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When Islam and natural medicine come together: Exploring prophetic medicine in Poland*

Abstract. This study explores the revival and application of prophetic medicine (*aṭ-ṭibb al-nabawī*) among the small and diverse Muslim community in Poland. Prophetic medicine, rooted in early Islamic traditions and influenced by pre-Islamic folk practices, is examined through interviews and social media analysis to understand its reception and practice in a non-Muslim European context. The research identifies two pathways for prophetic medicine in Poland: as a distinct Islamic practice and as a sub-branch of Eastern/natural medicine. The findings reveal that while the prevalence of prophetic medicine is marginal, it holds potential for growth. The study highlights the holistic approach of prophetic medicine, which integrates physical and spiritual health, and contrasts it with Western biomedical practices. The article contributes to the understanding of how traditional Islamic practices can adapt and find relevance in contemporary European settings.

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Keywords: prophetic medicine, aṭ-ṭibb al-nabawī, Poland, Islamic medicine, natural medicine, holistic health, Muslim community

Introduction

Prophetic medicine (*aṭ-ṭibb al-nabawī*) is a concept that had been developed in the early days of Islam and is nowadays experiencing a revival. Its scope and recognition depend on the geographical location, local traditions and individual interpretations both in so-called Muslim majority countries and among Muslims who live as minorities in the West. Just like many other Islamic concepts or practices that have their roots in history and have been brought back to light, it is unambiguous and falls as an interpretative category into the tradition vs. modernity clash, or Eastern vs. Western medicine clash (Mateo Dieste, 2019).

Poland is a country located between the East and the West, or – as some claim – a semi-periphery (Bobako, 2018). The local Muslim community is very small, yet diverse. In this setting we were willing to explore to what extent prophetic medicine is known among Polish Muslims, and how it is applied, received and narrated. Based on that we show possible pathways for prophetic medicine to enter a non-Muslim European country with a tiny Muslim community that does not exceed 0,5% of the whole population (Piela et al., 2022).

The article starts with a literature review on the origins of prophetic medicine and its essentials, and discourses around this type of medicine. The intention is to provide a background on how prophetic medicine works and how it is framed as a politicised concept. The next part of the article briefly presents the diversity of the Muslim community in Poland. The prevalence of prophetic medicine in Poland is marginal. However, our data shows it might gain some popularity. In the course of this exploratory study we identified two pathways for prophetic medicine: as a distinctive Islamic medicine, or as a sub-branch of so-called "Eastern"/natural medicine. We explore both of these pathways in the article.

Data and methodology

This article uses two types of data: interviews and social media analysis. The interviews provide insights to how prophetic medicine is practiced, while social media – how it is narrated. Both data sources complement each other.

We conducted four semi-structured interviews between May and August 2022, each lasting approximately an hour. All of our respondents are women –

two converted to Islam and two were born Muslims, three are Sunni and one is Shia. Moreover, one of the authors practices prophetic medicine herself – mostly as a diet – and thus has insider knowledge. Each of the interviewees apply some practices of prophetic medicine in their diet or for healing purposes, and one of them is a trained hijāma professional.

An overview of several Polish Islamic Facebook groups provided us with insights on whether and how Polish Muslims discuss prophetic medicine. We searched for relevant information, notes or memes to see whether this concept is known and popular.

Before we present the data, one significant remark should be made. The Polish Islamic community is very small, but is a close network. Many Muslims know each other from their online activities, and some from local mosques or joint events. At the same time Islam and Muslims are still considered an interesting research topic, which results in a handful of "duty Muslims" who participate in a number of studies as respondents or participants (Piela et al., 2022). This makes the participants of any study on Polish Islam particularly vulnerable, as their identities can easily be discovered by other Muslims. For that reasons we decided to keep the information about our respondents to a minimum, and provide only summarised demographical data above. The same applies to the social media groups – we will only refer to the data in there rather than quote selected users, or provide detailed (or even general) information about them, so as to protect their anonymity.

The origins of prophetic medicine

The Prophet's medicine (*aṭ-ṭibb al-nabawī*) is a name used for medical literature, popular in the Islamic world since the middle age when it was created, as a response to the encounter with the Greek medicine practiced by Christian physicians in 7th century Syria, conquered by Muslim armies.

As its popularity rose among Muslims, there was a growing need to add spiritual Islamic values, especially that for Islamic scholars the Greek medicine practiced by non-Muslims was connected with pagan ideas like Hellenistic philosophy (Perho, 1995), as it was based not only on Galen (medicine)[1] and Dioscorides (pharmacology), but also on Aristotle's works (philosophy of

[1] The Galenic system (Hippocrates medicine systematised by Galen) is based on the theory of four elements (*arkān*): fire, air, water and earth, their mixture was called 'temperament' (*mizāğ*). The balanced temperament depends on harmonious proportions of the elements, illnesses were seen as humoral imbalance, caused by either qualitative or quantitative changes in the humours. Body organs were created from the 'daughters of the elements' (*banāt al-arkān*). The body consists of three types of spirits: natural, animal and psychic (Perho, 1995).

medicine). However, according to Islamic scholars, the doctors' knowledge in medicine was not perfect, because they did not have special guidance and wisdom given by God to His prophets, particularly to the Prophet Muḥammad. In reality there were not enough Prophet sayings about medicine (traditionally gathered in the ḥadīṯ collections called *Kitāb al-marḍā* ("The book of the sick") or *Kitāb aṭ-ṭibb* ("The book of medicine") to create a whole medical system.

> The hadith related to medicine are not only few, but also usually late, and frequently cryptic or contradictory. It is quite possible that some of these pious traditions do transmit Muḥammad's opinions about various aspects of Arab practices during his lifetime, but they certainly multiplied greatly after his death (Dols, 1992, p. 139).

A special characteristic of the Prophet's medicine was the significant influence of the pre-Islamic folk medicine (evil spirits, witchcraft, evil eye). It raised some critics, like Ibn Ḫaldūn, who claimed that prophetic medicine was a "native Arab folk medicine" and "not a part of the divine revelation [...]", although he admits the physical benefit of psychological well-being created by religious faith (Dols, 1992, p. 154), and there were also some attempts to remove these non-Islamic elements from prophetic medicine, but using charms and amulets was common practice in medicine in the time when this kind of literature was written (Perho, 1995).

This kind of literature developed gradually from modest collections of *ḥadīṯs* to complete medical treatises. Abū ʿAbd Allāh Muḥammad ibn Aḥmad ibn ʿUṯmān a aḏ-Ḏahabī (d. 1348/748 H), Ǧalāl al-Dīn Abū al-Faḍl ʿAbd al-Raḥmān ibn Abī Bakr as-Suyūṭī (d. 1505/911 H), Šams ad-Dīn Abū ʿAbd Allāh Muḥammad ibn Abī Bakr ibn Ayyūb az-Zurʿī l-Dimašqī al-Ḥanbalī Ibn Qayyim al- Ǧawziyya (d. 1350/751 H), Šams ad-Dīn Abū ʿAbd Allāh Muḥammad Ibn Mufliḥ al-Maqdisī al-Qāqūrī (d. 1362/763 H) known as Ibn Mufliḥ represent the latest stage of this development. Their books contained etiology, prevention and treatment of illnesses based within the system of prophetic medicine. The medicine of the Prophet was a combination of humoral concepts of Greco-Islamic medicine with religious content (*ḥadīṯ* of the Prophet Muḥammad).

The ideal physician-philosopher should take care not only of the body of the patient but also of their soul and psychical wellbeing, and help them lead a decent life. It became urgent to "subordinate elements of Galenic medicine to their religiously orientated medicine" ethics that a doctor could also look after salvation of the patient's soul.

> The process was quite similar to comparable intellectual conflicts in other areas caused by the introduction of the Greek philosophical and scientific tradition, and

the eventual accommodation of foreign tradition within Islamic culture (Dols, 1992, p. 248).

There are different opinions about the aim of creating such type of medicine in literature. For J. Christoph Bürgel (1997, pp. 54–60) prophetic medicine was an expression of the objection of Muslim scholars to the Galenic suspected medicine, "the Islamic dethronement of Galen [...] in favour of Bedouin quackery and superstition sanctified by religion". Manfred Ullmann (1998, p. 5) saw prophetic medicine as a compilation of "popular practices, magic and superstitions that emerged in the process of competition with the Greco-Islamic tradition of medicine". According to him the knowledge based on Revelation should challenge the medicine of pagan origins. Fazlur Rahman (1987) opposes the views of Bürgel and Ullmann, who see prophetic medicine as competitive to Galenic medicine, but stresses its religious dimension. He links prevention, curing and popularising medicine and a healthy lifestyle with acts of piety. According to Michael W. Dols (1992, p. 248) prophetic medicine can be seen as a kind of Islamic "domestication" of scientific knowledge, giving its medicine religious authority, a "response to it in the form of an appropriation." Irmeli Perho (1995) holds a similar opinion and points out on frequent references to Galen, Hippocrates and Ibn Sīnā in the prophetic medicine works. Philippe Grenon (2017) sees prophetic medicine in a broader perspective and does not make any sharp distinction between scientific, materialistic Greek knowledge and the spiritual Islamic perspective. According to him Galenic medicine was not atheistic, and even the naturalistic and "rational" aspect of Greek medicine were seen by Muslims as a way of glorifying God through His creation, whereby also the mythological origins of Hippocratic medicine could be interpreted as a form of revelation and this way more connected with Islam. Arabs received Greek medicine from Christian Syriac translators who "depaganised" it.

Essentials of prophetic medicine

Prophetic medicine originated as a reaction to the Galean medical practices that had been deemed as not Islamic (Koenig, Al Shohaib, 2014, p. 10). The essential difference between Greek and prophetic medicine was the attitude towards the meaning of illness and health. According to Galenic medicine it was possible to have good mental and physical health and a perfect life in this world by avoiding disturbances and leading a balanced lifestyle. In prophetic medicine illnesses and suffering are trials sent by God, which believers should pass with patience and faith. The most important is salvation of the soul. It does not mean that Muslims can neglect their health, as taking care of one's

body was an important duty, but "eternal happiness in the hereafter" and salvation of the soul was the ultimate goal. The Prophet's medicine was aimed at "common people to instruct them about Islamic norms in questions of health and illness" (Perho, 1995, p. 146).

Prophetic medicine puts a lot of attention on prophylaxis and a healthy lifestyle, including diet. As in the humoral theory, where the balance of body elements was essential in preserving good health, one should assure a proper amount of rest, sleep, physical exercise, air inhaled and especially moderation in eating and drinking. Treatment based on restoring the balance, in the first place by diet, is the most important intervention. In cases when diet is not enough, medicaments can be used in the form of simple drugs (but not compound ones; Perho, 1995).

The humoral imbalance can be also treated by increasing a secretion of substances from the body. The methods are venesection (*faṣd*), cupping (*ḥiǧāma*) and cautery (*kayy*) – burning with a hot iron or needle. While there are no disagreements regarding the recommendation of cupping and the several *ḥadīṯ* mention this method, there is some unclarity about venesection and cautery.

Spiritual medicaments (prayer, patience, fast, incantations) play a very important role not only in reaching spiritual well-being, but also in curing physical illnesses, as the spiritual wellbeing motivates "the body to fight against the illness" (Perho, 1995, p. 111). Physical activity during prayer is also perceived as beneficial for physical health. One of the most popular and widely used spiritual cures is ruqya (incantations of Quranic verses).

The medicine treaties also underline the importance of choosing the best doctor according to their competences, where a trained physician should have professional skill, good imagination and also a proper religious attitude. There are also discussions about the responsibility of a doctor. The perfect physician should treat the patient as a unity of interdependent body and soul, and be interested in healing their soul and in its salvation. Islamic medicine not only has ambitions to provide guidance on curing physical illnesses, but also responds to "the spiritual needs of believers" (Perho, 1995, p. 147).

Discourse about prophetic medicine

Aṭ-ṭibb al-nabawī is a complex phenomenon that can be framed in positive and normative terms. From the former perspective it is considered to be a valid medical approach that can cure or prevent different kinds of illnesses, while in the latter case the religious character of the prophetic medicine is stressed. Consequently, if Prophet Muḥammad himself had advocated for these medical

practices, then they have to have healing powers. At the same time its religious character makes *aṭ-ṭibb al-nabawī* politicised knowledge.

Most studies regarding the medical use of prophetic medicine refer to *ḥiğāma* – i.e. wet-cupping. *Ḥiğāma* combines cupping and scarification applied to chosen parts of the body (between scalpula and the back of the neck, vertext of the head lumbosacral region and oart of the calf) during a specific period in the Islamic calendar – *ğumādā ăṯ-ṯānia* (Again et al., 2016, p. 3). For better results *ḥiğāma* should be accompanied by fasting (Babiano Fernández, Fernández Ciudad, 2015). By definition *ḥiğāma* combines physical and spiritual activity. *Ḥiğāma* is used to treat pain, inflamatory conditions such as scianca, gout, rheumatoid arthritis, swelling, etc. (Akhtar et al., 2017); there is also some preliminary evidence that *ḥiğāma* might support female factor infertility treatment (Abduljabbar et al., 2016), as well as diabetes mellitus (Sheikh, 2016).

Ḥiğāma has been researched through the application of Western models of knowledge generation and biomedicine testing paradigms. Available studies focus on the benefits (Again et al., 2016) and disadvantages or undesired effects of *ḥiğāma* (Nisar, 2018; Uddin et al., 2016), such as induction of bullous pemphigoid (Azizpour et al., 2018). However, many of the studies in support of the positive effects of *ḥiğāma* have serious limitations, which raises doubts about the effectiveness of wet cupping (AlBedah et al., 2011). According to Abdullah AlBedah et al. (2011, p. 15) most of the evidence in support of using *ḥiğāma* was gathered in the so called Global South, whereas studies that indicate adverse effects were conducted in the West.

Some authors go even further and claim that prophetic medicinal foodstuff and drinks have preventive and curing features, such as anticancer and antiangiogenic agents in cancer treatment (El Sayed et al., 2013), as well as with treating depression (Wan, Zaki, 2021) and oxidate stress in thalassemia children (El-Shanshory et al., 2018). They usually indicate the Islamic – and thus godly – character of these prescriptions, showing their superiority over the means and methods of medical treatment developed in the West (e.g. *ḥiğāma* vs. traditional cupping therapy; El Sayed et al., 2013). Some Muslim psychologists advocate Islamic psychology (Rassool, 2019) or Traditional Islamically Integrated Psychotherapy (Keshavarzi, 2021, p. 2) in a similar manner.

At the same time it seems that prophetic medicine is downplayed in the Middle East and North Africa for its link to folklore, and is juxtaposed against the Western-styled medical care. Traditional knowledge is therefore not included in study programmes at medical universities (with some exceptions – Hamouda et al., 2019) and practiced outside of the medical world by traditional healers. In this case *aṭ-ṭibb al-nabawī* is linked not only to Islam, but also to black magic, which emphasises the question about its rational and

evidence-based character associated with medical sciences (El-Wakil, 2011, p. 7). Also in South Asia *aṭ-ṭibb al-nabawī* is downplayed. There is space for traditional medicine called Unani, but the role and influences of prophetic medicine are diminished for their Islamic character of Unani (Schmidt Stiedenroth, 2019).

Aṭ-ṭibb al-nabawī has been used across Europe since the Middle Ages (Ostafin, 2003). However, some of its elements – especially *ḥiǧāma* – gained interest in recent decades in the West with the appearance of established businesses and certified programmes that offer knowledge and skills to practice wet cupping (Sajid, 2016; Mayberry, 2017). At the same time prophetic medicine fits in well with integrative or alternative medicine, thus catering to people looking for an alternative to the medical care offered at medical facilities. It is also practiced by some migrants from Middle East and North Africa (Kluger, Fraslin, 2017) as a tool that offers Muslims in Europe living (and healing) according to the way of the Prophet.

Two approaches to prophetic medicine in Poland

Poland is one of the EU countries with the lowest proportion of Muslims. In fact Muslims constitute approximately 0.5% of the whole population, with the size of the community estimated at a total of 30–40 thousand. Despite the relatively small size, the Polish Islamic community is very diverse, with no ethnic group dominating over the others. The Tatars – historically the autochthonous Muslims of Poland – are considered to be Polish Muslims and perceived favourably by mainstream society (Pędziwiatr, 2011). Muslims of migrant origin come from a number of countries from the Middle East, Africa and Central Asia – some coming to Poland with the first wave of immigration back in the Socialist era within the framework of cooperation with "friendly regimes" from Africa or the Middle East, such as Iraq or Syria; some came later after the collapse of the Eastern bloc as entrepreneurs or students; and there is a noticeable community of Chechens who took refuge in Poland during the first Chechen war. Moreover, there is a growing number of Polish converts to Islam who live in Poland, but many who have also migrated to Western Europe (mostly to the United Kingdom).

Located at the crossroads of the East and West, Poland could benefit from both the routes that lead to prophetic medicine: from Muslim migrants from the East and from Muslims who live in the West; another path, which is often the source of learning about Islam by Polish converts (Piela et al., 2022), is through relevant literature. Our respondents' experiences with prophetic

medicine reflect all these types of encounters. Barbara, who lives at the Eastern border of Poland, became familiar with *aṭ-ṭibb al-nabawī* through the Chechens. Marcela's road to prophetic medicine was through her interest in natural medicine and searching for links to the way of the Prophet in relevant literature. Grażyna and Agata learnt about *aṭ-ṭibb al-nabawī* from literature in English while living in the UK. Moreover, Grażyna became a certified *ḥiğāma* practitioner in Poland by completing a *ḥiğāma* training in the UK. She does not have many customers in Poland, and when there is interest it is mostly from Muslim men (but she does not serve them). From time to time she organises "*ḥiğāma* parties" for a small number of Muslim women, where they get together for *ḥiğāma* therapy sessions and spend time with each other while undergoing the procedure.

Prophetic medicine does not seems to be popular in Poland. Grażyna has on average just one customer per month. In fact she does not even advertise her practice as Islamic, but as natural medicine to attract non-Muslim clients. Links to Islam would only discourage non-Muslims from her services, not only due to the high levels of Islamophobia in Poland (Piela, 2020), but also due to the unfamiliarity with Islamic practices by mainstream society. Unlike Western European societies, Poland is homogenous from an ethnic and religious perspective, and the vast majority of Poles have never met a Muslim (CBOS, 2019).

Despite limited exposure to prophetic medicine in Poland, one can distinguish two types of discourse pertaining to this kind of medical practice among Polish Muslims. While they are not mutually exclusive, one focuses on presenting prophetic medicine as a religiously compliant type of natural medicine that resembles Polish folk medicine, and the other one focuses on the Islamic dimension of prophetic medicine that makes it superior to the dominant biomedical approaches. Both will be elaborated in the subsequent sections.

Prophetic medicine as a medicine of the East

Prophetic medicine is embedded in the Islamic approach to health and illness, which significantly differs from the Western bio-medical one. The holistic approach conceptualises the human body (*ğism*) and spirit (*rūḥ*) as being in a symbiotic relationship (Mitha, 2020). *Aṭ-ṭibb al-nabawī* perceives illnesses of the body and illnesses of the soul (or heart) and the role of emotions in preserving mental and physical health. Keeping emotional balance is also important – uncontrolled and intemperate emotions (such as anger, worry, passionate love, grief, envy) can cause physical illnesses.

Our interviewees stressed the Eastern provenience of prophetic medicine and juxtaposed it against the Western one. In the Western bio-medical approach the body and soul are separated, while medicine is perceived as a remedy for the body. The Eastern approach is natural and treats human beings in a holistic manner. Marcela's interest in prophetic medicine came from her interest in natural medicine. She is not fond of chemicals in general and does to trust pharmaceutical companies. She saw prophetic medicine as an extension of natural medicine that offered her new types of remedies. Agata uses medicine occasionally, only if there is no other way. In the case of an illness she always starts with natural remedies, as she does not like taking pills. Both believe that prophetic medicine and natural medicine have many synergies and are confident users. At the same time, they also express only limited trust to Western medicine.

Barbara, who has contacts with Chechens living in Poland, pointed at the discrepancy between the Eastern and Western model. According to her people who grew up with the holistic concept of healthcare are less likely to trust medical doctors, just as many Westerners doubt in natural medicine – regardless of whether it is prophetic or a different type. That is why the only thing they seem to accept is henna painting and dyeing, but this is for esthetical reasons rather than health-related.

Interestingly, Agata noticed that the same division between traditional and modern medicine can be observed in Poland. She can recall from her childhood drinking chamomile, cupping, or using goose fat in the case of illness. These practices are hardly used by Poles any more, considered a part of so called "folk medicine"[2] studied by ethnographers and historians rather than by medical staff for their usability (Penkala-Gawęcka, 1995). In fact most contemporary articles and studies in Polish dedicated to traditional or folk medicine cover non-European countries (mostly East Asian) rather than Polish folk medicine.

These traditional practices are hardly known by the younger generation. Grażyna recalls a case she had with her son at school some time ago. His young teacher took him to the nurse at school in order to see whether he was being abused at home. The nurse explained that the child underwent a cupping therapy. The teacher was young and most probably had never seen what cupping looks like. According to Grażyna this case exemplifies the low awareness of traditional or folk medicine in Poland.

[2] The distinction between the East and the West echoes the dilemmas faced by Muslims of migrant origin related to their mental health. According to a study by Simon Dein, Malcolm Alexander and A. David Napier (2008) the old generation of Bangladeshis who live in London attribute their misfortunes and weak mental health to *ǧinn*, whereas the younger ones want to be perceived as modern and therefore critically speak about these traditional beliefs.

At the same time Barbara and Agata observe medicalisation of the Polish society, which is visible in the use of OTC (over-the-counter) medicine and dietary supplements without professional advice. While medicalisation could also include seeking unconventional therapies (Wójta-Kempa, 2017), Eastern medicine is rarely chosen. In fact, the Polish society is one of the most eager to reach for "pharmacological" remedies in Europe in terms of medicine use (Buczek, Poławski, 2011).

Agata, Barbara, Grażyna and Marcela treat prophetic medicine as natural healthcare. They mostly use black seed oil, dates, honey, while Barbara and Grażyna also practice *ḥiğāma*. For them prophetic medicine means a healthy lifestyle that originates from Islam, and is natural. All except for Marcela are aware of the benefits and disadvantages of both types of medicine – prophetic and "regular." As Grażyna explains:

> Looking holistically at prophetic medicine I can see some shortcomings. These shortcomings could not have been avoided due to the development of medicine at that time. So I think you should use it, but if there is anything better then you should use that. Anyway, one *ḥadīṯ* scholar said that if there is something better, then use it. So I will not stop creep with fire, as we have now other methods.

Living the way of the Prophet

Josep Lluís Mateo Dieste (2019, p. 100) perceives the revival of prophetic medicine as a part of "transnational processes of the dissemination and construction of Islamic medicine". This kind of Islamic medicine is different from the one that had emerged in the so called Islamic Golden Age from the Greco-Roman influences, pre-Islamic practices of Arab nomads, prophetic and spiritual medicine (Koenig, Al Shohaib, 2014, p. 10). Contemporary prophetic medicine has its roots in the *ḥadīṯ* and pre-Islamic medical tradition (Wessel, 2019).

Prophetic medicine – often referred to as "Islamic medicine" – is advocated on a variety of Islamic forums in Polish that promote Islam in general and different aspects of living according to Islam. The topics include a healthy lifestyle, diet, properties of some natural products recommended in prophetic medicine, ruqya healing for mental and emotional problems like depression, and other topics like, for instance, choosing the best position while sleeping. These kinds of discussion and advise are labelled as "Islamic medicine" or "Islamic natural medicine" rather than „prophetic medicine." A lot of information on Islamic medicine is translated from English sources (which can be extrapolated from English transliteration of Arabic terms). The information is often provided as memes dedicated to prophetic food like zam zam water, grapes, mushrooms,

olive oil, cucumber, honey, milk, pumpkin, melon, onion, garlic, lentils, figs, dates, pomegranate, bananas, olives, vinegar, Nigella, vinegar, truffle, cheese, and barley.

Some group members discuss prophetic medicine, but do not call it such. They only quote ḥadīṯ or relevant verses from the Qur'ān to provide medical advice. Knowledge from Muslim religious sources is often juxtaposed against contemporary medical knowledge to prove that Prophet Muḥammad was able to predict what medical scientists will discover, and that he was ahead of his times. One example is a *ḥadīṯ* dedicated to the way one should sleep. According to the *ḥadīṯ* Muslims should not sleep in prone position as "it is a way of lying that Allāh hates" or "for this is how the people of Hell lie." The woman who quoted the *ḥadīṯ* added that she was searching for explanation why sleeping on one's stomach is discouraged in Islam and found out that in this position the spine drops and puts pressure on internal organs. Thus, the medical explanation serves as proof of Prophet Muḥammad's wisdom.[3] Another user quotes a "scientific miracle" from the Qur'ān – the instructions Maryam received from God while giving birth to ʿĪsā (19:22–19:26) resemble methods used in hospitals nowadays to facilitate childbirth. Thus, according to her, the revelation in the Qur'ān preceded contemporary scholarly knowledge by 14 centuries.[4]

Some other users advocate using *ḥiǧāma* as a remedy that works better than conventional medicine for physical and spiritual reasons. Medical reasons are that most diseases occur due to poor blood and oxygen supply to organs and tissues – as one user claims. Spiritual reasons are linked to the practice of ruqya – the art of reciting passages from the Qur'ān while performing cupping. Ruqya is another concept rooted in prophetic medicine that has been re-introduced as a part of re-Islamisation. According to Mateo Dieste (2019, p. 101–102) it serves to strengthen the significance of Islam through daily practices. It is not just a reproduction of techniques used in the early ages of Islam, but a remake that is adapted to social needs. The group members underline that the beneficial effect of *ḥiǧāma* does not rely on medical activities but in the first place on spiritual value and divine provenance by comparing cupping and *ḥiǧāma*:

> You can buy cups at any pharmacy, but remember that *ḥiǧāma* is not just about placing cups. *Ḥiǧāma* differs from ordinary cupping therapy in that you must be-

[3] Similar claims have been also made in scientific literature related to Islamic medicine, according to which sleeping scientists should consult religious literature to improve their studies (e.g. BaHammam, 2011).

[4] Also this part of Islamic medicine has been elaborated in academic papers (e.g. Hosseini Karnamy, Asghari Velujayi, 2016; Nazri et al., 2016).

lieve it will help you because it was recommended by the Prophet, peace be upon him, and communicated in the *ḥadīṯ*.

This statement brings in an important point about prophetic medicine. As G. Hussein Rassool (2019) claims, only those who have ʾīmān can benefit from prophetic medicine as an immanent part of medical treatment is ruqya (recitation of Qurʾānic verses; however, the term can also be translated as 'exorcism' as ruqya is also used to expel a *ǧinn*). In other words *aṭ-ṭibb al-nabawī* is a medicine only for believers.

Limitations

There are two limitations of our study. The first is a limited number of studies on the reception of prophetic medicine. Most of them are located in a Muslim majority or Western context. Through our research we aimed to explore the concept of prophetic medicine in a semi-peripheral country located in Central and Eastern Europe – thus, neither Muslim nor Western. According to our knowledge this is the only study on the prevalence of the prophetic medicine in Central and Eastern Europe. The second is the limited amount of data. Despite a vast personal network of contacts to Muslims who live in Poland, we managed to reach out to four persons who practice prophetic medicine. That is why our study is only exploratory.

Conclusions

Poland is a country located between the East and the West, and at the same time it is far from significant Islamic influences. This makes the knowledge of prophetic medicine limited and fragmented but at the same time differentiated. Prophetic medicine came to Poland from abroad – both from the East through Muslim migrants from Russia and Central Asia, and from the West – through the exposure to English literature on prophetic medicine and its practical application in the UK. Whatever the origin, *aṭ-ṭibb al-nabawī* in Poland is a recent phenomenon.

Prophetic medicine could find a niche in Poland due to strong medicalisation of the mainstream society and prevalence of medical self-care. However, it seems that medicalisation is reflected mostly in the consumption of pharmacological products rather than turning to natural means of health care. As one of our interviewees summarised: "cupping is a natural procedure in the East, just like swallowing paracetamol tablets is in Poland." In a similar manner

Polish traditional or folk medicine is neglected in terms of medical knowledge and perceived as a cultural artifact.

Both approaches to prophetic medicine that we have identified and analysed present this type of medicine as an alternative to 'regular' methods, but they place emphasis on its different aspects. The first approach considers *aṭ-ṭibb al-nabawī* as a part of Eastern medicine – one that is natural and linked to a healthy lifestyle. The second approach focuses on the Islamic – i.e. religious – character of prophetic medicine, proving its superiority over Western medical science. Both approaches consider the holistic character of Islamic health care, unlike the Western approach with a distinction between the body and the spirit. They also stress the religious dimension of prophetic medicine. In the first narrative it is autotelic, whereas in the second one it seems to be a mean that should not only diminish Western medicine, but also serve as a foundation for establishing and developing Islamic medicine.

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