Tibb al-Nabawī* therapy is when dealing with a patient's disorder which has a strong obvious spiritual aspect. The physician needs to carefully assess this, and the degree to which assistance or guidance can be applied.

6. Conclusion

Medical ethics is a term used to describe collectively the moral values and judgments on the practice of medicine. It applies to the relationship between the doctor and the patient, and vice-versa, and the professional and social behaviour of the doctor, in both private and public settings. A major axiom of medical ethics is that the doctor must always act in the best interests of the patient, and avoid harming him or her. Mutual respect is the key feature of the doctor/patient interaction, based upon dignity, truthfulness and honesty. Treatment is carried out after the patient offers consent, or refuses, based on accurate information on the nature and consequences of the therapy. *Tibb al-Nabawī* is based on medical ethics as embedded in the Hippocratic Oath and further developed by Galen, and lead to Islamic medical ethics, which provided the basis for the development of the topic in today's world. The provision of healthcare, in light of Islamic teachings, is considered to

be a *farḍ al-kifāyah* (i.e. if a few uphold this obligation, then the community as a whole is absolved from upholding it).

It is therefore the duty of the community to ensure that patients are able to access healthcare.

The fact that the provision of medical care by Muslim practitioners is a legal obligation in Islam, renders the vocation an *'ibādah* and is more than just a career in which to make a living. This noble and dignified occupation truly carries with it obligations and responsibilities.

References

1. *The Conduct of the Physician*. (1985). (Trans. Ishāq ibn 'Alī Al-Ruhāwī), vol. 18, p. 36. Publications of the Institute for the History of Arabic-Islamic Science, Frankfurt-am-Main, Germany.
2. As-Suyuti, J.A. *Medicine of the Prophet*. (Trans) p. 30. Ta-Ha Publishers Ltd, London, UK. 1994.
3. Atighetchi, D. (2007). *Islamic Bioethics: Problems and Perspectives*, pp. 13-29. Springer, Netherlands.
4. *Medical Ethics*. Online at: <http://en.wikipedia.org/wiki/Medical_ethics>
5. *Islamic Bioethics*. Online at: <http://en.wikipedia.org/wiki/Islamic_bioethics>
6. Bukhāri *ḥadīth* No. 110/7; al-Bayhaqi *ḥadīth* No. 19679.
7. Ibn Mājah *ḥadīth* No. 3500.
8. Al-Jawziyya, I.Q. *Medicine of the Prophet*; (Trans P. Johnstone). p. 88. The Islamic Texts Society, UK. 1998.
9. Ebrahim M., Misha'ī A., Fadel H., Nordin M. (2013) *Muslims Physicians Ethics, Obligations and Liability*. FIMA year book.



Chapter 18

Afflictions from the unseen

1. Introduction

The existence of witchcraft and the malevolent use of sorcery have been accepted by most societies for most of recorded history. The agents of this unseen world are different according to the culture they exist in, whether witches, spirits, or *jinn*. Although Muslims believe in the reality of the non-physical world, the practice of sorcery is strongly condemned, and perpetrators are often punished harshly¹. For Muslims, the possibility of the *evil eye* causing physical or mental harm to individual people is accepted, and measures to alleviate or neutralise this malign power featured prominently in healing.

Even though serious attempts have been made to eradicate the practice of sorcery over the years, especially in the developed countries, its practice continues. *Ṭibb al-Nabawī* holds that *siḥr* (black magic) is something that definitely exists and causes harm to people. The Prophet ﷺ was also afflicted with *siḥr*. A Jew, by the name of Labīd ibn ʿĀṣim who outwardly posed to be a believer, but was in actual fact a hypocrite (*munāfiq*) carried out black magic on the Prophet ﷺ. It is for this reason that classical works of *Ṭibb al-Nabawī* such as that of As-Suyuti, Al-Jawziyyah and others have a section that deals with this subject.

2. Humans, Angels and Jinn

In Islamic theology, there are three basic types of creature who can perceive, feel emotions and exhibit consciousness. These are human beings, angels and the *jinn*. Belief in angels is one of the six Articles of Faith in Islam. Angels, who are made of pure light, do not have free will, but act only at the behest of Allah ﷻ. The *jinn*, or *genie*, inhabit the unseen world. They can be intrinsically good, or evil, or neutral in their attitude to human beings. They are often referred to in the Qurʾān, where they are described as being composed of fire, although they do possess physical mass. Unlike the angels, they possess free will, a feature they share with humans. A Tradition of the Prophet Muḥammad ﷺ reads:

“Allah ﷻ created the angels from light, created the jinn from the pure flame of fire, and Ādam ﷺ from that which was described to you, that is, the clay”

Jinn can travel at high speed over long distances. They belong to their own communities which are located in remote areas of the world, like mountains and deserts. They are not directly visible to humans, and *vice-versa*.

“Yet, they join the jinn as partners in worship with Allah ﷻ, though He has created them (the jinn), and they attribute falsely without knowledge sons and daughters to Him... There are among us some that are righteous and some to the contrary; who follow divergent paths”³

Qurʾān 6:100; 72:11

Numerous references confirm that *jinn* are able to possess human beings and thus cause harm. *Shariʿ ruqyah* is prescribed for the removal of *jinn* and their ill effects.

3. The Unseen World, health and sickness

Although the world of the unseen can have a marked effect on us, we must be mindful that it can only happen with the approval of Allah ﷻ. Throughout history, many cases have been recorded of people falling ill due to the effect of the evil eye. Whether this is directly due to a malignant influence, or whether the person affected responds so negatively to the perceived gaze of the perpetrator and falls ill, or even dies, is a controversial topic. But there is no doubt that a person can be negatively influenced by someone else looking at him or her in such a way as to wish harm on the person. Of course, if a person's *imān* is strong, some contend that the evil eye power is diminished or neutralised. There are numerous accounts of people's health being influenced by witchcraft and ill-intention. However, there is also a fine line between the real and hysteria. It has often been found that the cause of supposed incidents of witchcraft are in many cases overanalysed or ill-informed versions of psychological conditions.

4. Witchcraft (Siḥr)

This is the use of supernatural forces to manipulate nature for personal or another person's advantage, or to inflict damage on others. It was a generally accepted practice of most civilisations and cultures in the past. Even today, it is practiced in many countries, although surreptitiously or even secretly in developed countries. This is because the practice is frowned upon by modern science and logic based societies, as it has unacceptable connotations of superstition, magic, sorcery and the existence of an unseen world. Witchcraft is usually regarded as the casting of evil spells, often using herbs and potions to cause harm or death.

For those who subscribe to the existence of the physical world only, the ideas of witches, warlocks, devils and *jinn*s, and the casting of spells, the evil eye and protection by charms are completely alien. The concept of the eternal struggle between good and evil, which is a cardinal feature in many religious belief systems, is equally unacceptable.

5. The Evil Eye (Al-‘ayn)

When injury, illness or personal misfortune can be inflicted upon certain people by looks made towards them by sorcerers, it is described as the evil eye. It may be carried out for reasons of malice, envy, or personal enmity, and the unfortunate victim is usually unaware of the harm being meted out. This power of harming a person by merely looking malevolently at him or her is a common concept in many cultures.

Acceptance of the evil eye is evident in Islamic doctrine. The Prophet ﷺ is reported to have said:

“The influence of an evil eye is a fact ... 4”

Belief in the existence and power of the evil eye is very much present in the Middle East, Africa, India and other developing regions. It is also accepted more in southern European countries. Ibn Hajr holds the view that the evil eye is a glance combined with jealousy that comes from a despicable person to affect another⁵. Ibn Qayyim is of the opinion that the person casting the evil glance can do so involuntarily and is not necessarily an evil person. ‘Āmir ibn Rabī‘ah ؓ affected Sahl bin Ḥunayf ؓ with the evil eye, despite the fact that ‘Āmir was not only among the early persons to accept Islam but also participated in Badr.

Rasūlullāh ﷺ permitted using *ruqyah* in accordance with *sharī‘ah* for treating *al-‘ayn* (evil eye) as reported by Muslim. Ibn al Qayyim said that *al-‘ayn* can be cured by reciting *Sūrah al-Falaq*, *al-Nās*, *al-Fātiḥah*, the verse of *al-Kursīy* (*Āyātul Kursīy*) and the prescribed Prophetic *du‘ās* (supplications) that many advocate. Some scholars, such as Ibn Kathīr, are of the opinion that when one sees something pleasing, then reciting *‘Māshā’Allah lā quwwata illā billāhi* will defend against the effects of an evil eye.

6. Protection and cure from the evil eye and sihr

The Prophet ﷺ has advised that the believer seek protection and cure from the *sihr* and the evil eye. Warding off the effects of the evil eye is commonly practiced by devout Muslims. *Ṭibb al-Nabawī* offers sound advice on protecting oneself from this. The basic advice on protecting against this malign influence is to lead a good life according to Islamic precepts. This ensures the blessing and protection of Allah ﷻ. The best way to protect oneself against the evil eye is by reciting the *ruqyahs* that are prescribed in *sharī'ah* and by reciting other Qur'ānic verses including *Sūrah al-Baqarah* verse 137, *Sūrah al-Nisā'* verse 54, *Sūrah al-Qalam* verse 51, *Sūrah al-Mulk* verse 3, *Sūrah al-Ahqāf* verse 31, *Sūrah al-Isrā'* verse 82, *Sūrah al-Fussilat* verse 44, *Sūrah Yūnus* verse 57, *Sūrah al-Tawbah* verse 14, *Sūrah al-Shu'arā'* verse 80.

The Prophet ﷺ has also advised that the believer seek protection and cure by reciting incantations.

In the *Ṣaḥīḥ* of Muslim, from Abū Sa'īd al-Khudrī, we read that *Jibrā'īl* came to the Prophet ﷺ and said:

“O Muḥammad, are you in pain?” He replied: ‘Yes’. So Jibrā'īl said: “In the name of Allah ﷻ I recite this incantation over you to free you from every ill that harms you, and from the evil of every nafs or envious Eye, Allah ﷻ heals you. In the Name of Allah ﷻ I recite this incantation over you”⁶

Elaborating on incantations, Al-Jawziyyah recommends various incantations of which two are listed below:

“I seek refuge with Allah’s perfect words, which cannot be surpassed by the pious or the impious from the evil of that which He has created, fashioned and formed, and from the evil of what descends from the sky, and the evil of what rises into it, and from the evil of that which He has created in the earth, and the evil of that which comes forth from it, from the evil of temptation of the night and of the day, and from the visitors by night and day, except the one who brings glad tidings of good; O Most Merciful! ”

and

“O our Lord! You are indeed my Lord, there is no God but You; unto You have I entrusted myself, for You are the Lord of the mighty throne. Whatever Allah ﷻ wishes comes to pass, whatever He does not wish does not come to pass. There is no power nor strength save with Allah ﷻ; I know that Allah ﷻ is powerful over all things, and that Allah ﷻ has encompassed all things with His knowledge, and has reckoned and counted all things. O our Lord! Indeed I take refuge with You, from the evil of my soul, the evil of Satan and his polytheism, from the evil of every creeping thing which You seize by the forelock. Indeed my Lord is on the straight path 7”

After mentioning these prayers Al-Jawziyyah emphasises their efficacy in the following words:

“Whoever tests these supplications and means of seeking protection knows to what extent they are beneficial, and how great is the need for them. They prevent the influence of the one with the Eye from reaching its victim and repel it once it has reached him, in accordance with the strength of faith of the one who utters these formulae, the power and preparedness of his soul, and the strength of his commitment to Allah ﷻ and the firmness of his heart. For these are arms for the fight; and arms are effective in accordance with the one who will use them”

7. The use of amulets (taʿwīz)

Whilst amulets (taʿwīz), talismans or charms, have been used extensively for many centuries to ward off the evil eye, its use is condoned only under strict conditions. Their use is unfortunately often encouraged by charlatans on unwary and unsuspecting people, usually to their financial detriment. Scholars such as Ibn Taymiyyah ﷺ and others have permitted the use of taʿwīz. Hanging or wearing of amulets (taʿwīz) is normally permissible for protection or healing provided certain conditions are met: a) That they consist of the names of Allah ﷻ Almighty or his attributes; b) That they are

in Arabic; c) That they do not consist of anything that is disbelief (kufr); d) The user does not believe the words have any affect in themselves, but are empowered to do so by Allah ﷻ Most High. These conditions highlight the importance of the reliance on Allah ﷻ rather than resorting to amulets and charms. Everything is in the hands of Allah ﷻ.

8. Conclusion

The existence of the supernatural, ‘unseen world’, with its attendant witchcraft, spirits and *jinn*s, has existed in most societies since the dawn of time. It is still practiced in many present-day societies in spite of persistent attempts to eradicate it, especially in regions influenced by the West. It refers to the use of spells, magical incantations and supernatural power to exert some influence in a person who is unaware of this effect. Belief in the supernatural world is a feature of the Muslim faith, as is the malign force of the evil eye in inducing ailments in unfortunate people. Measures to neutralize the influence are available for those affected. Islamic teaching warns against being too hasty to attribute the cause of every problem to black magic. This has become too common. However, if it has been reliably determined that *sihr* or *al-‘ayn* is the cause for the ailment then one should primarily turn to Allah ﷻ and resort to the remedies mentioned in the Qur’ān and Sunnah. It should also be remembered that if the help of others is sought, then one should only turn to those who are God-fearing and pious.

References

1. Al-Asqalānī, Ibn Hajr, (1981). *Fath al-Bārī*, 10/225, al-Salafiyyah Cairo.
2. Ṣaḥīḥ Muslim, Zuhd, *ḥadīth* No.61 (4/2294).
3. *Al-An‘ām* verse.100; *Jinn* verse 11.
4. Ṣaḥīḥ Muslim, *ḥadīth* 26/5427.
5. Al-Asqalānī, Ibn Hajr, (1981). *Fath al-Bārī*: 10/200. al-Salafiyyah Cairo.
6. Riyāḍ al-Ṣālihīn, *ḥadīth* No. 908.
7. Al-Jawziyya, I.Q. *Medicine of the Prophet*, (Trans. P. Johnstone), p. 127. The Islamic Texts Society, UK. 1998.



Chapter 19

Spiritual Healing

1. Introduction

Islam regards good health as one of the greatest blessings that Allah ﷻ has bestowed on mankind. This translates into physical, mental, emotional and spiritual health. After all, humans are complex beings whose well-being needs to be addressed on all levels.

Tibb al-Nabawī has always maintained that there are multi-faceted dimensions to achieving wellness, so treatment of the spiritual is often an essential component of therapy for numerous ailments.

Spiritual healing exists in most cultures, and has been around for thousands of years. In recent years, there has been a revival of spiritual treatment, with an increasing awareness that many diseases, amongst many other problems of life, have their roots embedded in the spiritual dimension. Moreover, there is growing realization that healing does not come from the physician alone, but is driven by the patient's inner healing force, or *physis*, which has a potent spiritual element. This, in Islamic medicine, is considered to receive its power through the will of Allah ﷻ. Spiritual healing not only provides healing for the soul, but also contributes to treating ailments of the body.

2. What is spiritual healing?

Spiritual healing can be described as various spiritual practices, such as prayer, meditation or safe rituals, in order to restore, maintain or improve health, without the use of medicine or other medical procedures. It is the channeling of the universal energy from its spiritual source – for Muslims this source is Allah ﷻ.

‘*Spirituality*’ in its broadest sense is the person’s ability to recognise and experience a higher, non-physical, pure divine power that influences life, and makes it meaningful. It embraces such concepts as soul, inner non-material personal nature and vital force.

3. The value of spiritual healing

Spiritual healing has been shown to be effective in treating numerous physical and mental disorders¹, as well as for ailments of the soul. A particular disease may respond well to drugs or surgery, but the cure will not be complete until any spiritual disharmony in the patient has been resolved. In fact most illness conditions have an underlying emotional cause/s which is directly linked to a *‘troubled, emotionally-burdened or grievous soul’*.

Just as the person’s body acquires energy from the food and drink he or she consumes, so the person’s soul is fortified and maintained in good health by spiritual activities such as worship, pilgrimages, charity and performing good deeds.

4. Physis and spiritual healing

Healers see body, mind and soul as being interconnected². What affects one, will affect the others, and all three must be in harmony for optimum health to exist. The underlying mechanism is *physis*, *‘the doctor within’*.

Various practices involved in spiritual healing focus on supporting the power and activity of *physis*.

A major component of *physis* is the immune system. Many forms of spiritual healing encourage relaxation and focused awareness, and thus have a beneficial effect on the immune system. People of faith appear to live longer than their secular counterparts, and are less prone to infections and generally have better health.

5. The power of prayer

Prayer harnesses the power of belief³. Any health benefits derived from prayer or any other form of worship, such as fasting are conditional on the recipient being endowed with religious belief. The best of supplication is *ṣalāh*, as it comprises both physical movement and mental concentration, both of which restore inner spiritual harmony, and lead to a complete state of rejuvenation of the body⁴.

“... Doing the prayer contains all that is excellent in both this world and the next... In worship (a person) will experience apprehension, fear, hope, uncertainty and love... when his attention turns to the next life, it will strengthen his faculties, delight his heart, and... drive out disease”⁵

As-Suyuti

People who pray regularly enjoy better health, have healthier immune systems, are less prone to depression and less-inclined to addictive substances or behaviour. Prayer induces a sense of calm, which supports people who are suffering from anxiety and stress. It also reduces the risk of ulcers, stroke, heart problems and digestive disorders. Another factor is that people who pray regularly are less likely to have poor lifestyle behaviour. They take better care of themselves generally, by eating better, smoking and drinking less, and are more involved in the community. All these contribute to improved wellness.

6. Spiritual healing in Islam

In Islam, spiritual healing includes all practices involved in healing by spiritual means, such as expression of faith, fasting, various religious rituals, *dhikr* and prayer.

Many *Ṭibb* healers point out the fact that the act of repeating a prayer and then blowing on oneself instigates a transfer of energies and constitutes an important part of the healing process. What can never be stressed enough is that the source of all healing in the Islamic perspective is Allah ﷻ as mentioned in the verse below:

“And when I fall ill, so it is He who heals me”⁶

Qur’ān 26:80

The Qur’ān itself is a healing for all ailments, be they related to the mind (psychological), body (physical) or the soul (spiritual).

“And We send down in the Qur’ān that which is a cure for the believers and a mercy...”⁷

Qur’ān 17:82

Furthermore, not only is the Qur’ān a means of healing, but is also a guiding light for the sincere seeker, as the words themselves carry a positive Divine energy.

“Tranquillity of the heart (soul) is obtained through recognition of its Creator, His Names/Attributes, ...prefer what He approves/loves... avoid what He forbids/dislikes”⁸

Al-Jawziyyah

Ṭibb al-Nabawī provides guidelines for spiritual healing practices which includes supplication.

7. Supplication (*Du‘ā*)

The greatest weapon that the believer has is that of supplication. ‘Alī ؑ narrates from Prophet ﷺ that he is reported to have said: “*Supplication is the weapon of the believer, the pillar of the religion and the light of the heaven and earth* ⁹.” There are numerous aḥādīth, wherein a cure for a particular ailment, the individual is required to recite a *du‘ā* (invocation) and then blow on themselves.

‘Āishah ؓ narrates that:

“During the Prophet’s ﷺ fatal illness, he used to recite the mu‘awwadhatain (Sūrah al-Falaq and Sūrah al-Nās) and then blow his breath over his body. When his illness was aggravated, I used to recite those two sūrahs and blow my breath over him and make him rub his body with his own hand for its blessings ¹⁰”

In another ḥadīth, Abū Dāwūd relates in his *Sunan*, among other aḥādīth of Abū Dardā’ ؓ : “*I heard the Messenger of Allāh ﷺ saying: If anyone of you complains of anything, or if a brother of his is suffering, let him say:*

“Our Lord Allah ﷻ, you are in heaven; Holy is Your Name, and Your command is in heaven and on earth, just as Your Mercy is in heaven, so place Your mercy on earth, and forgive us our offences and sins. You are the Lord of the pure ones. Send down mercy from your presence’ and healing from Your healing upon this pain ¹¹”, and it will be healed with Allah’s permission.

Remember that there are six auspicious times when *du‘ās* are more likely to be accepted. These include, the last third of the night; during the time of *adhān*; between the *adhān* and *iqāmah*; after the *farḍ ṣalāh*; from the time the Imām ascends the pulpit to the time the prayer has finished on the day of *Jumu‘ah*; and the last hour after the prayer of ‘*Asr* on the day of *Jumu‘ah* ¹².

Supplication should always be done with the presence of heart and faith in the decree of Allah ﷻ, always bearing in mind that a sincere *du'ā* is always rewarded, whether in this world or in the hereafter.

8. Conclusion

More people now recognize the role that the non-physical, spiritual aspect of human nature plays in resolving many chronic disorders of the body, mind and soul. For Muslims, the power and potential of spiritual practice is well established since the time of the Prophet ﷺ. They accept the holistic and natural aspects of spiritual healing, and that it can be both preventative and curative. They also accept that ultimately healing originates from Allah ﷻ, acting through the force of inner healing, or *physis*.

References

1. Thomas, P. (2002). *What Works; What Doesn't. The Guide to Alternative Health care*, p. 238. Newleaf, Dublin, Eire.
2. Hamza, Yūsuf (2004). *Purification of the heart*, p. 4. Starlatch, USA.
3. Islam & Health. Online at: <<http://www.muslimhealthnetwork.org/islamandhealth.shtml>>
4. Islamic Healing. Online at: <<http://tajbaba.com/en/islamic-healing>>
5. As-Suyuti, J.A. *Medicine of the Prophet*. (Trans) p. 173 Ta-Ha Publishers Ltd, London, UK. 1994.
6. *Al-Shu'arā'* verse 80.
7. *Banī Isrā'īl* verse 82.
8. Al-Jawziyya, I.Q. *Medicine of the Prophet*; (Trans P. Johnstone) p. 5. The Islamic Texts Society, UK. 1998.
9. Al-Mustadrak *ḥadīth* No. 1855.
10. Bukhārī *ḥadīth* No. 5735.
11. Abū Dāwūd, *ḥadīth* No. 3892.
12. Imām Muḥammad ibn 'Alī al-Shawkānī, *Tuḥfah al-Dhākirīn*, (1988). al-Thaqāfiyyah, p. 55.



Chapter 20

Healthy living guidelines for different temperamental types

1. Introduction

Now that we have a better understanding of the various elements that influence health both physically and spiritually, from the *Ṭibb al-Nabawī* viewpoint, this final chapter is aimed at providing guidelines on healthy living for the different temperamental combinations.

Whilst the focus of this chapter offers guidelines on optimising physical and emotional health, spiritual health, which relates to a healthy soul, is equally – if not more important. Indeed, a healthy soul will be the deciding factor in the hereafter.

As mentioned in previous chapters the prescription for a healthy soul is living a life in accordance with the Qur'ān and Sunnah. This translates into obeying the commands of Allah ﷻ with respect to fulfilling the obligatory duties of *ṣalāh*, *fasting*, *zakāh* and *ḥajj* (when due) together with all other spiritual activities that increase *taqwā* in our daily lives. In addition to honouring our responsibility as vicegerents on Earth, our day to day actions must emulate the character of our Prophet ﷺ, in dealing with friends, family and the society at large.

The lifestyle programmes below can only be holistically applied if they are accompanied by the Qur’ān and Sunnah in its entirety.

Listed below are healthy living guidelines for the eight different temperamental combinations.

| |
|---|
| • Dominant bilious with sub-dominant melancholic |
| • Dominant bilious with sub-dominant sanguinous |
| • Dominant sanguinous with sub-dominant bilious |
| • Dominant sanguinous with sub-dominant phlegmatic |
| • Dominant phlegmatic with sub-dominant sanguinous |
| • Dominant phlegmatic with sub-dominant melancholic |
| • Dominant melancholic with sub-dominant phlegmatic |
| • Dominant melancholic with sub-dominant bilious |

2. Dominant Bilious with sub-dominant Melancholic Temperament

This combination has a temperamental quality between Bilious (Hot & Dry) and Melancholic (Cold & Dry) resulting in an overall **dominant quality of dryness**, which is common to both temperaments.

As **dryness** is the dominant quality associated with this temperamental combination, an **increase in dryness** from the **Six Lifestyle Factors** will **negatively affect this individual to the greatest extent**. An increase in heat and coldness will also affect, but to a lesser extent, whereas an increase in the quality of **moistness will be beneficial for this person**.

An increase in dryness can be as a result of:

Summer, very hot weather/environment, late winter, Hot & Dry foods, anger, grief, strenuous exercise, excessive awakening, irregular elimination of wastes, etc.

The illnesses that this combination are inclined to are those of the Bilious temperament:

Bronchitis, Hay fever, Gastralgia, Vomiting, Nausea, Hepatitis, Excessive bleeding during menstruation, Palpitations of the heart.

To a lesser extent this combination may be inclined to illnesses of the Melancholic temperament:

Insomnia, Thrombosis, Embolism, Dry Cough, Asthma(dry), Arthritis, Hyperacidity, Constipation, Piles, Flatulence, Psoriasis, Cracked Skin.

Health maintenance for this temperament:

Food and Drink

Ideally this combination should eat **mostly Cold & Moist** foods, **followed by Hot & Moist** foods, **less Cold & Dry** foods and the **least amount of Hot & Dry** foods.

Additional Dietary Advice:

- Stick to this diet especially in summer and spring.
- Include more fruit and vegetables than meat in your diet.
- Drink at least 2-3 litres (8-12 glasses) of water per day.
- Avoid refined foods.
- Eat simply and avoid eating lots of different types of foods at the same meal.
- If emotional or upset, sit down, take a few deep breaths or drink a glass of water.
- Avoid excessive intake of tea and coffee.

Environmental Air and Breathing

- Fresh air and a cool, properly ventilated environment is beneficial.
- Avoid weather, environment, work and leisure activities that increase heat and dryness.

Physical Exercise

- Excessive movement and strenuous exercise is not advisable.
- Exercise in the early morning and late afternoon.
- A 15 to 30 minute morning walk is beneficial.

Sleep

- A good night sleep of 5-6 hours is advised.

Emotions & Feelings

- Meditation and breathing exercises are beneficial during times of emotional turmoil.
- Extreme emotions of worry, anger and excessive excitement are the emotional excesses of this temperamental type and should be managed with breathing exercises and meditation.
- A 5 -10 minute relaxation break after lunch is beneficial.

Elimination

- Laxatives should be considered.
- A regular high-fibre diet should be adopted to keep the colon clear.

3. Dominant Bilious with sub-dominant Sanguinous Temperament

This combination has a temperamental quality between Bilious (Hot & Dry) and Sanguinous (Hot & Moist), resulting in an overall **dominant quality of heat**, which is common to both temperaments.

As **heat** is the dominant quality associated with this temperamental combination, an **increase in heat** from the **Six Lifestyle Factors** will **negatively affect this individual to the greatest extent**. An increase in moistness and dryness will also affect, but to a lesser extent, whereas an increase in the quality of **coldness will be beneficial for this person**.

An increase in heat can be as a result of:

Summer, very hot weather and environment, Hot & Dry foods, anger, strenuous exercises, excessive awakening, etc.

The illnesses that this combination are inclined to are those of the Bilious temperament:

Bronchitis, Hay fever, Gastralgia, Vomiting, Nausea, Hepatitis, Excessive bleeding during menstruation, Palpitations of the heart.

To a lesser extent this combination may be inclined to illnesses of the Sanguinous temperament:

Vertigo, High Blood Pressure, Diabetes, Urinary Tract Infection, Inflammation of the Ovaries/Fallopian Tubes, Endometriosis.

Health maintenance for this temperament:

Food and Drink

Ideally this combination should eat **mostly Cold & Moist** foods, **followed by Cold & Dry** foods, **less Hot & Moist** foods and the **least amount of Hot & Dry** foods.

Additional dietary advice:

- Stick to this diet especially in summer and spring.
- Include more fruit and vegetables than meat in the diet.
- Drink at least 2 litres (8 glasses) of water per day.
- Avoid excessive intake of tea and coffee.
- Avoid refined foods.

- Eat simply, and avoid eating a lot of different types of foods in the same meal.
- Avoid foods and drinks containing salt as well as fried and processed meats.

Environmental Air and Breathing

- Fresh air and a cool, properly ventilated environment are most ideal.
- Avoid exposure to the sun, or hot climates.
- During summer especially it is important to keep cool at all times.
- Air-conditioners are acceptable.

Physical Exercise

- Excessive movement and strenuous exercise is not advisable.
- Exercise in the early morning and late afternoon.
- A 15 to 30 minute morning walk is advised.

Sleep

- 6 to 7 hours sound sleep is essential.
- Sleeping more than 8 hours or less than 5 hours a night will have a negative effect.

Emotions & Feelings

- Meditation and breathing exercises are beneficial during times of emotional turmoil.
- Extreme emotions of worry, anger and excessive excitement are the emotional excesses of this temperamental type and should be managed with breathing exercises and meditation.
- A 5 -10 minute relaxation break after lunch is beneficial.
- If emotional or upset, sit down, take a few deep

breaths or drink a glass of water.

Elimination

- A regular high-fibre diet should be adopted to keep the colon clear.
- Laxatives should be considered

4. Dominant Sanguinous with sub-dominant Bilious Temperament

This combination has a temperamental quality between Sanguinous (Hot & Moist) and a Bilious (Hot & Dry), resulting in an overall **dominant quality of heat**, which is common to both temperaments.

As **heat** is the dominant quality associated with this temperamental combination, an **increase in heat** from the **Six Lifestyle Factors** will **negatively affect this individual to the greatest extent**. An increase in moistness and dryness will also affect, but to a lesser extent, whereas an increase in the quality of **coldness will be beneficial for this person**.

An increase in heat can be as a result of:

Summer, very hot weather and humid environment/weather, Hot & Moist to Hot & Dry foods, anger, strenuous exercises, excessive awakening, etc.

The illnesses that this combination are inclined to are those of the Sanguinous temperament:

Vertigo, High Blood Pressure, Diabetes, Urinary Tract Infection, Inflammation of the Ovaries/Fallopian Tubes, Endometriosis.

To a lesser extent this combination may be inclined to illnesses of the Bilious temperament:

Bronchitis, Hayfever, Gastralgia, Vomiting, Nausea, Hepatitis, Excessive bleeding during menstruation, Palpitations of the heart.

Health maintenance for this temperament:

Food and Drink

Ideally this combination should eat **mostly Cold & Dry** foods, **followed by Cold & Moist** foods, **less Hot & Dry** foods and the **least amount of Hot & Moist** foods.

Additional dietary advice:

- Stick to this diet especially in summer and spring.
- A diet that contains equal amounts of protein, fruit, vegetables and salads is ideal. Seafood is excellent.
- Drink at least 2-3 litres (8-12 glasses) of water per day.
- Avoid refined foods.
- Eat simply, and do not eat a lot of different types of foods at the same meal.

Environmental Air and Breathing

- Keep cool in hot weather and warm in wet weather.
- Weather, environment, work and leisure activities that increase heat and moistness especially humid weather will have a negative effect.

Physical Exercise

- Excessive movement and strenuous exercise is not advisable.
- Exercise in the early morning and late afternoon.
- Gardening and aerobic exercises are advisable
- A 15 to 30 minute morning walk or jog.

Sleep

- 6 to 7 hours sound sleep is essential.
- Lack of sleep (less than five hours on a continuous basis) and late nights will a negative effect.

Emotions and Feelings

- Extreme emotions of anger, excitability, irritability, excessive speech and suppression of anger are the emotional excesses of this temperamental type and should be managed with breathing exercises and meditation.
- If upset, sit down, take a few deep breaths or drink a glass of water.
- Try and be in an atmosphere free from stress, fear and worries.

Elimination

- Laxatives should be considered.
- Avoid a large intake of white flour products as this will result in irregular bowel movements. A regular high-fibre diet should be followed to keep the colon clear.
- Cupping or blood donation 2-3 times a year reduces the excess blood dominance in a Sanguinous person - this is preferable in summer or spring.

5. Dominant Sanguinous with sub-dominant Phlegmatic temperament

This combination has a temperamental quality between Sanguinous (Hot & Moist) and Phlegmatic (Cold & Moist), resulting in an overall **dominant quality of moistness**, which is common in both the temperaments.

As **moistness** is the dominant quality associated with this temperamental combination, an **increase in moistness** from the **Six Lifestyle Factors** will **negatively affect this individual to the greatest extent**. An increase in heat and coldness will also affect, but to a lesser extent, whereas an increase in the quality of **dryness will be beneficial for this person**.

An increase in moistness can be as a result of:

Rainy season, humid environment/weather, Hot & Moist to Cold & Moist foods, excessive sleep/rest, depression and fear, lack of exercise, etc.

The illnesses that this combination are inclined to are those of the Sanguinous temperament:

Vertigo, High Blood Pressure, Diabetes, Urinary Tract Infection, Inflammation of the Ovaries/Fallopian Tubes, Endometriosis.

To a lesser extent this combination may be inclined to illnesses of the Phlegmatic temperament:

Oversleeping, Low Blood Pressure, Asthma (wet), Sinusitis, Dyspepsia, Diarrhoea, Anaemia, Amenorrhoea, Prolapse of the Uterus.

Health maintenance for this temperament:

Food and Drink

Ideally this combination should eat **mostly Cold & Dry** foods, **followed by Hot & Dry** foods, **less Cold & Moist** foods and the **least amount of Hot & Moist** foods.

Additional dietary advice:

- Stick to this diet especially in autumn, rainy weather, during winter and in coastal areas.
- A diet that contains equal amounts of protein, fruit, vegetables and salads is advisable.
- Seafood is excellent.
- Avoid foods and drinks containing salt as well as fried and processed meats.
- Avoid drinking water, cool drinks or juices during meals.
- Preferably drink liquids half an hour before meals or

- 1 hour after meals.
- Drink at least 2 litres (8 glasses) of water a day.
- Avoid refined foods.
- Eat simply, and avoid eating lots of different types of foods in the same meal.

Environmental Air and Breathing

- Keep cool in hot weather and warm in wet weather.
- Weather, environment, work and leisure activities that increase heat and moistness - especially in humid weather will have a negative effect.

Physical Exercise

- Moderate exercise is advisable.
- Exercise in the warmer times of the day.
- Gardening and aerobic exercises are advisable.
- A 15 to 30 minute morning walk or jog.

Sleep

- 7 to 8 hours sound sleep is essential.
- Sleeping more than 8 hours or less than 5 hours a night will have a negative effect.

Emotions and Feelings

- Extreme emotions of excitability, excessive speech and suppression of anger are the emotional excesses of this temperamental type and should be managed with breathing exercises and meditation.
- If upset, sit down, take a few deep breaths or drink a glass of water.
- Actively try and be in an atmosphere free from stress, fear and worries.

Elimination

- A regular high-fibre diet should be adopted to keep the colon clear.
- Laxatives should be considered.
- Cupping or blood donation 2-3 times a year reduces the excess blood dominance in a Sanguinous person. This is preferable in summer or spring.

6. Dominant Phlegmatic with sub-dominant Sanguinous Temperament

This combination has a temperamental quality between Phlegmatic (Cold & Moist) and Sanguinous (Hot & Moist), resulting in an overall **dominant quality of moistness**, which is common in both the temperaments.

As **moistness** is the dominant quality associated with this temperamental combination, an **increase in moistness** from the **Six Lifestyle Factors** will **negatively affect this individual to the greatest extent**. An increase in heat and coldness will also affect, but to a lesser extent, whereas an increase in the quality of **dryness will be beneficial for this person**.

An increase in moistness can be the result of:

Early winter, cold environment, rainy season, humid environment/ weather, Cold & Moist and Hot & Moist foods, depression and fear, excessive sleep, lack of exercise, continuous blood loss etc.

The illnesses that this combination are inclined to are those of the Phlegmatic temperament:

Oversleeping, Low Blood Pressure, Asthma (wet), Sinusitis, Dyspepsia, Diarrhoea, Anaemia, Amenorrhoea, Prolapse of the Uterus.

To a lesser extent this combination may be inclined to illnesses of the Sanguinous temperament:

Vertigo, High Blood Pressure, Diabetes, Urinary Tract Infection, Inflammation of the Ovaries/Fallopian Tubes, Endometriosis.

Health maintenance for this temperament:

Food and Drink

Ideally this combination should eat **mostly Hot & Dry** foods, **followed by Cold & Dry** foods, **less Hot & Moist** foods and the **least amount of Cold & Moist** foods.

Additional dietary advice:

- Stick to this diet especially in autumn, rainy weather, winter and in coastal areas.
- Have only one or two full meals daily. Because of the low digestive ability, phlegmatic people should preferably have 2 meals per day with a 6-8 hour gap between meals. If hungry between meals, fruit or salad should be eaten.
- The diet should be high in fibre and protein including eggs, meat, seafoods and liver.
- During winter or on cold and rainy days/nights, cold foods should be avoided as these increase phlegm.
- Start the day with a glass of warm water with two tablespoons of honey. Drink 1½ to 2 litres of tap water per day but avoid drinking water half an hour before and up to one hour after meals.
- Avoid refined foods. Eat simply, and avoid eating lots of different types of foods in the same meal.
- Avoid foods and drinks containing salt as well as fried and processed meats.

- Weather, environment, work and leisure activities that increase cold and moistness will have a negative effect.
- Because of low heat, phlegmatic people are particularly vulnerable to a cold environment.
- Heat management by wearing appropriate clothing and seeking a warm environment is of utmost importance.
- The bedroom may be heated electrically, with an electric blanket when needed.

Physical Exercise

- Exercising on a daily basis/ additional activity to supplement body heat.
- A 20-30 minute brisk walk or jog every day is very beneficial.
- Gardening and aerobic exercises are advisable.

Sleep

- Retiring early for 8 hours of sleep and rising before sunrise is advisable to avoid an excess of phlegm.
- Sleeping during the daytime should be avoided especially 1 hour before sunset as this aggravates the phlegm and leads to heaviness of the head and sinus congestion.

Emotions and Feelings

- Fear, shyness and depression are the emotional excesses of phlegmatic people and should be managed through breathing exercises and meditation.
- Actively try and be in an atmosphere free from stress, fear and worries.
- If emotional or upset, sit down, take a few deep breaths or drink a glass of water.

Elimination

- Laxatives should be taken to keep the bowels clear.
- Massage is also advised.

7. Dominant Phlegmatic with sub-dominant Melancholic Temperament

This combination has a temperamental quality between Phlegmatic (Cold & Moist) and Melancholic (Cold & Dry), resulting in an overall **dominant quality of cold**, which is common in both the temperaments.

As **coldness** is the dominant quality associated with this temperamental combination, an **increase in coldness** from the **Six Lifestyle Factors** will **negatively affect this individual to the greatest extent**. An increase in moistness and dryness will also affect, but to a lesser extent, whereas an increase in the quality of **heat will be beneficial for this person**.

An increase in cold can be as a result of:

Early/late winter, cold environment, rainy season, Cold & Moist and Cold & Dry foods, depression and fear, worries, sadness, excessive sleep, lack of exercise, continuous blood loss, irregular eating and sleeping habits, suppression of natural urges for a prolong period, irregular elimination of wastes etc.

The illnesses that this combination are inclined to are those of the Phlegmatic temperament:

Oversleeping, Low Blood Pressure, Asthma (wet), Sinusitis, Dyspepsia, Diarrhoea, Anaemia, Amenorrhoea, Prolapse of the Uterus.

To a lesser extent this combination may be inclined to illnesses of the Melancholic temperament:

Insomnia, Thrombosis, Embolism, Dry Cough, Asthma(dry), Arthritis, Hyperacidity, Constipation, Piles, Flatulence, Psoriasis, Cracked Skin.

Health maintenance for this temperament:

Food and Drink

Ideally this combination should eat **mostly Hot & Dry** foods, **followed by Hot & Moist** foods, **less Cold & Dry** foods and the **least amount of Cold & Moist** foods.

Additional dietary advice:

- Stick to this diet especially in cold weather and during winter and autumn.
- Avoid drinking water, cool drinks and juices during meals.
- Have only one or two full meals daily. Because of the low digestive ability, phlegmatic people should preferably have 2 meals per day with there a 6-8 hour gap between meals. If hungry between meals, fruit or salad should be eaten.
- The diet should be high in fibre and protein including eggs, meat, seafoods and liver.
- During winter or on cold and rainy days/nights, cold foods should be avoided as these increase phlegm.
- Start the day with a glass of warm water with two tablespoons of honey. Drink 1½ to 2 litres of tap water per day, but avoid drinking water half an hour before and up to one hour after meals.
- Avoid refined foods. Eat simply, and avoid eating lots of different types of foods in the same meal.

- Avoid cold things, sour things, dairy products, tin foods, processed meats and salads.
- Fruits must be washed with warm water before eaten.

Environmental Air & Breathing

- Managing heat levels by wearing appropriate clothing and seeking a warm environment is of utmost importance.
- If necessary heat the bedroom with a heater when needed.

Physical Exercise

- Exercising on a daily basis/ additional activity to supplement body heat.
- A 20-30 minute brisk walk or jog every day is very beneficial.
- Gardening and aerobic exercises are advisable.

Sleep

- Retiring early for 8 hours of sleep and rising before sunrise is advisable to avoid an excess of phlegm.
- Sleeping during the daytime should be avoided.

Emotions and Feelings

- Fear, shyness and depression are the emotional excesses of phlegmatic people and should be managed through breathing exercises and meditation.
- Actively try and be in an atmosphere free from stress, fear and worries.

Elimination

- Laxatives should be taken to keep the bowels clear.
- Massage is also advised.

8. Dominant Melancholic with sub-dominant Phlegmatic Temperament

This combination has a temperamental quality between Melancholic (Cold & Dry) and Phlegmatic (Cold & Moist), resulting in an overall **dominant quality of cold**, which is common in both the temperaments.

As **coldness** is the dominant quality associated with this temperamental combination, an **increase in coldness** from the **Six Lifestyle Factors** will **negatively affect this individual to the greatest extent**. An increase in moistness and dryness will also affect, but to a lesser extent, whereas an increase in the quality of **heat will be beneficial for this person**.

An increase in cold can be as a result of:

Early/late winter, cold environment, rainy season, Cold & Dry and Cold & Moist foods, depression and fear, worries, sadness, excessive sleep, lack of exercise, continuous blood loss, irregular eating and sleeping habits, suppression of natural urges for a prolong period, irregular elimination of wastes etc.

The illnesses that this combination are inclined to are those of the Melancholic temperament:

Insomnia, Thrombosis, Embolism, Dry Cough, Asthma (dry), Arthritis
Hyperacidity, Constipation, Piles, Flatulence, Psoriasis, Cracked Skin.

To a lesser extent this combination may be inclined to illnesses of the Phlegmatic temperament:

Oversleeping, Low Blood Pressure, Asthma (wet), Sinusitis,
Dyspepsia, Diarrhoea, Anaemia, Amenorrhoea, Prolapse of the Uterus.

Health maintenance for this temperament:

Food and Drink

Ideally this combination should eat **mostly Hot & Moist** foods, **followed by Hot & Dry** foods, **less Cold & Moist** foods and the **least amount of Cold & Dry** foods.

Additional dietary advice:

- Stick to this diet especially in cold weather and during winter and autumn.
- Avoid drinking water, cool drinks or juices during meals. Preferably drink liquids half an hour before meals or 1 hour after meals.
- Drink at least 1-2 litres (4-8 glasses) of lukewarm water per day.
- Avoid refined foods.
- Eat simply, and do not eat lots of different types of foods in the same meal.
- A 15-20 minute brisk walk every day is very beneficial.
- Avoid cold things, sour things, dairy products, tin foods, processed meats and salads.
- Fruits must be washed with warm water before eaten.

Environmental Air & Breathing

- Weather, work and leisure activities that increase coldness and dryness will have a negative effect.
- In autumn and winter keep away from the cold of night.
- Dewy conditions during autumn, late winter and between midnight and 6:00am also aggravates this temperamental combination.
- Outings or change of environment (picnics, etc.) every 2-3 months is beneficial.
- In dry weather apply a moisturizer, cream or oil (olive oil) to the skin.

Physical Exercise

- Gardening and aerobic exercises are advisable
- A 15 to 30 minute morning walk or jog.
- Exercising on a daily basis/ additional activity to supplement body heat.

Sleep

- Get to bed early, around 22:00 for 6-8 hours sleep.
- Excessive waking during the night will have a negative effect.

Emotions and Feelings

- Extreme emotions - excessive worries, sadness, loneliness and overly philosophical thoughts are the emotional excesses of this temperamental type and should be managed with breathing exercises and meditation.
- A 5 -10 minute relaxation break after lunch is beneficial.

Elimination

- Be aware of unnecessary suppression of stools and urine.
- Laxatives should be considered to keep the bowels clear.

9. Dominant Melancholic with sub-dominant Bilious Temperament

This combination has a temperamental quality between Melancholic (Cold & Dry) and Bilious (Hot & Dry) temperament, resulting in an overall **dominant quality of dryness**, which is common to both the temperaments.

As **dryness** is the dominant quality associated with this temperamental combination, an **increase in dryness** from the **Six Lifestyle Factors** will **negatively affect this individual to the greatest extent**. An increase in heat and coldness will also affect, but to a lesser extent, whereas an increase in the quality of **moistness will be beneficial for this person**.

An increase in dryness can be as a result of:

Summer, very hot weather/environment, late winter, Cold & Dry and Hot & Dry foods, anger, sadness, strenuous exercise, excessive awaken-ing, irregular eating and sleeping habits, suppression of natural urges for a prolong period, irregular elimination of wastes etc.

The illnesses that this combination are inclined to are those of the Melancholic temperament:

Insomnia, Thrombosis, Embolism, Dry Cough, Asthma (dry), Arthritis Hyperacidity, Constipation, Piles, Flatulence, Psoriasis, Cracked Skin.

To a lesser extent this combination may be inclined to illnesses of the Bilious temperament:

Bronchitis, Hay fever, Gastralgia, Vomiting, Nausea, Hepatitis, Excessive bleeding during menstruation, Palpitations of the heart.

Health maintenance for this temperament:

Food and Drink

Ideally this combination should eat **mostly Hot & Moist** foods, **followed by Cold & Moist** foods, **less Hot & Dry** foods and the **least amount of Cold & Dry** foods.

Additional dietary advice:

- Stick to this diet especially in cold weather and during winter and autumn.
- Avoid drinking water, cool drinks or juices during meals. Preferably drink liquids half an hour before meals or 1 hour after meals.
- Drink at least 1-2 litres (4-8 glasses) of lukewarm water per day.
- Avoid refined foods.
- Eat simply, and do not eat lots of different types of foods in the same meal.
- A 15-20 minute brisk walk every day is very beneficial.
- Avoid cold things, sour things, dairy products, tin foods, processed meats and salads.
- Fruits must be washed with warm water before eaten.

Environmental Air & Breathing

- Weather, environment, work and leisure activities that increase coldness and dryness will have a negative effect
- In autumn keep away from the cold of night and the midday heat.
- Dewy conditions during autumn, late winter and between midnight and 06:00am also aggravates this temperamental combination.
- Outings or change of environment (picnics, etc) during

times other than those mentioned every 2-3 months is beneficial.

- Protect yourself in dry weather by applying a moisturizer, cream or oil (olive oil) to the skin.
- Breathing exercises in the early morning and late afternoon.

Physical Exercise

- Gardening and aerobic exercises are advisable.
- A 15 to 30 minute morning walk or jog.
- Exercising on a daily basis/ additional activity to supplement body heat.

Sleep

- Get to bed early, around 22:00 to get 6-8 hours sleep.
- Excessive waking during the night will have a negative effect.

Emotions & Feelings

- Meditation and breathing exercises are helpful especially during times of emotional turmoil.
- Extreme emotions - excessive worries, sadness, loneliness and overly philosophical thoughts are the emotional excesses of this temperamental type and should be managed with breathing exercises and meditation.
- A 5 -10 minute relaxation break after lunch is beneficial.

Elimination

- Be aware of unnecessary suppression of stools and urine.
- Laxatives should be considered to keep the bowels clear.

10. Conclusion

Based on the information in previous chapters, the Healthy Living Guidelines have been designed to help you apply this knowledge on a day-to-day basis. Each of the programmes, takes into account the uniqueness of an individual within the context of the *Six Lifestyle Factors* advocated in *Tibb*.

Adopting the lifestyle advice, with the intention of adopting the philosophy of *Tibb Al-Nabawi*, is in itself an *‘ibādah*. May it also have the benefit of assisting *physis*, and keeping the humours in balance, thereby maintaining the ideal temperament of a person. Of course, everything is by the will and decree of Allah ﷻ. May His blessing always be upon us and may we be bestowed with the best of health, *Inshā-Allah*.

References

1. Bhikha, R.A.H. (2006). *4 Temperaments 6 Lifestyle Factors*, pp. 66-102. Ibn Sina Institute of Tibb, South Africa.

About the book:

As Muslims, submission to the will of Allah ﷻ and living in accordance with the Sunnah of the Prophet ﷺ is a means of success in this world and in the Hereafter. This necessitates educating ourselves in all aspects of life, including healthcare.

Imām Shāfi said: "After the science which distinguishes between what is permissible and what is impermissible, I know of no science which is more notable than that of Tibb".

Allah ﷻ has guided us through the Qur'an and the example of Prophet Muhammad ﷺ on how to live a healthy and meaningful life, helping us understand that, as Muslims, we can only perform our obligatory duties and contribute to society as vice-gerents if we are well.

Aimed at students of Islamic studies, physicians, as well as consumers, 'Medicine of the Prophet' - Tibb Al-Nabawi is based on the works of Ibn Qayyim Al-Jawziyya and Jalalu'd-Din Abd'ur-Rahman As-Suyuti. It is supported by comprehensive research and relevant Qur'anic verses and Ahādīth, providing insight into the principles of health promotion and treatment, fully subscribing to the tenant that "*prevention is better than cure*".

About the authors:

Prof Rashid Ahmed Hassen Bhikha is passionately involved in improving the level of healthcare in our country. As a qualified pharmacist he started Be-Tabs Pharmaceuticals, which, upon its sale in 2007, was the largest privately owned generic manufacturer in South Africa. In 1997, after extensive research into Tibb medicine, both locally and overseas, Prof. Bhikha founded the Ibn Sina Institute of Tibb, to promote the training and practice of Tibb in South Africa. In 2004, he completed his PhD in Education at the University of the Western Cape, where he established the training of Unani-Tibb. In addition to the many papers he has presented internationally and locally he has also authored numerous books. Prof Bhikha's dedication towards social upliftment earned him the Inyathelo Lifetime Philanthropy Award in 2009.

Mawlana Dr Muhammad Ashraf Ebrahim Dockrat is a graduate of Madrasah Arabia Islamia, Azaadville, South Africa. He also holds degrees in Semitic languages, Islamic studies and religious studies. Ashraf Dockrat is a teacher at the Darul Ulums' at Madrasah Rahmaniyyah, Masjid Darus Salaam and the Jamiah al-Ulum al-Islamiyyah. He is an associate researcher of the Centre for Anthropological Research (University of Johannesburg). His research interests include Qur'anic studies, Arabic lexicography and the study of Muslim thought. He has a number of accredited publications.