


Journal of Ma'ālim al-Qur'ān wa al-Sunnah

Volume 21 No. 2 (2025)

ISSN: 1823-4356 | e-ISSN: 2637-0328

Homepage: <https://jmq.s.usim.edu.my/>



- Title : **Dimensions of the Early Islamic Use of *Al-Ruqyah Al-Islāmiyyah*: Insights from Maḥmūd Nāẓim Al-Nasīmī**
- Author (s) : Muhammad Akmalludin Mohd Hamdan, Ahmad Salahuddin M Azizan and Syed Mohamad Zainudin Bichk Koyak
- Affiliation (s) : Universiti Sains Islam Malaysia and Open University Malaysia
- DOI : <https://doi.org/10.33102/jmq.s.v21i2.555>
- History : Received: September 25, 2025; Revised: October 13, 2025; Accepted: December 1, 2025; Published: December 25, 2025.
- Citation : Mohd Hamdan, M. A., M Azizan, A. S., & Bichk Koyak, S. M. Z. (2025). Dimensions of the Early Islamic Use of *Al-Ruqyah Al-Islāmiyyah*: Insights from Maḥmūd Nāẓim Al-Nasīmī. *Ma'ālim Al-Qur'ān Wa Al-Sunnah*, 21(2), 158–179. <https://doi.org/10.33102/jmq.s.v21i2.555>
- Copyright : © The Authors
- Licensing :  This article is open access and is distributed under the terms of [Creative Commons Attribution 4.0 International License](https://creativecommons.org/licenses/by/4.0/)
- Conflict of Interest : Author(s) declared no conflict of interest

# Dimensions of the Early Islamic Use of *Al-Ruqyah Al-Islāmiyyah*: Insights from Maḥmūd Nāẓim Al-Nasīmī

**Muhammad Akmalludin Mohd Hamdan**  
Faculty of Quranic and Sunnah Studies  
Universiti Sains Islam Malaysia

**Ahmad Salahuddin M Azizan\***  
Faculty of Social Sciences and Humanity  
Open University Malaysia

**Syed Mohamad Zainudin Bichk Koyak**  
Faculty of Quranic and Sunnah Studies  
Universiti Sains Islam Malaysia

## Abstract

This article examines the early Islamic practice of *al-ruqyah al-islāmiyyah* (Islamic healing incantations) through the analysis of Maḥmūd Nāẓim al-Nasīmī, highlighting how the Prophet Muḥammad ﷺ reformed pre-Islamic healing traditions rooted in superstition and polytheism. The central issue addressed is how Islam redirected such practices toward a framework grounded in *tauḥīd*, ethical integrity and psychological reassurance. Thus, the objective of the article is to clarify the scope and dimensions of *ruqyah* in its formative period according to al-Nasīmī and to demonstrate its broader role beyond mere ritual recitation. Methodologically, the study employs qualitative textual analysis of the Qurʾān, authentic ḥadīth, early scholarly writings and al-Nasīmī's commentary, with reference to modern academic perspectives. The findings reveal a tripartite framework: *ruqyah*'s role in treating psychological disorders such as fear, insomnia, and afflictions linked to sorcery or the evil eye, its application to physical illnesses where remedies were lacking, and its integration with material medicine to strengthen hope and recovery. Overall, the outcome underscores *al-ruqyah al-islāmiyyah* as a multidimensional system of healing that harmonized spiritual reliance with empirical remedies, establishing a holistic model of care that remains ethically and socially relevant. Beyond its historical significance, this study highlights the potential of *al-ruqyah al-islāmiyyah* to reinforce spiritual resilience and ethical awareness within the contemporary Muslim community. It offers insights that may guide present efforts to integrate

---

\*Correspondence concerning this article should be addressed to Ahmad Salahuddin M Azizan, Open University Malaysia Malaysia at [salahuddin\\_azizan@oum.edu.my](mailto:salahuddin_azizan@oum.edu.my).

faith-based healing values with modern understandings of mental and spiritual well-being.

**Keywords:** *al-ruqyah al-islāmiyyah*, prophetic medicine, Maḥmūd Nāẓim al-Nasīmī, spiritual healing

## Introduction

Islam came to liberate the Arabs from disbelief, polytheism, idol worship, and the veneration of statues and idols. It called for the exclusive worship of one God and prohibited its followers from seeking assistance from devils.<sup>1</sup> It also commanded them to seek refuge in Allah alone and to seek protection from the evil of the devils and all other created evils. Thus, Muslims, in every prayer, turn to Allah and recite, “You alone we worship and You alone we ask for help.”<sup>2</sup> They recite in the Qur’ān, “And say, My Lord! I seek refuge in You from the whispers of the devils. And I seek refuge in You, my Lord, lest they be present with me,”<sup>3</sup> and, “Say: I seek refuge in the Lord of daybreak, from the evil of what He has created, and from the evil of darkness when it settles, and from the evil of those who blow on knots, and from the evil of an envier when he envies,”<sup>4</sup> and, “Say: I seek refuge in the Lord of mankind...”<sup>5</sup>, to the end of the chapter.

Islam clarified that seeking refuge with devils and those subjugated to them does not bring relief. Instead, it increases distress and humiliation. Allah the Exalted states, “And there were men from among mankind who sought refuge in men from among the jinn, so they only increased them in burden.”<sup>6</sup> Islam has elevated the dignity of committed believers and increased their trust in Allah. The believers are therefore not overcome by fear of devils, sorcery, or the superstitions attached to them. This is especially after Allah declares that the chief of the devils, Iblis, has no power over His sincere servants, “Indeed, My servants, you have no authority over them, except those who follow you of the deviators.”<sup>7</sup>

Furthermore, seeking aid or assistance from idols, statues, jinn, or anything brought by sorcerers, soothsayers, or fortune tellers, whether in their incantations, talismans, or rituals, is all falsehood and a form of

---

<sup>1</sup> Ahmad Darlis et al., “Konsep Pendidikan Tauhid Yang Terkandung Dalam Surat Al-Fatihah,” *Jurnal Dirosah Islamiyah* 5, no. 2 (2023): 441–53.

<sup>2</sup> Al-Fatihah: 5

<sup>3</sup> Al-Mukminun: 98–99

<sup>4</sup> Al-Falaq

<sup>5</sup> Al-Nas: 1

<sup>6</sup> Al-Jin: 6

<sup>7</sup> Al-Hijr: 42

polytheism that Islam unequivocally rejects, even if it occurs under the guise of spiritual healing. In line with this, Islam rejects beliefs based on superstition and myths, such as relying on omens or seeking healing or protection through charms, including amulets, beads, stones, and metals.<sup>8</sup>

In view of the Prophet Muḥammad's ﷺ warning and prohibition concerning certain *ruqyah* (healing incantations), Muslims are expected to avoid those that stem from their pre-Islamic traditions. When situations arise that necessitate spiritual treatment, such as when a remedy for an ailment is urgently sought, the Prophet ﷺ would require the *ruqyah* to be presented to him first. If he found nothing in it that contradicted the doctrine of pure monotheism and the spirit of Islam, he would approve it and permit its use. It is narrated from Jābir ibn 'Abdillāh (may Allah be pleased with him) that he mentioned, "The Messenger of Allah ﷺ forbade *ruqyahs*. Then the family of 'Amr ibn Ḥazm came to the Messenger of Allah ﷺ and stated, 'O Messenger of Allah, we had a *ruqyah* we used for treating scorpion stings, but you have prohibited *ruqyahs*.' He requested, 'Present it to me.' So they presented it to him, and he mentioned, 'There is nothing wrong with it. Whoever among you can benefit his brother, let him do so.'"<sup>9</sup>

Scholars have stipulated three conditions for the permissibility of healing incantations (*ruqyah*). Al-Ḥāfiẓ Ibn Ḥajar stated, "The scholars have reached a consensus on the permissibility of *ruqyah* when three conditions are met: that it is composed of the words of Allah, or His names and attributes; that it is in the Arabic language or in a language whose meaning is clearly understood; and that the one performing the *ruqyah* believes that it has no inherent effect in and of itself, but that its effect comes only through the will of Allah Almighty."<sup>10</sup> He further cited the statement of the Prophet ﷺ, "There is no harm in *ruqyah* as long as it does not involve *shirk* (polytheism)."<sup>11</sup> This indicates that any form of *ruqyah* that leads to *shirk* is prohibited. Moreover, any *ruqyah* whose meaning is not intelligible is also forbidden, as a precautionary measure, since it cannot be guaranteed that it does not entail *shirk*.

Accordingly, this article aims to critically examine the issue of *al-mu'ālahjah al-rūḥiyyah* (spiritual healing practices) in the early period of Islam, while exploring the dimensions of *al-ruqyah al-islāmiyyah* (Islamic

---

<sup>8</sup> Al-Nasimi, Mahmud Nazhim. (1987). *Al-Tibb al-Nabawi wa 'Ilm al-Hadith*. Beirut: Muassasah al-Risalah. 3/147.

<sup>9</sup> Muslim. (2011). *Shahih Muslim*. Beirut: Dar Tuq al-Najah. Hadith no: 2199.

<sup>10</sup> Al-'Asqalani, Ibn Hajar. (1970). Fath al-Bari. Ed. Muhammad Fuad 'Abd al-Baqi, Muhib al-Din al-Khatib. Egypt: al-Maktabah al-Salafiyyah. 10/195.

<sup>11</sup> Muslim. (2011). *Shahih Muslim*. Hadith no: 2200.

healing incantations) as delineated by Maḥmūd Nāẓim al-Nasīmī; a head of physicians in Aleppo during his time, in his most notable work: *al-Ṭibb al-Nabawī wa al-ʿIlm al-Ḥadīth*. He first pursued studies in Islamic law before engaging in medical sciences. He authored several beneficial works, particularly in the field of medicine and its connection with Islam and its textual sources.

Among his objectives of writing *al-Ṭibb al-Nabawī wa al-ʿIlm al-Ḥadīth* was to explain the Hadiths on Prophetic medicine by providing appropriate medical commentary consistent with the advancements of modern medical science, as well as to promote greater public health awareness that could help reduce the spread of diseases within society. He also stated in the preface of his book the distinguishing features that set it apart from other works on Prophetic medicine. Among these was the abundance of research incorporated into the book, including the interpretation of Hadiths in light of modern medicine and their integration with discussions of legal rulings to maximize benefit. Furthermore, his work was distinguished by its reliance on authentic Hadiths of Prophetic medicine, the exclusion of fabricated or severely weak narrations, and the inclusion of weak Hadiths only when they offered notable benefit, accompanied by a clear indication of their degree of authenticity.

Besides, this article is also intended to broaden the understanding of the contextual use of *al-ruqyah al-islāmiyyah* within Islam. This highlights that it is not confined solely to the treatment of spiritual illnesses. Instead, it encompasses a wider conceptual and functional scope.

## 2. Scope and Methodology

The scope of this study is to examine the role and dimensions of *al-ruqyah al-islāmiyyah* in the early period of Islam, with special focus on the analysis of Maḥmūd Nāẓim al-Nasīmī in his work *al-Ṭibb al-Nabawī wa al-ʿIlm al-Ḥadīth*. It aims to explain how spiritual healing was shaped by the Qurʾān, the Sunnah, and the Prophet's ﷺ guidance, while also correcting and refining practices inherited from the pre-Islamic era. Methodologically, this research uses a qualitative approach based on textual and historical analysis. It draws on primary sources such as the Qurʾān, authentic ḥadīth, and early scholarly writings, together with Nasīmī's commentary, while also referring to modern academic studies for broader context. By combining these classical sources with contemporary perspectives, the study demonstrates how prophetic guidance transformed spiritual healing into a practice that was spiritually sound, ethically guided, and socially relevant.

### 3. Spiritual Healing in the Early Period of Islam According to Maḥmūd Nāẓim al-Nasīmī

Spiritual healing in the early period of Islam was grounded in offering reassurance to the patient, encouraging them, praying for their well-being, and treating them through *al-ruqyah al-islāmiyyah*.<sup>12</sup> As for reassuring and encouraging the patient, Islam placed significant emphasis on instilling tranquility and increasing the patient's hope for recovery. Building on this, the Prophet ﷺ stated, "For every disease, there is a cure."<sup>13</sup> Ibn al-Qayyim commented on this statement, "In the saying of the Prophet ﷺ, 'For every disease, there is a cure,' there lies psychological strength for both the patient and the physician. It is an encouragement to seek out the appropriate remedy and to investigate its nature. Essentially, when the patient becomes internally convinced that a cure exists for his ailment, his heart becomes attached to the spirit of hope, the heat of despair subsides, and the door of optimism opens. Once the soul is strengthened, the innate vital heat (*ḥarārah gharīziyyah*) is reactivated, leading to the reinforcement of the animal, psychic, and natural spirits. Consequently, when these vital forces are strengthened, the faculties that carry and support them are also fortified, allowing them to overcome and repel illness. Similarly, when the physician knows that a certain ailment has a cure, it motivates him to search and investigate with greater determination."<sup>14</sup>

Furthermore, the Prophet ﷺ drew attention to a highly crucial aspect of visiting the sick, whether the visitor is a physician, a relative, a friend, or a companion. He emphasized that visitors should refrain from saying anything that may instill fear or despair in the patient. Rather, they are encouraged to speak in ways that bring comfort, joy, and hope for recovery. The Prophet ﷺ stated, "If you visit a sick person or attend a funeral, then speak well, for the angels affirm what you say."<sup>15</sup>

Moreover, the Prophet ﷺ established the practice of praying for the sick as part of the etiquette of visitation. Such supplications uplift the patient's spirit and serve as a reminder to turn to God, deepening the patient's sense of spiritual tranquility.<sup>16</sup> According to a narration by 'Ā'ishah (may Allah be pleased with her), whenever the Prophet ﷺ visited a sick person, he would supplicate, "Remove the harm, O Lord of mankind, and heal, for You are the

<sup>12</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa 'Ilm al-Hadith*. 3/158.

<sup>13</sup> Muslim. (2011). *Shahih Muslim*. Hadith no: 2204.

<sup>14</sup> Al-Jauziyyah, Ibn Qayyim. (n.d). *Al-Tibb al-Nabawi*. Beirut: Dar al-Hilal. 15.

<sup>15</sup> Muslim (2011). *Shahih Muslim*. Hadith no: 919.

<sup>16</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa 'Ilm al-Hadith*. 3/159.

Healer. There is no healing but Your healing, a healing that leaves behind no ailment.”<sup>17</sup>

Consistent with this, it becomes evident that spiritual healing in early Islam centered around specific recitations known as *al-ruqyah al-islāmiyyah*, which consist of selected verses from the Qur’ān and supplications directed to God using His names and attributes. These prayers seek His aid and protection alone, placing complete trust and hope in His divine will.<sup>18</sup>

#### 4. Dimensions of the Use of *Al-Ruqyah Al-Islāmiyyah* According to Maḥmūd Nāẓim al-Nasīmī

In addition to purifying the *ruqyah* practiced by the Arabs during the pre-Islamic era (*Jāhiliyyah*), the Prophet ﷺ also introduced an expanded functional scope of *al-ruqyah al-islāmiyyah* as taught to his Companions. According to Maḥmūd Nāẓim al-Nasīmī, the use of *al-ruqyah al-islāmiyyah* in the early period of Islam can be categorized into three primary dimensions as follows:

#### 5. The Use of *al-Ruqyah al-Islāmiyyah* in the Treatment of Psychological Disorders

Psychological disorders constitute the foremost and earliest domain for the application of psychotherapeutic treatments, both in ancient and modern contexts.<sup>19</sup> Historically, the outcomes of such treatments were considered superior, particularly in earlier centuries, compared to the use of known sedative and sleep-inducing medications, which often failed to address all forms of psychological ailments.<sup>20</sup>

##### 5.1 Treating Fear and Nighttime Disturbances in Sleep

Occasionally, sudden fright during sleep arises as a consequence of terrifying dreams or other unsettling events that recur, indicating a lack of psychological comfort. Such fright may stem from anxiety, fear of hostility

---

<sup>17</sup> Al-Bukhari, Muhammad Ismail. (2001). *Shahih al-Bukhari*. Beirut: Dar Tuq al-Najah. Hadith no: 5675, 5743, 5750. Muslim. (2011). *Shahih Muslim*. Hadith no: 2191.

<sup>18</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa ‘Ilm al-Hadith*. 3/159.

<sup>19</sup> Pim Cuijpers et al., “Cognitive Behavior Therapy vs. Control Conditions, Other Psychotherapies, Pharmacotherapies and Combined Treatment for Depression: A Comprehensive Meta-analysis Including 409 Trials with 52,702 Patients,” *World Psychiatry* 22, no. 1 (2023): 105–15.

<sup>20</sup> Ganesh Anil Vitukade, “A Systematic Review on Sedative and Hypnotics,” *International Journal for Research in Applied Science and Engineering Technology* 12, no. 7 (2024): 671–81; Adam Wichniak et al., “Effects of Antidepressants on Sleep,” *Current Psychiatry Reports* 19, no. 9 (2017): 1–7.



from others, or psychological distress.<sup>21</sup> The Prophet ﷺ instructed the recitation of a specific supplication in such instances, aiming to provide spiritual reassurance and tranquility. The ḥadīth states, “If any of you feels disturbed during sleep, let him seek refuge in Allah by saying, I seek refuge in the perfect words of Allah from His anger, His punishment, the evil of His servants, the whisperings of devils and their presence.” Thus, ‘Abd Allāh ibn ‘Amr would teach this supplication to any of his children who had reached the age of comprehension, and for those who had not yet reached that stage, he would write it on a parchment and hang it around their necks.<sup>22</sup>

## 5.2 Treating Insomnia

Insomnia appears in various forms: it may accompany the early stages of some physical illnesses that arise from preoccupation with daily burdens, anxieties, and troubles. This resulted in lingering fears, which manifest as psychological confusion or the onset of mental disorders.<sup>23</sup> Accordingly, redirecting the mind away from distressing thoughts toward contemplation of the greatness of the Creator of the heavens and earth, seeking His assistance, and relying upon Him against all harm grants the afflicted person spiritual refuge, inner calm, and psychological serenity, facilitating sleep and dispelling insomnia.<sup>24</sup>

It has been narrated from Buraydah that Khalid ibn al-Walid complained to the Prophet ﷺ about his difficulty sleeping due to insomnia. The Prophet ﷺ instructed him, “When you go to bed and cannot sleep, say: O Allah, Lord of the seven heavens and all they cover, Lord of the earths and all they contain, Lord of the devils and all whom they misguide, be my protector from the evil of all Your creation, so that none of them can overpower or harm me. Your protection is mighty, and glorified is Your praise; there is no god but You, and there is no deity besides You.”<sup>25</sup>

Although the chain of transmission of this ḥadīth is weak, it nevertheless indicates a spiritual method for treating insomnia in early Islam. On a similar note, numerous other narrations, some with authentic chains of transmission, recommend the recitation of supplications before sleep or after lying in bed. These supplications transfer the believer’s focus from worldly worries to the contemplation of the Almighty Creator, seeking His aid and

<sup>21</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa ‘Ilm al-Hadith*. 3/160

<sup>22</sup> Al-Tirmidhi, Muhammad bin ‘Isa. (1975). Sunan al-Tirmidhi. Egypt: Maktabah al-Babi al-Halabi. Hadith no: 3528. Graded as Hasan Gharib according to al-Tirmidhi.

<sup>23</sup> Sharon L. Schutte-Rodin et al., “Clinical Guideline for the Evaluation and Management of Chronic Insomnia in Adults,” *Journal of Clinical Sleep Medicine* 4, no. 5 (2008): 487–504.

<sup>24</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa ‘Ilm al-Hadith*. 3/161.

<sup>25</sup> Al-Tirmidhi. (1975). Sunan al-Tirmidhi. Hadith no: 3523. Al-Tirmidhi said: “This is a ḥadīth whose chain of transmission is not strong.”



protection, which grants relative psychological tranquility that varies from person to person. Correspondingly, this process distances the afflicted individual from causes of insomnia and facilitates restful sleep.<sup>26</sup>

### 5.3 Treating Affliction Caused by Sorcery or the Evil Eye

An individual who believes that they have been afflicted by sorcery or the evil eye and fears such harm excessively often experiences heightened anxiety, particularly under specific circumstances, imagining that they are under the influence of either one. This may lead to psychosomatic or functional illness. In such cases, treatment through spiritual means becomes essential, aiming to dispel these illusions and remove the notion that sorcery or the evil eye has truly affected the person.<sup>27</sup> Indeed, frequent fear of sorcery or the evil eye can lead a person to misattribute any sudden illness to one of these causes. Hence, spiritual therapy plays a vital role in isolating the psychological factor and eliminating the resulting symptoms, preventing the progression of psychosomatic illness. Essentially, treating this condition through spiritual means, using prayers, supplications, and Qur'ānic recitations, helps to dispel fear and false assumptions.<sup>28</sup>

Islam guides a believer not to succumb to baseless fears or illusions but rather to strengthen their heart with good thoughts, reliance upon Allah, and trust in His divine will and protection. In addition, among the key Islamic remedies for sorcery and the evil eye are remembrance of Allah, prescribed supplications, and recitations that serve as preventive and curative measures.

The Prophet ﷺ permitted the use of *ruqyah* for cases of the evil eye. Ahmad narrates on the authority of Abū Hurayrah (may Allah be pleased with him) that the Prophet ﷺ stated regarding the evil eye, “The evil eye is real, and through it *shayṭān* is present, along with the envy of the son of Adam.”<sup>29</sup> The evil eye refers to a harmful gaze mixed with admiration or envy that reaches the afflicted person, causing real harm. As narrated by ‘Ā’ishah (may Allah be pleased with her), the Prophet ﷺ commanded, “Seek *ruqyah* for protection against the evil eye.”<sup>30</sup>

---

<sup>26</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa ‘Ilm al-Hadith*. 3/162.

<sup>27</sup> Ratu Essya Putri Latukau, Muhammad Yasir, and Wissam Farhan Al-Nussairi, “The Concept of Ain (Evil Eye) in the Qur’an and Hadith: Implications for Mental Health in Contemporary Era,” *Al-Karim: International Journal of Quranic and Islamic Studies* 3, no. 1 (2025): 105–24.

<sup>28</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa ‘Ilm al-Hadith*. 3/162-163.

<sup>29</sup> Ibn Hanbal, Ahmad. (2001). *Musnad Ahmad*. Tahqiq: ‘Abdullah al-Turki. Beirut: Muassasah al-Risalah. 15/417. Hadith no: 9668.

<sup>30</sup> Ibn Hanbal, Ahmad. (2001). *Musnad Ahmad*. Hadith no: 24345.

Among the Islamic *ruqyah* that may be employed as a form of spiritual therapy for afflictions caused by sorcery or the evil eye is the recitation of the two protective chapters (al-Mu'awwidhatayn): "Say: I seek refuge with the Lord of the daybreak" (*Qul a'ūdhu birabbil-falaq*) and "Say: I seek refuge with the Lord of mankind" (*Qul a'ūdhu birabbil-nās*). It is narrated from Abū Sa'īd al-Khudrī (may Allah be pleased with him) that he stated, "The Messenger of Allah ﷺ used to seek refuge in Allah from the jinn and from the human evil eye, until the two protective chapters were revealed. Once they were revealed, he relied upon them exclusively and abandoned other forms of supplication."<sup>31</sup>

Additionally, there is the general *ruqyah* performed by the angel Jibrīl upon the Prophet ﷺ. Muslim narrates on the authority of Abū Sa'īd al-Khudrī that Jibrīl came to the Prophet ﷺ and asked, "O Muḥammad, are you unwell?" The Messenger of Allah ﷺ replied, "Yes." Then Jibrīl stated, "In the name of Allah, I recite over you for healing from everything that harms you, from the evil of every soul and every envious eye. In the name of Allah, I recite over you, and may Allah grant you healing."<sup>32</sup>

Among the spiritual treatments prescribed for the evil eye is also the act of using water with which the person who caused the affliction (*al-ā'in*) has washed certain parts of their body, then pouring that water over the one afflicted, from behind them. Muslim narrated from Ibn 'Abbās, who reported that the Prophet ﷺ stated, "The evil eye is real, and if there were anything that could precede divine decree, it would be the evil eye. And when you are asked to wash (for the afflicted person), then wash."<sup>33</sup> Al-Nawawī stated that this ḥadīth affirms the reality of the evil eye, its potential harm, and that it is a real force that can cause damage.<sup>34</sup>

As for the statement of the Prophet ﷺ, "And when you are asked to wash (for the afflicted person), then wash." Ibn Hajar stated in *Fath al-Bārī*. This contains an indication that performing *ghusl* (ritual washing) for this purpose was already known among them, and the Prophet ﷺ commanded them not to refrain from it when requested. At the very least, it serves to dispel the misconception or illusion that has arisen in the matter. The apparent meaning of the command indicates obligation.<sup>35</sup> Al-Māzarī mentioned a difference of opinion regarding this matter but affirmed the view that it is

<sup>31</sup> Al-Tirmidhi. (1975). Sunan al-Tirmidhi. Hadith no: 2058. Graded as Hasan Gharib according to al-Tirmidhi.

<sup>32</sup> Muslim. (2011). *Shahih Muslim*. Hadith no: 2186.

<sup>33</sup> Muslim. (2011). *Shahih Muslim*. Hadith no: 2188.

<sup>34</sup> Al-Nawawi, Yahya bin Syaraf. (1972). al-Minhāj Sharḥ Ṣaḥīḥ Muslim bin al-Ḥajjāj. Beirut: Dār Iḥyā' al-Turāth al-ʿArabī. 14/174.

<sup>35</sup> Al-ʿAsqalani, Ibn Hajar. (1970). Fath al-Bari. 10/204.

obligatory. He stated: If there is fear of death and washing by the one who caused the evil eye (*al-‘ā’in*) is customarily known to bring about healing, then it becomes imperative to do so. It has already been established that one is compelled to provide food for a person in dire necessity, and this matter takes precedence over that.<sup>36</sup>

The ḥadīth of Ibn ‘Abbās does not specify the method of this washing. However, the incident is narrated in detail in the ḥadīth of Sahl ibn Ḥanīf, reported by Aḥmad through the narration of al-Zuhrī from Abū Umāmah ibn Sahl ibn Ḥanīf, who reported from his father that the Prophet ﷺ once traveled with his companions until they reached the valley of al-Kharrār near al-Juhfah. Sahl ibn Ḥanīf, who was fair-skinned and had a handsome body and complexion, performed *ghusl* (washing). ‘Āmir ibn Rabī‘ah looked at him and mentioned, “I have never seen anything like what I see today, not even the skin of a maiden secluded in her chamber.” Suddenly, Sahl collapsed. The Prophet ﷺ was informed and asked, “Do you suspect anyone?” They replied, “‘Āmir ibn Rabī‘ah.” The Prophet ﷺ summoned ‘Āmir, reproached him angrily, and stated, “Why would one of you kill his brother? Why did you not say, ‘May Allah bless him,’ when you saw something that amazed you?” He then instructed him, “Perform ablution for him.” Accordingly, ‘Āmir washed his face, hands, elbows, knees, the ends of his feet, and the inside of his lower garment into a vessel. Then, a man poured that water over Sahl from behind, over his head and back, and finally, the vessel was turned upside down. This was performed, and Sahl departed with the people, completely recovered and unharmed.<sup>37</sup>

Indeed, the Prophet ﷺ demonstrated a profound understanding of ethical social principles when a person witnesses something that pleases or amazes him. He stated to ‘Āmir ibn Rabī‘ah, after he had afflicted Sahl ibn Ḥanīf with the evil eye, “If one of you sees from his brother that which pleases him, then let him supplicate for blessing for him.”<sup>38</sup> This directive serves to dispel the whispers of envy, to redirect admiration toward supplicating for Allah’s bounty, and to protect the owner of the admired object from imagining that he has been envied or harmed by the evil eye.<sup>39</sup>

In the case of *ruqyah* for sorcery, it is permissible for the *rāqī* (spiritual healer) to include the recitation of the following Qur’ānic verses: “That which

<sup>36</sup> Al-Maqrīzī, Aḥmad bin ‘Alī. (1999). *Imtā‘ al-Asmā’*. Ed. Muḥammad ‘Abd al-Ḥamīd al-Namīsī. Beirut: Dār al-Kutub al-‘Ilmiyyah. 7/388.

<sup>37</sup> Ibn Hanbal, Aḥmad. (2001). *Musnad Ahmad*. Hadith no: 15980.

<sup>38</sup> Ibn Majah, Muhammad bin Yazid. (2009). *Sunan Ibn Majah*. Ed. Syu’aib al-Arnaut. Beirut: Dar al-Risalah al-‘Alamiyyah. 4/542. Hadith no: 3509.

<sup>39</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa ‘Ilm al-Hadith*. 3/167.

you have brought is only sorcery. Indeed, Allah will nullify it. Verily, Allah does not amend the work of the corrupters.”<sup>40</sup> This is attributed to the fact that the entire Qur’ān is suitable to be used as a general *ruqyah*.<sup>41</sup>

#### 5.4 Treatment of Mental Disability (‘Atah) through *Ruqyah*

It was narrated from Khārijah ibn al-Ṣalt al-Tamīmī, from his uncle, who stated, “We returned from visiting the Messenger of Allah ﷺ and passed by a tribe from among the Arabs. They mentioned, ‘We have been informed that you have come from this man (the Prophet) with something good. Do you have any medicine or *ruqyah*? For indeed, we have a man afflicted with mental disability who is kept in chains.’ I replied, ‘Yes, we do.’ Then they brought to me a man restrained in shackles. I recited over him Sūrah al-Fātiḥah for three days, morning and evening. Every time I completed the recitation, I would collect my saliva and then blow upon him. It was as though he was suddenly released from bondage (he was cured and freed from his affliction).” He continued, “They offered me a reward, but I said, ‘I will not accept it until I ask the Messenger of Allah ﷺ.’ Upon telling him, the Prophet ﷺ mentioned, ‘Take it. By my life, whoever accepts payment for a false *ruqyah*, yours, indeed, was for a true and legitimate *ruqyah*.’”<sup>42</sup>

The Prophet ﷺ classified *ruqyah* into two categories: *ruqyah* of truth and *ruqyah* of falsehood. The *ruqyah* of truth is that which is based on the Qur’ān or authentically transmitted from the Prophet ﷺ, whereas the *ruqyah* of falsehood is that which does not conform to these sources. Al-Shawkānī stated, “The ḥadīths that prohibit *ruqyah* are to be understood as referring to false *ruqyah*, while the ḥadīths that permit it are to be understood as referring to authentic *ruqyah*.”<sup>43</sup>

The statement made by that tribe from among the Arabs, “Is there any medicine for him or a *ruqyah*?” indicates that the term “medicine” when used by the Arabs generally refers to a material remedy. However, the ḥadīth does not highlight the symptoms exhibited by the individual described, except for the violent outburst that suggests physical restraint. This may imply that the individual was restrained to prevent him from harming others with his impaired behavior, frightening children and women, or becoming the subject of ridicule and aggression from others due to his erratic actions. Nonetheless,

<sup>40</sup> Yunus: 81.

<sup>41</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa ‘Ilm al-Hadith*. 3/167.

<sup>42</sup> Abu Daud, Sulaiman bin al-Asy’ath. (2009). Sunan Abi Daud. Ed. Syu’aib al-Arnaut. Beirut: Dar al-Risalah al-‘Alamiyyah. 5/295. Hadith no: 3420. Graded as *hasan* according to Syu’aib al-Arnaut.

<sup>43</sup> Al-Ghumari, ‘Abdullah. (n.d.) Kamāl al-Īmān fī al-Tadāwī bi-al-Qur’ān. Cairo: Maktabah al-Qahirah. 23.

it remains unclear whether the patient mentioned in the ḥadīth was entirely lacking reason and mentally incapacitated, or partially so, or whether he was suffering from a psychological disorder with symptoms that suggest diminished intellect and cognitive function.<sup>44</sup>

In Al-Qāmūs al-Muḥīṭ, the term *ma'tūh* refers to a deficiency in intellect, a loss thereof, or a state of astonishment.<sup>45</sup> It is self-evident that the intended meaning in linguistic usage differs from its technical usage in medical terminology. Indeed, the medical terminology itself differs between ancient and modern medicine. In line with this, astonishment (*al-dahsh*) does not warrant restraining the individual experiencing it, as it is a temporary emotional state. Therefore, it is not what is intended by the term *ma'tūh* mentioned earlier.<sup>46</sup> In modern medicine, *'atah* (dementia) refers to an irreversible impairment of cognitive ability due to its association with a non-correctable organic disorder.<sup>47</sup>

Alternatively, the *ma'tūh* mentioned in the ḥadīth may have been afflicted with a psychological disorder, specifically catatonic schizophrenia. If that were the case, the individual may not have had a clearly defined clinical profile over time. The disorder was first described by John Conally in 1849 CE without assigning it a specific name. Meanwhile, the Belgian psychiatrist Morel in 1860 CE used the term 'dementia praecox' (*al-'atah al-bāsir*). The term "schizophrenia" was again used by Eugen Bleuler in 1911 CE. Accordingly, schizophrenia is no longer classified merely as a disease, but rather as a breakdown manifesting in various disorganized patterns of behavior, indicating a profound fragmentation of personality. Among the methods for treating schizophrenia is psychotherapy. However, such an approach often fails in most cases, since individuals with schizophrenia are unable to engage in meaningful cooperation or establish a connection with the treating physician. It is also possible that the patient exhibiting signs of mental deficiency along with violent outbursts was suffering from agitated depression/delusion (psychomotor agitation). This includes other conditions that specialists in psychiatry may identify as causes of cognitive impairment, whether accompanied by outbursts or not.<sup>48</sup>

## 6. The Use of *al-Ruqyah al-Islāmiyyah* in the Treatment of Physical Illnesses

---

<sup>44</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa 'Ilm al-Hadith*. 3/168.

<sup>45</sup> Al-Fairuz Abadi, Muhammad bin Ya'qub. (2005). *Al-Qāmūs al-Muḥīṭ*. Beirut: Muassasah al-Risalah. 1249.

<sup>46</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa 'Ilm al-Hadith*. 3/168.

<sup>47</sup> Julie Hugo and Mary Ganguli, "Dementia and Cognitive Impairment. Epidemiology, Diagnosis, and Treatment.," *Clinics in Geriatric Medicine* 30, no. 3 (2014): 421–42.

<sup>48</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa 'Ilm al-Hadith*. 3/169.

This dimension pertains to cases of physical illness for which treatment has failed, is unavailable, or has yet to be discovered. In many cases, it is imperative that the physician refrain from disclosing to the patient the full extent of the danger, poor prognosis, or lack of available treatment. Rather, the physician should seek to reassure the patient and prescribe symptomatic relief. If, however, the patient becomes aware of the true nature of his illness, that it is life-threatening or chronic with no effective cure, his psychological reaction to such information will vary depending on individual factors. This includes personality, psychological state, life circumstances, family support, religious commitment, and strength of spiritual conviction. In such situations, psychological symptoms may compound the physical condition. Therefore, spiritual treatment becomes essential in such cases, alongside the use of symptomatic medications.<sup>49</sup>

Historically, effective medications were limited, and many diseases remained unknown and undiagnosed.<sup>50</sup> Spiritual healing (*ruqyah*) often stood alone in the treatment of conditions for which medicine had failed, or for which no remedy had yet been discovered. Below are several examples of the use of *al-ruqyah al-islāmiyyah* in the treatment of physical illness from the early Islamic period:

### 6.1 Treating Venomous Animal Stings with *Ruqyah*

At that time, antidotes for poison or animal stings were not known or had not yet been discovered. Moreover, the commonly recognized remedies for poisoning were not constantly available, especially in rural areas and remote valleys. Consequently, many cases were treated with spiritual healing rooted in traditions that predate Islam, dating back to the pre-Islamic era (*Jāhiliyyah*).<sup>51</sup> ʿĀ'ishah (may Allah be pleased with her) stated, “The Messenger of Allah ﷺ permitted *ruqyah* as treatment for envenomation caused by snakes and scorpions.”<sup>52</sup>

The historical sources do not record the specific wording of the *ruqyah* used by the family of Ḥazm, the Anṣārīs of Madinah, to treat those stung by snakes or scorpions, whether during the pre-Islamic period (*Jāhiliyyah*) or after the advent of Islam. Nevertheless, the ḥadīth transmitters recorded in

<sup>49</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa 'Ilm al-Hadith*. 3/170.

<sup>50</sup> Muhammad Akmaludin Mohd Hamdan et al., “Principles of Prophetic Medicine According to Mahmud Nazhim Al-Nasimi,” *International Journal of Religion* 5, no. 5 (2024): 1048–57.

<sup>51</sup> Rouhullah Dehghani and Mohammad Ghannaei Arani, “Scorpion Sting Prevention and Treatment in Ancient Iran,” *Journal of Traditional and Complementary Medicine* 5, no. 2 (2015): 75–80; Timothy P. Jenkins et al., “Terrestrial Venomous Animals, the Envenomings They Cause, and Treatment Perspectives in the Middle East and North Africa,” *PLoS Neglected Tropical Diseases* 15, no. 12 (2021): 1–36.

<sup>52</sup> Ibn Majah, Muhammad bin Yazid. (2009). Sunan Ibn Majah. 4/547. Hadith no: 3517. Graded as *sahih* according to Syu'aib al-Arnaut.



their works that one of the Companions performed *ruqyah* for a person who had been stung, using Sūrah al-Fātiḥah. He recited it seven times, and the person was cured. Prior to that, the victim's family had tried all the known and accessible remedies for such stings, but to no avail.<sup>53</sup>

Most of the narrations of this incident do not specify the type of sting, whether it was from a snake or a scorpion. In one version, it is reported as a snake bite. In another, a scorpion sting. In addition, some narrations indicate that the one who performed the *ruqyah* was Abū Saʿīd al-Khudrī (may Allah be pleased with him). Al-Bukhārī and Muslim narrated from Abū Saʿīd al-Khudrī (may Allah be pleased with him), who stated: A group of the Companions of the Prophet ﷺ set out on a journey until they came to a tribe from among the Arab tribes and requested hospitality from them, but the tribe refused to host them. Then, the leader of that tribe was bitten (by a venomous creature), and they tried everything to treat him. However, nothing proved beneficial. Some among them mentioned, "Why don't you go to the group of travelers who stopped nearby? Perhaps some of them might have something (that could help)." So, they came to the Companions and stated, "O group (of travelers), our leader has been bitten, and we have tried everything but to no avail. Do any of you have something (that might cure him)?" One of them replied, "Yes, by Allah, I do perform *ruqyah*. But by Allah, we sought hospitality from you and you refused to host us, so I will not perform *ruqyah* for him unless you give us a fee." They agreed to give them a flock of sheep in return. Then he went to the afflicted man and began spitting lightly on him and reciting, "*Al-Ḥamdu lillāhi Rabb al-Ālamīn*." It was as if the man had been released from bondage; he stood up and began walking, exhibiting no signs of ailment. They fulfilled their agreement and gave the Companions the flock of sheep. One of them suggested, "Let us divide it (among ourselves)." However, the one who performed the *ruqyah* stated, "Do not do so until we go to the Prophet ﷺ and inform him of what happened, so that we may see what he commands us to do." When they came to the Messenger of Allah ﷺ and informed him of what had occurred, he stated, "How did you know it was a *ruqyah*?" Then he mentioned, "You have done correctly. Distribute the flock and allot me a share with you," and the Messenger of Allah ﷺ smiled.<sup>54</sup>

Ibn Qayyim al-Jawziyyah stated in the chapter titled "*Ruqyah* of the One Stung Using Sūrah al-Fātiḥah," "There was a time when I was in Makkah and I fell ill, and at that time, no physician or medicine was available. So, I treated myself with Sūrah al-Fātiḥah. I would take a portion of Zamzam water, recite the sūrah over it several times, and then drink it. Through this, I experienced

<sup>53</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa 'Ilm al-Hadith*. 3/170-171.

<sup>54</sup> Al-Bukhari, Muhammad Ismail. (2001). *Shahih al-Bukhari*. 3/92. Hadith no: 2276.



complete recovery. Thereafter, I made it a practice to use this method for many ailments, and I would benefit from it to the utmost degree.”<sup>55</sup>

## 6.2 Treating Pain with *Ruqyah*

The physician exerts his utmost effort in alleviating the pain of his patient while awaiting recovery from the underlying condition that causes the pain, even when such recovery is unlikely. He also seeks to reassure the patient, as fear arising from the pain may intensify the muscle spasms responsible for it and may even lead to psychological disturbances.<sup>56</sup> Some types of pain originate from psychological causes, such as exhaustion and anxiety, often referred to as psychogenic pain. In such cases, rest and spiritual treatment are sufficient to eliminate the symptoms.<sup>57</sup>

Muslim narrated from ‘Uthmān ibn Abī al-‘Āṣ al-Thaqafī that he complained to the Prophet ﷺ about a pain he had been experiencing in his body since he embraced Islam. The Prophet ﷺ stated to him, “Place your hand on the part of your body where you feel pain and recite, *Bismillāh* (In the Name of Allah), three times. Then recite seven times, *A‘ūdhu biLLāhi wa qudratihi min sharri mā ajidu wa uḥādhir* (I seek refuge in Allah and His power from the evil of what I find and what I fear).”<sup>58</sup> According to the version narrated in *al-Muwatta’*, the wording is, *Bi‘izzatillāhi wa qudratihi min sharri mā ajidu* (By the might and power of Allah, from the evil of what I find). ‘Uthmān mentioned, “I recited that, and Allah removed what I had been suffering from. I continued thereafter to instruct my family and others to use it.”<sup>59</sup> It should be noted that none of the narrations specify the exact location of the pain or the nature of the illness. Meanwhile, Ibn Qayyim al-Jawziyyah stated, “In this form of treatment, through the remembrance of Allah, entrusting the matter to Him, and seeking refuge in His might and power from the harm of the pain, there lies that which removes it. The repetition (of the supplication) serves to render it more effective and impactful, akin to the repeated use of medicine to expel harmful substances. Moreover, the number seven possesses a particular efficacy that is not found in other numbers.”<sup>60</sup>

---

<sup>55</sup> Al-Jauziyyah, Ibn Qayyim. (n.d). *Al-Tibb al-Nabawi*. 132.

<sup>56</sup> Lok Cheung and Andrew Soundy, “The Impact of Reassurance on Musculoskeletal (MSK) Pain: A Qualitative Review,” *Behavioral Sciences* 11, no. 11 (2021): 1–17; Adrian C Traeger et al., “Effect of Primary Care–Based Education on Reassurance in Patients with Acute Low Back Pain: Systematic Review and Meta-Analysis,” *JAMA Internal Medicine* 175, no. 5 (2015): 733–43.

<sup>57</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa ‘Ilm al-Hadith*. 3/172.

<sup>58</sup> Muslim. (2011). *Shahih Muslim*. Hadith no: 2202.

<sup>59</sup> Malik. (1985). *Al-Muwatta’*. Ed. Muhammad Fuad ‘Abd al-Baqi. Beirut: Dar Ihya’ al-Turath al-‘Arabi. 2/942. Hadith no: 9.

<sup>60</sup> Al-Jauziyyah, Ibn Qayyim. (n.d). *Al-Tibb al-Nabawi*. 140.

### 6.3 Treatment by *Ruqyah* for a Condition that May Involve Fainting, Coma, or Genuine or Hysterical Seizures

Modern medicine indicates that hysteria may present in episodes resembling fainting, coma, or epileptic seizures. In such episodes, the individual feigns loss of consciousness, yet physicians are generally able to distinguish these hysterical episodes from actual medical conditions through careful observation and by identifying certain clinical signs.<sup>61</sup>

Al-Bukhārī and Muslim both narrated the incident of a woman suffering from genuine epilepsy who complained of her condition to the Prophet ﷺ. At the time, there was no known effective treatment for preventing epileptic seizures. Thus, the Prophet did not prescribe anything for her, neither a material remedy nor a *ruqyah*. Instead, she was content with his supplication that she would not be exposed during the seizure. ‘Aṭā’ ibn Abī Rabāḥ reported that Ibn ‘Abbās once stated to me, “Shall I show you a woman from among the people of Paradise?” I replied, “Yes, indeed.” He stated, “This black woman came to the Prophet ﷺ and mentioned, ‘I suffer from epileptic seizures, and during them I become exposed. So please supplicate to Allah for me.’” The Prophet ﷺ replied, “If you wish, be patient and you will have Paradise; but if you wish, I will supplicate to Allah to heal you.” She stated, “I choose patience.” Then she added, “But I become uncovered, so supplicate to Allah that I do not become exposed.” So, he ﷺ supplicated for her.<sup>62</sup>

Ibn Qayyim al-Jawziyyah stated, “Epilepsy is of two kinds: one caused by wicked earthly spirits, and the other caused by harmful bodily humors (*akhlāṭ radi’ah*). The latter is the type that physicians speak of in terms of its cause and treatment. Hippocrates himself explicitly mentioned this in some of his works, noting certain treatments for epilepsy, and stating, ‘This is beneficial only for epilepsy whose cause lies in humoral imbalance and physical matter. But as for epilepsy caused by spirits, this treatment is ineffective.’”<sup>63</sup>

As for epilepsy caused by malignant terrestrial spirits; that is, epilepsy resulting from the harm of devils (*shayāṭīn*), Ibn Qayyim al-Jawziyyah reported from his teacher, Ibn Taymiyyah, that, “He would recite into the ear of the afflicted person the verse: ‘Did you think that We created you in vain and that to Us you would not be returned?’ [al-Mu’minūn: 115].” He also treated such cases using Āyat al-Kursī [al-Baqarah: 255], and would instruct both the afflicted and those treating him to recite it frequently, along with

<sup>61</sup> Elisabeth Medeiros De Bustos et al., “Clinical Manifestations of Hysteria: An Epistemological Perspective or How Historical Dynamics Illuminate Current Practice,” *Frontiers of Neurology and Neuroscience* 35 (2014): 28–43.

<sup>62</sup> Al-Bukhari, Muhammad Ismail. (2001). *Shahih al-Bukhari*. 7/116. Hadith no: 5652. Muslim. (2011). *Shahih Muslim*. 8/16. Hadith no: 2576.

<sup>63</sup> Al-Jauziyyah, Ibn Qayyim. (n.d). *Al-Tibb al-Nabawi*. 51.

the two protective sūrahs (al-Mu‘awwidhatayn: Sūrah al-Falaq and Sūrah al-Nās).”<sup>64</sup>

## 7. The Use of *al-Ruqyah al-Islāmiyyah* in Conjunction with Material Remedies for the Treatment of Physical Illnesses

The purpose of *ruqyah* in such cases is to instill hope and reassurance in patients, to awaken their faith and reliance upon Allah for the success of the physical treatment. As a result, their morale is strengthened, and their hope for recovery is enhanced. This is particularly evident when the *ruqyah* is performed by someone whom they consider pious or whom they trust to be qualified in performing such incantations.<sup>65</sup>

The Prophet ﷺ served as the exemplary model for believers in combining material treatment with spiritual healing, without neglecting the use of physical remedies. The following are examples of such integration from the actions of the Prophet ﷺ and those of his noble Companions (may Allah be pleased with them all):

### 7.1 Treatment of a Scorpion Sting with Both *Ruqyah* and Salt

It is narrated from ‘Alī ibn Abī Ṭālib (may Allah be pleased with him) that one night, while the Prophet ﷺ was praying, he placed his hand on the ground, whereupon a scorpion stung him. The Prophet ﷺ then struck it with his sandal and killed it. When he had finished, he stated, “May Allah curse the scorpion! It spares neither one who is praying nor anyone else.” He then called for salt and water, placed them in a vessel, and began pouring the mixture over the finger where he had been stung, wiping it while reciting Sūrah al-Kāfirūn and the Mu‘awwidhatayn.<sup>66</sup>

Al-Munāwī mentioned, “Thus, the treatment combined both the physical remedy derived from natural means and the divine remedy. Salt is beneficial against venom; Ibn Sīnā stated that it is applied as a poultice with flaxseed for a scorpion sting, as salt possesses an attracting and dissolving property.”<sup>67</sup>

### 7.2 Treatment of a Small Abscess with Dharīrah and *Ruqyah* Combined

---

<sup>64</sup> Al-Jauziyyah, Ibn Qayyim. (n.d). *Al-Tibb al-Nabawi*. 52, 53.

<sup>65</sup> Al-Nasimi. (1987). *Al-Tibb al-Nabawi wa ‘Ilm al-Hadith*. 3/175, 176.

<sup>66</sup> Al-Tabarani, Sulaiman bin Ahmad. (1985). *Al-Mu‘jam al-Saghir*. Beirut: Al-Maktab al-Islami. 2/87. Hadith no: 830. Graded as *hasan* according to al-Haithami. Al-Haithami, ‘Ali bin Abu Bakr. *Majma’ al-Zawaid wa Manba’ al-Fawaid*. Cairo: Maktabah al-Qudsi. 5/111. Hadith no: 8445.

<sup>67</sup> Al-Munawi, ‘Abd al-Rauf. (1937). *Fayd al-Qadir*. Egypt: Al-Maktabah al-Tijariyyah al-Kubra. 5/270. Hadith no: 7262.

It is narrated from one of the wives of the Prophet ﷺ that the Prophet ﷺ entered upon her and stated, “Do you have any *dharīrah*?” She replied, “Yes.” He then called for it and applied it to a small abscess located between his toes, after which he supplicated, “O Allah, Extinguisher of the great and Magnifier of the small, extinguish it from me.” Consequently, it subsided.<sup>68</sup> In al-Qāmūs al-Muḥīṭ, *al-bathr* is defined as a small abscess.<sup>69</sup> In al-Qānūn by Ibn Sīnā, it is stated that *qasab al-dharīrah* (*Calamus aromaticus*) dissolves swellings.<sup>70</sup>

### 7.3 The Prophet’s ﷺ Use of Physical Medicines and the Qur’ān in Treating His Illness

This occurred even during the illness that led to his passing ﷺ. Hishām ibn ‘Urwah reported that ‘Urwah used to ask ‘Ā’ishah (may Allah be pleased with her), “O my mother, I am not surprised at your understanding, for I say: the wife of the Messenger of Allah ﷺ and the daughter of Abū Bakr; nor am I surprised at your knowledge of poetry and the history of people, for I say: the daughter of Abū Bakr, and he was among the most knowledgeable of people, but I am surprised at your knowledge of medicine. How did you acquire it? And from where?” She then struck his shoulder and stated, “O ‘Urayyah, indeed the Messenger of Allah ﷺ would fall ill towards the end of his life, and delegations of the Arabs would come to him from all directions, describing various treatments to him, and I would prepare them for him; that is how.”<sup>71</sup>

‘Ā’ishah (may Allah be pleased with her) also reported that when the Prophet ﷺ fell ill, he would recite the Mu’awwidhāt over himself and blow into his hands. When his illness became severe, she would recite them over him and wipe him with his own hands, hoping for their blessing.<sup>72</sup> The Mu’awwidhāt refers to: Sūrah al-Ikhlāṣ (*Qul huwa Allāhu Aḥad*), Sūrah al-Falaq (*Qul a’ūdhu birabb al-falaq*), and Sūrah al-Nās (*Qul a’ūdhu birabbi al-nās*). In the narration of al-Bukhārī, from Ma’mar, it is reported, “I asked Ibn Shihāb: How would he blow?” He replied, “He would blow into his hands, then wipe his face with them.”<sup>73</sup>

## 8. Conclusion

The discussion of *al-ruqyah al-islāmiyyah* in the early Islamic context, as delineated by Maḥmūd Nāẓim al-Nasīmī, demonstrates how the Prophet ﷺ

<sup>68</sup> Ibn Hanbal, Ahmad. (2001). Musnad Ahmad. 38/217, 218. Hadith no: 23141.

<sup>69</sup> Al-Fairuz Abadi, Muhammad bin Ya’qub. (2005). Al-Qāmūs al-Muḥīṭ. 345.

<sup>70</sup> Ibn Sina, Al-Husayn bin ‘Abdullah. (n.d.). Al-Qanun fi al-Tibb. n.p. 1/644.

<sup>71</sup> Ibn Hanbal, Ahmad. (2001). Musnad Ahmad. 40/441. Hadith no: 24380. Graded as *sahih* according to Syu’aib al-Arnaut.

<sup>72</sup> Malik. (1985). Al-Muwatta’. 2/942. Hadith no: 10.

<sup>73</sup> Al-Bukhari, Muhammad Ismail. (2001). Shahih al-Bukhari. 7/131. Hadith no: 5735, 5751.

transformed spiritual healing from superstition into a practice firmly anchored in tauhīd, ethical conduct, and psychological well-being. Notably, by purifying inherited incantations from pre-Islamic practices, the Prophet ﷺ established *ruqyah* as a legitimate therapeutic framework grounded in Qur'ānic verses, authentic supplications, and complete reliance upon Allah. In particular, al-Nasīmī's analysis highlights three primary dimensions of this practice: its role in addressing psychological disorders such as fear, anxiety, insomnia, and afflictions caused by sorcery or the evil eye. This includes its use in the treatment of physical illnesses when material remedies were absent or ineffective, such as venomous stings, chronic pain, or seizures. It also underscores its integration with material remedies, where spiritual reassurance complements physical medicine in strengthening the patient's morale and trust in recovery.

This tripartite framework illustrates that *ruqyah* was never limited to ritualized recitation. Instead, it embodied a holistic vision of care. It reassured patients, instilled optimism, and aligned spiritual trust with medical treatment. Moreover, it exemplified a balance between divine reliance and empirical remedies, as modeled by the Prophet ﷺ in his own practices and guidance to his Companions. In this sense, *al-ruqyah al-islāmiyyah* emerges as a spiritual act and as a multidimensional system of healing, capable of sustaining individual and communal well-being while safeguarding the core principles of Islamic belief. Moreover, the findings of this study contribute meaningfully to the Muslim community by reaffirming the relevance of prophetic guidance in addressing current challenges of psychological and moral distress. By revisiting *al-ruqyah al-islāmiyyah* through the lens of early Islamic reform and ethical integrity, Muslims today may draw renewed confidence in balancing spiritual conviction with modern health paradigms, thus enriching both personal and communal well-being.

## Bibliography

- Al-Quran al-Karim
- Abu Daud, Sulaiman bin al-Asy'ath. *Sunan Abi Daud*. Edited by Syu'aib Al-Arnaut. Beirut: Dar al-Risalah al-'Alamiyyah, 2009.
- Al-'Asqalani, Ibn Hajar. *Fath Al-Bari*. Edited by Muhammad Fuad 'Abd Al-Baqi and Muhib al-Din Al-Khatib. Egypt: al-Maktabah al-Salafiyyah, 1970.
- Al-Bukhari, Muhammad Ismail. *Shahih Al-Bukhari*. Beirut: Dar Tuq al-Najah, 2001.
- Al-Fairuz Abadi, Muhammad bin Ya'qub. *Al-Qāmūs Al-Muḥīṭ*. Beirut: Muassasah al-Risalah, 2005.
- Al-Ghumari, 'Abdullah. *Kamāl Al-Īmān Fī Al-Tadāwī Bi-Al-Qur'ān*. Cairo: Maktabah al-Qahirah, n.d.
- Al-Haithami, 'Ali bin Abu Bakr. *Majma' Al-Zawaid Wa Manba' Al-Fawaid*. Cairo: Maktabah al-Qudsi, 1994.
- Al-Jauziyyah, Ibn Qayyim (Muḥammad bin Abi Bakr bin Ayyub). *Al-Tibb Al-Nabawī*. Beirut: Dar al-Hilal, n.d.
- Al-Maqrīzī, Aḥmad bin 'Alī. *Imtā' Al-Asmā'*. Edited by Muḥammad 'Abd al-Ḥamīd Al-Namīsī. Beirut: Dār al-Kutub al-'Ilmiyyah, 1999.
- Al-Munawi, 'Abd al-Rauf. *Fayd Al-Qadir*. Egypt: Al-Maktabah al-Tijariyyah al-Kubra, 1937.
- Al-Nasimi, Mahmud Nazhim. *Al-Tibb Al-Nabawi Wa 'Ilm Al-Hadith*. Beirut: Muassasah al-Risalah, 1987.
- Al-Nawawi, Yahya bin Syaraf. *Al-Minhāj Sharḥ Ṣaḥīḥ Muslim Bin Al-Ḥajjāj*. Beirut: Dār Iḥyā' al-Turāth al-'Arabī, 1972.
- Al-Tabarani, Sulaiman bin Ahmad. *Al-Mu'jam Al-Saghir*. Beirut: Al-Maktab al-Islami, 1985.
- Al-Tirmidhi, Muhammad bin 'Isa. *Sunan Al-Tirmidhi*. Egypt: Maktabah al-Babi al-Halabi, 1975.
- Bustos, Elisabeth Medeiros De, Sylvio Galli, Emmanuel Haffen, and Thierry Moulin. "Clinical Manifestations of Hysteria: An Epistemological Perspective or How Historical Dynamics Illuminate Current Practice." *Frontiers of Neurology and Neuroscience* 35 (2014): 28–43.
- Cheung, Lok, and Andrew Soundy. "The Impact of Reassurance on Musculoskeletal (MSK) Pain: A Qualitative Review." *Behavioral Sciences* 11, no. 11 (2021): 1–17.
- Cuijpers, Pim, Clara Miguel, Mathias Harrer, Constantin Yves Plessen, Marketa Ciharova, David Ebert, and Eirini Karyotaki. "Cognitive Behavior Therapy vs. Control Conditions, Other Psychotherapies, Pharmacotherapies and Combined Treatment for Depression: A Comprehensive Meta-analysis Including 409 Trials with 52,702 Patients." *World Psychiatry* 22, no. 1 (2023): 105–15.
- Darlis, Ahmad, Hadi Sufyan, Sri Rahmayani Manalu, Muhammad Amin, and Asnil Aidah Ritonga. "Konsep Pendidikan Tauhid Yang Terkandung Dalam Surat Al-Fatihah." *Jurnal Dirosah Islamiyah* 5, no. 2 (2023): 441–53.



- Dehghani, Rouhullah, and Mohammad Ghannae Arani. "Scorpion Sting Prevention and Treatment in Ancient Iran." *Journal of Traditional and Complementary Medicine* 5, no. 2 (2015): 75–80.
- Hamdan, Muhammad Akmaludin Mohd, Mohd Nor Adzhar Ibrahim, Muhammad Fawwaz Muhammad Yusoff, Mohd Zahir Abdul Rahman, and Norazmi Anas. "Principles of Prophetic Medicine According to Mahmud Nazhim Al-Nasimi." *International Journal of Religion* 5, no. 5 (2024): 1048–57.
- Hugo, Julie, and Mary Ganguli. "Dementia and Cognitive Impairment. Epidemiology, Diagnosis, and Treatment." *Clinics in Geriatric Medicine* 30, no. 3 (2014): 421–42.
- Ibn Hanbal, Ahmad. *Musnad Ahmad*. Beirut: Muassasah al-Risalah, 2001.
- Ibn Majah, Muhammad bin Yazid. *Sunan Ibn Majah*. Edited by Syu'aib Al-Arnaut. Beirut: Dar al-Risalah al-'Alamiyyah, 2009.
- Ibn Sina, Al-Husayn bin 'Abdullah. *Al-Qanun Fi Al-Tibb*, n.d.
- Jenkins, Timothy P., Shirin Ahmadi, Matyas A. Bittenbinder, Trenton K. Stewart, Dilber E. Akgun, Melissa Hale, Nafiseh N. Nasrabadi, et al. "Terrestrial Venomous Animals, the Envenomings They Cause, and Treatment Perspectives in the Middle East and North Africa." *PLoS Neglected Tropical Diseases* 15, no. 12 (2021): 1–36.
- Latukau, Ratu Essya Putri, Muhammad Yasir, and Wissam Farhan Al-Nussairi. "The Concept of Ain (Evil Eye) in the Qur'an and Hadith: Implications for Mental Health in Contemporary Era." *Al-Karim: International Journal of Quranic and Islamic Studies* 3, no. 1 (2025): 105–24.
- Malik. *Al-Muwatta'*. Edited by Muhammad Fuad 'Abd Al-Baqi. Beirut: Dar Ihya' al-Turath al-'Arabi, 1985.
- Muslim. *Shahih Muslim*. Beirut: Dar Tuq al-Najah, 2011.
- Schutte-Rodin, Sharon L., Lauren Broch, Daniel Buysee, Cynthia Dorsey, and Michael Sateia. "Clinical Guideline for the Evaluation and Management of Chronic Insomnia in Adults." *Journal of Clinical Sleep Medicine* 4, no. 5 (2008): 487–504.
- Traeger, Adrian C, Markus Huebscher, Nicholas Henschke, G Lorimer Moseley, Hopin Lee, and James H McAuley. "Effect of Primary Care-Based Education on Reassurance in Patients with Acute Low Back Pain: Systematic Review and Meta-Analysis." *JAMA Internal Medicine* 175, no. 5 (2015): 733–43.
- Vitukade, Ganesh Anil. "A Systematic Review on Sedative and Hypnotics." *International Journal for Research in Applied Science and Engineering Technology* 12, no. 7 (2024): 671–81.
- Wichniak, Adam, Aleksandra Wierzbicka, Małgorzata Walecka, and Wojciech Jernajczyk. "Effects of Antidepressants on Sleep." *Current Psychiatry Reports* 19, no. 9 (2017): 1–7.