MEDIEVAL THEORETICAL PRINCIPLES OF MEDICINE IN IBN SĪNĀ'S *AL-QĀNŪN FĪ AL-ṬIBB* AND AL-DHAHABĪ'S *AL-ṬIBB AL-NABAWĪ*

***Muhammad Fawwaz Muhammad Yusoff*[*], *Nur Izah Ab Razak*[**]**

[*]Faculty of Quranic and Sunnah Studies. Islamic Science University of Malaysia. 71800. Bandar Baru Nilai. Negeri Sembilan. Malaysia.
[**]Faculty of Medicine and Health Sciences. Universiti Putra Malaysia. 43400. UPM Serdang. Selangor. Malaysia.

Email: [*]fawwaz@usim.edu.my

DOI: https://doi.org/10.22452/afkar.vol22no2.4

Abstract

The Galenic account of medicine by Ibn Sīnā (d. 427AH/1037CE) was remarkably significant for natural philosophy and religious thought in the medieval Islamic world. Just as one might split philosophy in the Islamic world into eras before and after Avicenna, so one could periodise medical history into the time before and after Ibn Sīnā's glorious *al-Qānūn fī al-Ṭibb* (Canon of Medicine). This article compares the medical theory in *al-Qānūn fī al-Ṭibb* and al-Dhahabī's (d. 748/1348) *al-Ṭibb al-Nabawī* to determine if the medieval *al-Ṭibb al-Nabawī* genre was influenced by the post-Avicennian tradition. To assess this theoretical impact on the writing in the prophetic medicine genre, the article first analyses the introductory part of both writings, as well as the subsequent developments in *al-Ṭibb al-Nabawī* writings. This will form a comparative view of the medieval anatomical and philosophical positions. Given that traditional prophetic medicine is the focus of the *al-Ṭibb al-Nabawī* genre, the article turns to the question of medical theory, did al-Dhahabī really observe this topic? What role does

medical *ḥadīth* play in determining how Muslims should approach classical theories of medicine? By comparing these two works, one can see that al-Dhahabī's *al-Ṭibb al-Nabawī* developed in interaction with and extension of the *al-Qānūn fī al-Ṭibb*, as well as an attempt to bring forth a new form of medicine, that would integrate Ibn Sīnā's medical theory with Prophetic *ḥadīth*.

Keywords: *al-Ṭibb al-Nabawī*; medical *ḥadīth*; theories of medicine; al-Dhahabī; Ibn Sīnā; *al-Qānūn fī al-Ṭibb*; *Canon of Medicine*.

Khulasah

Keterangan perubatan Galen oleh Ibn Sīnā (m. 427H/1037M) mempunyai sumbangan yang signifikan terhadap falsafah tabii dan pemikiran keagamaan sewaktu Zaman Pertengahan dunia Islam. Jika seseorang boleh memisahkan falsafah dunia Islam kepada era sebelum dan era selepas Ibn Sīnā, zaman sejarah perubatan turut boleh dibahagikan kepada sebelum dan selepas penghasilan buku Ibn Sīnā yang terkenal bertajuk *al-Qānūn fī al-Ṭibb* (*Kanun Perubatan*). Dengan perbandingan terhadap teori perubatan yang terkandung di antara *al-Qānūn fī al-Ṭibb* serta *al-Ṭibb al-Nabawī* karangan al-Dhahabī (m. 748/1348), penulisan ini meneliti pengaruh pasca-tradisi Avicennian ke atas genre *al-Ṭibb al-Nabawī* di Zaman Pertengahan. Terdahulu sekali, makalah ini menganalisis bahagian pengantar kedua-dua karya bagi menilai impak teori Ibn Sīnā terhadap penulisan genre perubatan Nabi serta perkembangan seterusnya dalam tulisan *al-Ṭibb al-Nabawī*. Perkara ini akan membentuk perbandingan kedudukan sudut pandang anatomi dan falsafah Zaman Pertengahan. Memandangkan tradisi perubatan Nabi adalah merupakan tumpuan genre *al-Ṭibb al-Nabawī*, makalah ini akan beralih kepada persoalan teori perubatan iaitu sejauh mana al-Dhahabī benar-benar menuruti topik ini? Apakah peranan yang dimainkan oleh hadis perubatan dalam menentukan pendekatan

Muslim berhubung teori-teori perubatan klasik? Menerusi perbandingan kedua-dua karya ini, seseorang dapat melihat *al-Ṭibb Al-Nabawī* oleh al-Dhahabī berkembang melalui interaksi serta lanjutan daripada *al-Qānūn fī al-Ṭibb*, dan percubaan untuk menghasilkan suatu bentuk perubatan baharu yang menggabungkan teori perubatan Ibn Sīnā dan hadis Nabawī.

Kata kunci: *al-Ṭibb al-Nabawī*; hadis perubatan; teori perubatan; al-Dhahabī; Ibn Sīnā; *al-Qānūn fī al-Ṭibb*; *Kanun Perubatan*.

Introduction

When we ponder the bond between Prophetic medicine and the social practice of medicine, we tend to think first of the transmission from the prophet into *ḥadīth* literatures in the early centuries of Islam and to forget that there was also transmission in the other direction. Partly as a result of this, this field has received little scholarly attention, be it in the form of straightforward narration through the generations or of the social practice used as sources in the writing of the prophetic medicine genre.

Those *ḥadīth* scholars who continued to use medical *ḥadīth* as their literary medium did not live in isolation from their increasingly Graeco-Arabic medical surroundings, and those authors writing in the prophetic medicine genre were clearly influenced by the scientific developments taking place under Islam.[1] Indeed, borrowings from Graeco-Arabic medicine may have increased with the advancement of the sciences in Islamic civilisation and such borrowings may have been quite common by the time we reach the fourth/tenth and fifth/eleventh centuries, the so-called 'border' between the early and middle periods for the genre.

[1] Maḥmūd Naẓīm al-Nasīmī, *al-Ṭibb al-Nabawī wa 'Ilm al-Ḥadīth* (Beirut: Mu'assasah al-Risālah, 1996), 7.

In the earliest writings in this prophetic medicine genre, the *raison d'être* appears to have been a reaction to the *tark al-tadāwī* (rejection of medication) or anti-medical views present in the Muslim community.[2] Some religious scholars claimed that a person who resorted to medication acted against the Qur'ānic injunction: "In God let the believers put all their trust."[3] Other scholars refuted these arguments by referring to abundant *ḥadīth* material attesting the Prophet's approval of medicine. One of the most explicit sayings is: "Servants of God, use medicaments! God did not give an illness without giving it a cure."[4]

It is possible that the earliest prophetic medicine literature was produced specifically with the intention to oppose such anti-medical views. Abundant recorded sayings demonstrated that the Prophet had not only commanded Muslims to be medicated but also that he himself had received medical treatment. Throughout their history, most of the Muslim community believed medication to be the Sunna of the Prophet and rejected the idea that medical care signified a deficiency in belief.[5]

Some previous studies on Muslim medicine have dealt concisely with Prophetic medicine and the accustomed motivations for its composition. Ullman says that Islamic orthodoxy wanted thereby to challenge the

[2] Irmeli Perho, "Medicine and the Qur'ān", in *Encyclopaedia of the Qur'ān*, General Ed. Jane Dammen McAuliffe (Washington DC: Georgetown University, 2019).

[3] The Quran, 9:51; See also Muḥammad Khalīd Manṣūr, *al-Aḥkām al-Ṭibbiyah al-Muta'alliqah bi al-Nisā' fī al-Fiqh al-Islāmī* (Amman: Dār al-Nafā'is, 1999), 18.

[4] Ibn Mājah, *Sunan Ibn Mājah*, ed. Muḥammad Fu'ād 'Abd al-Bāqī (Beirut: Dār Iḥyā' al-Kutub al-'Arabiyyah, n.d), no. 3436, 1137.

[5] Ibn Qayyim, *al-Ṭibb al-Nabawī* (Riyadh: Dār al-Salām li-Nashr wa al-Tawzī', 1433H), 16.

medical authority of the 'pagan Galen' on behalf of the Prophet's authority.[6]

However, the regular quotations from Hippocrates (c. 370 BCE), Galen (c. 210 CE), Ibn Sīnā and 'Abd al-Laṭīf al-Baghdādī (d. 629/1231), especially in the middle period of *al-ṭibb al-nabawī* genre, reveals that the medical theory and practice of these scholars were admired by the authors.[7] A more thorough arrangement of Prophetic medical writing is given by Rahman in his book *Health and Medicine in the Islamic Tradition: Change and Identity*.[8] The book contains a chapter on Prophetic medicine, in which Rahman analyses the numerous reasons its inventors had for producing it at some length. According to Rahman, this genre of Prophetic medicine was "an attempt to spiritualize medicine, to set high religious value on it, and to bring it to the centre of Islamic concerns."[9]

Scarcely distinct from Rahman's argument, Perho opines that the *al-ṭibb al-nabawī* genre was an attempt to bring forth a new form of medicine that would combine Islamic teachings and Graeco-Arabic medical theory.[10] As Ragab explains, prophetic medicine appeared as both a textual genre and a subject heading under which certain

---

[6] Manfred Ullman, *Die Medizin im Islam* (Leiden: Köln: E.J. Brill, 1970), 185.

[7] Fazlur Rahman, *Health and Medicine in the Islamic Tradition* (Kuala Lumpur: S. Abdul Majeed & Co, 1993); Kamran I. Karimullah, "Assessing Avicenna's (d. 428/1037) Medical Influence in Prolegomena to Post-Classical (1100–1900 CE) Medical Commentaries," *MIDÉO* 32 (2017), 93-134; Asim Abdelmoneim Hussein, et al., "Prophetic Medicine, Islamic Medicine, Traditional Arabic and Islamic Medicine (TAIM): Revisiting Concepts and Definitions," *Acta Scientific Medical Sciences* 3(8) (2019), 62-69.

[8] Fazlur Rahman, *Health and Medicine in the Islamic Tradition*, 41.

[9] *Ibid*., 42.

[10] Irmeli Perho, *The Prophet's Medicine: A Creation of the Muslim Traditionalist Scholars* (Finland: University of Helsinki, 1995), 78.

ḥadīth were organised.[11] The composition and organisation of medical *ḥadīth* were thus prepared on the diseases suffered by the Prophet or by his companions and diligently followed the events of their lives, but did not present what seemed significant for physicians or scholars interested in medicine. In short, they were chapters of the Prophetic corpus that appeared connected to medicine.[12]

Al-Nasīmī, meanwhile, sought to determine the way in which a series of Muslim scholars, especially ḥadīth scholars, formulated the guidance of the Prophet in light of current medical theory and practice. Al-Nasīmī's three-volume work *al-Ṭibb al-Nabawī wa 'Ilm al-Ḥadīth* differs somewhat from other studies in that it also contains a section dealing with medieval Prophetic medical texts. The author gives a rather detailed description of ten existing manuscripts, listing their contents and giving information on the sources the authors had used.

Interestingly, in his analysis of the development of the Prophetic medicine genre, al-Nasīmī precisely recognises significant discrepancies between the medical chapters in early and canonical *ḥadīth* collections, such as those of al-Bukhārī (d. 256/870), and Muslim (d. 261/875) and later writings such as those by al-Dhahabī (d. 748/1348), Ibn al-Qayyim (d. 751/1350) and Ibn Mufliḥ (d. 763/1362).[13] He illustrates that the later writings displayed strong consideration of the details of Greek medicine and were in agreement with the interests of medical theories and practice. Perho points out that these influences are chiefly in reference to the writings of physicians such as 'Abd al-Laṭīf al-Baghdādī (d. 629/1231) and Ibn Tarkhān (d. 720/1320), who composed books on Prophetic medicine and presumably provided

[11] Ahmed Ragab, *Piety and Patienthood in Medieval Islam* (New York: Routledge, 2018), 86.
[12] *Ibid*.
[13] Al-Nasīmī, *al-Ṭibb al-Nabawī wa 'Ilm al-Ḥadīth*, 8.

religious scholars with a template to address medical theory and practice.[14]

According to Lewicka, Ibn al-Jawzī (d. 597/1200) and ʻAbd al-Laṭīf al-Baghdādī used their expertise to combine the medical *ḥadīth* with the teachings of Greek-based medicine.[15] Ibn al-Jawzī wrote two books on medical subjects, and spiritual crises such as stinginess or envy and their purifications were the subject of his book, *al-Ṭibb al-Rūḥāni* (*Spiritual Medicine*). Here Ibn al-Jawzī explored similar issues pertaining to the effects of ethics upon the body and soul as undertaken by the physicians of the Graeco-Arabic school. The second book was *al-Luqat al-Manāfiʻ fī al-Ṭibb* (*Selections of the Benefits of Medicine*), which focused on physical diseases and their cures.

However, in Ibn al-Jawzī's work, *ḥadīth* are fairly sporadic and the structure of the integration of the two kinds of knowledge is not directly visible. Although his writing incorporated a large amount of the Prophetic corpus, it was presented as a concise medical work aimed at the educated public and not naturally a book of *ḥadīth*. Ragab adds that ʻAbd al-Laṭīf al-Baghdādī and Ibn Ṭarkhān copied extensively from Ibn al-Jawzī's *Luqat al-Manāfiʻ*.[16] In fact, ʻAbd al-Laṭīf al-Baghdādī's work was more systematic; he included forty *ḥadīth* from *Sunan Ibn Mājah* and elucidated each in terms of its consistency with existing Graeco-Arabic principles, thus indicating how truthful the divinely inspired Prophet's *ḥadīth* were when referring to various health matters. His book is entitled *al-*

[14] Perho, *The Prophet's Medicine*, 40.

[15] Paulina B. Lewicka, "*Medicine for Muslims? Islamic Theologians, Non-Muslim Physicians and the Medical Culture of the Mamluk Near East*," in ASK Working Paper 03 (History and Society during the Mamluk Era (1250-1517) (Bonn: Annemarie Schimmel Kolleg, 2012), 10.

[16] Ragab, *Piety and Patienthood in Medieval Islam*, 86-87.

Arba'īn al-Ṭibbiyyah al-Mustakhraj min Sunan Ibn Mājah wa Sharḥuha li al-'Allāmah al-Tabīb 'Abd al-Laṭīf al-Baghdādī 'amal Tilmīdhah Muḥammad ibn Yūsuf al-Birzalī (*Derivation of Forty Medical Ḥadīth from Sunan Ibn Mājah and their Commentary by Distinguished Doctor 'Abd al-Laṭīf al-Baghdādī, Prepared by His Student Muḥammad ibn Yūsuf al-Birzalī*).[17]

'Abd al-Laṭīf Al-Baghdādī was reported to have written a few books on *ḥadīth*. Perhaps the most important among these was his work on *mukhtalif al-ḥadīth*, or contradictory traditions.[18] As an intellectual physician, he also wrote a critique of Fakhr al-Dīn al-Rāzī's (d. 606/1209) commentary on the first section of Ibn Sīnā's *al-Qānūn fī al-Ṭibb* discussing *kulliyyāt* (generalities).[19] 'Abd al-Laṭīf al-Baghdādī warned his students, however, against relying simply on the generalities in the *Qānūn*.[20]

He composed a commentary on Ḥunayn ibn Isḥāq's (d. 260/873) *al-Masā'il al-Ṭibbīyah* (*Medical Questions*), which, like the *Qānūn*, had become a standard textbook by his day. Thus, although 'Abd al-Laṭīf claimed to view the medical textbooks of his time – including the abridgments of Greek works and the generalities of Ibn Sīnā's *Qānūn* – with antagonism, he himself engaged with the material.[21]

---

[17] 'Abd al-Laṭīf al-Baghdādī, *al-Arba'īn al-Ṭibbiyyah al-Mustakhraj min Sunan Ibn Mājah wa Sharḥuha*, ed. Kamāl Yūsuf Hūt (Beirut: Mu'assasah al-Kutub al-Thaqāfiyyah, 1985).

[18] Ragab, *Piety and Patienthood in Medieval Islam*, 174.

[19] N. Peter Joosse and Peter E. Pormann, "'Abd al-Laṭīf al-Baġdādī's Commentary on Hippocrates' 'Prognostic': A Preliminary Exploration," in *Epidemics in Context Greek Commentaries on Hippocrates in the Arabic Tradition (251-284)*, ed. Peter E. Pormann (Berlin: De Gruyter, 2012), 211.

[20] Cecilia Martini Bonadeo, *'Abd al-Laṭīf al-Baġdādī's Philosophical Journey from Aristotle's Metaphysics to the 'Metaphysical Science'* (Leiden: Brill, 2013), 180.

[21] Joosse & Pormann, "'Abd al-Laṭīf al-Baġdādī's Commentary," 252.

Indeed, ʻAbd al-Laṭīf even presented himself as breaking away from Ibn Sīnā's natural philosophy, but still remained in Ibn Sīnā's shadow in the sense that he largely responded to the medical agenda Ibn Sīnā had set centuries earlier. Accordingly, Ibn Sīnā's impact extended even beyond his indirect influence on those composing and commenting on new medical treatises that were modelled on and borrowed profoundly from Ibn Sīnā's own works, even as they modified elements of his thought and harmonised the apparent incongruities.[22]

Scope and Methodology

Ibn Sīnā's Galenic account of medicine was remarkably significant for natural philosophy and religious thought in the medieval Islamic world. Just as one might split philosophy in the Islamic world into an era before and after Avicennian tradition, so one could periodise medical history into the time before and after Ibn Sīnā's *al-Qānūn fī al-Ṭibb*, which continued to be a medical authority for centuries.

The book designates guidelines for medicine not only in the Islamic world but also in Medieval Europe and was adopted as a standard medical textbook through the eighteenth century in Europe.[23] In his autobiography, Ibn Sīnā appeared to categorise medicine under the heading of *ṭabīʻiyyāt* (physics or natural sciences),[24] whereas in his *Risālah fī Aqsām al-ʻUlūm* (*Epistle on the Division of Sciences*), he classified medicine as a derivative natural science (*al-ḥikmah al-ṭabīʻiyyāh al-farʻiyyah*). In the philosophical encyclopaedia called *al-Mashrīqiyyūn* (the

[22] Robert Wisnovsky, "Avicenna's Islamic Reception," *Interpreting Avicenna Critical Essays*, ed. Peter Adamson (Cambridge University Press, 2013), 190.

[23] Jon McGinnis, *Avicenna (Great Medieval Thinkers Series)* (Oxford: Oxford University Press, 2010), 227.

[24] Ibn Sīnā, al-Ḥusayn bin ʻAlī, *Tis' Rasā'il fī al-Ḥikmah wa al-Ṭabī'iyyāt* (Cairo: Dār al-ʻArab li al-Bustānī, 1989), 110.

Easterners), which he wrote later in life, he further downgraded medicine, categorising it with astrology and agriculture as a corollary science.[25]

Given the importance of Ibn Sīnā in medical genre writings during the medieval era, it may also be expected that borrowings in the Prophetic medicine genre will often go back either straight or indirectly to the writings of Ibn Sīnā, which does indeed appear to be the case in the writings of the prominent Mamluk *ḥadīth* scholar, Shams al-Dīn al-Dhahabī.

To advance this hypothesis, this article explores the *al-Qānūn fī al-Ṭibb* (*Canon of Medicine*),[26] which presents the ontological structure of man, and in particular, the basic and interrelated elements of the body. Presumably, then, religious and scientific scholars during al-Dhahabī's era were not solely occupied with adopting Ibn Sīnā's works on medicine. As mentioned earlier, their works also included epitomes of and commentaries on Ibn Sīnā's *Qānūn* or *Kitāb al-Shifā'* (Book of Healing).

Although al-Dhahabī did not regularly mention Ibn Sīnā in his *al-Ṭibb al-Nabawī*, we must assume that Ibn Sīnā must have influenced him in one way or another, at least in the early stages of his compositional development.[27] This article will be followed by an attempt to isolate and analyse the major theoretical concepts underlying the medical thought of Ibn Sīnā; the same kind of analytic study will then be made of al-Dhahabī.

---

[25] Peter E. Pormann, "Avicenna on Medical Practice, Epistemology, and the Physiology of the Inner Senses," *Interpreting Avicenna Critical Essays*, ed. Peter Adamson (Cambridge: Cambridge University Press, 2013), 93.

[26] Ibn Sīnā, *al-Qānūn fi al-Ṭibb*, ed. Muḥammad Amīn al-Dannawī (Beirut: Dār al-Kutub al-'Ilmiyyah, 1999); Avicenna, *The Canon of Medicine*, trans. Laleh Bakhtiar (New York, AMS Press Inc., 1973).

[27] Muḥammad bin Aḥmad bin 'Uthmān al-Dhahabī, Abū 'Abd Allāh Shams al-Dīn, *al-Ṭibb al-Nabawī*, ed. Aḥmad Rif'āt al-Badrawī (Beirut: Dār Iḥyā' 'Ulūm, 1990).

The present work, in any case, consists exclusively of an analysis of introductory part of the *Qānūn* and *al-Ṭibb al-Nabawī* of al-Dhahabī to elucidate the theoretical rule of medicine in the Islamic intellectual tradition. When compared to other earlier or contemporaneous exemplars of the Prophetic medicine genre, al-Dhahabī's writing shows a special attention to juxtaposing Greek medical theory with Prophetic *ḥadīth*. The similarity of the overall framework of the *Ṭibb* and much of its content to that of Ibn Sīnā's *Qānūn* could then be placed in proximity.

Al-Qānūn fī al-Ṭibb of Ibn Sīnā

According to Seyyed Hossein Nasr, Ibn Sīnā's writings on medicine are a synthesis of "Greek, Indian, and Iranian schools of medicine as well as fresh material derived from the experience and practice of the Muslim physicians themselves."[28] Ibn Sīnā relied heavily on Abū al-Ḥasan ʻAlī b. Sahl Rabban al-Ṭabarī's (d. 256/870) *Firdaws al-Ḥikmah* (*The Paradise of Wisdom*),[29] Muḥammad Zakariyyā al-Rāzī's (d. 313/925) *Kitāb al-Ḥāwi* (*The Virtuous Life*), otherwise known as *al-Jāmi''s*, or compendium of medicine, which was translated into Latin in 1279 under the title *Continens*, and *Kitāb al-Mansuri* (Latin: *Liber Almansoris*),[30] and ʻAlī b. ʻAbbās al-Ahwazī's (d. 384/994) *Kitāb Kāmil al-Ṣinā'ah al-Ṭibbiyyah* (*Complete Book of the Medical Art*).[31]

---

[28] Seyyed Hossein Nasr, *Three Muslim Sages Avicenna: Avicenna, Suhrawardi, Ibn Arabi* (New York: Caravan Books, 1997), 33.

[29] Sami K. Hamarneh, "Al-Tabari", in *Encyclopaedia of the History of Science, Technology, and Medicine in Non-Western Cultures* ed. Selin, Helaine (Dordrecht: Kluwer Academic Publisher,1997), 930.

[30] Majid Fakhry, *A History of Islamic Philosophy* (Columbia University Press, 2004), 98.

[31] L. Richter-Bernburg, "ʿAlī b. ʿAbbās Majūsī," *Encyclopædia Iranica*, I/8, 837-838, available online at http://www.iranicaonline.org/articles/ali-b-abbas-majusi.

The *al-Qānūn fī al-Ṭibb* of Ibn Sīnā was based to a great extant on these writings and because of its arrangement, organisation, and perfection happened to replace them as the textbook adopted by medical students and physicians, as described by Quṭb al-Dīn al-Shīrāzī.[32]

The *Qānūn*, Ibn Sīnā's greatest medical writing, is possibly the most productive source for the study of the theoretical and empirical dimension of Ibn Sīnā's contribution to the sciences of nature. This *magnum opus* is divided into five books, each arranged into divisions and chapters, and the five major components conforming with such general principles of medicine as: (1) the characterisation of the human anatomy or physical structure, its constitution or the cosmic elements that make up the cosmos and the human body, the mutual interaction of elements (temperaments), the fluids of the body (humours), human anatomy, and physiology; (2) *materia medica*; (3) special pathology; (4) special diseases involving more than one member; and (5) pharmacology.

This last section is a particular treasure from an empirical way of thinking. Nasr adds that the *Qānūn* is a synthesis of the traditions of Hippocrates, Galen and Dioscorides, as well as encompassing much that is not established in Greek authorship, particularly about the use of herbs in the treatment of numerous diseases.[33]

The first book of the *Qānūn*, which is the focus of this article, is made up of four treatises. The first treatise gives a general account of medicine, the four elements (earth, air, fire and water) in light of the Greek physician Galen of Pergamum's four humours (blood, phlegm, yellow bile and black bile); the mutual interaction of the elements (temperaments); and human anatomy and physiology. The second treatise explores aetiology

[32] Nasr, *Three Muslim Sages*, 34.
[33] *Ibid.*

(causation) and symptoms, while the third includes hygiene, health, disease and death. The fourth treatise is a therapeutic nosology (classification of disease) and a general overview of regimens and dietary treatments.

The introductory part of the *al-Qānūn* is worth unveiling, as it reveals Ibn Sīnā's preferences; he argues that, although medicine consists of both *naẓarī* (theoretical) and *'amalī* (practical) components, he is more interested in the science of medicine, which is made up of theoretical part.[34] Nonetheless, even the practical segment deals with the theory of application, or, as Ibn Sīnā expresses it: "*'ilmun 'ilmiyyun, wa 'ilmun 'amaliyyun, wa in lam tu'mal qaṭṭ* (medicine is a theoretical science and a practical science, even if it is never practised)."[35] Undeniably, there is also information about *mubsharah* (the substantial practice of medicine), but this is not a topic with which Ibn Sīnā concerns himself in the *Qānūn*. In other words, Ibn Sīnā draws from the possibility of merely engaging in practical matters.

Al-Ṭibb al-Nabawī of al-Dhahabī

In general, *al-ṭibb al-nabawī* or the Prophetic medicine genre consists of multidisciplinary theory and practices in which could be discovered not only a text entitled *al-Ṭibb al-Nabawī* (*Prophetic Medicine*) but also *ḥadīth* collections, jurisprudence books and many others. Throughout history, this type of sacred medicine has led *ḥadīth* scholars to create a specific genre with a view to preserving and imitating the traditional sayings and acts of the Prophet.

'Alī al-Bār explored references to some forty different books – some published and some lost – with the

[34] Ibn Sīnā, *al-Qānūn fi al-Ṭibb*, 9.
[35] *Ibid*, 13.

title Prophetic Medicine.[36] He considers "the best-selling book" of this genre to be that written by Ibn Qayyim al-Jawzīyyah (d. 751AH/1351CE), which was part of his famous collection *Zād al-Maʿād* (*Provisions for the Hereafter*).

In the Prophetic medicine part, Ibn al-Qayyim clarified the theological importance of medical principles in much more detail than al-Dhahabī's *al-Ṭibb al-Nabawī*.[37] Al-Dhahabī largely acknowledged the current Graeco-Arabic theories, while Ibn al-Qayyim tended to revise such theories to carry out theological concerns. For example, Ibn al-Qayyim thought that the idea of the four elements (earth, water, air, fire) was not compatible with the principles provided in the Quran, as there was no single *āyāh* (verse/sign) in the Quran affirming that Allah had created man from fire.[38]

Certainly, this theory of elements was based on the medical expertise of Hippocrates, Galen, Zakariyyā al-Rāzī, Ibn Sīnā and many others. Al-Dhahabī celebrated Hippocrates as the chief of medicine and Galen as his successor in the rank of expert.[39] Ibn al-Qayyim did not, however, give Hippocrates a higher position than others, but admitted that Hippocrates' medical science had been as significant for his community, the Greeks, as al-Ḥārith b. Kalada's had been for the Arabs.[40] Here, both the origins and the originality of Islamic medicine continued to attract the attention of *ḥadīth* scholars, especially those of al-Dhahabī's generation.

[36] Muḥammad ʿAlī al-Bar, *Mawsuʿah al-Ṭibb al-Nabawī* (Jeddah: Dār Kunūz Maʿrifah, 2016).
[37] Perho, *The Prophet's Medicine*, 58.
[38] Ibn Qayyim, *al-Ṭibb al-Nabawī*, 34.
[39] Al-Dhahabī, *al-Ṭibb al-Nabawī*, 35.
[40] Perho, *The Prophet's Medicine*, 84.

Some scholars assert the existence of foreign influence, while others ardently argue against it.[41] In the introductory part of the Prophetic medicine writing, some *ḥadīth* scholars like Ibn al-Qayyim discussed the origin and founders of medical theory and practice. Franz Rosenthal observes that there was an entire genre of literature, familiar in the medieval era, devoted to the study of the *Awā'il*, or the *firsts*, in which authors traced diverse intellectual traditions to their apparent founders, as well as those who commenced this particular practice.[42] *Awā'il* is technically used to denote various ideas such as the primary data of philosophical or physical phenomena; the ancients of either pre-Islamic or early Islamic times; and the first inventors of things (or the things invented or done first).

This pedigree of the origin of intellectual activity provides the foundation for a historical investigation in which the concerned routines attained their legitimacy and determined the essence of their identity from their recognised founders. Ragab asserts that "this genealogical root, usually tracing back to a prophet, a saint or a recipient of some form of divine or inspired knowledge, allowed for the vertical arrangement of the society, where professionals and intellectuals traced their belonging to a distant past."[43]

---

[41] Muhammad Fawwaz bin Muhammad Yusoff, "On Biographical Dictionaries of Ḥadīth Transmitters: Rethinking Development in the Islamic Literature," *Al-Bayan: Journal of Qur'an and Ḥadīth Studies* 17(2) (Dec 2019), 130.

[42] Franz Rosenthal, "Awā'il," in *Encyclopaedia of Islam, Second Edition* (Leiden: Brill, 1986), 758.

[43] Ahmed Ragab, "The Prophets of Medicine and the Medicine of The Prophet: Debates on Medical Theory and Practice in the Medieval Middle East," paper presented at Harvard University, Center for Middle Eastern Studies and Harvard Society of Arab Students, Cambridge, Massachusetts, November 2009, 4. See http://nrs.harvard.edu/urn-3:HUL.InstRepos:4726204

On the whole, faithfully producing an authentically Islamic medicine appeared to be the underlying aspiration for the writing of *al-Ṭibb al-Nabawī*. In trying to equip the Muslims with a medical practice that conformed to their *Weltanschauung* and met their obligations, *ḥadīth* scholars wanted to build a corpus based on an Islamic revelational foundation. Its central authority should be situated in the Quran and Sunna and not in foreign sciences. *Ḥadīth* scholars believed that all of the principles of medical knowledge were contained in the Quran and Sunna and there was an exoteric interpretation of both that constituted the revelation of their authority.[44]

The eight/fourteenth century corpus of al-Dhahabī signified the late medieval era of the genre development. Al-Dhahabī combined the Prophet's medical sayings with the medical teachings of Ibn Sīnā in his descriptions of the aetiology, prevention and treatment of illnesses. On the basis of the material we have consulted, he seems to have been the first one to accept Ibn Sīnā's medical thought totally by integrating Prophetic medicine in this manner. In general, al-Dhahabī's *al-Ṭibb al-Nabawī* is arranged in a trichotomy.

In the introduction, al-Dhahabī explains the arrangement of his writing into three major parts: "I have divided this book into three parts: first, medical principles: theory and practice; second, drugs and foods; third, treatment of diseases."[45] First and foremost, al-Dhahabī presents classical theoretical principles describing the elements and humours and giving the general causes for

[44] Muhammad Fawwaz bin Muhammad Yusoff, "Ḥadīth Scholar and Historiography: Some Reflections on the Sīra Corpora of Ibn Ḥibbān al-Bustī's (d. 354/965) Kitāb al-Ṯiqāt," *Arabica* 66(5) (Nov 2019), 505; See also Muhammad Fawwaz bin Muhammad Yusoff, "The Authentication of Ḥadīth: Ibn Ḥibbān's Introduction to His Ṣaḥīḥ", *Al-Masāq: Journal of the Medieval Mediterranean* (2020). DOI: 10.1080/09503110.2020.1712546.

[45] Al-Dhahabī, *al-Ṭibb al-Nabawī*, 19.

illnesses, followed by descriptions of practical rules or methods for preventing illnesses.

The second part consists of an alphabetical list of the names and treatments of diverse foodstuffs and medicaments. Al-Dhahabī then discusses peculiar illnesses and their medications in the third part. According to Perho, al-Dhahabī's *al-Ṭibb al-Nabawī* follows in the footsteps of the earlier Prophetic medical work, Ibn al-Jawzī's *Luqat al-Manāfi'*, in being a kind of comprehensive medical guidebook. The two works examine the underlying principles of medical theory and provide instructions in functional treatment, although al-Dhahabī applies the *ḥadīth* far more frequently than Ibn al-Jawzī does.[46]

Although a comprehensive analysis of the whole *al-Ṭibb al-Nabawī* would be beneficial, we only concentrate on the first part of al-Dhahabī's writing – the theory of medicine in comparison with Ibn Sīnā's medical thought. The first section on medical principles is built around the following four core ideas: (1) natural matters, (2) state of the body of man, (3) cause/aetiology and (4) signs. This article especially concerns al-Dhahabī's arrangement on natural matters.

Undoubtedly, Ibn Sīnā contributed largely to the subject of natural philosophy, or physics, which, in the strict sense is the study of nature. The term *ṭabī'ah* is the standard Arabic translation for the Greek *phusis*, which means nature.[47] As others have done before him, Ibn Sīnā recognised natural philosophy as the study of the body insofar as it is subject to motion. Nevertheless, we will focus only on the nature of the body as matter, but not on his account of motion. This concept of natural matter,

[46] Perho, *The Prophet's Medicine*, 58.

[47] Jon McGinnis, "Avicenna's Natural Philosophy," *Interpreting Avicenna Critical Essays*, ed. Peter Adamson (Cambridge: Cambridge University Press, 2013), 71.

which underlies the notion of al-Dhahabī, will be compared with the medical thought of Ibn Sīnā, allowing a comparative view of the philosophical, anatomical and physiological positions of these two writers.

Below is a table of medical theories of al-Dhahabī and Ibn Sīnā:

Subject	Al-Dhahabī	Ibn Sīnā
Stance of medical theory	"I have divided this book into three crafts: First, the theoretical rule of medicine: its *'ilm* (theory) and *'amal* (practice). Second, drugs and food. Third, treatment of diseases."[48]	"But truly every science has both *naẓar* (speculative /theoretical) and *'amal* (practical)."[49]
Medical theory	"The theory is subdivided into four sub-sections: The theory of the natural matters, the theory [concerns] the state of the body of man, the theory of *al-asbāb* (cause or aetiology), and the theory [deals] with *al-'alāmāt* (signs)."[50]	"The difference between two (theory and practice) need be explained in the case of medicine. Thus, in regard to medicine, we say that practice proceeds from theory, we do not mean that there is one division of medicine by which we know, and another, distinct therefrom, by which we act. We mean that these two aspects belong together – one deals with the basic principles of knowledge; the other with the mode of operation of these principles (within

[48] Al-Dhahabī, *al-Ṭibb al-Nabawī*, 19.
[49] Ibn Sīnā, *al-Qānūn fi al-Ṭibb*, 13.
[50] Al-Dhahabī, *al-Ṭibb al-Nabawī*, 21.

		the body). The former is theory; the latter is applied knowledge."[51]
Natural Matters	"The natural matters are seven: *al-arkān* (the elements), *al-mizāj* (the temperaments), *al-akhlāṭ al-arbaʿah* (the four humours/humoral pathology), *al-aʿḍā al-aṣliyyah* (fundamental organs), *al-arwāḥ* (the spirits), *al-quwwah* (the faculties), *al-afʿāl* (the functions)."[52]	This topic is diminutive to discuss about Ibn Sīnā's thought. The significance of natural matters, Ibn Sīnā's physics in particular, is twofold. First, it signifies Ibn Sīnā's finest effort to elucidate the sensible world in which we live and to provide the principles for many of the other different sciences. Second, Ibn Sīnā's natural philosophy lays the foundations for a complete understanding of his advancements in other fields.
States of the Body	"Three states of the body are possible – health, disease and a condition which is neither health nor disease."[53]	"Another thing – there is no need to assert that "there are three states of human body – sickness, health, and a state which is neither health nor disease." The first two cover everything."[54]
Causes	"The causes are six: *al-hawā'* (air), food and drink, *al-badaniyan* (bodily) movement and rest, *al-nafsaniyan*	"There are four kinds of "cause": *mādiyāt* (material), *faʿiliyāt* (efficient), *suriyāt* (formal), *tamāmiyāt*

[51] Ibn Sīnā, *al-Qānūn fi al-Ṭibb*, 13.
[52] Al-Dhahabī, *al-Ṭibb al-Nabawī*, 21.
[53] *Ibid.*, 25.
[54] Ibn Sīnā, *al-Qānūn fi al-Ṭibb*, 14.

	(emotional) movement and rest, waking and sleeping, excretion and retention."[55]	(final)."[56]

Table 1: Medical Theories of al-Dhahabī and Ibn Sīnā

Analysis: Seven Natural Matters

Al-Dhahabī systematically followed the seven subdivisions of *al-umūr al-ṭabī'iyyah* (natural matters). His explanation is superficial, without any further commentary on the various natural matters. Although lacking profundity, his discussions illustrate that he accepted the integral foundation of Ibn Sīnā's theory or, in more general terms, Graeco-Arabic medical theory. It should be emphasised that he very rarely referred to the Quran or Sunnah to support the anatomical or philosophical structure he presented. This suggests that Graeco-Arabic medical theory was considered conclusively proved even among *ḥadīth* scholars. Al-Dhahabī apparently regarded medical theory as reasonable and saw nothing objectionable in it. Perhaps for this reason, he saw no need for theological discourse.

Elements

Al-Dhahabī began to elaborate the first component of natural matters, *al-arkān* (the elements). He says, "the elements are four in number – fire which is hot and dry, air which is hot and wet, water which is cold and wet, and earth which is cold and dry."[57] Ibn Sīnā's thesis on the elements of the cosmos is seemingly "the foundation of the whole *Canon*." The elements, as Ibn Sīnā stated at the beginning of this topic, "are the primary components of the human being throughout all its parts, as well as other

[55] Al-Dhahabī, *al-Ṭibb al-Nabawī*, 28.
[56] Ibn Sīnā, *al-Qānūn fi al-Ṭibb*, 14.
[57] Al-Dhahabī, *al-Ṭibb al-Nabawī*, 21.

bodies in their varied and diverse form."[58] Ibn Sīnā asserts that the physician must accept these four elements, two of which are light, and two are heavy. These elements are not "matter," but have only a virtual existence. The lighter elements are fire and air and the heavier are earth and water. The elements resulting from this natural philosophy is summarised by Ibn Sīnā as follows[59]:

> "Earth is an 'element' normally situated at the centre of all existence… It is cold and dry in nature, and it appears so to our sense as long as it is not interfered with by extraneous agencies and obeys its own peculiar nature. It is by means of the earthy element that the parts of our body are fixed and held together into a compacted form.
>
> Water is a simple substance whose position in nature is exterior to the Earth, and interior to the Air. This position is owing to its relative density. In nature it is cold and moist.
>
> Air is a simple substance, whose position in nature is above the sphere of Water, and beneath that of Fire… in nature it is hot and moist.
>
> Fire is a simple substance which occupies a position in nature higher than that of the other three elements – namely the hollow of the sublunary world, for it reaches to the (world of the) heavens. All things return to it. This is because of its absolute lightness. In nature it is hot and dry."

Temperament

Al-Mizāj (the temperament) is a proto-psychological theory that suggests four fundamental personality types:

[58] Ibn Sīnā, *al-Qānūn fi al-Ṭibb*, 17.
[59] *Ibid.*

sanguine, choleric, melancholic, and phlegmatic. Historically, Galen (129 – c. 200 CE) produced the first classification of temperament in his treatise *De Temperamentis* and explored the physiological basis for different behaviours in human beings.[60] Adapting from the four elements, he classified the temperaments as hot, cold, dry, and wet. Considering the significance of temperament in traditional medicine, Ibn Sīnā divides temperament into that which is harmonious and that which is non-uniform.[61]

Ibn Sīnā says: "Temperament is that quality which results from the mutual interaction and inter-passion of the four contrary primary qualities residing within the (imponderable) elements."[62] Ibn Sīnā asserts that the personality of people is based on their unique temperament, which would later complement the unique genetic formation of each individual and presage the central notion of interindividual divergence.[63] Basically, the temperament or mixture of a person represents his or her physical constitution and tendencies and was a part of the theory of the four humours, which is the next concept of the seven natural matters presented by al-Dhahabī.

Al-Dhahabī's presentation of *al-mizāj* is supported with five *ḥadīth* from the *Saḥīḥayn*, the highest authority in Sunni canonical *ḥadīth* collection. The application of *ḥadīth* was not to show support or disprove the medical theory, however, but to admire the Prophet. Furthermore, al-Dhahabī articulated his agreement with the Galenic

[60] Pierro Tassinari, "Mixtures," in *Galen: Works on Human Nature*, ed. P. Singer & P. Van der Eijk (Cambridge: Cambridge University Press, 2019), 47.

[61] Ibn Sīnā, *al-Qānūn fi al-Ṭibb*, 19.

[62] *Ibid*.

[63] Asadollahi, R., Asadollahi, H, "Avicenna's View on Medical Genetics," *Genet Med* 15 (2013), 410–411.

view that man was, temperamentally, the most at equilibrium among animate things.[64]

He gives further expression on this by asserting that the most balanced among human beings were the *mu'minūn* (believers), and among the believers the *anbiyā'* (prophets), and among the prophets the *rusul* (messengers), and among the messengers the *ūlū al-'azm* (those of the perseverance and strong will), and among these the Prophet Muḥammad, who had the most balanced temperament.

Four Humours

For a comprehensive discussion of humoral pathology, its history and influence, the text must be considered from the perspective of at least two intellectual and medical traditions, the Greek and the Muslim. Following the humoral pathology of Hippocrates, Ibn Sīnā considers *al-akhlāṭ al-arba'ah* (the four humours) as the elements within the body.[65] According to Savage-Smith, the concept of four bodily humours was one of the undisputable medical ideas universally assimilated with little or no challenge throughout the Islamic world.[66]

As Dimitri Gutas has observed in his work *Medical Theory and Scientific Method in the Era of Ibn Sīnā*, "the theory and principles of humoral pathology are to be accepted as given in natural science (physics) and their investigation is declared off-limits to the physician."[67] The

[64] Al-Dhahabī, *al-Ṭibb al-Nabawī*, 21.

[65] Emilie Savage-Smith, "Were the Four Humours Fundamental to Medieval Islamic Medical Practice?" in *The Body in Balance: Humoral Medicines in Practice*, ed. Peregrine Horden and Elisabeth Hsu (New York: Berghahn Books Inc., 2013), 90.

[66] *Ibid*.

[67] Dimitri Gutas, "Medical Theory and Scientific Method," in *Before and After Avicenna, Proceedings of the First Conference of the Avicenna Study Group*, ed. David C. Reisman and Ahmed H. al-Rahim (Leiden: Brill, 2003), 151.

four humours are the vital bodily fluids such as blood, phlegm, yellow bile and black bile, and they are to the body what the four elements – fire, air, water and earth – are to the natural world. One of Ibn Sīnā's contemporaries, Ibn Hindu (d. 420/1029), presented the following definition of the four humours in his treatise *Miftāḥ al-Ṭibb wa Minhāj al-Ṭullāb* (*The Key to Medicine and a Guide to Students*)[68]:

> Humours are the foundations of the microcosm, which is the human being. Their equivalent in the macrocosm is the elements. This is because the body is composed of these humours just as all else in the world of creation and decay is made up of the elements.

Fundamentally, the four humours could be attached to cosmology – that is, the elements – and al-Dhahabī accepted the existence and relevance of the four humours, as well as their connection to the four elements. If the humours were indeed connected to the elements, this would mean that a human being contains earth, air, water and fire. Al-Dhahabī comments further on the concept of four humours[69]:

> "Like the elements, each of the humours possesses two natures, *al-dam* (the blood) being hot and moist; *al-balgham* (the phlegm) cold and moist; *al-ṣafra* (the yellow bile) hot and dry; and *al-sawdā'* (the black bile) cold and dry."

Fundamental Organs

From here, the other four of the seven natural matters were only given as a list without any further commentary

[68] Ibn Hindu, *The Key to Medicine and A Guide to Students* (*Miftah al-Ṭibb wa Minhaj al-Tullab*), translated by Aida Tibi (Reading: Garnet Publishing, 2011), 60.

[69] Al-Dhahabī, *al-Ṭibb al-Nabawī*, 23.

on their properties. The fourth group of natural matter consisted of the fundamental organs. Al-Dhahabī says: "The fourth is the fundamental organ that originates from semen."[70] This view suggests a difference from Greek theories, in which the uterine membranes originated from female semen, whereas the blood vessels, nerves, tendons, bones and cartilage originated from the male sperm.

The Quranic account of human creation affirms that 'sperm' and 'firm lodging' refer to sperm within the female reproductive tract and, more specifically, within the uterus.[71] Towards the end of *al-Ṭibb al-Nabawī*, al-Dhahabī elaborates further on this issue in a chapter on 'embryology and anatomy'.[72] In this chapter al-Dhahabī refers to a *ḥadīth*[73]:

> "The fluid of male is viscous and white, while the fluid of woman is delicate and yellow. Whichever of them precedes [the other] determines [the offspring's] resemblance."

The essence of this type of *ḥadīth* allowed al-Dhahabī to accept the status of female semen, and by quoting them as justification to the word *'alaq* in the verse above, he signified that the *'alaq* consisted not only of male sperm but also of female semen. Al-Dhahabī also asserted that "from *mā' al-rajul* (the fluid of the male) are created *al-a'ḍa' al-aṣliyyah* (the fundamental organs) and

[70] *Ibid*,. 24.

[71] Ebrahim, Abul Fadl Mohsin, "Biology as the Creation and Stages of Life", in *Encyclopaedia of the Qur'ān,* General Editor: Jane Dammen McAuliffe (Washington DC: Georgetown University, Consulted online on 20 November 2019), http://dx.doi.org.ezproxy.lib.gla.ac.uk/10.1163/1875-3922_q3_EQCOM_00026

[72] Al-Dhahabī, *al-Ṭibb al-Nabawī*, 295.

[73] *Ibid*., 297.

al-'iẓam (the bones) and that from *mā' al-mar'ah* (the fluid of the female) is created *al-laḥm* (the flesh)."[74]

In Ibn Sīnā's view, "the fundamental organs are derived primarily from the amalgamating of the humours, just as the humours are derived primarily from the commingled elements."[75] Ibn Sīnā further classified the organs according to their origin:[76]

> "Some organs take their origin from the semen, namely organs composed of like parts except the flesh and the fat. Other organs come from both male and female sperm. According to the philosophers, the process of generation may be compared with the process which takes place in the production of cheese. Thus, the male sperm is equivalent to the clotting agent of milk, and the female sperm is equivalent to the coagulum of milk. The starting point of clotting is in the rennet; so, the starting point of the clot man is in the male semen (We made the life-germ a clot. The Quran, 23:14). Just as the beginning of the clotting is in the milk, so the beginning of the clotting of the form of man lies in the female sperm. Then, just as each of the two (the rennet and the milk) enter into the "substance" of the cheese which results, so each of the two (male and female sperm) enters into the substance of the embryo."

[74] *Ibid.*

[75] Bahrami, Mohsen et al. "The Body Organs and Their Reconstruction Power (Regeneration) from the Viewpoint of Iranian-Islamic Physicians," *Iranian Red Crescent Medical Journal* 16(3) (2014), e15193. doi:10.5812/ircmj.15193.

[76] Ibn Sīnā, *al-Qānūn fi al-Ṭibb*, 39.

Souls

Al-Dhahabī does not explain the ontological structure of man, nor the basic and interrelated elements of the soul. His scope thus eliminates the detailed segmentation of properties and workings of the further attributes that characterise the soul. In very simple terms, al-Dhahabī says: "The fifth is the souls."[77] However, a quick glance at *al-Ṭibb al-Nabawī*, in the case of the *rūḥ* (soul), al-Dhahabī mentions the *ḥadīth*:[78]

> "Allah sent an angel to blow a soul into it. And He gave orders for his fate to be written in four words: for hindrance or for help, for misery or for happiness."

This *ḥadīth* and its discussion appear in the last part of *al-Ṭibb al-Nabawī* and explain al-Dhahabī's account of the spectrum of opinions concerning the soul within the domain of natural matters. This short article cannot, however, do justice to all of the facts and arguments on the soul articulated by al-Dhahabī and Ibn Sīnā. When Ibn Sīnā approached the faculties of the soul in his *Qānūn*, he had to figure out some way to integrate the earlier medical tradition with his own philosophical ideas.[79] From the beginning to the end of the *Qānūn*, the reader can see that Ibn Sīnā does so by highlighting the discrepancy between medical and philosophical knowledge.[80]

In general, the explanation of souls elaborates and alters some of Aristotle's ideas, as Ibn Sīnā undertakes to explain the faculties of the soul in the mould of Aristotle and his Alexandrian commentators. Although following Aristotle in his categorisation of the faculties of the soul,

---

[77] Al-Dhahabī, *al-Ṭibb al-Nabawī*, 24.

[78] *Ibid*., 296.

[79] Pormann, "Avicenna on Medical Practice," 105.

[80] For discussion on Ibn Sīnā's thought on soul, see Nasr, *Three* Sages, 38.

Ibn Sīnā disagrees from them in his emphasis on the immortality of the individual soul, as well as its incorruptible and immaterial substance.[81]

Faculties

The internal faculties are obviously of particular interest to us here. Al-Dhahabī says: "The sixth is the faculties and they are three in number; *al- ṭabī'iyyah* (the natural), *al-ḥayawāniyyah* (the vital), and *al-nafsāniyyah* (the psychic)."[82] These three faculties are the same as presented by Ibn Sīnā in his *Qānūn*. In the opinion of Pormann, Ibn Sīnā makes use of the technique of division to a greater extent here than he does in his philosophical works.[83]

He accordingly classifies the faculties of the human being into *nafsāniyyah*, *ṭabī'iyyah* and *ḥayawāniyyah*, and he further classifies the *nafsāniyyah* faculties into *mudrikah* (cognitive) and *muḥarrikah* (motive). He then further classifies the cognitive faculties into *al-bāṭin* (internal) and *al-ẓāhir* (external). These internal faculties correspond to the internal senses, whereas the five external faculties are the five senses: sight, hearing, smell, touch and taste. The *ṭabī'iyyah* is twofold: the *al-taghazzī* (nutritive) and *al-tanāsul* (reproductive) faculties.

Ibn Sīnā considers the centre of the *ḥayawāniyyah* faculty to be the heart, and its function proceeds from this.[84] Ibn Sīnā further explains, "faculties are to be distinguished from functions. The difference is that the former originates the latter. But as each function depends on its own special faculty they can be treated together."[85]

---

[81] Nasr, *Three Sages*, 40.
[82] Al-Dhahabī, *al-Ṭibb al-Nabawī*, 24.
[83] Pormann, "Avicenna on Medical Practice," 105.
[84] Ibn Sīnā, *Canon of Medicine*, 110.
[85] *Ibid*., 107.

Functions

Ibn Sīnā says: "there are three kinds of faculty, and therefore of functions proceeding therefrom. Namely, *al-ḥayawāniyyah* (the vital), *al- ṭabī'iyyah* (the natural), *al-nafsāniyyah* (the psychic)."[86] Towards the end of discussion on natural matters, al-Dhahabī says: "And the seventh is the functions: (the function of) attraction and (the function of) repulsion."[87]

Conclusion

In this short article, we have not been able to do more than outline what we know about al-Dhahabī's use of Ibn Sīnā's works as a source. The manner in which al-Dhahabī used the materials he borrowed from Ibn Sīnā and other physicians – adapting and altering them in certain cases to suit his own purposes – still needs to be examined more closely. The proliferation of Prophetic medical writing into an extensive medical system has been demonstrated in the work of al-Dhahabī, which was no longer mere specialised *ḥadīth* literature, but introduced an analysis of the primary subjects of medical theory and practice.

In the *Ṭibb*, al-Dhahabī summarised the section on the theoretical rules of medicine and added commentaries connecting these theories to the Prophet being the most perfect and balanced human being. The presentation by al-Dhahabī, in fact, brings the *Ṭibb* in line with the contents of the Greek medical corpus. The factor that al-Dhahabī found attractive in Ibn Sīnā's writings was, without doubt, Ibn Sīnā's authority as well as the clear, systematic presentation of material. This would have been the case especially when he turned to the *Qānūn* of Ibn Sīnā as a source for his theoretical principles of medicine.

Similarly, it was no doubt the comprehensive and rational treatment of material in the *al-Ṭibb al-*

[86] *Ibid.*

[87] Al-Dhahabī, *al-Ṭibb al-Nabawī*, 24.

Nabawī that inspired and prompted al-Dhahabī to use this work as a source in composing a new type of work, which had no precedent in the Prophetic medicine genre. Al-Dhahabī not only used Ibn Sīnā's work to provide a structure around which to build his writings, but also borrowed the contents of large portions.

For al-Dhahabī to borrow as much as he did, he must have agreed with much of Ibn Sīnā had said and found what he saw in Ibn Sīnā's writings congenial and convenient for his purposes. It is significant that al-Dhahabī, as a master of the *ḥadīth* tradition, could borrow so much from a leading scholar of Islamic philosophy, not only in matters pertaining to the medical sciences, but also in matters that lay at the core of his philosophical activities.

This convergence tells us much about what the two schools of thought represented by these two men shared. More than any other *ḥadīth* scholar, al-Dhahabī dedicated his teachings to clarifying the authenticity of the Prophetic tradition in all things and the necessity of Muslims conforming to this practice. The arguments he offers are at once scriptural and practical, scientific and ethical. He tries to address every dimension of human existence and speaks constantly of the inherent goodness of the social practice respecting the rights of all medical practitioners.

If there is a single scriptural theme to his *al-Ṭibb al-Nabawī* writings, after *tawḥīd*, it is certainly the *ḥadīth*: "The best of you are those who are finest in character." He reads this in conjunction with the 'Ā'ishah insistence that the character of the Prophet is the Quran. He understands this to mean that the Prophet is the most perfect of human beings, and that this perfection originated from equilibrium of nature to the rightness and appropriateness of all things – to the extent of human capacity. In other words, the constitution of human beings formed the

Prophet in the image of "the most evenly balanced of creation."

References

'Abd al-Laṭīf al-Baghdādī. *Al-Arba'īn al-Ṭibbiyyah al-Mustakhraj min Sunan Ibn Mājah wa Sharḥūhā*. ed. Kamāl Yūsuf Hūt. Beirut: Mu'assasah al-Kutub al-Thaqāfiyyah, 1985.

Asadollahi, R., Asadollahi, H.. "Avicenna's View on Medical Genetics." *Genet Med* 15 (2013): 410–411.

Asim Abdelmoneim Hussein et al. "Prophetic Medicine, Islamic Medicine, Traditional Arabic and Islamic Medicine (TAIM): Revisiting Concepts and Definitions." *Acta Scientific Medical Sciences* 3(8) (2019): 62-69.

Avicenna. *The Canon of Medicine*. trans. Laleh Bakhtiar. New York: AMS Press Inc., 1973.

Bahrami, Mohsen et al. "The Body Organs and Their Reconstruction Power (Regeneration) from the Viewpoint of Iranian-Islamic Physicians." *Iranian Red Crescent Medical Journal* 16(3) (2014): e15193. doi:10.5812/ircmj.15193.

Bonadeo, Cecilia Martini. *'Abd al-Laṭīf al-Baġdādī's Philosophical Journey from Aristotle's Metaphysics to the 'Metaphysical Science'*. Leiden: Brill, 2013.

Al-Dhahabī, Shams al-Dīn. *Al-Ṭibb al-Nabawī*. ed. Aḥmad Rif'āt al-Badrawī. Beirut: Dār Iḥyā' 'Ulūm, 1990.

Ebrahim, Abul Fadl Mohsin. "Biology as the Creation and Stages of Life". In *Encyclopaedia of the Qur'ān*. ed. Jane Dammen McAuliffe. Washington DC: Georgetown University, 2019.

Elgood, Cyril. "Ṭibb–ul-Nabi or Medicine of the Prophet." *Osiris* 4 (1962): 33-192.

Fakhry, Majid. *A History of Islamic Philosophy*. New York: Columbia University Press, 2004.

Gutas, Dimitri. "Medical Theory and Scientific Method." In *Before and After Avicenna, Proceedings of the First Conference of the Avicenna Study Group*. ed. David C. Reisman and Ahmed H. al-Rahim. Leiden: Brill, 2003.

Hamarneh, Sami K. "Al-Tabari". In *Encyclopaedia of the History of Science, Technology, and Medicine in Non-Western Cultures.* ed. Selin, Helaine. Dordrecht: Kluwer Academic Publisher, 1997: 161-162.

Ibn Hindu. *The Key to Medicine and a Guide to Students (Miftah al-Ṭibb wa Minhaj al-Tullab).* trans. Aida Tibi. Reading: Garnet Publishing, 2011.

Ibn Mājah. *Sunan Ibn Mājah*. ed. Muḥammad Fuād ʻAbd al-Bāqī. Dār Iḥyā' al-Kutub al-ʻArabiyyah, n.d.

Ibn Qayyim. *Al-Ṭibb al-Nabawī*. Riyadh: Dār al-Salām li-Nashr wal-Tawzīʻ, 1433H.

Ibn Sīnā, al-Husayn bin ʻAlī. *Al-Qānūn fī al-Ṭibb*. ed. Muḥammad Amīn al-Danawī. Beirut: Dār al-Kutub al-ʻIlmiyyah, 1999.

Ibn Sīnā, al-Ḥusayn bin ʻAlī. *Tisʻ Rasā'il fī al-Ḥikmah wa al-Ṭabīʻiyyāt.* Cairo: Dār al-ʻArab li al-Bustānī, 1989.

Joosse, N. Peter & Pormann Peter E. "'Abd al-Laṭīf al-Baġdādī's *Commentary on Hippocrates' 'Prognostic'*: A Preliminary Exploration." In *Epidemics in Context Greek Commentaries on Hippocrates in the Arabic Tradition.* ed. Peter E. Pormann. Berlin: De Gruyter, 2012: 251-284.

Kamran I. Karimullah. "Assessing Avicenna's (d. 428/1037) Medical Influence in Prolegomena to Post-Classical (1100–1900 CE) Medical Commentaries." *MIDÉO* 32 (2017): 93-134.

L. Richter-Bernburg, "'Alī b. ʻAbbās Majūsī," Encyclopædia Iranica, I/8, available online at http://www.iranicaonline.org/articles/ʿAlī-b-abbas-majusi: 837-838.

Lewicka, Paulina B. *Medicine for Muslims? Islamic Theologians, Non-Muslim Physicians and the Medical*

Culture of the Mamluk Near East. ASK Working Paper. Bonn: Annemarie Schimmel Kolleg, History and Society during the Mamluk Era (1250-1517), 2012.

McGinnis, Jon. "A Small Discovery: Avicenna's Theory of *Minima Natur 'Alīa*." *Journal of the History of Philosophy* 53(1) (January 2015): 1-24.

McGinnis, Jon. "Avicenna's Natural Philosophy." In *Interpreting Avicenna Critical Essays*. ed. Peter Adamson. Cambridge: Cambridge University Press, 2013: 71-90.

McGinnis, Jon. *Avicenna (Great Medieval Thinkers Series)*. Oxford: Oxford University Press, 2010.

Muḥammad ʿAlī al-Bar. *Mawsuʿah al-Ṭibb al-Nabawī*. Jeddah: Dār Kunūz Maʿrifah, 2016.

Muhammad Fawwaz bin Muhammad Yusoff. "Ḥadīth Scholar and Historiography: Some Reflections on the Sīra Corpora of Ibn Ḥibbān al-Bustī's (d. 354/965) Kitāb al-Ṯiqāt." *Arabica* 66(5) (2019): 484-505.

Muhammad Fawwaz bin Muhammad Yusoff. "On Biographical Dictionaries of Ḥadīṯ Transmitters: Rethinking Development in the Islamic Literature." *Al-Bayan: Journal of Qur'an and Ḥadīth Studies* 17(2) (2019): 125-146.

Muhammad Fawwaz bin Muhammad Yusoff. "The Authentication of Ḥadīth: Ibn Ḥibbān's Introduction to His Ṣaḥīḥ." *Al-Masāq: Journal of the Medieval Mediterranean* (2020): 294-310. DOI: 10.1080/09503110.2020.1712546.

Muḥammad Khalīd Mansur. *Al-Aḥkām al-Ṭibbiyyah al-Mutaʿalliqah bi al-Nisā' fī al-Fiqh al-Islāmī*. Amman: Dār al-Nafā'is, 1999.

Al-Nasīmī, Maḥmūd Naẓīm. *Al-Ṭibb al-Nabawī wa 'Ilm al-Ḥadīth*. Beirut: Mu'assasah al-Risālah, 1996.

Nasr, Seyyed Hossein. *Three Muslim Sages Avicenna: Avicenna, Suhrawardi, Ibn Arabi*. New York: Caravan Books, 1997.

Perho, Irmeli. "Ibn Qayyim al-Gawziyyah's Contribution to the Prophet's Medicine." In *A Scholar in the Shadow: Essays in the Legal and Theological Thought of Ibn Qayyim Al-Ǧawziyyah*. Oriente Moderno, Nuova serie, Anno 90, Nr. 1, Istituto per l'Oriente C. A. Nallino, 2010: 191-210.

Perho, Irmeli. "Medicine and the Qur'ān". In *Encyclopaedia of the Qur'ān.* ed. Jane Dammen McAuliffe. Washington DC: Georgetown University, 2019.

Perho, Irmeli. *The Prophet's Medicine: A Creation of the Muslim Tradition 'Alīst Scholars*. Helsinki: University of Helsinki, 1995.

Pormann, Peter E. "Avicenna on Medical Practice, Epistemology, and the Physiology of the Inner Senses." In *Interpreting Avicenna Critical Essays*. ed. Peter Adamson. Cambridge: Cambridge University Press, 2013: 90-108.

Ragab, Ahmed. "Prophetic Traditions and Modern Medicine in the Middle East: Resurrection, Reinterpretation, and Reconstruction." *Journal of the American Oriental Society* 132(4) (October-December 2012): 657-673.

Ragab, Ahmed. *Piety and Patienthood in Medieval Islam*. London: Routledge, 2018.

Rahman, Fazlur. *Health and Medicine in the Islamic Tradition*. Kuala Lumpur: S. Abdul Majeed & Co., 1993.

Rosenthal, Franz. "Awā'il." In *Encyclopaedia of Islam,* 2nd edition. Leiden: Brill, 1986.

Savage-Smith, Emilie. "Were the Four Humours Fundamental to Medieval Islamic Medical Practice?" In *The Body in Balance: Humoral Medicines in Practice*. ed. Peregrine Horden and Elisabeth Hsu. New York: Berghahn Books Inc., 2013.

Tassinari, Pierro. "Mixtures." In *Galen: Works on Human Nature*, ed. P. Singer & P. Van der Eijk (Cambridge Galen Translations). Cambridge: Cambridge University Press, 2019: 47-184.

Ullman, Manfred. *Die Medizin im Islam*. Leiden, Köln: E.J. Brill, 1970.

Wisnovsky, Robert. "Avicenna's Islamic Reception." In *Interpreting Avicenna Critical Essays*, ed. Peter Adamson. Cambridge: Cambridge University Press, 2013: 190-213.