With great advancements in medical research and technology, the practice of medicine has increasingly detached itself from the human touch and the actual practice of the art of medicine. Management of patients has become very technical, thus focusing on the imaging and laboratory results rather than focusing on patients as people with bodies and souls.

Looking at this matter from the Islamic point of view, the care of patients seems now to be isolated from the ibadah (daily duties of Muslims). In fact, the act of comforting and elevating misery experienced by patients by the medical professionals is part of the rahmatan lil a’lamin (mercy to all god’s creation); aligned with the purpose of maqasid sharia (the objective of Islamic law) to protect religion, life, mind, progeny and wealth. Therefore, it is a mistake to think that Islamic medical practice is confined to certain medical practices during the golden era of the Islamic civilization. In reality, the practice of Islamic medicine is based on values and principles rather than a specific treatment method.1

Interest in Islamic medical practice in Malaysia formally began linked to the field of medical education when the Kulliyyah (Faculty) of Medicine, International Islamic University of Malaysia (IIUM) developed a curriculum that integrated Islamic values; called the Islamic Input in Medical Practice (IIMP). This adaptation still remains a theoretical concept confined to teaching in the classroom and simulated environments. Topics in the curriculum include the wonders of Allah’s creation in our bodies, Muslim medical ethics and practical praying session for Muslim patients.2 Islamic medical service in Malaysia was started under the ibadah-friendly hospitals program by the Ministry of Health. Under this program, the Muslim hospital staff are trained by Muslim religious officers to facilitate patients to perform their religious duties such as praying. Sometimes, the hospital also organizes programs for the Muslim staff on religious issues such as the treatment of patients during Ramadhan, the fasting month. The hospital also provides ablution tools for patients in the wards and prayer rooms for visitors and staff.3 Further improvement in the Islamic Medical Service occurred after the development of the initiative of the Sharia Compliant Hospital in 2014 which aimed to ensure that the hospital services do not have any conflicting issues with Islamic rulings. This is done through a shariah-based quality management standard developed by SIRIM called the MS 1900:2014. Examples of the Sharia-Compliant Hospital program include the use of halal medicine, and providing a clean and modest covering for Muslim patients during treatment.4 Recently, Muslim chaplaincy services have also been introduced to sharia-compliant hospital services. Under this program, religious officers and some medical staff were trained in psychological support based on Islamic teaching to fill the vacuum in the medical services.5

However, the practice of the doctors according to Islamic teaching in Malaysian hospitals is still lacking; such as how the doctors should behave towards patients, their methods of decisions making and how doctors should execute treatment to align with Islamic teaching are still not clear. Therefore, there is a need to explore and understand how Islamic medical practice can be implemented in a Sharia-Compliant hospital. Thus, guidelines on Islamic medical practice can be developed and Muslim patients can receive quality medical care which heals not only their bodies but also their souls.

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