

Advice regarding Healthymuslim.com

Bismillahir Rahmaanir Raheem

All praise is to Allah, the Mighty and Majestic, with heavenly peace and blessing upon the final Messenger of Allah, and those that tread upon his path.

I write this piece of advice reluctantly due to the presence of more knowledgeable brothers than myself however none of them have taken the lead, and thus with the responsibility and obligation upon my shoulders I feel my hand has been forced. I write for the Face of Allah *subhanahu wata'ala* intending to correct what I see as clear errors from you, my dear brother, Abu Iyaadh Amjad Rafiq (may Allah protect and bless you) as you are from the main authors of the website in question; healthymuslim.com. I acknowledge your efforts and sincerity for islaam and the muslims which is evident from what I have known of you for the past 15 years, via Salafipublications.com and its predecessor website, as well as your many circles which I have personally attended. Being a student of knowledge and translating the works of the scholars and spreading that scholarly knowledge across the english speaking world, is indeed an honourable task and I encourage you to continue with it and I advise you to not get distracted by that which is lesser than it.

Recently I have become aware of a new direction from yourself entering into health advice, via healthymuslim.com giving unqualified and at times inappropriate medical advice to both individuals, such that specific tailored advice has been given regards to how to apply certain treatments, your interpretation of medical tests or your diagnosing conditions based upon signs and symptoms. And likewise on a broader public level, such that you attempt to discuss the efficacy of treatments to prevent harm, whether treatments are associated with harm and even whether medical conditions in them of selves are harmful. It is about issues like these that are clearly manifest to any physician, like myself, that I wish, bi iznillah, to give some sincerity of purpose. I would also like to give some foresight to the likely consequences of such behaviour to the health of the muslim public and the dawahtus-salafiyah, as both are clearly at risk. For indeed, the believers are awliyah one to another, and from this walaayah is to correct and advise one another when we fall in to error and to shut-off the harm to each another. I remind hoping that the reminder profits, firstly reminding myself that the basis of any advice when Ahlus-Sunnah deal with each other is gentleness, for whenever it enters an affair it beautifies it.

I am aware of the advice that our noble brothers Dr Adnaan and Dr. Nasser (May Allah protect and bless them) have given to you and your reply to that advice. This advice is complementary to theirs and builds with some details upon the principles that they have mentioned. I do not intend belittlement rather only some brotherly advice from one who sees some slips, from the handiwork of shaitaan, and by highlighting these with some detail hoping that it enlightens your heart, bi iznillah, and rectification is achieved. To humble & rectify oneself is from the noblest of characteristics, so I ask may Allah (subhanahu wa ta'ala) rectify my and your affairs and guide us to a way that is best.

Ameen!

Role of Prophetic Medicine

Prophetic Medicine is from the revelation and to it, as muslims, we submit and recognise that it is from the best forms of all medicine transmitted from our Lord, the Most High, via the Truthful one whose Truthfulness is attested (as-Sadik as-Sudook), Muhammed bin Abdullah *sallallaahu'alaibinasallam*. To spread this form of medicine with the correct understanding of the scholars of Ahlus-Sunnah is a noble goal and one I would encourage you with in regards to healthymuslim.com website. One should exert one's efforts in conveying the Prophetic Medicine with it being the focus especially if you, O Abu Iyaadh, utilises the word 'muslim' within its title, and no doubt with this aim and the correct usage of information of the Prophetic Medicine it could be become a door of benefit for Muslims in terms of their health and further more a door into the salafi dawah. Shaikh Salih al-Fawzaan *hafizuhullah* in his explanation to the 'Three Principles' mentions the importance of entering the houses of knowledge from their (correct) doors. However deviation from this, such that unqualified health advice is given, which at times is inappropriate and even dangerous are from the main issues I would like to address, as this will have the opposite effect resulting in harm to the dawtus-salafiyyah due to the very fact that salafipublications.com website is being utilised as a platform for healthymuslim.com.

Prophetic Medicine should be spread with the understanding of the scholars and those traditional doctors that have experience and expertise in it. Otherwise if applied incorrectly it too can lead to side effects & harm, e.g. excessive dosages of black seed causing liver damage. One needs expertise and awareness of dosages between that which is inadequate such that the medicine doesn't take effect from that which is excessive such that harm is caused. Hence it requires referral back to those traditional doctors who are acquainted with it and have much experience in using it and are well known for that. You will find such traditional doctors in muslim countries and I have heard of some within Yemen and I advise you, O Abu Iyaadh, that correct dosages and course duration of Prophetic Medicines are followed via the guidance of these traditional doctors and they from their experience will also be able to advise about interactions of using several medicines from the Prophetic Medicine such that one may inhibit the effect of the other or its opposite, multiplying the strength of one or both medicines. In doing so, one will avoid inadequate treatment of disease and likewise the over-usage leading to harm.

Therefore to learn the practicalities of this Prophetic Medicine is a noble task but it needs to be done from these traditional doctors that are acquainted and proficient in it. This is the correct door to this knowledge and skill. One can not simply pick up a book such as Imam Ibnul Qayim al-Jauziyah's *Tibb al-Nabawiy*, then study it word for word and then consider himself a medical practitioner, as the correct means (asbaab) have not been taken and in this case these means are to learn the skill and experience directly from those recognised and established as traditional doctors. This skill is not present in the books but is present in its proficient practitioners. Even while one is learning one must restrain from practising independently until one is fully competent in his skills and a student will not know this until his teacher(s) attest to his competency and proficiency.

Prophetic Manhaj in Respect to the Various Disciple of medicine

The various modern day sciences of diseases and disease management in no way impinge upon or opposes the Prophetic Medicine, rather they are complimentary to each other. These forms of medicine such as herbalism, traditional/folk medicine (various forms including the above),

nutritional medicine, homoeopathy, allopathy (modern/western medicine), physiotherapy, etc. then all of these disciplines of disease management are complimentary to one another and to the Prophetic medicine. Even though these disciplines of medicine may differ in their approach to disease management and hence their differences in treatment, then this does not restrict an individual patient to a single form at any one time rather a patient may try a treatment from each form, providing the practitioners of each of these forms is competent & content with this (although there may in specific situations be concerns of drug interactions). This is why you may see allopathic doctors who also have competency in homoeopathy. However what is best is to search for the best discipline of medicine and its practitioners after the Prophetic Medicine in those matters that the Prophetic Medicine is not specific whereby taking the means (asbaab) to a cure. This is evident from the approach of Ibnul Qayim (rahimullah) in his book *Tibb an-Nabawiy* that he uses the medicine of his time and puts it into context using the Prophetic Medicine, such that we see he often returns to the four elements of the body; water, earth, air and fire. Likewise elemental breakdown of substances; cold, hot, dry & wet. This knowledge and classification originates from the Greeks and was the knowledge of that time in the sciences. This likewise acknowledges the co-existence of worldly medicine and Prophetic Medicine.

The various different disciplines of medicine in a shari'ah perspective are from the wasaail-ul-kawniyyah (natural means) to achieve, bi iznillah, treatment of ill health despite these disciplines of medicine having differences of opinion with one another. This difference of opinion is permitted and one could argue inevitable as their methods of approach are different. From the conditions of the wasaail-ul-kawniyyah (natural means) is that they are required to be beneficial through observation or experience. An example of this is when a treatment is given then it needs to show that it brings about the desired effect and this can be observed through the likes of clinical trials where the treatment is ideally compared with a placebo or an already established treatment. (Note: Placebo effect is a phenomenon of when an individual takes a treatment and feels better even though the placebo in itself has no pharmacological activity but the mind feels better that it has taken something that will help, so in turn the body feels better.) If the treatment removes ill health (statistically more so than placebo, if used) then one would regard it as an observed benefit. As for experienced benefit then this is what is passed from one clinical practitioner to another practitioner through the actual practising of a form of medicine, i.e. one learns through experience with dealing with treatments such as when one uses a heart drug then realises it causes a consistent side-effect such as male potency. In this case the experience of using this treatment leads it to be used for another disease such as impotency (as occurred with Viagra).

So the various disciplines of medicine are clearly permissible from both intellectual perspective with sound reason and from a shari'ah perspective and one could even argue recommended (mustahab), as they are from the ways (asbaab) to achieve treatment, bi iznillah, of ill-health as is demonstrated in the Prophetic guidance related in the hadeeth that Imam Maalik rahimullah collected in his *Muwatta'*, from Zayd ibn Aslam:

A man, in the time of the Messenger of Allah *sallallaahu'alaihiwasallam*, was wounded, and the blood became congested. The man summoned two men from Banoo Anmaar, who examined him. He declared then that the Messenger of Allah asked these two:

أيكما أطبّ؟

“Which of you is the more skilled as a physician?”

To which they asked: ‘Is there then some value in medicine, O Messenger of Allah?’

He replied:

أنزل الدواء الذي أنزل الأذى

“The One Who sent down illness also sent down medicine.”

Also in the Musnad of Imam Ahmad, from Ziyad bin Alqah from Usamah bin Sharik, that he said

I was with the Prophet *sallallaahu‘alaibivasallam* when some bedoiuns came to him and said, “O Prophet of Allah! Should we take medicine?” He said

“ Yes , O servants of Allah! Seek cure, for Allah did not place any illness except that He has placed its cure, except one single illness.”

They said what is it? He said **“Old age.”**

There are more example but these two should suffice. Both hadeeth show permissibility of the companions to make use of the medical advice (that is other than the Prophetic Medicine) and its medical practitioners, the Prophet *sallallaahu‘alaibivasallam* also clarified its clear benefit and furthermore went to depths to seek the one who was more skilled of the two present; thus the Prophetic Manhaj allows and encourages the usage of medical practitioner who give health advice and treatment; confirming the benefit within this profession.

Thus the Prophetic manhaj in respect to the muslim’s health should be dictated by the shari'ah, via a textual evidence, and the understanding of the scholars, such that the wordly means (asbaab-ul-kawniyah) cannot be absolutely affirmed or negated except by textual evidence or the absence of likelihood of benefit from that which is observed or experienced. The various medical disciplines have entered into this (wordly means - asbaabul -kawniyah) since the time of the Prophet *sallallaahu‘alaibivasallam* up until today as is as established by the aforementioned two hadeeth with the addition of the recognition of modern medical profession by the scholars through their statements and actions. Simply having a claim that modern medicine falls outside of this is unheard of and unknown to any of the people of knowledge, in any time and place. Nor is heard that revival of the Prophetic medicine necessitates refutation of modern medicine. To make blanket statements about the medical profession requires the individual to fulfill certain conditions for such statement to take weight and this matter would not have been hidden from the scholars regarding the whole profession, which is a matter of safety, concern and an important affair ('fiqh ul-waaqi'), thus falling into the collective obligation of the scholars to be aware of any such dangers and warn of them. However we find that some of the scholars are recipients of modern medication via the modern medical profession and have advised in some medical situations for muslim individuals to refer

back to these medical practitioners for their professional opinions. Likewise this recognition is not restricted to the scholars, but is also found from the trustworthy muslims from all the various disciplines of medicine and even from the consensus (ijmaa') of the muslim nation (ummah) as a whole. If such concerns of the profession as a whole or specific aspects of modern medicine whether regarding treatments or the ability to evaluate medical evidence (and in turn weigh the harms & benefits) would have been brought to the attention of the muslim public in any of the muslim and non-muslim countries by trustworthy muslim physicians (of any discipline) of both present time and years gone by. If such concerns and statements had come from the appropriate authority such as the trustworthy muslim physicians or from the scholars, then the hearts would have been at ease and tranquility. However if we find an individual making such blanket statements that is in opposition to the aforementioned authority and the ijmaa' of the ummah, then it is feared for this individual that he has begun to open a new door that wasn't opened by any previous authority.

Healthymuslim.com's approach to Medicine and its Practitioners

The healthymuslim.com website states in its 'About Us' section that:

It is our firm belief and conviction that modern (Western) medicine does little to treat or cure the true underlying causes of diseases and chronic illnesses. It is mostly centred around the treatment of symptoms, that is, to manage disease symptoms. This leads to the continued use and reliance upon prescription drugs with the true underlying causes of the disease never really being addressed. This model of disease treatment is by and large structured in order to facilitate the exploitation of disease conditions and states for profitable pharmacological agents.

The position here is clear and speaks for itself. These are serious statements and claims about modern (allopathic) medicine and its practitioners

1. Medication does not cure (or little to cure).
2. Diseases are being exploited to make money.
3. Patients are made reliant upon medication.
4. Medication prescription is for the intent to make money.

In the reply that was received from you, O Abu Iyaadh (in response to the initial advice of the two previously mentioned trustworthy doctors) included:

... the "opinions" in your profession is essentially "bought" and "owned" by the companies that pretty much completely and totally dominate the entire spectrum of activity in medicine (education, research, institutions, grants, funds, awards, and practice) and since the overwhelming majority of contemporary medical research into disease is to enable the manufacture and production of profitable pharmacological agents... (pg156)

Independence of thought in medical practice has been eliminated and regimentation of thought has been forced.

*The scientism and scientific imperialism that is behind a good part of today's (corporate) medical profession is akin to the **mu'tazilite** paradigm of old.*

These concerns need to be put into perspective in terms of whether they are genuine and recognised by the authority, either the trustworthy muslim medical practitioners of any discipline throughout any of the muslim and non-muslim countries or the religious scholars, both of today and years gone by. Contrary to this we find many scholars travel great distances to seek medicine from the modern practitioners. What is known from the scholars is that they have the utmost trust in modern physicians and their ability to practice modern medicine. They regard the modern medical field to have gone through much research in medication and this in turn is a proof that the medicine provided is effective and beneficial, and we see some of them physically using some of the modern medicines. We find them trusting physicians, both muslim and kafir, as I have personally witnessed from Shaykh Falaah bin Isma'eel *hafizahullah* allowing the medical advice of the kafir doctor, and trusting in that, concerning the issue of whether someone was fit to fast during Ramadaan following a throat cancer operation. This patient-doctor trust with the muslim doctor would be greater than the trust with the kafir doctor, from the angle of what is more foremost (min baabul-ulaa). However this position of yours, O Abu Iyaadh, it makes no restrictions and applies absolutely for all the practitioners of modern medicine alike. It is attempting to undermine and break that trust which is essential that will result in a vacuum of unqualified medical advice being sought.

Not all doctors are inherently good, so some individuals have oppressed themselves and others, such as Harold Shipman, but an absolute statement to apply to all modern medical practitioners, then without doubt it is a lie, a slander and a blatant attack of their honour. It accuses them of unjustly acquiring wealth of others and being deceptive in that. It removes the patient-doctor trust and allows unqualified medical advisers to fill that vacuum. Islam came to protect the wealth, blood and honour of people and more so the muslims, so I politely ask from where have you taken this position? Who are the scholars that precede you in it? Who are the health professionals that precede you in this stance?

O Abu Iyaadh, I advise that you do not attack the honour of the muslim doctors for it will break the trust of patients and this will have consequences that can be an issue of life or limb. I also advise that you to follow in the footsteps of the scholars in seeking the ways and means (asbaab) to treat ill health and from them is modern medicine. Likewise do not discourage the use of medicine and medical practitioners which the Prophet *sallallaahu'alaihiwasallam* encouraged. Do not be from the first of the Salafee's to open a door that will harm the muslims and even the dawatus-salafiyah. Rather return to the original path, the path of the scholars and the consensus of the muslims; in it is all success, nobility and raising of one's rank.

Prophetic Manhaj for the Medical Practitioner to be Competent

These various disciplines of medicine are not inherent to any single individual, rather they require learning of knowledge and skills from someone already competent within that discipline and to learn for a period of time that the one teaching is content that the student has completed all the competencies required for that discipline such that they can practice that form of medicine

independently. This is not just generic to medicine but is the same in all walks of life and many different types of skilled occupations. However the danger is when an overtly keen student does not recognise his limitations, causing a false sense of confidence in the absence of certification or qualification of one already acquainted with that field leading to a half medical practitioner. One who on occasions will be correct and on occasions incorrect, but due to what is at stake, i.e. a persons health, then the gravity of the matter is serious indeed. This agrees with the sound reason, so for example, if there was an engine problem with one's car (and money wasn't an issue) who would you take it to? A qualified car mechanic? Or someone who knows a bit about cars? Or some one who knows about physics/mechanics (i.e. an understanding of car components)?

No doubt it would be to a qualified car mechanic otherwise your at risk of damaging your car further if the two alternatives are used. The sound reason is also in agreement with the Prophetic Manhaj as is established in the following hadeeth.

The Messenger of Allah *sallallaahu 'alaihiwasallam* said:

من تطبّب ولا يُعلم منه طب فهو ضامن

“If anyone carries out medical treatment, yet previously he was not known as a medical man, then he takes the responsibility.”

This hadeeth is related by Aboo Daawood, al-Nisaa'ee and Ibn Maajah, from *hadeeth* of 'Amr ibn Shu'ayb, from his father, from his grandfather and Ibnul Qayim *rahimullah* discusses it in depth in *Tibb an-Nabawiy* differentiating between the linguistic, legal and medical aspects.

The words of the Prophet *sallallaahu 'alaihiwasallam* used were: **“Whoever practices medicine (*tatabbaba*)”**, he did not say “whoever is a physician (*tabba*)”. The expression of the fifth form (*tafa'ala*) indicates some constraint in the action, and entering into it with difficulty, and that the one so described is not originally one of its practitioners. Similarly, we find the expressions: to attempt clemency (*taballama*), to show courage (*tashajja'a*), to adopt patience (*tasabbara*) and others of this kind. Thus, 'to force oneself' (*takallafa*) is formed upon this pattern. The poet said: 'And Qays of 'Aylan, and whoever sought to be a Qays (*taqayyasa*).

The legal (*shar'ee*) aspect is that this *hadeeth* establishes the liability of the ignorant practitioner. For if he assumes the knowledge and practice of medicine, without formerly having any acquaintance with it, by his ignorance he risks causing harm to the lives of people; he practices irresponsibly what he does not know and, thus, deceives the sick person. Therefore he must be held responsible. This is the consensus among all scholars.

Al-Khattaabee said: I do not know of any disagreement regarding the fact that when a person carrying out treatment transgresses the limits of his knowledge and expertise and causes harm to the patient he should be held responsible. One who lays claim to knowledge or practice which he does not have is an impostor. When injury is brought about by his action, he is responsible for the blood-money, and he has no right to

retaliation (*qamad*); for he has no authority without the sick person's permission. The consequences of the practitioner's felony - according to the opinion of most jurists - falls upon his clan (*'aaqila*).

So what is important is that competency of health practitioners, those that give health related advice on a personal individual level is known and demonstrated and there is a level of trust that the practitioner advises within his competency and doesn't go into extremes of that delving into fields that he has no knowledge. This issue is even more important if the health advice is on a public level as the number of people it will affect is greater hence having greater consequences. Inappropriate advice leads to destruction of the body which no one will doubt or disagree, but unqualified advice (i.e. from one who has not demonstrated competency) will inevitably lead to inappropriate advice. This is in agreement with what we witness from the scholars of today such that we see Shaykh Falaah bin Ismaa'eel *hafizahullah* on his last sitting with us (during last Ramadaan) having described three destructive people; first, the half physician who destroys the body, second, the half grammarian who destroys the language and third, the half scholar who destroys the religion.

So just as the half scholar is one who has some knowledge and understanding but the knowledge is not complete but he regards himself as being complete in those issues which he delves into, then on occasions he will be correct and on occasions he will be incorrect, but this incorrectness will damage and destroy the religion, because of the gravity and extent of what the religion necessitates. Then likewise the half doctor being the health practitioner that advises about health, who believes that he is competent because of some knowledge in that field, whereas in reality he is not competent to enter into health, diseases and disease management then on occasions he will be correct and on occasions he will be incorrect but because of the gravity and extent that health necessitates he destroys the body with his incorrectness.

One who is even worse than this half trained doctor is the one with no health training at all, rather he has deluded himself by some knowledge in other scientific areas but makes the fundamental error of equating it to health, whereas in reality it is not management of health and disease, not in the estimation of any health practitioner be that in modern medicine (allopathy), homoeopathy, traditional/folk medicine, nutritional medicine, physiotherapy, herbal medicine, etc. This individual is worse than the ignorant, as absence of knowledge of medicine is not blameworthy. The blameworthy individual is the one ignorant yet claims knowledge, (i.e. arrogantly ignorant), then this one will align himself with the knowledgeable, and Allah's aid is sought from his destructive evil.

Thus anyone wishing to enter the arena of medical health to advise on medical conditions or treatments but yet has not had any training, nor experience, nor certification then for this one I fear that he is the 'Impostor' which Ibnul Qayim and Al-Khattaabee *rahimahumullah* both mentioned and that this impostor is to be held accountable and responsible for his actions for entering into the medical issue without qualification, his legal shari'ah responsibility remains, if the people are led to believe that he is a knowledgeable & proficient medical advisor be that well researched or experienced.

If an individual gives advice of tailored information to an individual patient, such that it involves the likes of detail application of treatments, interpretation of medical tests or diagnosis of specific conditions (based upon signs and symptoms) have been alluded to without recourse to a medical

practitioner (for that tailored advice) but rather this advisor has given that information from himself, then no doubt this is medical advice irrespective of what it is named be that 'information sharing' or otherwise. Likewise if this advice is communicated at a broader public audience, propagating issues related to the efficacy of treatments to prevent harm, whether treatments are associated to harm or whether medical conditions in of themselves are illness and harmful, then all of this is medical advice irrespective of what it is named or any disclaimer given. The implications and consequences of such advice remains, from a shari'ah perspective, with the individual giving it irrespective of whether any disclaimers are given. If the case was otherwise then anybody would be free to speak about any matter be that politics, health or even religion, then simply gave a disclaimer after such speech. The fact that common people request medical advice to a website that deals with health, and more so the health of muslims, then it implies that there is a trust that the muslim advocating the advice is speaking from within his knowledge, skills, experience and proficiency. If he is being asked questions out side of these wordly skills then it is only because the impression given is that of a health advisor who is qualified to give health advice.

Authorship of Healthymuslim.com

O Abu Iyaadh, then you are from the head of the authors of this website, and I do not know that you have any training, experience or qualification from any of the disciplines of medicine, neither yourself nor your co-author. What I do know is that you *rahimakumullah* have had training in biochemistry and alhamdulillah you were blessed in it such that you achieved a doctorate in it. This you completed a decade ago and since then I am not aware that you have remained within the biochemistry field, either researching it or lecturing it (at a high level such as diploma or degree). If you have medical qualification that were in modern medicine or traditional medicine then please show this to the people such that they will have no angle against you.

O Abu Iyaadh, I do not know any medical practitioner from any disciples that regards biochemistry equivalent to medicine or to be sufficient to give medical advise. Rather I do know many medical practitioners that will regard biochemistry training as insufficient and unqualified to give medical advice. Likewise I do not know any active biochemist researcher or lecturer to regard a PhD in Biochemistry as sufficient to give medical advice. Rather again, I do know at least one active salafee Lecturer & researcher with a biochemistry PhD that regards both himself and yourself unqualified to give medical advice. If you are aware of any medical practitioner or active biochemistry researcher/academic (or lecturer at a high standard such as degree) that regards Biochemistry PhD proficiency to give, medical advise then please bring them forward so that the people do not have any angle against you.

O Abu Iyaadh, I have concern for you, that if you are unable to do this, then you should kindly reconsider giving medical advise until you learn this knowledge by its correct route. Disclaimers do not remove the responsibility from any medical advice you give when the people think you are advising based upon knowledge and skills of a practitioner, especially after gaining your trust from your activities as a student of knowledge. There will be consequences if you continue in this manner. In rectification is your honour and nobility, a raising of your rank among the people and in the Sight of Allah, Subhanahu wa Ta'ala. Please kindly reconsider, O Abu Iyaadh, my love & concern for you dictates that I advise with this, loving for you that which I love for myself.

Prophetic Manhaj on Utilising the Most Skilled Medical Practitioner

With the widespread existence of information the problem that faces us today is being able to have the ability to distinguish that which is correct information from that which isn't and when one is not able to do so, then knowing to whom to refer to, in order to achieve this. General information is not the same as applied knowledge and skills as the latter two are more specific and tailored to individuals and communities and will likewise be particular to specific places (i.e. different parts of the world) and even for different periods in time (i.e. some knowledge & skills if not updated can become outdated).

Just like when a patient may want to know regarding IVF (in-vitro fertilisation) or abortion then one will want to know firstly the shari'ah perspective upon this, so to whom would you refer them too? Would you answer from yourself would you be able to give them applied knowledge to their situation? No doubt it would be to the religious scholars that are acknowledged and recognised for their knowledge and no doubt if you had a choice of several scholars you would refer to the scholar who was most recognised for that particular type of knowledge if possible.

Any scholarly ruling will depend upon the complexity of the issue involved the scholar may quote evidences so that correct following (mutaba'ah) of the text can be achieved. However if the issue is complicated and involves detailed understanding of a variety of islamic sciences then the scholar will not mention the evidences, as it will not be understood by the common person, nor even some of the students of knowledge. As such taqleed will be necessary but on the condition that the scholar is from the true scholars (rabaaniyoon) and that he has no doubt from another scholar.

As for the student of knowledge then he can transmit the knowledge and understanding that he has taken from the scholars and even the common person can call to matters that are clear cut, such as ordering his family to pray & fast and this is all from the angle of Commanding the Good & Forbidding the Evil.

However the worldly skilled professions are different, because understanding the evidence of observation and experience is complex and difficult to put in to context. The one who is not acquainted with the principles of that profession will not be able to fully appreciate them until they themselves have hands-on practical experience. If it is an issue of academia unless one is already acquainted with the speciality it would takes years before one could understand these difficult areas of contention. So in this case one is to seek out the most skilled in that field, whether muslim (who is given precedence) or kafir. This likewises applies to the skilled medical practitioner, that whenever one has an option then to seek out the most proficient and skilled is dictated by the sound intellect.

To continue with the example of IVF or abortion, after knowing its permissibility in the shari'ah then you would refer to the qualified health professionals who are recognised in that field for both general advice as well as specific tailored advice for that individual patient, i.e. you would go to a gynaecologist. If you went to another health practitioner (e.g. cardiologist or dietician) who does not have expertise in that field then it would be ludicrous opposing the sound intellect. When the specialist gives tailored health advice then it may oppose some general health principles and this is why it is necessary that one refers to an individual who is the most recognised with the knowledge and competency in that field providing one has access to them.

This principle is likewise established from the Prophetic Manhaj as demonstrated in the hadeeth that Imam Maalik collected, which was mentioned earlier, from Zayd ibn Aslam:

A man, in the time of the Messenger of Allah *sallallaahu‘alaibivasallam*, was wounded, and the blood became congested. The man summoned two men from Banoo Anmaar, who examined him. He declared then that the Messenger of Allah asked these two:

أَيُّكُمَا أَطَبُّ ؟

“Which of you is the more skilled as a physician?”

To which they asked: ‘Is there then some value in medicine, O Messenger of Allah?’ He replied:

أنزل الدواء الذي أنزل الأذى

“The One Who sent down illness also sent down medicine.”

Ibnul Qayim *rahimullah* after mentioning the above hadeeth in Tibb an-Nabawiyy goes on to explain

This *hadeeth* shows that it is necessary, concerning every science and craft, to seek the help of the person most skillful in it; the most skillful person will be the one most likely to find the best solution. Thus the person seeking to obtain a legal pronouncement (*fatwa*) has the obligation to seek assistance concerning what has been revealed about it from the most learned of all the learned people, for the most learned is closer to the correct answer than the less learned. Likewise, if anyone is not sure of the true direction of the *qiblah*, he will follow the most learned person he can find, for this is the way Allah created His servants. Thus too, one who travels by land or sea will find tranquility for his soul and confidence only in the most skillful and best informed of any two guides, and to this one he will betake himself and on him he will rely. In this the *sharee‘ah*, human nature and reason are all agreed.

To clarify further, one may wish to have blood cupping (*hijamah*) done which in general principles is good and from the Prophetic Medicine but in the situation that a woman is pregnant then to whom would you refer here for advice. No doubt it would be the trained competent medical practitioner in that field and even the scholars point you in the same direction, as I have witnessed personally from one of them doing so. The Islamic ruling here may change from that which is recommended (*mustahab*) to any of the five jurisprudence (*fiqh*) rulings, depending upon the health state of this woman. The foundation for this change in ruling is based upon the trained competent medical practitioners health advice whose expertise this involves, giving advice with what he knows or making analogical deduction (*dunyawee-ijtihad*) from the principles relating to health and applying it to that individual.

However the half-doctor which we mentioned earlier who only has partial training but deems himself to be fully competent in giving health advice, with excessive confidence this one will be

less likely to arrive at the correct advice and may cause harm to the mother or to the foetus such that it is born with defects as a result of inappropriate and dangerous health advice. Even if this half-doctor did arrive at the truth then his *dunya-wee-ijtihaad* is not an acceptable one as he was not a valid medical practitioner in the first place, knowing the principles of health management in the presence of health professionals that deal with health and disease management on a regular basis and whose competency has been attested too.

Please pay attention, O Abu Iyaadh, for you have delved into the issues of medical contention & controversy, then for you is not to try to collect and analyse the evidences, as you are not from the people of that speciality. You will not have the academic skills and expertise to weigh the evidences correctly putting each into its correct place. Indeed many of the issues that you have delved into then I myself as an attested medical practitioner would not enter for the purpose of publicising, as it is for the specialists in that field. Issues such as fluoride use in toothpaste then these are issues for the likes of academic dental specialists, epidemiologists and public health physicians. So I kindly advise you not to pursue the evidences rather pursue its specialist practitioners, seeking the most skilled thereby following the Prophetic Manhaj. And in this is lies the path to success.

Prophetic Manhaj in Issues of Contention Regarding Public Safety

Unfortunately many of the people do not restrain themselves when it comes to their opinions which is based upon incomplete knowledge and incompetency and thus they openly speak about all sorts of sciences and walks of life as mentioned earlier. So they will give opinions upon opinions even though they are not qualified and they are even encouraged to hold opinions in modern society as they feel it reflects ones standing in society and an understanding of the so called *fiqh al waaqi*, thus the entering into so called intellectual discussion. This is clearly evident in the likes of the news media of today.

Whereas in reality such individuals that speak in public with unqualified advice about public affairs then I fear they may have some of the characteristics from the *ruwaybidah*, who are in reality are ignorant of the true reality of affairs within those specific fields of public affairs such as religion, politics, health, economics or otherwise.

No doubt if one is transmitting knowledge from certified practitioners who are well established within the various fields of medicine providing their views are not erroneous and contrary with what is establish from the various specialised practitioners & bodies. Then this transmitted knowledge would be acceptable providing one was not applying it to specific individuals or communities as the knowledge is general and its detailed application may be contrary to this, as I have explained earlier with the example of blood cupping (*hijamah*).

Likewise if it is a point of contention among various bodies of established medical practitioners then we refer the contention back to those most specialised in that area, in accordance to the Prophetic Manhaj as clarified in the hadeeth mentioned earlier “**Which of the two is more skilled as a physician?**” and likewise this in accordance to Allah's statements of asking the people of Reminder when you do not know.

So in issues such as childhood vaccination, where a general surgeon may differ with a physician, then to whom should the affair be related back to? No doubt it is the specialised public health physicians and those involved in infectious diseases who are acquainted with the various detailed knowledge and conflicting studies putting each in its correct place. These public health issues that

entail the likes of childhood vaccinations and whether they reduce the risk of infectious diseases on a community level, the use of cholesterol lowering medicines whether they reduce risk of various types of vascular disease at a community level, and even the likes of whether a common food is carcinogenic, then all these issues are related to public safety.

So when there is contention, to whom is the matter referred ? What is the Prophetic Manhaj in this? No doubt it is referred back to those specialised within that field so that all types of information and evidence can be put in their correct respective places. This is in accordance to Allah's, al-Hakeemul-Khabeer, statement in Surah An-Nisa – 4:83

وَإِذَا جَاءَهُمْ أَمْرٌ مِّنَ الْأَمْنِ أَوْ الْخَوْفِ أَذَاعُوا بِهِ وَلَوْ رَدُّوهُ إِلَى الرَّسُولِ وَإِلَى أُولِي الْأَمْرِ مِنْهُمْ لَعَلِمَهُ الَّذِينَ يَسْتَنْبِطُونَهُ مِنْهُمْ وَلَوْ لَا فَضْلُ اللَّهِ عَلَيْكُمْ وَرَحْمَتُهُ لَاتَّبَعْتُمُ الشَّيْطَانَ إِلَّا قَلِيلًا

When there comes to them some matter touching (public) safety or fear, they make it known (among the people), if only they had referred it to the Messenger or to those charged with authority among them, the proper investigators would have understood it from them (directly). Had it not been for the Grace and Mercy of Allah upon you, you would have followed Shaitân (Satan), save a few of you.

So the individuals who make such issues of public safety known are different from the proper investigators. The proper investigators mentioned in this ayah then to whom would it refer to, in the context of public safety in health, such as whether a vaccine reduced an infective disease and its transmission within a community or whether a particular food is carcinogenic? No doubt it would be those experts with the most specialised knowledge and skills within Public Health Medicine; these individuals understand the principle issues. If there is contention then it is even more necessary (from the angle of what is foremost) to refer to the specialist, as stated by Ibnul Qayim (rahimullah) earlier.

.... it is necessary, concerning every science and craft, to seek the help of the person most skillful in it; the most skillful person will be the one most likely to find the best solution.

Walhamdullilah we have such Muslim specialists available within the UK. So there is no need for an individual to overburden himself and oppose the Prophetic Manhaj and go to the unqualified person or an expert in another field (such as an anatomical pathologist) or even try to analyse the matter himself.

Healthymuslim.com and the Public Health Specialist.

In regards to Healthymuslim.com, such a specialist muslim professor of public health has been consulted, whose details can be provided, and after he examined the website there were grave concerns regarding some of the content and about the competency of those compiling it.

O Abu Iyaadh, the writing about public safety as to whether foods are safe or carcinogenic causes undue anxiety, despair & scare-mongering, which has consequences. Many of these studies are preliminary trials that require further clinical studies to establish true causal link, i.e. it is

speculative information and not certain evidence. But the consequences are that the food in question becomes “prohibited” in the minds of people, even if you do not intend it. They will not read the full 180 pages yet they will make their own interpretation of some of your statements after skimming through it. One needs to be aware of the manner people behave before giving them information and it needs to be simplified for them so it is not mis-understood. You must safe-guard the people from harm by blocking off the paths to it, before advising them. Such actions where food becomes “dangerous” and thus “Prohibited” within their minds has consequences. So for example if pasteurised milk is left because raw milk is not widely available then it would lead to a loss of nutrients especially calcium which may already be a considerable health issue for the hijab-wearing muslimah.

Also scare-mongering can sometimes lead to excessive stress and fear (e.g. having cancer after eating crisps all these years) for which you bear responsibility, i.e. the stress can cause panic attacks, heart-attacks or premature labour, etc. So I kindly advise you, O Abu Iyaadh, to avoid this public medical safety and fear concerns without referring it to the specialist. I can put you in contact with one of them if you wish.

The Criterion - Ability to Comprehend the Medical Evidence

The bulk of the readers of healthymuslim.com will not be health related professionals and as such will not have a criterion to distinguish that which is correct from that which is incorrect and dangerous. Walhamdulillah we as a salafee community within UK have been blessed with trained health professionals whose competency has been attested to and thus we are not in need of do-it-yourself (DIY) alternatives. Likewise we as Muslims have trained specialist within various fields both in the UK and Muslim Countries. So the criterion for the non-specialist is to refer back to the specialist and show humility in the affair, for Allah (the Mighty and Majestic) has blessed them within this specialised field with that which he has not blessed the non-specialist doctor. And from the angle of what is even more foremost that this applies more greater to the half doctor and to the one less than that, respectively. i.e. it applies to the half- ignorant, completely ignorant and the arrogantly ignorant.

We live in an age where there is much information available and access to it is easy via the internet and opinions are wide spread, but yet much of this information contain untruths and at times blatant lies. Being able to distinguish between what is true and what is untrue requires some skills that are not inherent to everyone, nor to every scientist, nor even to every health professional. Rather each individual will vary, but knowing where oneself stands is the most important issue which will dictate the level of involvement in health related advice, more so if public health matters are involved. What is required is humility and recognising one owns limitations and this is praiseworthy. What is destructive is blindness to this and over-confidence leading to the characteristics of the arrogantly ignorant, which is blameworthy. Unfortunately we see many on the internet and media falling into this last caterogary, and Allah's Aid is sought.

Many health practitioners who are not specialised in the field of public health would not dare to enter into this field of public health contention for this very reason that they realise that it is a matter for the specialist. To the untrained one who thinks that he has the ability and skills to come to a judgement in the detailed specialist affairs of public health then I say again humble yourself and fear Allah, whom you will stand in front of on the Day of Account. Indeed your Prophet *sallallaahu'alaibinasallam* left his companions on a way that was better, which is to refer contentions back to the specialist, and not to enter the affair yourself giving your own judgement.

I wish to write a few words upon some of the skills required to assess medical evidence in hope that one recognises their own deficiency and that one is not from its people. Indeed this is a great field that the epidemiologist specialises and their role is essentially to 'Critise and Praise' (Jarh wa Ta'deel) clinical studies and extract the knowledge from the information presented. They have many works on appraing studies and to give it justice one should refer to their works. And even if you learnt the knowledge in those works than you would need to apply it for a considerable period of time under their guidance before you become proficient at it.

First one needs to identify all the studies and evidences in that issue of contention which is achieved by doing a computer database literature search of several databases, (including the likes of Pubmed, Medline, Embase, Cochrane, CINAHL etc.) using specific keywords and technical skills of searching such as using MESH.

So for example, to study milk on the Pubmed database it will return over 80, 000 citations, and if we restricted this search further to cows milk it would return over 20,000 citations!

Then after identifying which of these citations had all the relevant studies by examining all their abstracts. Imagine the time needed for 20, 000 or so abstracts in the issue of cows milk and that is only from a single database. Full study text would be needed of all relative studies found. One would then do a second search of all the references within these studies to identify other studies especially unpublished trials. So to continue with the example of cows milk from the 20,000 citations one would expect a few hundred clinical trials.

Acquiring full text papers is not an easy task, it would require multiple subscription to journals paper or electronic subscriptions. Older studies will be paper only. You would have go to a medical library which is generally restricted to specialists, researchers, lecturers and medical students (i.e. academic professionals) and physically go through volumes and volumes of large heavy journals, dating back over several decades, row upon row, searching through them and photocopying the required papers. Then many of the journals will not be in one library and there is an inter-library loan system set-up where one pays for a photocopy of the the required papers, a cost of around £5 each if I remember correctly as a medical student (with inflation now I am informed it is close to £30-£40). So 100 journals could easily cost £500 (or 6 times this if the inflation figure is correct). As for the unpublished studies one would require to write to the authors who would then send copies of data.

Ninety-nine percent of studies will not be up to the standard of proof and can be placed in the waste bin. These are identified by detailed assessment of the study and identifying methodological flaws in its design, removal of bias by comparing to controls and blinding of examiners, the size of the study giving it statistical power. The results of the trials are examined for statistical anomalies to see if appropriate models were used, and benefit & harm ratios quantified. If concerns are present, one may have to write to the authors and ask for the raw data, which in turn will require the use of a statistician.

Once the quality studies are identified then each study will vary in terms of the weight of evidence it brings and this is determined by a number of factors mainly, the type of study, it quality (as determined from above) and it's size. I have listed some types of studies in decreasing order of weighting; meta-analysis, randomised control trial, cohort study, case control study, surveys, case studies (anecdotal evidence). As for the size of the study; the larger studies involve many thousand

patients which have more weighting than the smaller study which may have 50 patients or even less.

This analysis of validity of the study or whether it can go in the waste bin and then further analysing the studies, and weighting them based upon its methodological quality requires knowledge, skills and time, and one only become proficient by implementing under the directions of those skilled at it and doing so regularly. Skills are lost if not maintained.

So I hope this gives appreciation of a glimpse of the complexity of medical evidence and an acknowledgement that it is not for the common person to understand, nor for him to request or demand, as it will not be understood by him. For him is to seek the most skilled health advisor.

Authorship of Journals and equating that to Weighing Medical Evidence

Writing a few journals here and there which lots of professionals and academics do such as those undertaking doctorates, then indeed the specialist in this field of journal analysis would say 99% of these journals written are fit for the waste bin only. This is because people and establishments such as pharmaceutical industries, wish to provide evidence for their research or products and in doing so may show bias, or distort statistics, hide data, tell untruths or blatantly lie. Hence the need to appraise such studies with a fine comb.

O Abu Iyaadh you stated in your 160 page reply (to the advice about your inexperience and lack of expertise in evaluating various medical evidences) on pg 156;

As someone who has conducted scientific research in a laboratory, and published scientific research papers and scientific review papers in numerous journals such as Analytic Biochemistry, Enzyme and Microbial Technology, and Comparative Biochemistry and Physiology, I would like to believe that I have a fairly good understanding of the concept of bringing together all previous available research on a particular issue to provide a holistic and comprehensive background and context within which to evaluate a new or developing research or evidence and within which to measure and gauge the relative strengths of different evidences and mechanisms and tools used in deriving such evidences.

Then I have looked into what you have stated and come across some of the studies that you, O Abu Iyaadh, have co-authored as listed below. I do not see any evidence of any systematic literature review nor any meta-analysis. Please if you have experience of this, which is what is relevant to your current activities on healthymuslim.com then please kindly do bring it forward so that the people do not have an angle against you. So far these studies are restricted to biochemistry, which is not equivalent to treatment of diseases and health management. Analysis of the latter would be very different to that of the former.

- A study of some proteases from the camel pancreas (PhD thesis 1998)
- The Induction and Characterization of Phytase and Beyond
Enzyme and Microbial Technology, Volume 22, Issue 5, April 1998, Pages 415-424
- A More Sensitive Hummel Assay for Chymotrypsin
Analytical Biochemistry, Volume 257, Issue 2, 15 March 1998, Pages 233-234

- Purification and characterization of cationic trypsin from the pancreas of the Arabian camel (*Camelus dromedarius*)
Comparative Biochemistry and Physiology Part B: Biochemistry and Molecular Biology, Volume 115, Issue 3, November 1996, Pages 363-367

My dear brother, if indeed you do have systematic literature reviews of a sufficiently acceptable standard for publication then please do let the people see it, so that there is no angle against you. I also note there is a 10 year gap to-date and I have not known for you to have remained within the field of biochemistry, by way of researching or lecturing, so I hope you have kept up-to-date with recent biochemistry advances, which in turn may give you expertise in biochemistry and maybe you can refocus your website on this rather than health.

Erroneous Principle of requiring Examination of the Detailed Evidences

Despite all this, we are finding individuals requesting evidence and even demanding it. Their stance, when simplified into principles becomes clearly erroneous. That is:

In issues of medical contention, after looking into detailed arguments and detailed evidences on both sides, then after weighing them upon our own (unqualified) scales, I then (and only then) will take a position.

So I ask the any individual who holds this view, from where have you taken this principle? And I have already shown proofs that the Prophetic Manhaj is to refer the contention to the one most specialised in that field and not to indulge in self analysis or follow statements from the non-specialist. So I repeat incase the reminder profits, that indeed the one who knows (knowledgeable) is not equal to the one who knows not (ignorant). But there is one worse than the ignorant and that is the one who knows not but he thinks he knows (arrogantly ignorant). This latter one he is more dangerous to himself and to others, he will align himself with the knowledgeable one. Whereas the case of the ignorant in medical academia is non-blameworthy, however the case of the arrogantly-ignorant is blameworthy.

This false principle is similar to those that say, in religious affairs, we do not make taqleed in any issue of deen such as the reliability of narrators/people which is similar to the principle of tathabut (we will verify for ourselves).

Healthymuslim.com approach to Medical Evidence & Referring to Specialist Individuals or Establishments

A primary aim of the site is to shift the burden of responsibility for health development, restoration and maintenance back into the domain of the individual as opposed to leaving it to the monopoly of the promoters of pharmacological agents and vaccine serums who claim (in both words and actions) that such agents are the primary mediators of health (and absence of disease).

(www.healthymuslim.com/about.cfm)

...it is merely information sharing and a recommendation of courses of action which in our view - in light of the presented evidences - would be conducive and beneficial to your health and well-being. All such matters should be considered our opinions and viewpoints. (www.healthymuslim.com/about.cfm)

We accept no liability for anyone acting upon any information contained with this document. It is purely for your education. You are encouraged to do your own research. (p.g. 181 The Prophetic Medicine, and Raw, Natural , Pure Cow's Milk)

I stand corrected on any issue that is found on the website, provided it is based upon sound evidence, religious or scientific as opposed to appeals of authority or mere references to establishment and industry sponsored views. (pg 154 Abu Iyaadh's reply to the initial naseehah)

O Abu Iyaadh, if you hold these view, then humble yourself, indeed you do not have access to all the detailed arguments and evidences and even if you did, you do not have the principle of health & disease management to put each evidence into its correct place, i.e. you do not have the criterion. Rather for you is to refer to the specialists in that field, be that individuals or established bodies, whose knowledge and skills are attested too, as is the Prophetic Manhaj and not to make verification. Likewise do not encourage the common (non-medical) people to adopt this methodology to do tathabut, i.e. "their own research", for they will not understand, it will lead to overburdening them and put them to tribulation in the issue. Rather advise them to go to the skilled ones in that field; in that is sufficiency and ease (and the burden has been put in its correct place). If the people think that you are acquainted with the detailed evidences, when in reality you are not, then no matter how many disclaimers you mention, you carry the sharee' responsibility of all the medical advice you give. O Abu Iyaadh, I fear for you, for your actions unless you make rectification and in that is all success, a raising of your rank, and an increase in love from Allah *subhanahu wata'ala* and his servants.

Role of Medical Evidence

As for the issue where specialists differ among themselves then this case is different, here each specialist will bring his evidence and argument, but generally speaking these evidences due to their complexity will not be understood except by other specialists and to a lesser degree other medical practitioners who are familiar with general principles of evidence based medicine. So what is the point of bringing the evidence here? This is an important question that has not been understood by many and it has led some to go to extremes such that what is apparent from them is the erroneous position as mentioned above. So pay attention, O Dear reader, May Allah have mercy on you !

When two contemporary specialists differ in a matter, then when each is advised to bring his evidence then this is to allow the two specialists to try and reconcile with each other so that they can both arrive at the truth in the matter. Likewise this can also apply to a contention between medical disciplines, such as the established traditional doctor and the attested allopathic/modern-medicine doctor. So here they both bring their evidences in order to come to a consensus, thereby resolving the contention. However the likelihood for consensus between disciplines is unlikely as their approaches are different and the types of evidence used are different between the various disciplines.

In any case, it is not for the common person to enter into the evidences, as he does not have the criterion to understand them. This is in contrast to the religion that when the scholars are questioned in many of the issues of contention then the evidences can be understood by most people and correct following (mutaaba'ah) of the Sunnah is achieved. But even in complex religious issues then the evidence is not brought for the common person and not even for some of the students of knowledge, because they will not understand it and it will be a source of tribulation for them. So here taqleed is necessary unless there is a doubt from another scholar, in which case the doubt needs to be removed as much as possible. Even in the issue of taqleed then it is done of the scholar whom one deems more knowledgeable in that particular subject (such as 'Criticism and Praise' of people & narrators).

In discussing this issue Shaykh Nasir al-Albani *rahimullah*

“so you see a layman, who does not understand anything, yet when he asks a scholar about the ruling concerning a particular matter, then even if the answer is a prohibition, he quickly asks: What is the proof? And sometimes it is not possible for that scholar to establish a proof, especially if the proof is something arrived at by way of deduction and extraction; not being textually stated as such in the Book and the Sunnah so that the proof can be quoted. So in the likes of this situation the one asking the question should not try to delve into the matter by saying: What is the proof? Rather, he must realize his own state: Is he from those who (understand) proofs or not? Does he have any knowledge concerning the general (*'aamm*) and the specific (*khaass*), the unrestricted (*mutlaq*) and the restricted (*muqayyad*), or the abrogating (*naasikh*) and the abrogated (*mansookh*)? Yet he does not have any understanding of that, so will his asking: ‘What is the proof,’ or ‘What is it based upon,’ be of any benefit to him? ... Thus we sometimes say: It is not always the case that a question will have a detailed proof which will be understood by every Muslim; regardless of whether he is an unlearned layman, or a student of knowledge, this will not be the case in every matter. Therefore, Allah the Exalted said,

“ **Ask the people of knowledge if you do not know.** ” [Sooratul-Anbiyaa‘ 21:7]

So from the immoderate behaviour which I have just indicated - and because of which the most ignorant of people refuse the proof - is that many of those who ascribe to the call to the Book and the *Sunnah*, give the false impression that when a scholar is asked about a matter, that he has to add to his answer: Allah said such and such, and His Messenger said such and such. However, I say: This is not an obligation, and this is one of the benefits of being attached to the way and methodology of the Pious Predecessors (*as-Salafus-Saalih*), may Allah be pleased with them all; and their religious verdicts are a practical proof of what I have said. Therefore mentioning the proof is obligatory when the situation requires it. However, it is not obligatory that whenever the scholar is asked a question that he should reply: Allah's Messenger (*sallallaahu 'alayhi wa sallam*) said such and such, particularly if the question is a difficult *fiqh* question about which there is a difference of opinion. And the saying of Allah the Exalted, “ **Ask the people of knowledge if you do not know,** ” is first of all, unrestricted, so it is upon you to ask one whom you think is from the people of knowledge. So when you hear the reply, then it is upon you to follow, unless you have a doubt which you have heard from another scholar; in which case there is no harm in mentioning it. What is then obligatory upon the scholar, is that he should put forward whatever knowledge he has in order to remove

the doubt which was mentioned by the questioner.”

From the words of the Shaykh, as occurs in *al-Asaalah* magazine (no. 8, pp. 76-78; *Jumaadal-Aakhar* 1414H). (www.spubs.com/sps/downloads/pdf/MNJ060010.pdf page 72-73)

So specific issues (and more so issues of contention) in the religion is to be returned to the scholars and the textual evidences, whereby following the religion upon correct understanding (ittibaa) based upon the Allah's *subhanahu wata'ala* command:

فَاسْأَلُوا أَهْلَ الذِّكْرِ إِنْ كُنْتُمْ لَا تَعْلَمُونَ

so ask the people of the Reminder if you do not know.
(Al-Anbiya 21:7 or An-Nahl 16:43)

اتَّبِعُوا مَا أُنزِلَ إِلَيْكُمْ مِنْ رَبِّكُمْ وَلَا تَتَّبِعُوا مِنْ دُونِهِ أَوْلِيَاءَ

Make ittibaa of what has been sent down from your Lord, and do not make ittibaa of friends and protectors other than Him. (Soorah al-Araaf 7:3)

However in the dunya there is no such command, rather we see in the Sunnah that the Prophet *sallallaahu'alaibimasallam* only referred to those skilled at their professions, seeking the best available. Such as when he *sallallaahu'alaibimasallam* hired the guide for the migration and the use of the two physicians choosing the better of the two. Ibnul Qayim *rahimullah* explained this further as already mentioned.

.... it is necessary, concerning every science and craft, to seek the help of the person most skillful in it; the most skillful person will be the one most likely to find the best solution.

And there is no indication nor command to look into the evidences of such professionals, to verify (tathabut) how they arrived at whatever decision they conclude. In issues of wordly contention within a skilled profession such as medicine then the only reason why such contentions may exist between specialists is because the evidence is complex and highly unlikely to be understood by the common person. Hence the need to seek the most specialised expert and not the evidences.

Thus there is a distinction between the religion and the worldly academic or skilled affairs in simple issues but agreement in the more complex issues regarding the necessity of evidence, and that is because the evidences for worldly academic skills are in of themselves usually complex as well as the absence of a single textual authority. This is wisdom in the religion of Allah *subhanahu wata'ala* as religious academia is not a necessity to practice the religion, unlike the skilled worldly professions which require learning & competency to be from its practitioners. So to reiterate, it is for the common person to seek the most skilled medical practitioner as already established and not to request for evidences. In this is ease, from the Legislator, for if evidence and verification was encouraged then it would be an encouragement to over-burden the common people, due to the complexity of skills and evidence involved.

Another point to clarify is regarding the analogy between the student of knowledge advising with the knowledge of religion with that of a non-health professional advising with health. Then such an analogy is only correct if the conditions are proved to be the same. From these conditions in respect to the student of knowledge is that the knowledge is taken from the scholars and not taken from the source its self. So one would not take a narration (hadeeth) and make uncertified verification of its authenticity (takhreej) of it himself (while the muhaddith's verification is already present). Then extract the benefits (analyse it) followed by analogical deductions (ijtihad / qiyaas) and applying it to a specific tailored circumstance and then propagate that information. Rather one would go to the scholars and look to their verification and likewise look to the benefits that they derived as well as they analogical deductions and then propagate that knowledge of the scholars. The first case in respect to medicine is like the one who is not a certified health practitioner who then goes to the clinical studies (medical evidence) and derives whatever conclusion he does. Whereas the second case is the same individual but he goes to the specialists in that field and taking they view using the medical evidence they provide. There is a great difference between the these two, just like the difference between the mujtihad scholar and other than him.

As for the case where there is a medical doubt then it is necessary to check from where this doubt arises; is it the specialist of that field or other than them. If it is the latter, it can be safely ignored as such an individuals have spoken outside their field of expertise but if one wanted tranquility in their heart then referring the issue to any specialist in that field is sufficient. As for the sceenario that the doubt has arisen from a specialist then its resolution is to refer the issue to the most skilled of the specialists (i.e. the specialist most recognised and acknowledged for that speciality) that one has access to. As for requesting evidences or entering the issue one self then this opposes the Prophetic Manhaj.

O Abu Iyaadh, indeed you are not from the people of medicine, nor nutrition, do not ask for a thing that if it is made apparent to you then it will make things difficult and burdensome for you. Rather I kindly advise you to stick to the easier and more correct of the two paths, that is to refer to the most skilled and to be content with that. In that is ease and a rectification for you and a raising of your rank. O Abu Iyaadh, I kindly advise you not to leave that which is better for that which is lesser, for a student of knowledge is to strive in the islamic knowledge, but if you wish to seek the medical knowledge then approach it by its doors thus achieving proficiency and removing any blame from yourself.

Other Issues

Identification of Authorship

The two individuals who write the bulk of these articles hide behind screen names of SoundHealth and HealthyMuslim hiding their real identity. To some this may appear to be two bodies of people rather than two individuals which is not the case and may be deceptive. The isnaad for information is important, and I know that in the previously mentioned advice from our two doctors, that in your reply you acknowledged this, O Abu Iyaadh. However over 3 months have past and I continue to see no rectification in this specific matter. So I remind you again in case the the reminding benefits.

Systematic Allegations and Attacks upon Integrity

I have already advised you regarding the some statements of yours but and I remind you again here. Your statements which are all taken from your reply, include:

Since the “opinions” in your profession is essentially “bought” and “owned” by the companies that pretty much completely and totally dominate the entire spectrum of activity in medicine (education, research, institutions, grants, funds, awards, and practice) and since the overwhelming majority of contemporary medical research into disease is to enable the manufacture and production of profitable pharmacological agents, it is vital that people in your profession who are Salafees, make adequate verification of all such research in a meticulous manner and not simply narrate or accept everything at face value, lest that be transmitting or acting upon what can essentially amount to khadhib. pg156

Independence of thought in medical practice has been eliminated and regimentation of thought has been forced.

The scientism and scientific imperialism that is behind a good part of today's (corporate) medical profession is a akin to the **mu'tazilite** paradigm of old.

I free myself from such allegations. I am not paid any wages, nor any incentives, nor any bonuses for prescribing for any of the various products of the pharmaceutical industries, neither by these industries themselves or any other body. Rather it is these very industries who are in need of doctors, like myself, to prescribe their medication. And if this was stopped then they would go out of business and not the medical profession, however it would have consequences;

1. Patients would be deprived of current drugs that clearly benefit
2. Patients would be deprived of research of new drugs.
3. Patients would be deprived of research into diseases (as the two go hand-in-hand)

Although you may be happy with the thought of this consequence, as you clearly have no confidence in medication. But imagine now a child gets pneumonia or meningitis, then who is being deprived the most; Is it the pharmaceutical company? Is it the physician? Or is it the child? No doubt it is the child who's life and limbs are at stake. If this scenario does not concern you then, may Allah protect you and your family, but what if it was one of your children !!

In regard to medical and scientific researchers being funded by the pharmaceutical industry then again there are a number of points to bear in mind. Firstly, if an individual is funded by an organisation or state, although this is recognised as a possible source of bias, then it does not affect the integrity of the individual as long as no bias has been seen in his work nor that he has tried to keep this 'competing interest' hidden. His case is similar to a scholar being funded by a state government who then gives rulings (fatawa) for activities that the government partakes in, which in it of its self is not contradictory to upright integrity unless there is bias away from the truth and towards the state. His contemporary specialists in that field will check for such bias and this will be evident from the study itself and having the skills to recognise this bias in many of its forms is from the skills of medical evidence analysis. Secondly, clinical studies have an enormous cost to them

especially those that require more quality control and are larger in numbers for statistical significance. Unfortunately, this cost is not affordable by most academic institutions and thus to disallow or ignore clinical studies from pharmaceutical industries would halt the observational advancement of medicine, which in turn would result in no new treatments for new medical diseases and for existing medical diseases where the cure has not yet been discovered.

Education of the medical field by the most part is not spread by the pharmaceutical companies rather it is part self-funded and part state-funded just like most bachelor degrees of any academic subject. Likewise many institutions are free from links to pharmaceutical companies, however I do understand your concerns as does the medical profession as a whole that pharmaceutical industry are attempting to influence the medical field. But funding is not to be equated to bias just like the state-funded scholar, judge, etc. Rather these types of calls we hear coming from the ignorant ones. Bias is to be established in each case and is not necessarily linked to the funding itself. You should also realise that the pharmaceutical industry is not one united body rather they are many individual companies each competing against the other for the sale of their products; it is not a monopoly. As for the pharmaceutical industry marketing strategies, which you likewise alluded to in your reply, then I and others health physicians are fully aware of these and other such statistical and linguistic techniques they employ; to think otherwise is an error.

O Abu Iyaadh, I kindly request that you cease all hostilities against qualified doctors unless you can bring detailed proofs in specific cases where a specific doctor acts without integrity. Then that error is with that specific doctor, do not use it as ammunition to belittle a whole profession. I advise myself and yourself to fear Allah, indeed his Grip is Severe, in this regard, and preserve the honour of people in general and muslims specifically.

Medical Advice on Healthymuslim.com

The medical advice on Healthymuslim.com is clear. But in case you have not recognised it then let me give you some obvious examples on general issues at a public health level.

1. Association of milk to ill health.
2. Efficacy of vaccines treatments
3. Association of cholesterol to ill health
4. Efficacy of cholesterol lowering treatments

I do not feel that you have brought substantial medical (or religious) evidence in any of these issues to substantiate your main points. But these are subsidiary issues in respect to some of the principles laid out in this document. And if you accept the principle issues then this will dictate you do not become involved in these subsidiary issues except after referral to the specialists in those fields.

As for some of your dangerous medical advice on an individual level, then I have expounded on two examples so that you are not left in any confusion in the matter, inshallah. (see Appendix)

- Prostate cancer and PSA.

This is a clear example of where general principles are different to tailored advice. The PSA advice of false positive although can be correct but in this case where the prostate has already been removed because of cancer, then serial test implies the use of multiple consecutive tests therefore

risk of false positive is very low. They show an increasing trend which is a worrying sign that requires referral to the specialist, urologist. However your dangerous advice influences his perspective, minimalising the severity in his eyes thereby giving him some false reassurance. Unfortunately you did not stop there, but continued again with a general information that from the many people that have prostate cancer foci then it does not impact their life quality or span. However in this specific case where someone who has previously had prostate cancer that has impacted his life requiring its removal such that only the prostatic capsule remains then any cancer of this, as it is structurally thin, will have an impact on his life and can cause premature morbidity and mortality. Again false reassurance.

O Abu Iyaadh, fear Allah in this regard and kindly cease your medical activities you can not call it harmless information sharing as you speaking out of your limit. Fear Allah, the One Severe in Punishment. Allah has made life & blood sacred but I fear you are starting to follow a path that will violate life or limb.

- 'Bumps' around the eye.

Then you limit this to two possible conditions which are relatively minor thereby minimalising the condition in the mind of the patient and giving some false reassurance, whereas in reality there are many other things it could be such as skin tags, skin warts, xanthelasma, or even one of the many types of cancers.

O Abu Iyaadh, the the blessing of someone's vision is great, this advice you give is not only unqualified it is inappropriate and dangerous. I strongly urge your to kindly reconsider your position.

Medical Methodology

Today's chronic illnesses are all illnesses related to diet, nutrition and lifestyle.

Pharmaceutical products "manage disease symptoms", they don't and won't cure disease because they are not designed to.

<http://www.healthymuslim.com/articles/kpkqk-the--raw-milk---great-interview-on-real-milk-immunity-and-nutrition.cfm>

Independence of thought in medical practice has been eliminated and regimentation of thought has been forced.

This medical methodology that healthymuslim.com has adopted is not a new concept and it has not been adopted from the Prophet Medicine nor from the Prophetic Manhaj. Neither is it from our scholars such as Ibnul Qayim *rahimullah* or Ibn Rajib *rahimullah* or any of the contemporary scholars. Rather it has been adopted from the kuffaar.

What is the intent of this medical methodology?

Then it is to boycott the physician, whether specialist or non-specialist.

So how do they achieve this boycott?

1. Restrict the causes of disease to that which is reversible only; diet, nutrition and lifestyle. Therefore the cure is likewise restricted to the same triad. If a patient becomes ill all he needs to do is change one or more of these three and he will be cured.
2. Convince people that drug treatments do not cure any illnesses.
3. To attack the integrity of doctors thereby breaking the trust.
4. Bringing controversial issues & evidence and encouraging the common people to try and make sense of it, but in reality it is to confuse them.

Unfortunately, the ones that fall into it, have not realised the medical methodology that they have adopted and what its consequences will be.

O Abu Iyaadh, it is an individual you have often quoted from and an individual whose book you possess and an individual who has no medical training in any of the disciplines of medicine. Nor do any of the disciplines of medicine acknowledge him as a one who is skilled in medicine. So I advise you to forsake him and his methodology, which you are in its infancy stage, as there are clearly more skilled medical practitioners than him. Stick to the Prophetic Manhaj in this affair, so you can prosper.

Bernarr MacFadden & Cosmotarianism / Physical Culture

It is the methodology whose founder is Bernard McFadden (who changed his name to Bernarr MacFadden) who was born in Mill Spring, America (1868 - 1955CE). His father was an unsuccessful farmer and Bernard worked on a farm during his childhood received little formal education, a situation he later termed a blessing!!!.

He had multiple professions, with the closest to medicine being a dentist's assistant where he held patients head still while the dentist operated. He later set up his own Gym and began to body-build and became a professional wrestler (which he was well skilled at).

His education consisting of signing on as professor of kinistherapy and all-purpose coach at a St. Louis military school (i.e. PE teacher) and liberally partook of its curriculum for a year or so, learning literacy at the same time.

Very much into his own physique, he set up several public magazines and newspapers which many accused him of using as a medium to spread obscenity including pornography. Yet he claimed it was for the opposite! These magazines mainly physical culture, sports and fitness-related later made him rich and more influential and termed by some as the Tabloid king

Prior to his riches he would publicly offer to wrestle anyone or enter wrestling/strength competitions or model his body, doing various stunts demonstrating his strength. He used this as means to attract crowds and would then preach about virtue of good health and physical culture.

MacFadden wrote many articles and books including Superb Virility of Manhood (1904), MacFadden's Encyclopaedia of Physical Culture (1911–1912), Fasting for Health (1923), and The Milk Diet (1923).

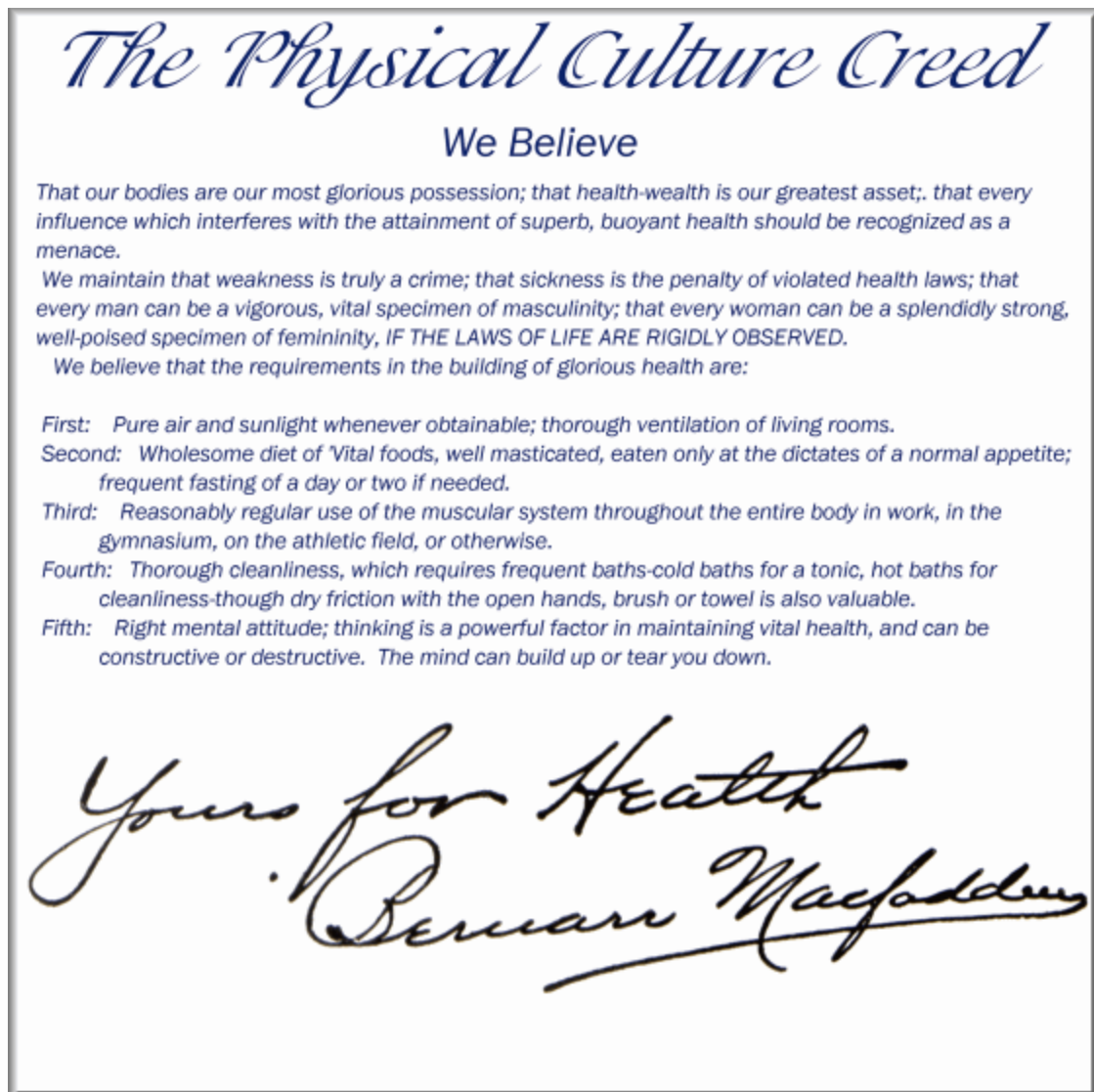
MacFadden made an unsuccessful attempt to found a religion, “Cosmotarianism”, based on physical culture. He claimed that his regimen would enable him to reach the age of 150.

He would preach what he practised, and that is to fast for long periods such as up to a week at times (detoxification) and drink much raw milk (natural antibiotic) and decline the need for a doctor. Any physical weakness was regarded as a crime (sin) and a specific diet and lifestyle was advocated. He would attempt to bring 'evidence' for his positions and analyse them against 'evidence' to the contrary and try and give the impression of a balanced argument. He would write volumes of works, to try and demonstrate academia despite no health academia or skill training.

It was the condition of his 4th marriage that his bride would reject caffeine and doctors. All medication were declined and only foods were used as medication. His young son died of a convulsion as the mother was not allowed to call the doctor, but was publicly blamed on a fall. He himself died in his 80's from a urinary tract infection after refusing medical treatment.

Those who adopt this medical methodology today point to weakness as a crime and their argument that the true underlying cause for diseases is a weak immune system. In reality it is from the causes but there are many other causes that are overlooked.

MacFadden's creed based upon the religion he attempted in the name of health is as follows.



Modern Medicine -Removal of some Doubts

To remove a doubt in the mind of the authors of healthymuslim.com. Modern (allopathic) medicine incorporates the use of healthy diet and lifestyle and this is always the first step in disease management. However when it is felt that a particular medicine will be beneficial then it is prescribed by the qualified medical practitioner. The prescription of such a medicine does not negate the continued use of appropriate dietary and lifestyle changes but the two are used in conjunction. We can likewise refer to dieticians when necessary, resources allowing, and even to a fitness programme. To deny that doctors do not advise about diet and lifestyle is an error.

Secondly if a treatment has a long course duration such as six month or even two years then this does not imply that it is not curative or that it is symptomatic treatment only. Even Prophet *sallallaahu'alaibiwassalam* advised recurrent use of honey in the condition of someone with diarrhoea, and likewise we see course dose, frequency and duration specified & prescribed with honey, blackseed, milk, etc, from traditional doctors.

Finally, the term 'chronic' is used for illness that is longlasting or enduring. Advent of modern medicine from around mid-nineteenth century when anaesthetic and later bacteria then antibiotics and vaccines were discovered has led to pharmacology developing from herbalism and many drugs are still derived from plants (atropine, ephedrine, warfarin, aspirin, digoxin, hyoscine, etc). Many illnesses that used to be chronic in the past (and still are in some developing countries) are now no longer chronic (in the western world), due to advancement of modern medicine, illnesses such as rickets, scurvy, beriberi, pernicious anaemia, etc and many infective diseases such as malaria, tuberculosis, etc. As for current chronic illnesses then if the advancement of modern science continues, inshallah, they will no longer become chronic in the future. However these chronic illnesses cause early morbidity and mortality without many of the modern medication and modern medical practice, illnesses such as asthma and diabetes. So even though in some conditions there is no cure discovered at present, by any of the disciplines of medicine, morbidity is reduced and longeveity is increased by controlling such diseases via medication, herbs, food, etc.

Modern medicine has certainly played a significant role which partialy explains (need to also consider war and famine) why average life expectancy is around 80 years of age or more in the western medical world and less than 60 years in the poor developing world and in between these two for the newly industrialised countries. Likewise infant mortality follows an inverse relationship to this. These advancements in average life expectamncy, bi iznillah, are due to modern medicine and specifically public health medicine.

Dawatus-Salafiyah and Healthymuslim.com

The students of knowledge and the callers to salafiyah hold a noble place for that which they convey to the people from the scholars, calling to Allah (subhanahu wa'tala) and his religion. Such individuals gain a trust of the salafiyoon, especially the non-arabic english speaking people, as there is a reliance upon the translation (of the students of knowledge) of the works of the scholars. This trust extends into other walks of life and trade that a student of knowledge may partake in. As such these students carry the influence with their own statements and positions when it is conveyed publicly. With this influence comes responsibility. Therefore when a student delves into that which is out-side their religious or worldly knowledge it still influences people based upon that initial trust. Hence it is even more important that any knowledge transmitted has its basis with the specialist of that field be it religion or worldly academia. From the responsibility is that one should

not set a precedent from himself rather he needs to return to the religious scholars or worldly specialists before embarking upon issues of controversy.

In the current situation, I see the platform and basis for the launch of this website, from that of salafipublications.com website and bookshop and even many of the salafi youth distributing leaflets and business cards. Yet I see only a glimpse of salafiyah on this healthymuslim.com website and only a glimpse of the positions and statements of the scholars if I was to make an estimation than it would be less than 2%. In addition to that, I see, that its basis is upon error both in principles (as outline in this document) and some of its subsidiary positions and I likewise see, from what is apparent that it was established to spread medical controversy and this is its basis. Had the basis been Prophetic Medicine then it would have been the predominant information present upon the website.

Salafipublications have a duty of responsibility for that which it spreads and is aligned with, be it actual content on its own website or any linked websites and forum. It has a duty to monitor the content and to act appropriately when it is advised about an issue of public safety & importance.

This responsibility and duty as on several levels, that which relates to;

- Errors need to be stopped from being spread thus removing any medical harm.
- Those influenced by the errors need to be informed, so they can protect the health of them selves and families.
- Those who spread the errors likewise need to be advised so they can protect themselves from misguidance, and being callers to that.
- The medical harms of the error need to be reversed, i.e. the correct subsidiary issues need to be called to.

So just as I have a duty of care to the health of my patients and the public in general, then if I made a public error that can lead to medical harm then, from the angle of what is foremost, I have a greater duty to reverse that error and harm. The removal of harm takes precedence over giving of benefit.

In addition to this one must have foresight that this healthymuslim.com website is a medico-legal minefield if the enemies of the dawatus-salafiyah got hold of it, then no doubt it has the potential to damage the dawah seriously both from within (those affected by the harm and/or error) and out with (hizibiyoon and kufaar); an attack that would come from many levels including the authorities, public safety officials & health, tabloid & TV media, pharmaceutical companies and legal teams.

So I call all parties who have a duty of responsibility be that Abu Iyaadh or the heads of Salafipublications then fulfil your responsibilities in regards to the seriousness of this issue, it damages the individuals upon this strayed manhaj, it damages the health of muslims and non-muslims who are influenced by it and it will damage the dawah, inevitably. My brothers fulfil your responsibilities and do not break your trust with the people.

Summary of points

- The Prophetic Medicine is the Best form of medicine
- Modern medicine can be used in conjunction with the Prophetic Medicine
- Medicine has always been from the asbaabul kayniyaah and to remove it requires authority
- Modern Medicine has been accepted by the scholars and the consensus of the muslims.
- The necessity for the medical practitioner to be competent
- If more than one medical practitioner, then to refer to the most skilled
- In issues of contention then even more necessary to refer to the most skilled
- Not to publicly spread medical health safety issues until after recourse to the specialist in that field
- The complex nature of medical evidence and it is not for the common person to overburden himself with that, either seeking it or encouraging other people to seek it
- Medical evidences are for the purpose of the experts in that field to arrive at a consensus
- Journal authorship is not be equated with the ability to proficiently analyse the Medical evidences
- Biochemistry is distinct from medicine and health
- The need to keep updated in one's own field of expertise
- The need to protect the honour of any muslim doctors and to cease attacks upon them
- The medical methodology of Bernarr MacFadden despite any medical training in any discipline of medicine
- All authorship should be clear to any reader of any article be that health or other than it
- Without complete rectification the damage to the dawatus-salafiyah and to peoples health is at high risk
- The need to undue the damage that has already taken place

Final Remarks

O Abu Iyaadh, I hope by now after reading and studying this documents that Allah, al-Haleem ul-Lateef, has opened your heart and eyes. Then likewise realise that in rectification is our success. If you wish to continue spreading Prophetic Manhaj then I request that you contact the scholars and those that practice this form of medicine from the traditional doctors. As for that which concerns modern medicine I likewise request that you contact those most skilled in it, for whom I can give you a contact. If you wish to continue to evaluate the evidence yourself then first study and learn its knowledge to an acceptable level before embarking upon it. However I would recommend that you do not leave that which is better for that which is lesser and no doubt to spread the knowledge of the religion from the scholars, translating their works is indeed better.

Wallahu ta'ala 'alam. Wa billahi tawfeeq.

And the final call is that all praise is for Allah the Lord of the worlds.

Your brother,

Abu Yahya, Dr Sheraz bin Yasin
General Medical Practitioner

29th March 2009

Appendix follows

HealthyMuslim.Com كُلُوا مِنْ طَيِّبَاتِ مَا رَزَقْنَاكُمْ وَلَا تَطْعَمُوا فِيهِ

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Eat of the good things we have provided you and transgress not therein ... The Qur'an (20):31



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Green Tea, Blueberry and Raspberry Fruit Extracts Touted as Potential Cancer Fighters

Filed under: [News](#)

Friday, September 26 2008 - by [HealthyMuslim](#)

Key topics: [Cancer](#) • [Blueberries](#) • [Raspberries](#) • [Green Tea](#)

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The three top antioxidant fruits are strawberries, raspberries and blueberries. These fruits are high in antioxidants, zinc, folic acid and also help to support the liver. Here's a news item showing anti-cancer properties of these fruits.

“ (HealthDay News) -- A gel derived from black raspberries, a fruit beverage and old-fashioned green tea all hold potential promise as ways to treat or prevent different types of cancer, preliminary research suggests.

"Until now, foods have not been considered good treatments for chronic illness, especially tackling tumors," Greg Jardine, a biochemist at Dr. Red Nutraceuticals in Australia, said at a teleconference Thursday. In fact, "foods can be medicine," added Jardine, co-author of a manufacturer-funded study of a "punch" that appeared to reduce the growth of prostate cancer in mice.

In addition to Jardine's study, two others -- one with people and one with rats -- suggest that a black raspberry gel can reduce oral cancer lesions and green tea can prevent colorectal cancer.

The studies, which are all small and need further confirmation, were presented at the American Association for cancer Research's Sixth Annual International Conference on Frontiers in cancer Prevention Research, which runs through Dec. 8 in Philadelphia.


Researchers at Ohio State University and the University of Kentucky are using a gel made of extracts from black raspberries to treat oral lesions, which often begin as growths inside the mouth and threaten to turn into major tumors.

"About 36 percent will progress to oral squamous cell carcinoma, but, at this point, we don't have the molecular tools to determine which ones will go on to malignancy," said Dr. Susan Mallery, a professor in the Department of Oral Maxillofacial Surgery and Pathology at Ohio State University's College of Dentistry.

About 7,500 people in the United States die each year of oral cancer, according to American cancer Society statistics, and 34,000 new cases are diagnosed annually.

The researchers assigned 30 patients -- 20 with precancerous lesions and 10 healthy patients -- to apply the gel several times a day. After six weeks of treatment, the grade of the lesions decreased in 35 percent of patients, while it stayed steady in 45 percent of patients and grew in 20 percent, Mallery said.

Patients whose tumors had progressed the least seemed to do the best after undergoing the gel treatment, Mallery said. None of the patients reported side effects.

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Why does the gel appear to work? According to Mallery, the active agents appear to be "those chemicals that give it a very rich purple color." The study authors suspect that the chemicals may help "re-educate" tumor cells, reversing their march toward cancer.

In another study, Australian researchers -- funded by Dr. Red Nutraceuticals, the maker of an antioxidant-boosted beverage called "Blueberry Punch" -- gave the drink to mice with tumors that were considered equivalent to prostate cancer in humans.

The tumors were 25 percent smaller in eight mice that drank the punch for two weeks, compared to eight mice that did not drink the punch. Jardine said the next step is to figure out if the punch would have a beneficial effect in men. The punch, designed to be a health aid, is sold in Australia and in New Zealand, and is made of fruit concentrates and a variety of extracts, as well as tarragon, turmeric and ginger, he said.

In the third study, researchers from Rutgers University in New Jersey fed chemicals known as polyphenols from green tea to rats that had colorectal cancer. The polyphenols appeared to reduce the size of tumors by 45 percent, the study authors said.

It's not clear if the polyphenols would have a similar benefit in humans, and the equivalent amount of tea consumption in people would be hefty -- four to six cups a day, the researchers said.

SOURCES: Dec. 6, 2007, American Association for cancer Research teleconference with Greg Jardine, biochemist, Dr. Red Nutraceuticals, Mount Nebo, Australia; Susan Mallery, D.D.S., Ph.D., professor, Department of Oral Maxillofacial Surgery and Pathology, Ohio State University College of Dentistry, Columbus; American Association for cancer Research, presentations, Sixth Annual International Conference on Frontiers in cancer Prevention Research, Philadelphia

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Comments (currently closed)

1 **Peter Taylor. UK Resident.** - posted on Monday, 13 October 2008 11:12

I have been taking the recommended 25ml per day of Dr Red blueberry Punch for the last five months and I will be having my periodic 6 monthly PSA test in November. I had my prostate gland removed in 2000 and my PSA has still continued to rise slowly due to

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Royal jelly is a creamy substance found in the salivary glands of bees. It is primarily a nutrient-r ...
by **SoundHealth** (4 weeks ago)

Assalamulaykum I really loved this article. It was MasAllah brilliant. I did 546 skips under 19 ...
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JazakAllahkhair. You mentioned Royal Jelly and Bee Pollen. What are these and how are they used? ...
by **Muslima** (4 weeks ago)

Thanks for compiling these info. ...
by **LivingHalal** (4 weeks ago)

thank you very much for the article , I have thin hair . I hope this could help ...
by **geegee** (1 months ago)

As salaamu alaykum, you would be looking at topical application with a suitable cream (or you could ...
by **healthymuslim** (1 months ago)

Dear Assalamualaikum, Kindly advice how to use the aloe vera for psoriasis treatment as i have t ...
by **Ahmed** (1 months ago)

As-salaamu alaykum, The hadeeth mentions the actual seed not seed oil,is it t ...
by **Arif Mahmood** (1 months ago)

Black seed oil contains fifteen amino acids, including eight of the nine essential amino acids (thes ...
by **SoundHealth** (1 months ago)

As salaamu alaykum wa rahmatullaah. As the article explains, it is haraam, due it being a confirmed ...
by **healthymuslim** (1 months ago)

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cocoa coconut coconut oil
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cress cruciferous vegetables
cucumber cupping curcumin
dandruff dates dehydration
deodorant depression DHA
diabetes diet digestion
digestive cycles dips dopamine
dried fruit dust mites eating
habits echinacea eggs endive
EPA essential fatty acids
essential oil excitotoxin
exercise eye exercises
eyesight falafel fasting fats
fatty acids fenugreek fertility
fibre fig fish fitness flax oil
flax seeds flu flu vaccine
fluoridated water fluoridation
fluoride fluoride-free toothpaste
fluorosis folic acid food
combination food combining
food digestibility food poisoning
fruit gardening garlic ginger
glucose glycemic index goji
berry grain grapefruit grapes
green tea gum disease hair
HDL headache heart heart

bits of the cancer being left and is now getting towards the value that may require treatment with hormone tablets. Do you have any proof whether the Dr Red actually reduces the PSA in the men in your trials. Best Regards Peter Taylor

2 HealthyMuslim - posted on Monday, 13 October 2008 14:51

Hi Peter, thanks for your comment.

Firstly, we don't know of any human trials reporting a reduction in PSA with the use of Dr Red blueberry Punch to date. These are trials that are to be conducted in the future or may well be under way now.

Secondly, a point that I should bring to your attention about PSA tests. This is what is stated on www.cancer.gov website:

“What are some of the limitations of the PSA test?”

False positive tests: False positive test results (also called false positives) occur when the PSA level is elevated but no cancer is actually present. False positives may lead to additional medical procedures that have potential risks and significant financial costs and can create anxiety for the patient and his family. Most men with an elevated PSA test turn out not to have cancer; only 25 to 30 percent of men who have a biopsy due to elevated PSA levels actually have prostate cancer

In other words, the PSA test is not a reliable indicator and up to 3 in 4 men with elevated PSA don't actually have prostate cancer.

I would also like to quote the following observations by Dr. Elizabeth McGregor quoted from [this page](#):

“ The introduction of the PSA test in 1990 has led to a dramatic increase in the number of men diagnosed with prostate cancer over the last decade. At the same time, the test has brought prostate cancer screening into the realm of controversy. Because PSA is a protein that is produced by normal and cancerous prostate tissue, benign disease of the prostate - a very common condition in men over 50 - can lead to a false positive test result. The test can also miss cancers. To add to the controversy, a significant number of men have latent prostate cancer. "If you autopsy men over the age of 50 who died of causes completely unrelated to prostate cancer, 30 percent of them will have had cancer in their prostate," says Dr. McGregor. "You don't really want to be identifying that because it was clinically insignificant. It was never going to be a problem for them."

Dr. Elizabeth McGregor is an AHFMR Population Health Investigator and Research Scientist with the Division of Epidemiology, Prevention and Screening, Alberta cancer Board. She also received support from the National cancer Institute of Canada.

In other words, almost a third of men die of natural causes, despite having prostate cancer, meaning they die with prostate cancer, not because of prostate cancer.

Thirdly, while it is true that the berries are very high in antioxidants that can help combat or control cancer, it is not simply a matter of just taking these juices or supplements and thinking that on its own will be sufficient. There has to be a holistic approach. You have to make changes in diet and lifestyle.

Some things you can do is take a sufficient of omega-3 and omega-6 fatty acids in your diet - most people lack enough of these nutrients. These are absolutely essential for general health. The best sources are hemp oil and flax seed oil. Lower saturated fat intake in your diet, especially fried foods. Get regular exercise, enough to make you sweat, on a daily basis. Cut out all sugar, caffeine, and refined food from your diet. Try to formulate a diet consisting mostly of vegetables and cut down on red meat.

attack | heart disease | henna |
herbs | high fructose corn syrup |
high fructose corn syrup | hijama |
hina | homogenized milk | honey |
household products | houseplants |
hummus | immune system |
infertility | inflammation |
inflammatory response |
intoxicants | iron | irritable bowel |
Johanna Budwig | juice | kale |
kiwifruit | lavender | lawsonia |
inermis | LDL | lentil soup | lentils |
lifespan | linus pauling |
lipoproteins | live long | long life |
longevity | lung cancer | lutein |
lycopene | marjoram | medical |
industry | medicine | memory |
mercury | metabolism | milk | mind |
minerals | miswak | MMR | mobile |
phone | mold | monosodium |
glutamate | monounsaturated fats |
MSG | muscles | myrtle | natural |
health | nigella sativa | nigella |
seeds | night shift | nutmeg |
nutrition | nuts | oats | obesity | oil |
olive oil | olives | omega-3 |
omega-6 | omega-9 | onions |
orange | oregano | organic |
osteoporosis | oxidants | papaya |
parabens | Parkinson's disease |
parsley | pasteurization |
pasteurized milk | peppermint |
perfluorinated chemicals |
personal care | personal care |
products | pesticides | pH |
pharmaceutical industry |
phosphate | phospholipids |
phosphorus | pineapple | plums |
pollution | polyphenols |
polyunsaturated fats |
pomegranate | porridge |
postnatal depression | postpartum |
depression | posture | potassium |
pregnancy | probiotics | propylene |
glycol | prostate cancer | protein |
prunes | psoriasis | pulses | quark |
quince | raisins | ramadan |
raspberries | raw milk | respiratory |
problems | resveratrol | rice |
running | salad | salmon | salt |
saturated fat | saturated fats |
selenium | senna | serotonin |
sesame oil | silica | sinusitis |
siwak | skin | skipping | SLS |
sodium | sodium lauryl sulfate |
soup | spices | spinach | sprout |
sprouting | sprouts | St Johns |
Wort | St John's Wort | starch |
stimulants | strawberries | stress |
sugar | sulfur dioxide | sulphur |
sunflower seeds | superfoods |
sweetener | talbina | tea |
Thimerosal | thinking | tomato |
toothpaste | toxic | toxic chemicals |

HealthyMuslim.Com

كلوا من طيبات ما رزقناكم ولا تطغوا فيه

Your Guide To Health, Fitness and Longevity

Eat of the good things we have provided you and transgress not therein ... The Qur'an (20):31



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What Foods Are Good For Your Eyesight?

Filed under: [Body](#)

Saturday, November 01 2008 - by [HealthyMuslim](#)

Key topics: [Eyesight](#) • [Lutein](#) • [Anthocyanins](#) • [Vitamin A](#) • [Vitamin C](#) • [Beta-carotene](#) • [Vitamin E](#)

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These foods are good for maintaining good eyesight. Weakened eyesight may be the result of improper nutrition and lack of the relevant nutrients that are related to the maintenance of the various eye components.

- **Carrots.** These are rich in Vitamin A. Beta-carotene which is a precursor of Vitamin A plays an important role in numerous biochemical reactions in the body. The benefits of Vitamin A / Beta-carotene include maintenance of the surface linings in the eyes, and intestinal, urinary and respiratory tracts.
- **Cold water fish.** These include sardines, mackerel, cod and tuna. These fish are a rich source of omega-3 fatty acids, and particularly DHA which plays a crucial role in the structure of cell-membranes. It is recommended for people with dry eyes, and for the preservation of sight in general.
- **The leafy greens.** These include spinach and kale. These are rich in carotenoids, with lutein of particular interest. This is a pigment that protects the macula (part of the eye deep in the centre of the retina) from damage via sunlight.
- **eggs.** They are rich in sulfur, cysteine, lecithin and again, lutein. They can protect from cataract formation.
- **Garlics and onions.** These are also rich in sulfur, which is required for the synthesis of glutathione which is an antioxidant for the whole body, including the eye lens. It protects the body from damage and deterioration and this applies to the eyes as well.
- **Fruits and vegetables.** They contain a lot of Vitamin C, Vitamin A, Vitamin E and Beta-carotene. Carrots are good for daytime vision.
- **Blueberries and grapes.** They contain anthocyanins which are good for night vision.
- **Nuts and seeds** These contain zinc which is important for retina function. Zinc is also required to release Vitamin A from the liver which is then used by the eye.

These foods provide the nutrients to maintain good eyesight. You can also take supplements too. This would include Vitamin C, Vitamin B Complex, alpha-Lipoic acid, DHA (an omega-3 fatty acid), selenium, zinc and Magnesium.

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<http://www.healthymuslim.com/articles/jmz2n-what-foods-are-good-4>

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Comments (currently closed)

1 Yamina - posted on Tuesday, 04 November 2008 22:43

My son has a traumatic macular hole and has extensive permanent damage. I loaded him up with mango, pineapple, and carrots as all of these are excellent for eye health. After a year of this, he was complaining about how fuzzy his eyesight was, even with his glasses. His eye specialist was amazed at how much better his eye was (after telling me a year previously that he would always be essentially blind in his right eye). I had no idea that these other foods were so healthy for the eye as well.... This is VERY valuable info for our family. May Allah reward you for your endeavor and bless you with what you need.

2 Salma - posted on Wednesday, 05 November 2008 16:13

I seem to get a lot of bumps around the eye. Does anyone know what they are they are not painful just there doing nothing.

3 healthymuslim - posted on Wednesday, 05 November 2008 18:13

You may have sties, or chalazions (meibian cysts) if they are in the eyelids. This can occur as a result of being worn down with a weakened immune system, and they can persist for quite a while. They will not cause any pain but are just irritating and discomforting. They can occur when you are weak and worn down.

In general, you need to boost your immune system by ensuring a good all round diet with the right foods and you can take immune boosting supplements too.

If they are in the eyelids (top or bottom) they do tend to go away on their own, though in some cases if they get too big, they may have to be removed at your surgery. Try not to touch them or agitate them in any way. You should refer to the hospital's eye department for further advice.

4 noushad - posted on Monday, 17 November 2008 06:32

I am very happy for I'm getting more information about health. I have got short sight and I am eating good foods.

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As salaamu alaykum, you would be looking at topical application with a suitable cream (or you could ...
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by **Ahmed** (1 months ago)

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by **Arif Mahmood** (1 months ago)

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by **SoundHealth** (1 months ago)

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by **healthymuslim** (1 months ago)

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