
Illness and Treatment in Theological and Normative Viewpoints

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Received November 27, 2023; Revised December 14, 2023; Accepted December 25, 2023

Abstract: *The purpose of this study is to find out Islamic ethics in addressing illness and treatment. Methods used with literature search and literature selection. The theoretical framework of this study is that the Covid-19 pandemic has touched on every aspect of human life and raised many ethical questions. Several debates took place in various healthcare communities related to the coronavirus. In addition, religious communities also face various questions and challenges related to the Covid-19 pandemic regarding spiritual beliefs, ritual practices, and moral principles of the community. The results of the study show that every Muslim believes that every disease has its cure but man's job is to research and find a cure. Treatment is a healing effort recommended by the Prophet SAW, even if it is part of a form of tawakkal to Allah SWT, but treatment is prohibited by using drugs from unclean or made from objects forbidden by Islam. In times of emergency, Islam provides rukhsah (leeway) for treatment with the haram with some emergency conditions that scholars have explained. Except for khomr, khomr still cannot be used as medicine, because in khomr emergency conditions are not met.*

Keywords: *illness and pain, treatment, Islamic ethics, coronavirus, patience and effort.*

INTRODUCTION

The word "ethics" comes from the Greek word "ethos", which means "the disposition, spirit, and attitude of a group of people or culture". According to the Oxford Dictionary, ethics is defined as: 1. A system of moral principles by which human actions can be judged as good or bad, right or wrong; (2) Recognized rules of conduct concerning a particular class of human action. Also, ethics has been defined as: "The normative science of human behaviour living in society - the science that judges this behaviour to be right or wrong, good or bad or in a similar way" ethics [1].

From an Islamic point of view, ethics is related to several Arabic terms. The terms are as follows: ma'ruf (approved), khayr (goodness), haqq (truth and truth), birr (truth), qist (equality), adl (balance and justice), and taqwa (piety). Good deeds are described as salihat and bad deeds are described as sayyi' at. However, the term most closely related to ethics in

the Qur'an is akhlaq. Although ethics is defined as what is right and wrong, the most pressing issue is how one knows right from wrong [2].

Health is a state of bodily, mental and social well-being that enables everyone to live a socially and economically productive life. Not only limited to physical, mental and social disorders, but health is seen as a tool or means for productive living, thus, health efforts are, directed at efforts that can lead people to achieve sufficient health to live productively. Islam is a religion based on revelation, comes from Allah SWT and is a religion brought by Prophet Muhammad SAW to perfect the religion brought by previous prophets [3], [4].

Islam is a very noble and high religion, One of the proofs is that it is perfect in regulating human life from all aspects of human life. Islam is very elastic, especially in dealing with modern problems. Therefore, Islam is able and even successful in solving the problems of people's lives at any time and conditions [5]. Allah Almighty said:

اليوم أكملت لكم دينكم وأتممت عليكم نعمتي ورضيت لكم الإسلام دينا

"On this day, I have perfected for you your religion, and I have satisfied you with My favour and I have pleased Islam to be a religion for you". (Q.S. Al-Maidah: 3) The development of technology in the modern world has been increasingly rapidly advanced, which in turn has an impact on several industries, both food, daily necessities products, and not to mention the medical industry. Medicine is an ingredient to prevent, treat and cure various diseases [6].

Drugs can be used in various forms and ways, namely drunk, eaten, by being inserted into the rectum, vagina, injections, pasted or implanted in the skin, and so on. Halal medicine must be indicated by several characteristics: a) does not contain unclean ingredients; b) does not contain from animals forbidden by Islam; c) does not consist of ingredients that create harmful effects; and d) not provided, processed, and produced or stored using tools that are not free from impurities [7]-[10].

Literature Review

The COVID-19 pandemic has touched every aspect of human life and raised many ethical questions. Several debates took place in various healthcare communities related to the coronavirus. In addition, religious communities also face various questions and challenges related to the COVID-19 pandemic regarding spiritual beliefs, ritual practices, and moral principles of the community [11]-[14].

The role of spirituality and religious practice is often highlighted when a person feels helpless in the face of an illness for which there is no known cure or in times of general difficulty. The ECFR includes fatwas on the permissibility and importance of religious mantras (ruqya) as a means of protection from the pandemic. The fatwa begins with a general warning that the term ruqya is often confused with other cultural practices or traditions that tend to contradict Sharia and its goals. In essence, the fatwa shows, ruqya consists of prayers and sincere supplications to God. Moreover, it must be done by the patient himself, especially during a pandemic. The fatwa concludes by emphasizing the importance of following reliable medical procedures based on reliable sources as the main and most appropriate method of dealing with diseases (fatwa no. 12) [15]-[19].

Similarly, IIFA points out the importance of prayer and developing a firm belief in divine destiny but does not include explicit references to ruqya Apart from general statements about proper attitudes during the pandemic, the importance of one's spiritual-psychological state, and the role of religious deeds in combating disease, normative literature also addresses certain medical notions and therapeutic procedures. One of the emerging ideas related to the coronavirus pandemic is herd or community immunity, as a way to combat the disease. In the early weeks of the pandemic, the term became part of a pandemic-specific vocabulary that

infiltrated public discussion, along with expressions such as social distancing, curve flattening, and superspreaders, previously used only by medical experts [20]–[22].

In its basic definition, herd immunity refers to a situation when a large portion of the population becomes immune to a disease either through vaccination or previous exposure to the disease. Transmission decreases only when the number of immune people increases. In the absence of an effective vaccine or cure for the coronavirus, some argue that lifting restrictions and increasing exposure can be a means to achieve herd immunity. However, medical experts warn that seeking community immunity through this means is risky because large numbers of patients will spend unsecured medical resources to end treatment [23]–[26].

With the COVID-19 virus, doctors and health authorities are working to develop adequate therapeutic methods and drugs to help patients boost their immune systems to be able to fight the virus. One of the most important techniques is the plasma injection of recovered COVID-19 patients due to the inclusion of the required antibodies that will allow the patient's immune system to recover [27]–[29].

Fights infection. However, in many countries, the demand for this plasma far exceeds the available supply, which turns this plasma into a scarce commodity and creates a black market for it. Desperate patients and their families are sometimes forced to pay large sums to secure this plasma. From the perspective of Islamic ethics, this situation raises questions about whether or not it is permissible to sell plasma from cured patients, especially in a pandemic situation [30]–[33].

Al-Azhar's International Electronic Fatwa Center stated the issue, according to which withholding plasma by recovered COVID-19 patients, without a valid reason, is considered impermissible and sinful (Buḥayrī 2020). However, the statement further explicitly states the sale of plasma of recovered COVID-19 patients is prohibited [34]–[36].

To date, medical practitioners have been key decision-makers in clinical contexts globally. This authority is often associated with knowledge, training, and experience in disease pathology, management, and prognosis. However, in recent times, the moral authority of healthcare providers and healthcare personnel, particularly physicians, has been declining.¹⁵² This is a result of recent and historical violations of ethical conduct that have angered the public and health professionals, who are calling for better regulation of the medical community [37], [38].

These violations prompted a paradigm shift in moral thinking about the rights and responsibilities of medical practitioners and patients in contemporary medical ethics. The shift goes hand in hand with global efforts to protect individual freedoms and rights.

METHODOLOGY

Literature Search

This study conducted a systematic review of previous studies on Islamic ethics about addressing illness and treatment. The source of the literature search database is Google Scholar [39].

Literature Selection

Selected articles are articles that meet the inclusion criteria. The inclusion criteria in this study are articles published in national journals related to Islamic ethics about addressing illness and treatment from the Google Scholar database, articles that can be accessed in full (full text), and articles published in the last 10 years [40], [41].

RESULTS AND DISCUSSION

Ethics in Dealing with Pain

Contemporary Perspectives dan historical perspective

Major contributions in the field of Islamic bioethics and COVID-19 can be found in academic journals and books, communications by fatwa institutions, websites, and courses. Several Islamic academic journals that dedicate (or dedicate to) issues specific to COVID-19 such as the Journal of Islamic Ethics (by Brill), various Qatar University journals, and the Journal of Sharia and Islamic Studies by Kuwait University. Several academic books collect fatwas issued by scholars on COVID-19. Fatwa institutions play a role comparable to the role of bioethics institutions in dealing with major problems [42], [43].

Several transnational institutions have actively issued statements and fatwas since the beginning of the pandemic, including the International Islamic Fiqh Academy (IIFA), the International Association of Muslim Scholars (IAMS), the European Council for Fatwa and Research (ECFR), the Assembly of Muslim Jurists of America (AMJA), along with national fatwa committees in various Muslim countries, including Egypt, Saudi Arabia, Algeria, and others. Some news and opinion sites, such as aljazeera.net and atharah.com also publish ethical questions related to COVID-19 [44]–[46].

On the other hand, secular discourse on bioethics has been disseminated by scientific journals, bioethics and academic institutions, newspapers, and courses. Key issues discussed in Islamic discourse include ritual prayer, fasting, zakat, hajj, funeral rituals, resource allocation, and issues related to the role of the state and government. On the other hand, secular discourse focuses on the allocation and priority of day resources, ethics of public health surveillance, rights and obligations of health workers, research ethics, human rights, food ethics, and the duties and roles of government [47].

Contemporary Perspectives

The law of congregational prayer was identified as one of the most debated topics during the pandemic. National and transnational Islamic scholars and institutions contributed to the debate. These individuals and institutions can be divided into two main groups: one supports the lockdown of mosques and the ban on congregational prayers, and the other opposes lockdowns while advocating to observe precautions during congregational prayers (WHO 2020). Scientific and religious arguments, as well as solutions put forward by each group, are presented in the summer school [48].

Ray Jureidini (HBKU, Qatar) reveals a social perspective on COVID-19 that exacerbates the economic and health impacts for transmigrant communities globally (OHCHR 2020). The social and economic impact on households and trade is also declining. Lectures draw from scientific journals, UN agencies, and international human rights organizations, as well as newspapers and TV documentaries [49], [50].

Historical Perspectives

Samer Rashwani (HBKU, Qatar) offers an overview of the plague in religious scriptures including the Old Testament, the Qur'an, and a collection of hadiths. The collections of the Old Testament, Qur'an, and hadith contain references to the plagues that befell the Egyptians and Israelites. In these scriptural references, plagues are generally described as a means of punishment and sometimes as a sign of God's mercy. Scripture exhorts turning to God when faced with plagues and suffering [51], [52].

Rashwani gave insight into how early Muslims (Companions of the Prophet) engaged with the scriptures and argued about the best interpretation and course of action in the face of plagues and pandemics. Their approach highlights the process of *ijtihad* (ethical and legal reasoning) that tries to understand the phenomenon of plague and formulate responses to it. Sometimes, their interpretations result in different opinions [53].

Islam's intellectual heritage is built on a foundation of scriptural references and early Muslim debates on the topic. Samer Rashwani highlights how early Muslim scholars were primarily concerned with theological aspects of tradition related to the plague. However, later theologians developed a more modern approach seeking to reconcile different views and offer practical guidance [54], [55].

Arjan Post, in his lecture, explores two other dimensions in the Islamic tradition of plague. First, a theological approach that tries to understand the causes of disease and the role of medical treatment as a means to eliminate it. This is the approach of the "traditionalists" (mostly anbal scholars). Second, the mystical dimension of Sufi ascetics emphasizes the importance of relying on God and a relationship with Him in eliminating disease [56], [57].

Medical Ethics and Rights of Medical Practitioners

Islam provides its adherents with a moral roadmap for their personal, social, and professional environment. Muslims who receive and provide health care thus navigate carefully whether their practices within their professional sphere are following sharia (Islamic law). The ethical-legal framework described by Islamic normative sources is juxtaposed with global health priorities, secular healthcare systems, and patient preferences [45].

Patient Rights

End-of-Life Protection of Faith Ensuring that patients can make informed decisions about their care and that their religious and spiritual needs are met has seen increasing importance in contemporary medical ethics over the past few years. This value is following the Islamic right of patients to practice their faith in health or illness. Understanding the religious and spiritual needs of religious communities as they interact with health care settings, however, is poorly understood. The biomedical paradigm in understanding health and disease is the epistemic model prevailing in care [58], [59].

Healthcare providers, patients, and families interacting in such contexts, be it within institutions or in communities display not only the biomedical parameters of symptoms and diseases, but also individual and sociocultural histories, languages, values, and beliefs.

Right to Health Care

There are many verses in the Qur'an and sayings of Prophet Muhammad (peace be upon him) emphasizing health and well-being as blessings and sickness as a test. Sources advised the status of the sick, saying that those who are sick have the right to be treated and those who are in a position to do so have an obligation to care for them. Sickness and disease in the Islamic worldview are understood as suffering experienced by believers as a means of spiritual cleansing in which religious transgressions are manifested as diseases or means of uplifting worshippers. The Prophet Muhammad explained: "No disease is created by Allah, except He also created its treatment" and that "it is healed by God's permission" [60], [61].

Right to Privacy

The cornerstone of patient trust in medical practitioners and health professionals is the guarantee of privacy. The right to patient privacy and the responsibility of health professionals to ensure confidentiality are integral parts of medical ethics. Biomedicine, however, has changed dramatically in recent decades. Meetings with healthcare are no longer limited to individual patient-doctor interfaces. Information about patients is also not limited to case files in one computer or filing cabinet [62].

Protection against Exploitative Practices with Growing Research in Muslim Contexts

The globalization of clinical trials has increased research conducted in low- and middle-income countries (LAMICS). The majority of the country's fifty-seven Organizations of Islamic Cooperation belong to the LAMICS group. Muslim-majority countries in the region, such as Indonesia and Malaysia, have become popular areas for industry- and government-

sponsored trials. The latter is growing in popularity as the trial process proves cheaper, with faster recruitment of participants.

Some authors suggest that one reason for outsourcing clinical trials is to circumvent the strict governance mechanisms that exist in countries. In addition to the SEA region, the Middle East is also a popular place for research due to its good infrastructure, increased investment in medical sciences, and growing economies. Research shows that countries in the Middle East also operate with fewer restrictions, making it popular among pharmaceutical companies to test new and untested drugs [63], [64].

The jurists of ijma' argue towards that the law of treatment originated as mubah, 3 things are based on the hadith of the Prophet SAW:

عن أبي الدرداء رضي الله عنه قال : قال رسول الله صلى الله عليه وسلم : إن الله أنزل الداء والدواء ، وجعل لكل داء دواء ، فتداووا ، ولا تتداووا بالحرام(رواه أبو داود)

From Abu Darda' Radhiyaallahu Anhu said, said the Prophet SAW: "Allah has sent down every disease with its medicine, and made every disease have a cure, so treat you, and do not treat with the haram". Muslims believe that every disease has its cure but man must research and find a cure. Let us pray to God that He strengthens our faith for peace and tranquility which is an essential ingredient for us to be an ideal society. Prophet Muhammad's advice "Allah, the Most Merciful, love the merciful because of that, love the inhabitants of the earth. He will have mercy on you who are in heaven" [65]

In conclusion, the religion of Islam has had a major impact on the management of psychiatric disorders in psychiatric clinical practice. An extensive body of research has supported the effectiveness of Islamic values and beliefs in the treatment of mental illness. Muslims, through the incorporation of Islamic beliefs, help in medication adherence and modification of different psychotherapeutic techniques to suit Muslim patients [66].

In addition, many specific clinical issues are resolved using Islamic values and beliefs that are completely drawn from the Qur'an and the sunnah of Prophet Muhammad (PBUH) and Sharia such aspects provide the basis for specific guidelines in working with Muslim mental health clients wherever they live [67].

CONCLUSION

Treatment is a healing effort recommended by the Prophet SAW, even if it is part of a form of tawakkal to Allah SWT, but treatment is prohibited by using drugs from unclean or made from objects forbidden by Islam. In times of emergency, Islam provides rukhsah (leeway) for treatment with the haram with some emergency conditions that have been explained by scholars. Except for khomr, khomr still cannot be used as medicine, because in khomr emergency conditions are not met.

Acknowledgements

Thank you to all parties who have helped write until the publication of this research, Special to all writers involved in this research.

Author Contribution

All authors contributed equally to the main contributor to this paper, all authors read and approved the final paper, and all authors declared no conflict of interest.

Conflicts of Interest

All authors declare no conflict of interest.

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