

Knowledge and Medical Science

Learning and teaching has been greatly stressed in Qura'n at various events. The very first revelation of Qura'n was to read and learn: *“Read in the name of your Rabb Who created, Created man from a leechlike mass Read your Rabb is the most Gracious Who taught by pen taught man what he knew not. Qur'an- 96:1-5*

“He taught Adam the name of all things than he presented those things to angels and said: “Tell Me the names of these if what you say is true/? “ {Allah did this to show Adam's special qualities of learning and memory. Qur'an-2: 31

The prophet of Islam stressed the learning and acquiring knowledge in his various hadith “Learn from infancy to death (“Hadith- Muslim”) When prisoners of war were taken in to custody by Muslims in the first ever Battle between the Islamic state of Medina and nonbelievers of Makkah at Badger” Prophet Peace be upon him ordered the prisoners of war to educate 10 Muslims of Medina to get freedom without any Ransom (Fidiyah). The famous sayings: “Knowledge is of two types: the knowledge of the religion and the knowledge of the human body”. Therefore studying human body is a source of recognition of Allah's Power and is a source of opening new chapters of universe which Allah has created. In general the knowledge is mainly divided in to two major portions types:

1. Theoretical and applied sciences such as chemistry, physics, medicine and agriculture which should be connected to the experimental method. As narrated by Raf'e Bin Khadeej, in which the Prophet's idea about pollination was disagreed with by some experienced farmers. The prophet P.U.H, then, said: "I am but a human being; you take whatever I command you of your religion. Whatever else I command you of the world's affairs are of my own opinion, I am not but a human being." In the narration of 'Aisha, May Allah be pleased with her, "...you know best of your own life affairs."

2. The knowledge or religion can not be accepted other than divine sources and knowledge related to faith (Aqeeda) such as the knowledge related to the Islamic law, religious observances, values and general conception of the universe, human soul, and the social system can only be obtained from sole divine source.

The study of these humanitarian sciences cannot be approached by the experimental and inductive method, which is used in the study of substance, for two reasons:

1. In studying the relationship between two variables, it is not possible to achieve voluntary control of the factors affecting these variables either by confirmation or change of postulates; while this could be achieved in the case of experimenting on solids, e.g., the effect of heat on iron.
2. The study of these sciences does not yield the same results if repeated in the same way and in the same circumstances, e.g., iron expands each time when subjected to heat. But man is distinguished from other creatures in that he is endowed with the Holy Divine Breath which has granted him will, power and knowledge. Therefore, due to man's free will, nobody can positively predict his behaviour towards certain situations in a scientific manner. Tests on humans are not always reproducible.

The Muslim should not, therefore, receive his codes of behaviour or the ethics of his society from non-Islamic sources. Allah says:

"Therefore shun those who turn away from our Message and desire nothing but the life of this World. That is as far as knowledge will reach them. Verily thy Lord knoweth best those who stray from His Path, and He knoweth best those who receive guidance." (Quran: 53:29- 30). It is the responsibility of a Muslim to seek the correct way of life and to rightly guide others to the righteous way of life: *"Ye are the best of peoples, evolved for mankind, enjoining what is right and forbidding what is wrong, and believing in Allah." (Qur'an- 3:110)*

The concept of "Fardh Kifaya" is addressed to every person for the good of the community as a whole. Every one is competent to perform his tasks according to the best of his abilities and should not Burdon the individual.

"No burden do We place on any soul, but that which it can bear", (Qur'an 7:42) and each one are better suited to cope with that for which each one is created.

Medical education though belong to second group of knowledge but can never is accepted without divine guidelines. The practice of medicine depends upon knowledge acquired not only during the undergraduate medical school days and post graduate residency training but continuous medical and Islamic education and learning. Many eminent Muslim scholars believe that acquiring technical knowledge in the best interest of the society is Farad Kaffaia (An act in Shari'a not essential for every one. If few or some persons from the society do that job it is being accepted by The Lord from the whole society), in this list of technical knowledge essential for the society Medical knowledge is on the top. Therefore acquiring medical knowledge and skills are essential for some members of the society. Rather acquiring medical knowledge and dispersing it in the best interest of humanity is a mean for strengthening one faith (Iman)

"Such is He, the Knower of all things, hidden and open, the Exalted (in Power), the Merciful;- He Who has made everything which He has created most well: He began the creation of man with (nothing more than) clay." Qura'n- 32:6,7

Acquiring medical Knowledge, dispersing it and practicing medicine remained the integral part of the Muslim society.

Imam Al-Shafei said: "I know no nobler science than medicine except the sciences of religion".

Medical education remained the essential part of learning and teaching in the Muslim society from its very early days. Medical Education, despite being a specialty, is but one fiber in a whole mesh founded on the belief in Allah, His oneness and absolute ability, and that He alone is the Creator and Giver of life, knowledge, cure from ailment, death, this world and the hereafter. In planning the making of a Medical Doctor, a prime goal is to make him a living example of all that his Creator loves, free from all that Allah hates, well saturated with the love of Almighty Allah, of people and of knowledge.

There is not a better mean or way to translate the theoretical aspects of medical ethics than to prepare an ethically correct doctor. Medical ethics is not essential part of medical curricula of

most of the universities and medical schools. The learning behaviors and modalities of imparting medical education need certain ethical boundaries. These ethical boundaries are very well drawn by Islamic education system. In the framework of good educational methodologies, certain responsibilities lie on educational system, curriculum, teachers, students, learning environments and pedagogical methodologies. This list I never exhausted and needs continuous up gradation and modification according to the emerging requirements. One must understand that teaching and training of medical student to up bring good Muslim doctors is the prime responsibility of all those who are involved in medical education programmers and their implementation. The knowledge and expertise which a Muslim medical fractional or academician acquires is a bounty of Allah SWT and he/she will be asked about all bounties bestowed to him/her. Imparting obsolete knowledge and training doctor through outmoded methodology and preparing out fashioned doctors is not matching with the demands of taqwa (God fearing). Achieving excellence in academia is the prime responsibility of a Muslim medical teacher. "The reward of every excellence is excellence (Qura'n -55:60)". Inferior quality of medical training and education at under or post graduate level is deviation from Islamic teaching and Islamic way of education and training. In the history of Islam Muslim medical educationists always kept their students with them during their practice hours. They used to learn and acquire the behaviors of their teachers and used to follow what they learn directly from their teachers. At the same time they were researchers and innovators thus contributing directly in to the progress of medical knowledge and expertise.

The teacher as a Role model

The purposes of any education process can never be achieved until, teachers or facilitators imparting such education or training are fully equipped with required knowledge, expertise and attitude required for that particular education process. A medical teacher is fully aware of the fact that he is the responsible role model for his students and graduate. He is not only fully aware but believes in facts that to learn and acquire the state of the art latest educational techniques and pedagogical tools are entirely essential for a medical teacher who believes in Allah with all his powers and forces. The Medical Teacher owes his students the provision of the good example, adequate teaching, sound guidance and continual care in and out of classes and before and after graduation. Medical Education is neither passive nor authoritarian. It aims at sparking mental activity, fostering observation, analysis and reasoning, development of independent thought and

the evolvement of fresh questions. Yet stagnation of medical knowledge is strongly condemned in Islamic etchings. Continuous up gradation and enhancing medical knowledge expertise to provide best medical care to patients can only possible if teacher is well versed with these techniques and capable of efficiently transmitting these techniques and knowledge to his students at under and postgraduate levels. Medical Education has to be protected and purified from every positive activity towards atheism or infidelity yet it picks from all trees without refractoriness or prejudice. Only following the old out dated ideas and methodologies learnt from a teacher years ago and not adopting newest better ideas and practical ascents is strongly condemned in Qura'n "As such we have found our fathers and we will follow on their footsteps". This the reason that Muslim teacher is progressive and forward looking rather than developing an attitude which is only conducive to stagnation and arrest of progress. A Muslim medical teacher is a role model for his students and his life reflects the Islamic behaviors. An attitude "Faith" is remedial, a healer, a conqueror of stress and a procurer of cure. The training of the Doctor should prepare him to bolster "Faith" and avail the patient of its unlimited blessings. This can only be done if doctor during his training acquires sound knowledge of Islam related to medicine and health sciences, comprehensive and update knowledge of Medicine and related art and science of medicating in correct perspectives. There after he must develop the abilities to decide and implement medical knowledge with in the frame of Islamic medical ethics.

The selection criteria in Medical School

The selection and training of medical students should emphasize service within the Islamic system of mutual social support. During selection process the main emphasis should be that we are selecting the leaders of the future. Physicians must be leaders of society whose moral values and attitudes are a role model for the society. A medical institution is aiming to train physicians who must be able to conduct research to extend the frontiers of knowledge. The process of training at under and post graduate level must motivate the future physician to excellence and commitment following the model of the early Muslim physicians. Therefore the selection of the under and postgraduate candidates must be strictly on merit cum aptitude basis. The selection criteria including entry tests and interviews must be designed in accordance to the best Islamic ideological concepts, reflection the best practical examples of Islamic justice and competency.

The selection system must be just and meeting the entire objectives of the medical education described elsewhere in this book.

Curriculum

Competence includes a broad range of knowledge, attitudes, and observable patterns of behaviors which together account for ability to deliver a specified professional service. (McGaghie, et al). Professional competence is the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice to improve the health of individual patient and community (Wilkerson (2002). Competency is a complex set of behaviors built on the components of knowledge, skills, attitude and competence as a personal ability (Capriccio, et al (2002).

Modern Medical curriculum needs frequent evaluation based on continuous audit and performance based efficacy of the curriculum matching with set goals and mission of the institutions where it is applicable. The curriculum must be a source of transmission of competent knowledge and acquiring required skills. Most important component of an effective curriculum is incorporate behavioral changes based on correct understanding of Islamic medical ethical values. This includes not only sound knowledge of medicine and its proper applications but necessarily include ethical issues in Islamic perspectives without which the essence of good curriculum can never be achieved. The curriculum must develop and achieved: Effective communications, performing basic clinical skills, application of Principle from Biomedical, Clinical and Behavioral Sciences and Epidemiology in the Practice of Family Medicine must include management of health problems in the individual, family and community, accessing, critical appraising and managing information, self awareness. self-care and personal development the curriculum must include: *Professional, moral and ethics contexts of Medical practice* Introduction of Medicine, Learning Skill and Information Technology, Humaniora, Professionalism in Medicine, Biomedical ethics, Blood, Immunology and Infection.. It must also cover the pathological and clinical aspects like: Urology, Digestive System and Nutrition, Endocrine's System, Neurosciences and Psychiatric disorders, Ophthalmology, ENT, Skin, Venereal Disease, Reproductive System, Pediatric and Geriatric. More over it must be a source of acquiring essential skills like: Public Health and Environmental health management, management of common emergencies, trauma management with perfect competency and

matching with the recent modalities of trauma management. The curriculum must be a methodology rather than reflection of accumulation of scientific informations and there must be an early student involvement in direct health care delivery system as a part of curriculum and education strategy. Biotechnology and Genetics (cloning, stem-cell) in Islamic perspectives, aspects of Immunology and Infection and how to get with those in Islamic teachings and Islamic ways to prevent HIV-AIDS and other sexually transmitted diseases prevention of other challenging and rapidly increasing disease like cancers, cardiovascular, respiratory, digestive and other diseases. Islamic perspective of prevention cardiovascular disease and Islamic life style, effect of prohibited food, intoxicant, and ingredients on human hormone and behavior, Islamic Perspective in Neurosciences, Islamic Perspective in Obstetrics & Gynecology, Human Reproduction in Islam, Sex Education for Muslim Youth and their parents, Islamic Perspective Geriatrics, Health Promotion through life styles, the Amman Declaration, WHO, Community Health in Islamic Way, Islamic Ruling on Smoking, Islamic Perspective in Environmental Health, Islamic Bioethics. Medical school curricula should comprise the teaching and study of this "Islamic Code of Medical Ethics Medical School curricula should emphasize that medicine is worship both as an approach to belief by contemplation on the signs of God, as well as from the applied aspect by helping Man in distress. Medical school curricula should include the teaching of matters of jurisprudence and worship pertaining to or influenced by various health aspects and problems of Fiqah pertaining to medical practice, research and development.

A curriculum is never comprehensive and up to the mark if it is lacking basic ethical issues pertaining to medical practice with special reference to faith and knowledge of practice of faith. These issues of professional ethics need to be included in basic as well as in clinical sciences. More over a holistic type of curriculum must include the core Islamic references, history of Islamic Medicine and Contribution of Muslim scholars in the research and development of medical knowledge and expertise, Health Guidelines from Qura'n and Sunnah of the Prophet P.U.H. Ethical values specially emphasized in Qura'n and Sunnah of our prophet, rights of sick person in particular and human rights described in Qura'n, Hadith and Islamic literature. Medical School curricula should familiarize the student with the medical and other scientific heritage of the era of Islamic civilization, the factors underlying the rise of Muslim civilization, those that lead to its eclipse, and the way(s) to its revival.

Medical curriculum must be also meeting the requirements of the society as well. The curriculum must address the common problems of the society and must not be adopted as such cooked by the western institutions for their own use. The stimulation for research based on loco-regional issues and issues of the Muslim ummah must be included in the curriculum. Thus at all level of the physician in training the aim of acquisition of values, attitudes, and ethics must be existing. At the national level training both Muslim and non-Muslim physicians within an institution based on Islamic teachings will contribute directly to a moral and ethical change in the national health care delivery system by having a number of ethical health professionals involved in the system.

The Islamic teachings related to the understanding and practice of medicine be the part of concepts rather than patching these teachings to the curriculum and must be directed at supplying conceptual tools that make the scientific study of medicine and its methodology deeper, universal, and objective. The dichotomy that exists in many Muslim institutions of higher learning should be removed such that there are no religious sciences distinct from non-religious ones. The Islamic input should be fully integrated into the medical curriculum and should preferably be taught by the same professors who teach other medical subjects. More over our professionals have to be trained to international standards such that they can work anywhere in the world.

In Muslim countries very little has been done on postgraduate curricula's and training programmers. Though it has been greatly emphasized and stressed in Islam on acquiring knowledge with a continuous pace but little has been done for continuous medical education and personal development of doctors. Our medical institutions must adopt a regular system of training and education with special reference to our loco- regional requirement without marginalizing the international needs and requirements. Training of Muslim doctors for specialization and supper specialization mainly depends upon the western institutions though this scope is also narrow down in the recent world scenario but Muslim countries in spite having some training programmes in their institutions lacking properly designed training programmers with special references of Islamic ethical values. Moreover knowledge duplication and consumption of techniques are so prevalent in our societies that we even do not bother to look in those programmers which are designed in a set of reference for particular reasons, in particular

ethical frame work and in secular environment try to implement in our medical institutions. This ultimately create contradictions and conflicts among our trainees and we have been neither able to prepare Muslim specialists nor non Muslim. Our doctors need to be trained with clarity of mind, sound faith and up to date expertise in their respective fields. It is therefore extremely important to design training programmed for our doctors with inculcation of Islamic ethical values in those programmed. Our continuous medical education programmed is a requirement of a faithful and correct doctor must also include continuous up gradation of knowledge of ethical issues including ethics of human and animal research and new development in medicine.

Pedagogical methodology and learning process in medical institutions: The teaching methodologies and pedagogical instruments in medical schools must be designed in such a fashion that these techniques should reflect the true absences of Islamic ideology and Islamic way of life. Any uncertain ways and means of communication should not be used

Teaching modules must include effective modalities of learning, must not be overwhelmed by authoritative behaviors and students must be provided good chance of self learning and thinking and pondering upon the best creation of Allah that is human being.” *We have indeed created man in the best stature; than we abase him to the lowest of low; except those who believe and do good deeds- for they shall have never ending reward { Qura'n 95:{ 4-6}}*” *“Those who remember Allah while standing, sitting and lying on their sides, and mediate (think and ponder upon) the creation of the heaven and earth, hen say:, Our Rabb You have not created this in vain glory to You Save us from the punishment of fire”. Qura'n: 3{191}*. Our every teaching effort must stimulate our students to think and to ponder upon the creation the best creation its structure, functions purpose of creation and if a person deviate from his/ her actual purpose of creation or misuse his body what type of different disease could develop and progress in his body and soul.

More over we our pedagogical efforts must reflect the evidence based practice of medicine, which the true Islamic medicine. There is no doubt this type of medical practice needs continuous evolution and continuous assessment of its performance. There are several modalities of medical education programmed and none of the teaching or instructive methodology is perfect to produce a wanted doctor meeting the challenges of health. Therefore all sort of curriculums are in continuous evolution and rearrangement in the search of the best possible means of instruction to produce the require doctor. In Islamic teaching there one very important

instruction to all human being and to the doctors in particular “ the rewards of excellence is excellent” One must exhale in his profession in such a way that he/she must try to achieve excellence in his profession. Our prophet said that a Muslim does his job with best possible ways” These instructions enlighten us to secure the best possible means of transmission of our medical knowledge to our successor with excellent ways, which is ammana with us. Weather we adopt the new trends in medical education like integrated teachings, Problem based learning or student centered learning or teaching or adopt our own ways of instructions and teaching modalities based on our own situations, we must achieve excellence and that is the best purpose of our religion.

At the same time our curriculum and teaching tools should not be fragmented sanctioned leading to crowding of minor things and leaving behind or less emphasizing on the practical contents. The specialization and supperspecilization might be a good effort but we need to know that why the people in the west are not satisfied by methodology of instruction and training programmed of the doctors and came up with the ideas of vertical and horizontal integration among different disciplines of medicine, etching by organ systems and using the problem centered approach. One must clearly understand that integration is not just putting two or more discipline together. It is a fundamental philosophical attitude based on a vision and guiding paradigm. Only Islam which has holistic approach to life and universe and every thing in can provide this paradigm. Not knowing this paradigm people of non faith are lacking equilibrium as a secondary manifestation of lack of integration. A lot of human illness is due to lack of balance and equilibrium; for example excessive intake of some food leads to disease just as inadequate intake leads to ill-health. Among different teaching models in practice in the western countries, the disease study model is predominating. The bias to the disease model explains western medicine being more curative than preventive. Since ultimate result of our effort is health and therefore every model must be health oriented and not disease oriented. This attitude developed in the west because of their negative attitude towards health and disease. While illness to a Muslim has it’s positive aspects and can be blessing and reason for expiation of sins. When viewed in a larger context, illness or disease need not always be seen as bad. Falling sick, may save a person from going where he would be hurt more badly or where he could commit a sin. In certain instants alarming signs give indications of tissue damage and can be helpful in managing symptoms. For example pain is an indication of tissue damage whether actual or impending. Fatigue an exhausting

donates to bobby's ways of forcing to the rest when we are over-stressed or overworked without adequate rest. Much of what manifests as disease are the body's attempt to return to natural or normal form. More over Islam asserts that ultimate cure of illness is from Allah. Man can only put his maximum effort to alleviate the suffering with best possible medical art and knowledge.

Islamic medical education aims to: to achieve the supreme purpose of Shari'at described in Islamic scripture like protection of religion, protection of life, procreation, intellect and wealth. Seeing back to medical practice the only profession involved with all five purposes. Therefore medical education must foster to produce such doctor who in their practice will fulfill these purposes with in holistic context. They should be health oriented.

This approach can only be applied to produce a desirable doctor who has a tauhidi (Unity of ALLAH) approach to integration is putting medical knowledge, teaching and practice in larger context to making sure it is harmony as well coordinated with other related medical or non medical phenomena. This purpose of medical education could be achieved by holistic view to medical education including selection students in to the medical school, changing and reforming curriculum emphasizing basic methodological and conceptual issues, involvement of students from their very days of medical schools as were practiced by prominent Muslim physicians in the history Islamic medicine. This was practiced by great Muslim doctors and medical academician Abu Ali Ibne Seena and others. Besides acquiring knowledge and skills medical education imparts attitudes and assumptions. These are part of the non factual learning that students acquire by watching their teachers

A system under control of the medical school should ensure systematic continuing medical education acknowledging the fact that much of what is taught is soon overtaken by new medical discoveries in rapidly changing knowledge and result of research and innovation in medical sciences. Medical education must shift from traditional teaching system to character building along with producing competent doctors who acquire the qualities of IMAN (faith- Tauhid, qadar, tafakkur, Taqwa (God fearing), Amanat: (commitment, sincerity of intention and quality of work), Akhlaq (best moral attitudes) .

Medical education must be research based and should be in the process of continuous evaluation. Islamic approach to medical education provides wide scope of research even for that disease

where we do not know the proper pathophysiology and cure of that disease. As Qura'n denounce blind following and Taqliid, this attitude provide great motivation for research and a Muslim doctor knows that his scope of research is more wider than a non believer knowing the fact that by understanding more signs of Almighty Allah leads to even more iman. A Muslim doctor always stress upon discovering more about Allah's signs to become more near to Him.

The physician of the future will have to change easily between inter related roles Research and innovation, clinical and preventive work and medical education. A doctor is also a social worker without which he can not perform his other functions. All these duties can be performed at the same time by correct time management at the same time. But some doctors spend more time on one aspect than on the other. A medical education system must be designed in such a way that a balance to be created among medical research, education, clinical, preventive and social work. A researcher who is clinician know basic problems his day to day practice is facing and teacher and clinician knows even better these problems and how to put maximum effort to come up with better solutions of these problems based on his studies and research.

Conducive Environments of Medical school/ institution: All efforts and techniques to prepare and training of a Muslim medical professional will be ineffective if the educational environments and academic atmosphere of a medical educational institution and teaching hospitals are not in accordance to Islamic teachings. All medical institutions including teaching hospitals and allied specialties must follow and adopt Islamic ideological values with correct understanding of their application without any reservations. It is impossible to import education in a secular environment and prepare a true Muslim doctor who could acquire all qualities of a good Muslim in general and good Muslim doctor in particular. At least a medical institution must follow the strict policy of sex segregation, avoidance from akhtalat (Mix gathering), Proper Islamic dress code, lay out of the institution, separate civic facilities for male and female staff etc. The campus must reflect Islamic symbols and there must be complete obedience of Allah and His Rasool, respect to Islamic values and norms. All anti Islamic and secular elements donating shirk (associating partners with Allah) must be removed from the premises. Otherwise a severe contradiction may develop among the minds of students and it is against the teachings of Qura'n to say some thing and not do accordingly. *"O' believers! Why do you say something which you do not do? It is very hateful in the sight of Allah that you say something which you do*

not do” Qur’an-61:2-3. There must be a complete harmony and concordance between their sayings, admonitions and practice. Campus of a medical institution should be self-sufficient in all basic needs for training of doctors in Islamic environments and self-contained with most modern and state of the art educational instruments including clinical materials. Clinical and basic sciences must be fully furnished with required equipments so that training could be imparted with up to the mark standard. The Islamic medical is evidence based, modern, ethical and efficient. A Muslim doctor endowers all those required qualities to achieve these goals and educational premises should be conducive for the implementations of Islamic ethical values.

Continuous medical Education (CME)

Medical knowledge ever expanding and medicine is the fastest field sciences where every day several hindered pages are being added to existing medical text. Once The Muslim medical scholars were the source of expansion of medical knowledge and expertise, were playing crucial role in creating and dispersing knowledge. Over the past five four hundred years muslim medical professionals gradually lagged behind and medical practice has become a source to obtain the higher certificates to help them attain a distinguished position in their countries, or provide them with profitable earnings due to their professional practices. This higher certificate is considered the ultimate goal in their pursuits to acquire knowledge in the Muslim countries rather scholarship. Therefore mostly medical professionals in the third world are neither mostly creative nor source of enhancement of medical knowledge and expertise. To remain at the cutting edge of knowledge and expertise it is not essential to acquire those but to contribute in enhancement of knowledge and skills. This can possible if Muslims doctor will turn towards acquiring medical knowledge more persistently and continuously.

This is done in a manner which keeps them in contact with all that is new in their specialties, without being separated or absenting themselves from work to study once again. A good example is of the former USSR, where continuous Medical education was essential for every doctor to keep his licences. For this purpose doctors have been subjected to study periodically in institutes of medical education, for a limited time in the capitals of different states. More recently certain CME hours are essential to maintain the licence in developed countries. If a godless society devolped CME programme for their professionals in the best interest of their society than why a Muslim should not be aware of his religious message which will make him

view things based on the Islamic perspective. Where the purpose of his life on this earth is defined i.e.: “to obey and worship Allah and thus achieving the purpose of being Allah’s Viceroy on earth by colonising it, setting up His religion and perfecting work therein. All this drives the Muslim doctor not to stop with the requirements of graduation, but rather to feel that he is a messenger of the humanity to acquire knowledge, and convey all he can of this knowledge to benefit his Umma. In his pursuits to acquire and increase his knowledge, the Muslim doctor is following the example of the Prophet P.U.H who is taught by the Qura’n how to invoke Allah saying

"O my Lord! Advance me in knowledge." (Qur'an-20:114)

On the authority of Anas who said the Prophet P.U.H said; *"Whoever gets out seeking knowledge is in the cause of Allah until he returns."* The Prophet P.U.H also said; *"If I witness the rise of a new day without being advanced in knowledge that will bring me closer to Allah, I am not blessed of the sunrise of that day."* Continuing medical education is mandatory for every Muslim doctor so, in the cause of increasing his knowledge, he is not at liberty to shun passively such a pursuit. Anas Bin Malik narrated that the Prophet P.U.H said; *"Seeking knowledge is a duty prescribed on every Moslem."*

If duties of religious observance have maximum limits to attain completeness, seeking knowledge, on the other hand, has no limits, extends to man’s entire life. On the authority of Abu Saeed, who said the Prophet P.U.H said; *"The faithful will never be fully satisfied of the good he hears, until his final goal is paradise."*

If knowledge is related to the health and safety of Muslim ummah, as well as preserving the aims of Islamic legislations, as such is the case in medical sciences, then perfecting and becoming advanced in such sciences is more of a priority and a duty. Absenting from CME will harm the Muslims, and Islam never accepts harm, but rather calls every Muslim to seek availing his Muslim/ human fellow. In this contexts acquiring medical knowledge is necessary from Muslim or non Muslim countries. In acquiring such knowledge a Muslim doctor must adhere with the message of Islam and divine guidelines.

The doctor must seek and advance his knowledge until the end of his life. He must be source of inspiration for the coming generations. He must always and persistently explore new and better

diagnostic and therapeutic tools for his time and times to come after. His additions in knowledge and expertise would then be a running charity to be rewarded for, even after his death. As raising the health status of Muslim community he contributes in preservation of peoples' lives in compliance with Allah's command to colonise the universe and thus assisting Muslims in performing religious observances in the comprehensive sense of the concept, both on the individual and communal planes. The concept of Islamic Message should be acknowledged by every scholar of medicine. He has to seek knowledge for the cause of Allah, with no regard to achieving material welfare or distinguished social status, thus keeping his work purely for the sight of Allah. But if he intends to study medicine for the sake of mean ephemeral worldly aims, the Prophet PUH warns him in the Hadith narrated by Abu Huraira; *"Whoever learns a knowledge, that of which Allah's sight would be sought, to seek a worldly benefit, will never find the fragrance of paradise on Doomsday."* On the authority of Abu Huraira who said the Prophet PUH said; *"Whoever learns knowledge for other than Allah or seeks other than Allah, would ascend his place in Fire."*

Acquiring knowledge and practicing medicine should entirely be to please Allah and for the cause of Islam though the by product of this practice could be earning or status but these are not the major aim of a Muslim doctor. And therefore acquiring knowledge raises the degrees of people to the highest ranks of faith, righteous work and Jihad (holy cause). Allah says;

"Allah will raise up, to (suitable) ranks (and degrees), those of you who believe and who have been granted knowledge". (Qur'an -58:11)

It is therefore required to achieve this high rank, all those prerequisites for the scholar of knowledge to fulfil, of which the most important is to have his knowledge intended for the sake of Allah and for the best interest of Islam and Muslim society. He must preserve an outstanding level of knowledge, continuing education is essential, so that the scholar's knowledge will be most useful for the society. Those who adopted the path of knowledge and enlighten will meet the lord as knowledgeable and not as an ignorant. "Seek the knowledge from the laps of mother (infancy) to grave (Death). A Muslim doctor is aware that he has to make a continuous research and enhance his diagnostic and therapeutic skills to find out the treatment of all those incurable conditions as an application of the Prophet's saying; *"No disease is ever created by Allah, but that He created its cure. Some know it and others ignore it."*

At the end one must always pray to Almighty in accordance to Sunnah of our prophet for the (*ilm nafei*) Knowledge which useful in this world and hereafter.

References

1. The Holy Qura'n, English translation by Mohammad Farooq Azam Malik- The Institute of Islamic Knowledge Texas USA.
2. Sahih Al Bukhari, Arabic-English by Dr. Mohammed Mohsin Khan, published by DAR AL ARABIA, Beirut, Lebanon.
3. Emanuel EJ. Changing premed requirements and the medical curriculum. *JAMA*. 2006; 296:1128-1131.
4. Follow L Arnold RM Frader J Teaching clinical ethics in the residency years preparing competent professionals *J Med Philos* 1991: 16, 93 – 112.
5. Forty Hadiths by Dr. Ezzuddin Ibrahim and David Johnson, published by the Holy Koran Publishing House, Beirut, Lebanon.
6. Kuwait Document, Islamic Code of Medical Ethics, International Organization of Islamic Medicine, 1981.
7. Proposed Medical Research Projects, edited by: Abdul Jawad M. As Sawai, Commission on Scientific Signs of Qura'n and Sunnah, 1992.
8. The Sayings of Muhammad PUH, edited and arranged by: A. Suhrawardy, Tarek Press, Cairo, Egypt, 1991.
9. 200 Hadith by Mr. Abdul Rahim Ismail Al Faheem, Makkah Printing Press, 1411H.
10. Khalid s khan Am Coomarasamy A hierarchy of effective teaching and learning to acquire competence in Evidence- based Medicine *BMC Medical education* 2006, 6:9.
11. Ten Cate O, Snell L, MANN k, Vermont Oreinting teaching towards the learning process *Acad Med* 2004, 79: 219-28.
12. M. Siddiqi, "Studies in Arabic and Persian Medical Literature", Calcutta University, Calcutta, 1959, p. 20.
13. SAYRAWAN, Sheikh Abd al Aziz Izz al al Istishifa min al almradhi al Nafsiyyaat wa al Jasadiyyah bi Adiyat al Qur'an wa al hadith Dar al Afaq al Jadidah Beirut No Date
14. SHAHINE YA Arab Contribution to Medicine Longman London 1971

15. GRAZIANI JS Arabic Medicine in the Eleventh Century As Represented in the Works of Ibn Jazalah Hamdard Academy, Hamdard Foundation Karachi 1980
16. MOORE K & AA al Zindani The Developing Human : with Islamic Additions, Correlation Studies with Qur'an and sunnah (3rd edition) WB Saunders Company Philadelphia 1993.
17. NAQIB, al Abd al Rahman Abd al Rahman Al I'daad al Tarbawi wa al Mihani li al Tibiib Inda al Muslimeen .Dar al Fikir al Arab Cairo. 1984.
18. Kasule, Sr., Omar Hasan.: An Islamic Introduction to the Study and Practice of Medicine. Vol 2: Basic Medical Sciences & revelation. (manuscript in preparation). International Islamic University Kuala Lumpur 1998
19. Kasule, Sr., Omar Hasan.: An Islamic Introduction to the Study and Practice of Medicine. Vol 3: Medicine and Jurispudence. (manuscript in preparation). International Islamic University Kuala Lumpur 1998 Badri, Malik. The AIDS Crisis: An Islamic Socio-cultural Perspective. International Institute of Islamic Thought and Civilisation. Kuala Lumpur 1997
20. Bakar, Osman. Philosophy of Islamic Medicine and Its Relevance to the Modern World. Secretariat for Islamic Philosophy and Science. Penang. 1996
21. Al Bar, Muhammad Ali. [al Adwah Bayn al Tiobb wa Hadith al Mustafa] Contagion Between Medicine and the Hadith of the Prophet. 4th edition. Al Dar al Saudia li al Nashr wa al Tawzi'i. Jeddah 1981/1401