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The Relevance of al-Kay’s Treatment according to the Perspective of Prophetic Hadith

[Relevansi Rawatan al-Kay menurut Perspektif Hadis]

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ABSTRACT

Throughout history, individuals adhering to the Islamic faith have diligently pursued the discovery of optimal medical practises. During that period, the practise of utilising cupping and employing hot iron (al-kay), was employed as a supplementary treatment for individuals suffering from chronic conditions. However, in alignment with the era of Industrial Revolution 4.0, the contemporary medical field has embraced more efficient clinical interventions due to the rapid advancement of high-tech products and the implementation of intelligent automated systems. This includes the utilisation of therapies including al-kay. Accordingly, this article aims to analyse the healing method with al-kay, which refers to the hadiths perspective in two different contexts: prohibition and conditional permission. By applying a qualitative research method, this article finds that one popular al-kay product today is laser-based circumcision. This circumcision is one of the modern ways in which the skin of the foreskin is cut using a unique cutting tool, i.e., a cautery or diathermy, which replaces knives and scissors to cut the skin. The device’s tip is heated up to 1000 degrees Celsius with electrical power, and cuts are made by burning the skin while closing the blood vessels. While from the point of view of Muslim scholars, the treatment of al-kay is a must if in an emergency, and there is no other option provided a specialist doctor recommends it. The legal classification of this regulation transitions to ḥarām (prohibited) when the patient becomes persuaded that the utilisation of a hot iron possesses a curative power that is revered in a manner comparable to the veneration of superstitious practises. The Prophet (PBUH) expressed his disapproval of the matter, deeming it inconsistent with the concept of tawakkul (trust in God).

Keywords: al-Kay, Treatment, Industrial Revolution 4.0, Hot Iron, Technology.

Kata Kunci: al-Kay, Rawatan, Revolusi Industri 4.0, Besi Panas, Teknologi.

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1. INTRODUCTION

Islam profoundly acknowledges and embraces the scientific investigations that serve as the foundation of contemporary medical interventions. However, Islamic scholars have contributed to the field of empirical research by challenging ideologies that contradict Islamic teachings, such as materialism, pragmatism, atheism, and the dismissal of divine revelation. Upon analysis of the hadith pertaining to medical matters attributed to the Prophet Muhammad (PBUH), it becomes evident that he granted considerable autonomy to his followers in selecting the most suitable treatment, taking into account the severity of their affliction. According to Awang and Mahmad Robbi (2020), the Prophet (PBUH) provided instruction to his companions on how to address the sorrow they experienced, suggesting a range of efforts. For instance, the imperative of limb transplantation and similar procedures for personal use arises from the fact that such interventions are integral to the field of medicine.

According to historical accounts, it is recorded that ‘Arfajah ibn As’ad, a companion of the Prophet (PBUH), suffered the loss of his nose during a military encounter. Subsequently, he employed a prosthetic nasal appendage composed of silver material, which emitted a malodorous scent originating from the place of the damage. Subsequently, the Prophet (PBUH) proposed that ‘Arfajah employ an artificial nasal appendage crafted from gold material:
The relevance of al-Kay's treatment...

From 'Abd al-Rahmān ibn 'Arafah that his grandfather 'Arfajah ibn As'ad had his nose cut off at the battle of Kulāb. Then he made an (artificial) nose out of silver then became rotten. So, the Prophet (PBUH) ordered him to make a nose out of gold.

According to Ābālī (2005), this particular hadith provides evidence supporting the permissibility of men using gold for medical purposes in emergency situations. In a similar vein, the followers (ābī'īn), such as 'Urwah ibn Zubayr ibn al-'Awwām, were confronted with a situation where he was afflicted with an infectious ailment. In response, the medical practitioners of that era reached a consensus that amputation of his leg was necessary in order to contain the spread of the sickness to other bodily regions. According to Ibn 'Asakīr (1996), medical professionals have recommended the administration of sedatives to him.

From an Islamic standpoint, the first reception of the legislation about the pursuit of medical care inside the sharī'ī (Islamic law) was one of approval, as evidenced by numerous verses in the Quran and the hadith of the Prophet (PBUH). In relation to this matter, the divine scripture of Islam, the Quran, contains a passage in sura al-İsra'

وَنُنزِلَ مِنْ أَلْقَارَانِ مَا هُوَ شِفَآءٞ وَرَحمَةٌ لِّلْمُؤْمِنِينَ وَلَا يُزِيدُ الظَّالِمِينَ إِلَّا خَسَارَةً

\[\text{And We send down of the Quran that which is healing and mercy for the believers, but it does not increase the wrongdoers except in loss.}\]

‘Imād al-Dīn Ismā‘īl ibn ‘Umar ibn Kathīr (d. 1373 AD), or known as Ibn Kathīr (2000/9: p. 70), one of the great exegete interpreted this verse in his work Tafsīr al-Qur'ān al-‘Azīm:

إِنَّهُ : ( شِفَآءٍ وَرَحمَةٌ لِّلْمُؤْمِنِينَ ) أي : يَدَبَّهُ ما في القلوب من أمراض ، من شذى ونفاق ، وشرك وزج ويمل ، فالقلان ينفع من ذلك كله. وهو أيضا رجاء يحصل فيها الإيمان والحكمة وطلب الخبر والرغبة فيه . وليس هذا إلا لم ينام ، وصدى وابتعه ، فإنك يكون شفاء في حق ورحمة . وأما الكافر الظلم نفسه بذلك ، فلا يزيد جمعه القرآن إلا لهذا وكذب وترك ، وألفا من الكافر لا من القرآن .

“Indeed, the Quran is a cure and a mercy for the believers, which can eliminate in the heart from various diseases, including doubt, hypocrisy, polytheism, deviation (from what is right), and inclination (to what is false). The Quran can cure all that. The Quran is also a blessing that produces faith, wisdom, obtains goodness, and adds love. This cannot happen except for those who believe in the Quran, justify it, and follow its guidance. So, the Quran will be a healer and mercy for him.”

Similarly, the words of the Prophet (PBUH) narrated by Abū Hurairah proves that Allah sent down a cure for every disease that is revealed:

عن أبي هريرة رضي الله عنه عن النبي صلى الله عليه وسلم قال ما آلم الله فداء إلا آلم الله شفاء

[Narrated by al-Bukhārī, Kitāb al-Ṭib, Bāb Mā Anzala Allah Dā' illa Anzala lahu Shīfā, hadith number 5354]

Meaning:

“Allah does not bring down a disease, but a cure is sent down with it.”

While certain hadiths appear to explicitly prohibit the use of certain treatments, such as al-kay and al-ruqyah, which involve spiritual practises rooted in Islam, such as reciting verses from the Quran or supplications...
From this perspective, it is important to acknowledge that pursuing medical therapy for an illness is a means of attaining a remedy, without negating the notion of trust in God. It is imperative to consider the justifications mandated by shari‘a in relation to matters of faith. Nevertheless, it is imperative to maintain the belief that the curing of an illness is ultimately facilitated by a divine entity, namely God. The hadith does not include any explicit cautionary advice against the consumption of medication. According to Muḥammad al-Qārī (nd.), al-kay and al-ruqyah should not be seen as medicine, but rather as practices that are prohibited due to their association with attempts to beyond the boundaries in seeking remedies. The usage of al-kay without a genuine necessity is discouraged. According to al-Mubārakfūrī (2008), the ancient beliefs in the age of ignorance, al-kay and al-ruqyah are considered to be the exclusive foundations for healing, rather than attributing it to Allah. Indeed, several individuals link it to malevolent incantations that do not derive from the divine appellations of Allah, the verses of the Quran, nor are they grounded in supplications said by the Prophet (PBUH) (Muḥammad al-Qārī, nd.). Regarding the practise of al-ruqyah, which involves reciting certain verses from the Quran and engaging in known dhikr (as endorsed by scholars), it can be deemed lawful rather than prohibited.

In conjunction with the advent of Industrial Revolution 4.0, the contemporary medical field has witnessed notable advancements in high-tech products and intelligent automation systems, leading to the implementation of more efficient clinical treatments. Notably, the use of al-kay has emerged as a therapeutic approach in this context. This article examines the utilisation of al-kay in medicine, providing a detailed analysis from the perspective of hadith.

2. METHODOLOGY

The objective of this study is to conduct an analysis of the healing technique known as al-kay, specifically examining its application within the framework of hadith perspective. This analysis will focus on two distinct contexts: prohibition and conditional permission. Furthermore, the objective of this study is not to comprehensively assemble all the hadiths pertaining to al-kay, but rather to provide a representative selection of authentic hadiths.

This article uses a descriptive qualitative approach which is an attempt to understand various concepts found in the research process, using content analysis techniques and library research. Qualitative content analysis is one of the several qualitative methods currently available for analyzing data and interpreting its meaning (Schreier, 2012). As a research method, it represents a systematic and objective means of describing and quantifying phenomena (Downe-Wamboldt, 1992; Schreier, 2012). For the prerequisite and successful content analysis, the data of this study reduced to concepts that describe the research phenomenon (Cavanagh, 1997; Elo & Kyngäs, 2008, Hsieh & Shannon, 2005) by creating categories, concepts, a model, conceptual system, or conceptual map (Elo & Kyngäs, 2008; Morgan, 1993; Weber, 1990). At the same time, the research library in this article uses the types and sources of secondary data obtained from research results, articles, and reference books that discuss topics related to the research theme (Creswell, 2010).

3. RESULTS AND DISCUSSIONS

3.1. Definition

In Arabic terms for traditional cautery, al-kay is considered one of the most ancient forms of traditional therapy still in use today. Traditionally, cautery is performed with a hot metal rod (Al-Akily, Bamashmus, & El-Gorafi, 2019). The definition of al-kay in Lisān al-‘Arab is known as the method of burning the skin with a hot iron or
others (Ibn Marzûr, 2010). In other words, stick a hot iron on the injured part of the skin. As the narration from Jàbir ibn ‘Abdullah said:

وَكَتَبَ ﺔِبَرَةُ ﻃَأْبَرُ ﻡَنَّ ﻛَبَرَ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا ﺔِبَرَةُ ﻃَأْبَرُ ﻓَيْرَ بَدَءَ ﻣَأَيِّرَ ﻳَإِذَا 

[Narrated by Muslim, Kitâb al-Sâlâm, Bâb Wa Istîkhbâb al-Tadàwûd, hadith number 4090]

Meaning:

“Then the Prophet (PBUH) stopped his bleeding with an arrow iron (which was heated). Then the wound swelled, so he did it again a second time.”

The purpose of al-kay is to stop the flow of blood from wounds that are feared to cause death (al-Kattâni al-Fâsî, nd.).

3.2 The Phenomenon of al-Kay Treatment in the History of Human Civilisation

Treatment techniques and medical knowledge that emerged in the early era of Islam were inherited by medical figures since the pre-Islamic period (Ahmad al-Andalusî, nd.). The Badawi, for example, their knowledge of medicine is unusually limited in this part of Arabia. Still, the excellent tonic is clarified butter, and al-kay, or actual cautery, is used even for rheumatism (Galdston, 1937). The medical knowledge that emerged in the early era of Islam was natural and was not considered a law that came from religion (Ibn Khaldûn, 2004).

Omar (2006) cites the view of Ahmad Taha, who stated that the Arabs before the advent of Islam were not very knowledgeable about medicine. As a result, they are lagging in this area. Arguably the basis of their therapy is to believe that the cause of the disease is from the evil spirits. They often sought treatment from monks, fortune tellers, astrologers, and sorcerers. In addition, they also use curse spells and sticks to treat diseases. However, there were also scientific medical methods at that time but in a simple form and suitable for the conditions and atmosphere. Among them is the use of al-kay for chronic diseases. However, they use it when other medical means are not available. Patients who have had conventional cautery (al-kay) indicate that it provides momentary respite followed by excruciating pain. This may be due to the cautery’s stimulating influence on releasing endogenous opioids and other neurotransmitters that function as analgesics, similar to acupuncture (Farid & El-Mansoury, 2015).

Islam emphasises the importance of health care and disease prevention instead of treating an ailment (Suhaimi & Sulong, 2009). The Arabs have practiced al-kay in most of their treatment activities against infections, so much so that there is a popular expression among them “the last remedy is al-kay” (al-Kattâni al-Fâsî, nd.). al-kay was used in the Arab world during the time of Prophet (PBUH) to treat a variety of ailments, including war injuries, excessive hemorrhage caused by the opening of a blood vessel, chronic and non-healing ulcers, and pleurisy, as well as during surgical procedures such as amputation, giving incision, etc. This is a popular way of treatment in Unani Medicine for various disorders such as epilepsy, leprosy, vertigo, numbness, and nasal polyps. However, it is no longer used in modern medicine. This approach has been adopted and effectively employed in surgeries, lowering the death risk associated with excessive bleeding. As a result of the procedure’s therapeutic value, it is vital to reintroducing it to treat such disorders that are difficult to treat with conventional therapies (Alam, Khan, Kalam, Sheeraz, & Ahmed, 2020).

If we examine the acceptance of the Prophet (PBUH) on the concept of science-based medicine in the time of the Prophet (PBUH), it is found that the idea of science-based medicine is part of the treatment methods adopted at that time (Ali, 2015). Several arguments can support this view, among them, the Prophet (PBUH) sent to Ubay ibn Ka’ab a doctor to cut his veins, then used a hot iron (while treating) [narrated by Ibn Abî Shaybah, Kitâb al-Tab, Man Ruhkâhaṣâ fi Qu’at al-Uruq, hadith number 3269, authentic (ṣaḥîh)]. The same goes for the treatment of al-kay by using hot thorns given to As’ad ibn Zurârah [narrated by al-Tirmidhî, Kitâb al-Tab ‘an Rasûlîllah SAW, Bâb Ma Ja’ā fi al-Ruhkâṣâ fi Dhârîk, hadith number 2050, ḥasan gharîb]. Not to be outdone is Sa’ad ibn Mu’âdh who received al-kay treatment from the Prophet (PBUH) due to an arrow wound he suffered [narrated by Abû Dâwûd, Kitâb al-Tab, Bâb fi al-Kay, hadith number 3866, authentic]. It is not surprising when the Prophet (PBUH) stated three aspects of medicine in his time which became the practice in science-based medicine, namely drinking honey, cupping (al-hijâma) and al-kay [narrated by al-Bukhârî, Kitâb al-Tab, Bâb al-Shijâ’ fi Thalâth, hadith number 5356].

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In the eighth century, a prevalent method for managing wounds associated with homeostasis involved the application of a burning technique known as cautery. This therapy entailed subjecting the wound site to the application of heated oil, resulting in localised tissue destruction. Nevertheless, the technique results in harm to the surrounding tissues next to the injury site. According to Kansupada and Sassani (1997), a prevalent practice among medical professionals is to employ cauterisation methods for wound treatment as a precautionary measure against the potentially fatal consequences of infections associated with sutures.

Abū al-Qāsim Khalaf ibn al-‘Abbās al-Zahrāwī (936-1013), a Father of Modern Surgery, born in Istanbul famous for his encyclopedia titled al-Taṣrīf liman ‘Ajaz ‘an al-Ta’līf has used both burning techniques and suture stitching during surgery (Amr & Tbakhi, 2007; Zarmani, 2017). The most specific work related to al-kay is a book written by ‘Abd al-Ghanī al-Nābulusī (1050-1143/1641-1731). al-Nābulusī’s scholarly output was high, and he is counted among the prolific scholars of Islam in jurisprudence, legal theory, hadith, doctrine, Quranic commentary, Sufism, grammar and rhetoric, poetry and literature, travelogues, history, and interpretation of dreams, as well as more peripheral disciplines such as medicine, music, and agriculture. Among his works is al-Abhāth al-Mukhliṣa fi Ḥulmi Kay al-Himmīṣa on cauterisation (Fouad Haddad, 2017).

3.3. Hadith Discourse on Treatment with al-Kay

The permissibility of utilising al-kay as a kind of treatment is primarily justified by referencing the hadiths that address this subject area. There is a divergence of opinions among scholars regarding the legal aspects of utilising al-kay for medical therapy as follows:

3.3.1. Prohibited

There are certain hadiths that provide evidence of the prohibition against seeking treatment through al-kay, as exemplified by the narrative attributed to ‘Abbās:


[Narrated by al-Bukhārī, Kitāb al-Ṭib, Bāb al-Shifa’ fi Thalāth, hadith number 5356]

Meaning:

“The healing is found in three things: drinking honey, cupping, and burning fire (al-kay). However, I forbid my people to burn with fire.”

3.3.2. Permissible

Hadiths that require the treatment of al-kay include the narration from Jābir ibn ‘Abdullah:


[Narrated by Muslim, Kitāb al-Saḥām, Bāb Li kal Dā’ Dawā’ wa Istīḥbāb al-Tadāwā, hadith number 2207]

Meaning:

“Ubay was shot in the Aḥzāb war in his veins. Then the Prophet (PBUH) ignited it (the wound) with a hot iron.”

3.3.3. Encouragement to Avoid

This encouragement can be derived from the account provided by ‘Imrān ibn al-Ḥuṣayn, who recounts his personal experience of suffering from Fistula or haemorrhoids. According to his experience, before to engaging in the practise of medicine with al-kay, he frequently experienced the angel’s salutations directed at him. However, subsequent to receiving treatment from al-kay, the occurrence of the greeting ceased. He made the following statement:


[Narrated by Muslim, Kitāb al-Ḥaj, Bāb Jawāz al-Tamaṣṭu’, hadith number 1226]
Meaning:

“... and once I was greeted (by the Angels) until I was treated with al-kay, then I was left (the angels no longer greet). Then I left al-kay, then (the angel) returned (to greet me).”

Similarly, the hadith narrated by Ibn ‘Abbās:

... هؤلاء أمتلك وهم يسعون أوفر ما قدامهم لا حسان عليهم ولا عذابر فئت وم قال كانا لا يكتبون ولا ينضرون ولا ينتظرون وعلي رحم يم بوكلون...

[narrated by al-Bukhārī, Kitāb al-Riqāq, Bāb Yadkhul al-Jannah Sabūn Alfan bi Ghayr Ḥisāb, hadith number 6175]

Meaning:

“... They are your people, and they are preceded by seventy thousand people (will enter paradise) without being counted or punished. I (the Prophet) asked: “Why (did they get that privilege)?” The angel Gabriel replied: “They (while in the world) do not seek medicine with a hot iron, do not ask for a spell, do not believe in good or bad luck, and their Lord, they trust...”

3.3.4. Disliked

One example of hadiths that demonstrate the unfavourable treatment of al-kay is the narration attributed to Jābir ibn ‘Abdullah, who reportedly heard the Prophet (PBUH) said:

عن جابر بن عبد الله رضي الله عنهما قال سمعت النبي صلى الله عليه وسلم يقول إن كان في شيء من أدوينكم أو يكون في شيء من أدوينكم خذ فيه مشرفة محله أو مشرفة عسل أو لدغة ببار لداء واما أجهب أن أكوني

[narrated by al-Bukhārī, Kitāb al-Ṭih, Bāb al-Dawā' bi al-'Asal, hadith number 5359]

Meaning:

“If there is on something that cures you or on something good in healing you, then it is on cupping, or drinking honey or al-kay (therapy by sticking a hot iron in the wound area) as medicine, and I do not like al-kay.”

3.3.5 Verification (Tarjīḥ)

The aforementioned hadiths serve as illustrations of fatwās, which are legal opinions provided by the Prophet (PBUH) to the companions who were in search of medical remedies. Upon careful examination and assessment of these hadiths, it becomes evident that a significant portion of the suggestions made by the Prophet (PBUH) are not deemed compulsory. The domain of ijtihād, which pertains to the formulation of novel judicial rulings in the field of medicine, encompasses a wide expanse that is intricately intertwined with the prevailing circumstances and geographical context of a given nation. The presence and characteristics of a certain location play significant roles in determining the occurrence and prevalence of various epidemics and diseases within that particular area. According to Awang and Mahmad Robbi (2020), there are variations in the daily routines between hot and cold countries. The phenomenon is subject to the effect of diverse geographical conditions, including but not limited to soil composition, weather patterns, cultural practises, and so forth. Ramli and Yusoff (2019) argue that local results, tests, investigations, and experiences conducted by specialised and experienced individuals can lead to the discovery and acquisition of various diseases and their appropriate remedies.

There is another hadith about the prohibition of torturing by using fire because the matter is the prerogative of Allah. As narrated from Abū Hurairah:
"The Prophet (PBUH) has sent us on a war mission. He said: “If you find Fulān and Fulān (somebody who has no name), then burn them with fire.” Then he had instructed when we were about to leave: “Indeed I have ordered you to burn Fulān and Fulān, and indeed fire cannot be used to torment except Allah. If you find them, then kill them.”

If we trace the meaning of the hadith presented earlier, then the prohibition of the Prophet (PBUH) shows that taking al-kay treatment is not liked or hated. This prohibition is because al-kay is seen as a torturing body and causing pain. Indeed, it is as argued by Abū 'Umar Yūsuf ibn 'Abdullāh ibn Muḥammad ibn 'Abd al-Bar (d. 1071 AD) that he did not know there was a difference of opinion from scholars even they are of the view that al-kay treatment can be tried if in need (Ibn ‘Abd al-Bar, 1990). Shams al-Dīn Muḥammad ibn Abū Bakr ibn Ayyūb al-Zarīf al-Dimashqī or known as Ibn Qayyim al-Jawziyyah (d. 1350 AD) the faqih of the Hanbali school stated that the prohibition from taking al-kay is only related to the assumption that it the only cure even believes there will be destroyed when not using this treatment. So, the ban is based on the intention factor.

Regarding the ailment experienced by ‘Imrān ibn al-Ḥuşayn (as discussed in sub-topic iii), it is worth noting that the hadith does not explicitly convey the Prophet’s prohibition. Rather, ‘Imrān only shared his personal experience, so precluding its potential utilisation as a basis for prohibiting the usage of al-kay. Furthermore, upon observation, the individual’s ailment can be identified as Nāṣūr or Fistula, as depicted in Figure 1. The condition pertains to a congenital or acquired anatomical anomaly characterised by a diminutive aperture in close proximity to the anal region, which frequently gives rise to discomfort in affected individuals. The presence of small tunnel-like channels between the anal canal and the outer skin has been attributed to the phenomenon (Seow-Choen & Nicholls, 1992). It is quite probable that the administration of al-kay therapy poses a significant risk to the health and well-being of ‘Imrān ibn al-Ḥuşayn in the context of this condition. Consequently, it is advisable to refrain from applying heat to the injured region. This analogy draws a parallel between the prohibition of al-kay and the vigilance exercised in all aspects of wound care to prevent the emergence of undesirable consequences (Ibn Qayyim al-Jawziyyah, nd.).

Figure 1
Fistula Disease
is al-kay against worsening wounds, severed limbs/amputations, so in this case, al-kay can be used as a healing treatment. If al-kay is used for healing a disease for which the success and failure rate of healing is 50-50%, then avoiding al-kay is more appropriate (al-‘Azīm Ābādī, nd.).

Based on the situation that will happen to some hadith texts that are said to be contradictory as above can be resolved through assembly (al-jam‘). If this happens, there is no choice but to compile the hadiths and apply all the hadiths according to the correct understanding (Baru & Deraman, 2011). In line with the method outlined by Imam al-Shāfi‘ī that “Taking advantage of both propositions (hadith) is more important than ignoring them.” (al-Shāfi‘ī, 1985: p. 64).

In summary, we can refer to Table 1 related to the law of al-kay treatment, which is categorized into four (4) parts (i). Prohibition (al-nahy), (ii). Permissible (jawāz), (iii). Praise be to those who leave it (al-thanā‘alā man tarakahu), and (iv) Not prioritizing it (‘adama maḥabbatahu). These four parts shows that the priority is not to take it. In comparison, the third part proves that leaving al-kay treatment is more critical so that there is no dispute between the four elements (al-Mubārakfūrī, 2008).

<table>
<thead>
<tr>
<th>No.</th>
<th>Types of Law</th>
<th>Hadith Status</th>
<th>Methods of Hadith Contradiction</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Prohibition (al-nahy)</td>
<td>Authentic</td>
<td>al-jam‘</td>
</tr>
<tr>
<td>2</td>
<td>Permissible (jawāz)</td>
<td>Authentic</td>
<td>al-jam‘</td>
</tr>
<tr>
<td>3</td>
<td>Praise be to those who leave it (al-thanā‘alā man tarakahu)</td>
<td>Authentic</td>
<td>al-jam‘</td>
</tr>
<tr>
<td>4</td>
<td>Not prioritizing it (‘adama maḥabbatahu)</td>
<td>Authentic</td>
<td>al-jam‘</td>
</tr>
</tbody>
</table>

It is important to note Abou-Elhamd’s (2009) perspective that in the current era of advanced healthcare, al-kay lacks scientific basis and is linked to considerable health risks. Health authorities in pertinent cultures ought to implement measures to prevent this detrimental practise. Additionally, they should utilise multimedia health education to provide information regarding its hazards to the general public. Furthermore, engaging the support of community religious leaders can be crucial in shaping public opinion and belief.

3.4. The Treatment of al-Kay in the Modern Age

The discipline of medicine is a field of knowledge that analyses limbs and diseases to maintain human health and improve the global community's well-being. This knowledge is indispensable to human beings in every age and place because no human being is immune from disease. Whatever their status and age, they can get sick at any time. From time immemorial, humans have sought to find better medicine. In ancient times, human society treated chronic patients by cupping and using hot iron (al-kay) (Alsanad, Asim, Gazzaffi, & Qureshi, 2018).

However, contemporary clinical interventions are currently being employed to enhance therapy efficacy. Within the realm of contemporary medicine, medical science encompasses the scientific discipline dedicated to the prevention and treatment of ailments. It is a subdivision of the life sciences, focusing on the preservation and sustenance of overall well-being. Contemporary medical practise encompasses a blend of therapeutic artistry, diverse scientific disciplines, as well as the use of intuition and clinical discernment to ascertain the optimal therapeutic approach tailored to individual patients. In a more expansive context, contemporary medicine presently encompasses other disciplines such as clinical medicine, surgery, research, and others (Said, Ismail, Abd Rahman, Abdul Rahman, & Wan Khairuldin, 2018).

One of the popular al-kay products today is laser-based circumcision. This method of circumcision is one of the modern methods (electrosurgery/electrocautery) (Razrim, 2020), in which the foreskin is cut using a unique cutting tool (Nalavenkata, Winter, Kour, Kour, & Ruljancich, 2014), i.e., a cautery or diathermy replace knives and scissors to cut the skin (Figure 2). The device’s tip is heated up to 1000 degrees Celsius with electrical power, and cuts are made by burning the skin while closing the blood vessels.
A group of researchers obtained exciting facts from the Department of Paediatric Surgery, K.K. Women’s & Children’s Hospital, Singapore, studied the use of 2781 cases of laser circumcision from 1997 to 2000. Their study found a significant 5-minute decrease in surgical time for a group of patients undergoing laser circumcision. Cost savings are also reduced by S$31. While out of 2781 cases of laser circumcision performed, there was an overall complication rate of 1.15%, with details of twenty-nine cases (1.04%) experiencing post circumcision bleeding and three cases (0.11%) suffering from wound infections requiring hospitalization. Thus, laser circumcision is a simple method to reduce surgical time, significantly impacting cost reduction. The morbidity rate of laser circumcision is also better than conventional circumcision (How, Ong, Jacobsen, & Joseph, 2003). Therefore, medical practitioners may need to use a faster method of performing circumcision. This is why circumcision that includes high-frequency electric charge surgical methods to generate heat is widely used. Circumcision using electric surgery has been proven to be faster, produce less bleeding, and the result of skin cuts is even more beautiful (Fariz et al., 2011).

Also, al-kay is frequently used to treat painful eye conditions such as facial nerve palsy, cranial nerve palsies (III, IV, VI), and corneal ulcers. The absence of evidence-based scientific data on the efficacy or safety of traditional cautery does not deter patients in Yemen and other developing countries from seeking such traditional therapy, which should be discouraged because it appears to cause more harm than good to the patient and also results in unacceptable cosmesis, particularly in the facial area (Elaobda, Abu-Hamad, Treister-Goltzman, & Peleg, 2016). People in Yemen believe that they should not lose any part of their body, particularly their eye, even if it results in blindness or death, which drives them to seek traditional cautery (Al-Akily, Bamashmus, & El-Gorafi, 2019; Farid & El-Mansoury, 2015).

4. CONCLUSION

The utilisation of treatment and medication as a proactive measure does not negate the notion of placing reliance in Allah. This perspective stems from the belief that the curative properties of remedies alone are insufficient to alleviate ailments, since they are contingent upon the divine will and omnipotence of God. The utilisation of al-kay does not contradict the notion of tawakkul, as it does not negate tawakkul by satisfying hunger and thirst through the act of consuming food and beverages. Likewise, abstaining from actions that result in harm and supplicating for sound physical well-being and protection from all forms of adversity does not contradict the concept of tawakkul.

Muslim individuals should endeavour to undertake measures aimed at promoting healing, including actively seeking medical treatment from authoritative healthcare professionals. Laser-based circumcision has emerged as a highly sought-after procedure within the realm of al-kay goods. This technique obviates the necessity for suturing, namely the act of incising tissue with a heat instrument. The procedure of circumcision involves the utilisation of a cautery instrument, followed by the application of adhesive to the incision site subsequent to the surgical intervention. The utilisation of laser technology in circumcision procedures has become increasingly significant in response to the demands posed by the Industrial Revolution 4.0. This is due to the medical field’s adoption of more efficient clinical interventions and the rapid advancements in high-tech medical products.
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REFERENCES


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