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History

The Contribution of Arab Islamic Civilization to Mental Health

Walid Sarhan

مساهمة الحضارة العربية الإسلامية في الصحة النفسية

وليد سرحان

Abstract

The Arabic Islamic civilization was rich in all aspects of knowledge and science, the establishment of hospitals, the classification of mental disorders and scientific foundation of psychiatry, psychology and neuroscience was started, the famous names are so many and the books written in that were overwhelming.

Keywords: None

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Introduction

Medicine did not develop overnight. The civilizations of Egypt, Greece, Rome, Persia, India, China and the European Renaissance took up the responsibility of the flame of medical development. During the Dark Ages, the medical flame was taken up by the Arabic-Islamic world. The period between the 7th and 13th centuries has been commonly neglected, despite the remarkable developments of biomedical science of the Arabic-Islamic world with the resultant flowering of knowledge that influenced medical practice throughout Europe.¹ We could say that the history of any nation is equal to the sum of the history of a few of its distinguished individuals. At every stage in Arabic medical history we can find outstanding people, whose greatest contributions and efforts cannot be underestimated.

Terminology

The modern discipline of psychology began in the 19th century. In the pre-modern context, the term 'psychology' refers to the study of the human mind and behavior, while the term 'mind' refers to human intellect and consciousness. So it must be made clear that medieval Islamic psychology does not deal with the mind only.² Early Arab and Muslim scholars wrote extensively about human psychology. They used the term Nafs (self or soul) to indicate individual personality and the term fitrah (nature) as an indication for human nature. Nafs is a broad term that includes the qalb (heart), the ruh (spirit), the aql (intellect) and irada (will). Early Muslim scholars had a

certain philosophy in their writing that encompassed all areas of human enquiry, i.e. the knowledge of all things, both divine and human.² Therefore, Islamic psychology, or Ilm-al Nafsiat (psychological sciences), refers to the study of Nafs (self or psyche) and is related to psychology, psychiatry and neurosciences.³ Al-ilaj al-nafsy (psychological therapy) in Islamic medicine is simply defined as the study of mental illness and is equal to psychotherapy, as it deals with curing/treatment of ideas, the soul and the vegetative mind. The psychiatric physician was referred to as al-tabib al-ruhani or tabib al-qalb (spiritual physician).³ Moreover, the Islamic and Arabic psychological era includes the establishment of the first mental hospitals; the development of the first clinical approach to mental illness, and; a unique experimental approach to the study of the mind.^{3,4}

Neuroscience and psychology

Islamic medicine stressed the need for the understanding of human mental health. The first psychiatric hospitals and insane asylums were built in the Islamic world in Baghdad in 705, Fes (the third largest city in Morocco) in the 8th century, Cairo in 800, Damascus and Aleppo in 1270.⁶ The most characteristic features of medieval Muslim psychotherapy were the use of clinical observations of mentally ill patients, which resulted in the provision of groundbreaking applications of moral treatment, baths, drug medication, music therapy and occupational therapy. The Muslim physician Ahmed ibn Sahl al-Balkhi (850-934) introduced the concepts of mental health and mental

hygiene. His book, *Sustenance for Body and Soul* (in Arabic: *Masalih al-Abdan wa al-anfus*), was the first book that discussed psychosomatic diseases with an emphasis on mind and body: "if the nafs (psyche) gets sick, the body may also find no joy in life with development of a physical illness".² Ahmed ibn Sahl al-Balkhi was a pioneer of psychotherapy, psychophysiology and psychosomatic medicine. He was the first to recognize that the body (fever, headache) and the soul (anger, anxiety and sadness) could be healthy, sick, balanced, or imbalanced. He recognized two types of depression: one resulting from known causes (physiological reasons) that can be treated through physical medicine; and the other caused by unknown reasons that can be treated psychologically.² Najab ud-din Muhamed, from the 10th Century, made careful observations of mentally ill patients with detailed descriptions of a number of mental diseases, including agitated depression, neurosis, priapism and sexual impotence, psychosis (Kutrib) and mania (Dual-Kulb).^{6,7} Al-Balkhi and Muhamed ibn Zakariya Razi (Rhazes) were the first known physicians to describe psychotherapy. Razi's books (*El-Mansuri* and *Al-Hawi*) were landmarks for the description of mental illness in the 10th Century and provided definitions, symptoms and treatments for problems related to mental health and mental illness. Razi was also the director of a unique psychiatric ward in a Baghdad hospital. Such psychiatric clinics did not exist in Europe during that time for fear of demonic possessions.^{5,6}

Ibn al Haytham is considered the founder of experimental psychology and psychophysics for his distinguished book on the psychology of visual perception, *Book of Optics* (Steffens, 2006). Ibn al-Haytham was the first scientist to argue that vision occurs in the brain rather than the eyes in his *Book of Optics* (Edition III). Moreover, he pointed out that personal experience has an effect on what people see and how they see and that vision and perception are subjective feelings.⁸

Al-Biruni was a pioneer in experimental psychology as the first person to describe empirically the concept of reaction time: 'Not only is every sensation attended by a corresponding change localized in the sense-organ, which demands a certain time, but also, between the stimulation of the organ and consciousness of the perception an interval of time must elapse, corresponding to the transmission of stimulus for some distance along the nerves'.⁹ He was also the first person to discuss in detail such mental disorders as sleeping sickness, memory loss, coma, meningitis, vertigo, epilepsy and hemiplegia. Moreover, he emphasized the preservation of health through diet and natural healing as much as on medication or drugs.¹⁰

Al-Biruni first recognized 'physiological psychology' for the treatment of illness involving emotions. He was a pioneer in psychophysiology and psychosomatic medicine, developing a system for associating changes in the pulse rate with inner feelings. Avicenna was also a pioneer of neuropsychiatry who first described numerous neuropsychiatric conditions, including insomnia, mania, hallucinations, nightmare, dementia, epilepsy, stroke, paralysis, vertigo, melancholia and tremors^{11,12,13,14}, Ibn Sina, known in the West as Avicenna (981-1037). For a thousand years, he has retained his original renown as one of the greatest thinkers and medical scholars in history. His most important medical works are the *Qanun* (Canon) and a treatise on cardiac drugs. The '*Qanun fi-l-Tibb*' is an immense encyclopedia of medicine. It contains some of the most illuminating thoughts pertaining to distinction of mediastinitis from pleurisy; contagious nature of phthisis, distribution of diseases by water and soil; careful description of skin troubles; of sexual diseases and perversions, of nervous ailments. The *Canon of Medicine* (*Qanun: Law of Medicine*) by Ibn-Sina is one of the most famous works in the history of medicine. It comprises a 14-volume medical encyclopedia completed in 1025 (Stanley, 1994). These volumes were used in many medical schools; for example the University of Montpellier, France in 1650. The *Canon* explains the causes of health and disease. Ibn Sina believed that the human body could be healthy if the causes of health and disease are determined. He defined medicine (*tibb*) as the science by which we learn the different aspects of the human body in both health and disease.

The Arabic text of the *Qanun* was translated into Latin as the *Canon of Medicine* by Gerard of Cremona in the 12th Century and into Hebrew in 1279. Avicenna dedicated three chapters of his book to neuropsychiatric disorders. He defined madness (*Junun*) as a mental disorder of reason in which reality is replaced by fantasy and he located its origin in the middle part of the brain. In the *Canon of Medicine*, Avicenna was considered the father of the science of psychoanalysis through his extension of the theory of temperaments to include mentality, emotions, morality, self-awareness, movements and dreams. His four primary temperaments are summarized later on in the 13th Century.¹⁵

Psychotherapy

When Al-Razi was appointed as a physician-in-chief at Baghdad Hospital, he made it the first hospital in history to have a ward devoted to mentally ill patients. Razi was considered the first person to combine psychological methods and psychological explanations and to use psychotherapy in an applicable fashion. Razi was once called to treat a famous caliph who had severe arthritis. Razi advised a hot bath and, while the caliph was bathing, Razi threatened him with a knife, proclaiming he was going to kill him. This deliberate provocation increased the natural caloric, thus creating sufficient strength to dissolve the already softened humors. As a result, the caliph got up from his knees in the bath and ran after Razi. Najab ud din Muhammad, a contemporary of Razi, left many excellent descriptions of mental diseases. His carefully compiled observations of patients comprised the most complete classification of mental diseases known before then. Najab described agitated depression, obsessional types of neurosis, Nafkhae Malikholia (combined priapism, sexual impotence), Kutrib (a form of persecutory psychosis) and Dual-Kulb (a form of mania).

Avicenna often used psychological methods to treat his patients. One of his patients was a prince of Persia who had melancholia and poor appetite; he suffered from the delusion that he was a cow, and would low like a cow as he cried: 'Kill me so that a good stew may be made of my flesh'. Avicenna was persuaded to take on the case and sent a message to the patient asking him to be happy as the butcher was coming to slaughter him. The sick man rejoiced. When Avicenna approached the prince with a knife in his hand, he asked, 'Where is the cow so I may kill it?' The patient then lowed like a cow to indicate where he was. 'By order of the butcher, the patient was also laid on the ground for slaughter.' When Avicenna approached the patient pretending to slaughter him, he said, 'the cow is too lean and not ready to be killed. He must be fed properly and I will kill it when it becomes healthy and fat.' The patient was then offered food, which he ate eagerly. He gradually gained strength, was rid of his delusion, and completely cured.²¹

Ibn-Sina recognized 'physiological psychology' in treating illnesses involving emotions. From a clinical perspective, Ibn-Sina developed a system for associating changes in the pulse rate with inner feelings, which has been viewed as a forerunner of the word-association test of Jung. He is said to have treated a very ill patient by feeling the patient's pulse and reciting aloud to him the names of provinces, districts, towns, streets and people. By noticing how the patient's pulse quickened when names were mentioned, Ibn-Sina deduced that the patient was in love

with a girl whose home Ibn-Sina was able to locate by the digital examination. The man took Ibn-Sina's advice, married the girl and recovered from his illness. It is not surprising, therefore, to know that an asylum for the mentally ill had been built by the early 8th Century at Fez, Morocco, and that insane asylums were also built by the Arabs in Baghdad in AD 705, in Cairo in AD 800, and in Damascus and Aleppo in AD 1270. In addition to baths, drugs, kind and benevolent treatment given to the mentally ill, music therapy and occupational therapy were also used. These therapies were highly developed. Special live music bands were brought in daily to entertain the patients by providing singing and musical performances, with comic performers as well.

Music as therapy in Islamic civilization

According to the Dewan Bahasa and Pustaka portal, therapy is treatment of mental or physical disease through a healing process without the use of medicine or surgery (DBP 2013). Oztunc (2015:2) stated that music therapy is a psychological method of treatment and the psychological effect of listening to musical sounds. Music therapy is also a branch of emotional and physical healthcare, a natural combination that plays an effective role in psychological, emotional and moral disorders and a method for healing, comfort and tranquility.^{16,17} Music is a very good therapy particularly for patients with mental illness. In addition, music is an alternative treatment to using drugs, which may cause side effects. Music therapy is an instrument for professional use whether in medicine, education as well as the living environment. Human life needs balance and the basis of study and training in music therapy itself is to stabilize the whole of physical, social, communicative, intellectual and health conditions.

From the above definitions, it is clear that music therapy plays a role in influencing a person's emotions and psychology. It can be deduced that music therapy is a treatment, which involves use of music to produce calming and soothing sounds in treating and restoring balance to a patient's emotions. Music has been made a method and instrument of healing. Besides reducing the cost of treatment, it is effective in soothing and reducing a patient's pain.

Scientists such as Kisilevsky studied the ability of a foetus to pay attention when music is played and the effect of music on foetus heartbeat and movement.¹⁸ In fact, during the glory of the Islamic civilization, Muslim scholars such as al-Farabi, al-Kindi, Muhyiddin Ibn Arabi and Safi al-Din Abd al-Mu'min had already acknowledged music therapy as a method of healing.¹⁸

The use of music as medical therapy in Islamic civilization was much influenced by the Greek civilization.¹⁸ Some Islamic civilization scholars who used music therapy in medicine were al-Kindi, Ikhwan al-Safa', al-Razi, al-Farabi and Ibn Sina. Al-Kindi, also known as Abu Ya'qub ibn Ishaq al-Kindi, was identified as the earliest scholar of the Islamic civilization to use music therapy. He lived from 801 to 870. Al-Kindi adhered to Aristotle's philosophy that music has a relationship with humans and cosmology through the earth elements of water, air, fire and soil.¹⁹ Ikhwan al-Safa' (Brethren of Purity) held the view that there is a relationship between music and astrology. Fadlou (1995) stated that the Ikhwan first approached sound from the perspective of physicists. He discussed its nature, in terms of cause and effect, and its subdivision. He also briefly explained how physicists experience the process of perceiving sound. When it came to musical sounds and the combinations that make up musical composition, they would observe the biological and psychological effects of the music on the listener. The next step was the final goal of their observation on musical experience, which was spiritual and mystical. In their philosophy, the attainment of this highest goal is made possible by their assumption that an affinity existed between music and other dimensions (the make-up of the higher spheres of being).

From the viewpoint of Abu Bakr Muhammad ibn Zakariya al-Razi (854-932M) or better known as al-Razi,²⁰ asserted that music is suitable to be used for treating only mental disorders. Abu Nasr Muhammad ibn Muhammad Farabi, or better-known al-Farabi (872-950M), and Ibn Sina (980-1037M) rejected all views, which relate music with earth elements or zodiac. Their view was that music has an effect on human health. Further, according to Ibn Sina, music may have an impact on human health due to sounds inherited in human nature, which have some functions in producing different emotions. The views of the Muslim scholar, al-Kindi, led to the application of music as a method of treatment.²⁰ He was regarded to be the first Muslim scholar to realize that music has a therapeutic value when he attempted to cure a paralyzed child with music.

Ibn-Sina

Abu Ali Al-Husayn B. Abd Allah Ibn Sina (980–1037), also known as Avicenna in the Western world, was a Persian scholar born in Bukhara, Uzbekistan in the present day. He was primarily known as a philosopher and a physician, but he also contributed to several different areas of science in his time. Ibn-Sina explored and

explained the mind, its existence, human body-mind relationship, sensation, perception etc. In his well-known book *Kitab Al-Shifa'* (The Book of Healing), he accepted hypnosis and used it as a treatment of mental disorders. Ibn Sina also gave psychological explanations of certain somatic illnesses, such as hallucinations, insomnia, mania, nightmare, melancholia, dementia, epilepsy, paralysis, stroke and vertigo. He believed that philosophizing was a way of helping 'the soul reach perfection'. Ibn Sina always explained that physical and psychological illnesses linked together. He called melancholia (depression) a type of mood disorder in which the person may become suspicious and develop certain types of phobias. He claimed that anger transformed melancholia to mania. He also certified that humidity inside the head can affect mood disorders. This happens with the amount of breath change. Happiness increases the breath, which leads to increased moisture inside the brain, but if this moisture goes beyond its limits, the brain will lose control over its rational thought leading to mental disorders. Ibn Sina also wrote about symptoms and treatment of love sickness (*Ishq*), nightmare, epilepsy, and weak memory.²¹ He is the first person to develop an association between emotions and pulse rate. He also used other psychological methods to treat his patients. He established free hospitals and treatments including surgery, hot baths, herbs, hypnosis (*Al Wahm Al-Amil*) and aromatherapy.^{23,24}

Ibn Sina (or Avicenna) was primarily a philosopher with amusing knowledge, who dealt in all aspects of art of medicine, astronomy, poetry, music and psychology. This giant, with an encyclopedic knowledge, has dealt in almost all scientific branches or praxis with great success. Numerous statements of his have been cornerstone of many sciences for centuries; and, some of them are (in the era of computers and Internet) still current. The best known treatise on medicine of his is *El-Kanun*, consisting of five volumes, wherein all medical achievements (including psychology, psychiatry and neurology) of that period were described clearly. In his psychology, Ibn Sina (Avicenna) analyses the essence of human soul, mind, psychical streams, intellectum, dreams and prophecy, man's desires etc. in details. It is unnecessary to point out how much these items are actual in the contemporary psychology. Ibn al-Nefis has described systematically the symptoms and recovery of 'head sick' (including headaches, cerebral sick like cranitis, letargy, coma, demency, melancholy, insomnia, nightmares, epilepsy, appoplexy, paralysis, spasm and many others) in his *Mujez al-Kanun*, which is synopsis of Ibn Sina *Kanun*. We need much time to learn the magnificence of this philosopher, which is best known as the great one among the physicians. It is our task to enable future generations not only to know his works exist, but also to realize the

essence of this marvelous genius because there are very few people that can be compared to him.

Abu Bakr Mohammed ibn Zakariya al-Razi

Known in the West as Rhazes, he was born in al-Rayy outside Tehran. He is considered one of the greatest physicians Islam has ever produced. He traveled widely, visiting famous medical centers of his time in Jerusalem, Cairo, and Cordova. In 907, he was appointed director of a large hospital in Baghdad and a court physician as well. He wrote 237 books, of which 36 have survived. The most famous of his works is *Liber Continens*, a medical encyclopedia. In his theories, al-Razi was a Galenist; in practice, he was guided more by the principles of Hippocrates²⁵. He was known for taking detailed histories from his patients and for his keen observational skills. al-Razi combined psychological methods and physiological explanations. He used psychotherapy in a primitive but dynamic fashion.²⁶

As the director of the hospital in Baghdad, he established a special section for the treatment of people with mental illness. He treated his patients with respect, care, and empathy. As part of discharge planning, each patient was given a sum of money to help with immediate needs. This was the first recorded reference to psychiatric aftercare and, perhaps, to the existence of a psychiatric consultation service in a general hospital. Al-Razi is also known for his contributions to psychiatric ethics. In his treatise "Upon the Circumstances Which Turn the Head of Most Men from the Reputable Physicians," al-Razi set clear standards for the professional practice of physicians. He advised physicians on how to retain the respect and confidence of their patients. At the same time, he advised patients to evaluate their physicians and demand from them a high level of integrity. He further advised patients to avoid physicians who are actively addicted to wine, a clear recognition of the problem of physician impairment over 1,000 years ago. Al-Razi's words on this subject are no less applicable today.²⁷

Al Razi was a Hakim, an alchemist and a philosopher. In medicine, his contribution was so significant that it can only be compared to that of Ibn Sina. Some of his works in medicine e.g. *Kitabal- Mansoori*, *Al-Hawi*, *Kitab al-Mulooki* and *Kitab al-Judari al- Hasabah* earned everlasting fame. Al-Razi was the first in Islam to write a book based on home medicines (remedial) advisor entitled *Man la Yahduruhu Teb* for the public. In his book *Mnafi' al-Aghthiyyah*, al-Razi followed a pattern that had been introduced earlier by Galen, but in it, al-Razi attempted to correct several errors made by Galen himself. The development of professional pharmacy, as a separate entity from medicine, started in Islam under the patronage

of the early Abbasiyyah caliphs in Baghdad. This first clear-cut separation of the two professions, and the recognition of the independent, academically oriented status of professional pharmacy materialized in the Abbasiyyah capital (Baghdad) and Al Razi was one of the few pharmacists who added very valuable contributions to medicine and pharmacy while most of Europe was still living in the Dark Ages.

Abu Zayd al-Balkhi

Of the many books ascribed to him in the *al-Fihrist* by Ibn al-Nadim, one can note the Excellency of mathematics on certitude in astrology. His *Figures of the Climates* (*Suwar al-aqalim*) consisted chiefly of geographical maps. He also wrote the medical and psychological work, *Masalih al-Abdan wa al-Anfus* (*Sustenance for Body and Soul*).

Mental health and mental illness

In Islamic psychology, the concepts of mental health and 'mental hygiene' were introduced by Abu Zayd al-Balkhi, who often related it to spiritual health. In his *Masalih al-Abdan wa al-Anfus* (*Sustenance for Body and Soul*), he was the first to successfully discuss diseases related to both the body and the soul. He used the term *al-Tibb al-Ruhani* to describe spiritual and psychological health, and the term *Tibb al-Qalb* to describe mental medicine. He criticized many medical doctors in his time for placing too much emphasis on physical illnesses and neglecting the psychological or mental illnesses of patients, and argued that 'since man's construction is from both his soul and his body, therefore, human existence cannot be healthy without the *ishtibak* [interweaving or entangling] of soul and body.' He further argued that 'if the body gets sick, the *nafs* [psyche] loses much of its cognitive and comprehensive ability and fails to enjoy the desirous aspects of life' and that 'if the *nafs* gets sick, the body may also find no joy in life and may eventually develop a physical illness.' Al-Balkhi traced back his ideas on mental health to verses of the Qur'an and hadiths attributed to Muhammad.²⁸

Cognitive and medical psychology and cognitive therapy

Abu Zayd al-Balkhi was the first to differentiate between neurosis and psychosis, and the first to classify neurotic disorders and pioneer cognitive therapy in order to treat each of these classified disorders. He classified neurosis into four emotional disorders: fear and anxiety, anger and aggression, sadness and depression, and obsession. He

further classified three types of depression: normal depression or sadness (huzn), endogenous depression originating from within the body, and reactive clinical depression originating from outside the body. He also wrote that a healthy individual should always keep healthy thoughts and feelings in his mind in the case of unexpected emotional outbursts in the same way drugs and first aid medicine are kept nearby for unexpected physical emergencies. He stated that a balance between the mind and body is required for good health and that an imbalance between the two can cause sickness. Al-Balkhi also introduced the concept of reciprocal inhibition (al-ilaj bi al-did), which was re-introduced over a thousand years later by Joseph Wolpe in 1969.²⁹

Psychophysiology and psychosomatic medicine

The Muslim physician Abu Zayd al-Balkhi was a pioneer of psychotherapy, psychophysiology and psychosomatic medicine. He recognized that the body and the soul can be healthy or sick, or 'balanced or imbalanced', and that mental illness can have both psychological and/or physiological causes. He wrote that imbalance of the body can result in fever, headaches and other physical illnesses, while imbalance of the soul can result in anger, anxiety, sadness and other mental symptoms. He recognized two types of depression: one caused by known reasons such as loss or failure, which can be treated psychologically through both external methods (such as persuasive talking, preaching and advising) and internal methods (such as the 'development of inner thoughts and cognitions which help the person get rid of his depressive condition'); and the other caused by unknown reasons such as a 'sudden affliction of sorrow and distress, which persists all the time, preventing the afflicted person from any physical activity or from showing any happiness or enjoying any of the pleasures' which may be caused by physiological reasons (such as impurity of the blood) and can be treated through physical medicine.²⁸ He also wrote comparisons between physical disorders with mental disorders, and showed how psychosomatic disorders can be caused by certain interactions between them.²⁹

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الدكتور وليد سرحان

مستشار الطب النفساني

رئيس تحرير المجلة العربية للطب النفساني

Email:wsarhan34@gmail.com