

Medical Error Among Arabs: Consequences and Penalties

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Abstract:

Medical errors have historically posed challenges to physicians, particularly in Arab civilizations before and after Islam. This study examines how different civilizations addressed medical malpractice. The research employs a historical-analytical approach, analyzing legal and ethical responses across various eras.

Findings indicate that Pharaonic Egypt exempted priests from penalties, while non-priests faced execution. Mesopotamian laws varied punishments, including amputation. Maghreb civilizations imposed no sanctions due to the sacred status of temple physicians. Pre-Islamic Arabs attributed errors to fate. Islam later established legal accountability, introducing ethical and legal consequences for medical errors.

Keywords: *Medical error, execution, Hammurabi, temples, magic, superstition, healer.*

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- INTRODUCTION

Medicine is one of the fundamental necessities for human well-being, as it enables individuals to restore their health when afflicted by illness. However, treatment can sometimes become a source of harm due to medical errors committed by physicians. Such errors have been prevalent throughout history, from ancient times to the present day, leading to the establishment of punitive measures and legal frameworks aimed at holding negligent physicians accountable. The nature of these sanctions has varied across the different civilizations and religions that have governed the Arab world. This study aims to explore the disciplinary actions and legal consequences imposed on Arab physicians for medical errors.

1. Definition of Medicine and Medical Error

1.1 Definition of Medicine

Linguistically, "medicine" refers to the treatment of both the body and the mind. A *mutatabbib* is someone who practices medicine, while a *tabib* is a skilled and knowledgeable practitioner. The term *ṭibb* denotes expertise, as in the expression "so-and-so is *ṭibb* in something," meaning that the person possesses deep knowledge of it. A *mustatabbib* refers to an individual practicing medicine without sufficient expertise, whereas a *fahl ṭibb* describes a highly skilled and proficient physician¹. From a technical standpoint, Ibn Sina (Avicenna) defines medicine as the science that examines the condition of the human body with regard to health and disease. Its primary objective is twofold: to preserve health—a concept now recognized as preventive medicine—and to restore lost health, corresponding to curative medicine². The origins of medical practice are subject to debate. Some believe that it emerged as a necessity for survival, others attribute it to divine revelation, while still others view it as the result of human experimentation and ingenuity. Early practitioners identified diseases and treatments through trial and observation.³ Amidst this debate, it remains clear that medicine has always been intrinsically linked to human existence. Since pain and suffering are inherent aspects of life,

the pursuit of remedies has accompanied humanity throughout history, making medicine as ancient as human life itself.⁴

1.2. Definition of Medical Error:

The concept of error is defined in various ways. Some scholars view it as a breach of a prior obligation, while others broaden the definition to include breaches of contracts, legal provisions, or ethical principles, considering it a key element of civil liability. The Civil Code defines error as "any act committed by a person through their own fault that causes harm to others," thereby obligating the perpetrator to provide compensation. In medical practice, error refers to a physician's deviation from accepted scientific and professional standards. This deviation may result from haste, negligence, lack of caution, or failure to utilize available medical tools, making the physician legally liable for any harm caused.⁵

2. Medical Error Among Arabs Before Islam

2.1. Medical Error in Pharaonic Civilization

The ancient Egyptians highly valued medicine, making Egypt one of the pioneering civilizations in this field. However, medical practices during the Pharaonic era were deeply influenced by magic, superstition, and incantations, reflecting the close connection between medicine and religious beliefs in ancient Egyptian society⁶. In ancient Egypt, medical practice was exclusively the domain of priests, who were responsible for diagnosing illnesses, treating patients, and preparing medicinal remedies⁷. These priest-physicians, known as *Sinu*, developed and administered their treatments within temple-based pharmaceutical workshops, where medicine was deeply intertwined with religious rituals and practices⁸. The ancient Egyptians believed that illness and death were caused by demonic possession or divine punishment for sins. As a result, their treatments relied more on spells and amulets than on medicinal substances or preventive care⁹. Despite recognizing the limited effectiveness and inherent uncertainty of such treatments, the Egyptians continued to

rely on them¹⁰. Since disease was attributed to supernatural forces, the priests and sorcerers responsible for treatment were not held accountable for medical errors. Priests occupied a privileged position within the Pharaonic hierarchy, and the belief that illness was a form of divine retribution further shielded them from punishment¹¹. However, if a physician (who was not a priest) made an error in treatment or surgery, they were severely punished, often facing execution, particularly if the error resulted from their own actions rather than from magical interventions¹². To avoid such consequences, Egyptian physicians were required to strictly adhere to prescribed medical texts. If they deviated from the sacred medical manuscripts and committed an error in treatment, they faced the death penalty¹³. No definitive legal documents have survived detailing medical punishments in ancient Egypt. However, based on secondary sources, physicians were required to inform patients about the likelihood of success in treatment, disclosing whether they could treat an illness, might be able to treat it, or could successfully cure it¹⁴. This practice aimed to ensure accountability and to protect physicians from severe legal consequences. To improve medical practices and reduce errors, the Egyptians established medical schools within temples and introduced specialization, leading to the emergence of fields such as ophthalmology and surgery, which contributed significantly to the advancement of ancient Egyptian medicine¹⁵.

2.2. Medical Error in Mesopotamian Civilization

The practice of medicine in Mesopotamian civilization closely resembled that of Pharaonic Egypt, as it was primarily conducted by priests and sorcerers. Ancient Mesopotamians believed that diseases were manifestations of divine wrath, and their literature contains numerous myths and epic tales illustrating this belief¹⁶. One such myth, *The Tragedy of Atrahasis*, recounts the god Anu declaring to the other deities: *"The noise of humankind has become too loud and has deprived me of sleep. Let the goddess Namtar raise her hand to unleash diseases upon them so that their numbers may decrease. Let*

*the god of fate, Mantar, remove them from the earth like a storm... diseases, plagues, and evil spirits shall sweep them away until the scent of death fills the city".*¹⁷ These myths reinforced the belief that illness was a punishment from the gods or the result of demonic possession, and that healing could only be achieved through priestly intervention. The priests and sorcerers who practiced medicine were considered intermediaries between the gods and humanity, and their role in treatment was regarded as sacred¹⁸. Healing rituals involved the use of incantations and amulets to expel evil spirits believed to have afflicted a person as a result of their sins¹⁹. Special wings within temples were dedicated to these healing practices, reinforcing the notion that recovery depended on divine favor and supplication²⁰. As in Pharaonic Egypt, Mesopotamian priests and sorcerers were not held accountable for medical errors, as the failure to cure a patient was attributed to the gods rather than to human negligence²¹. However, as medicine gradually moved beyond the exclusive control of priests, specialized physicians began to emerge, including eye doctors and surgeons²². With this shift, new laws and regulations were introduced, including provisions specifically addressing medical errors, particularly those arising from surgical procedures²³. With the rise of King Hammurabi²⁴, Significant reforms were implemented across various sectors, including medicine. Hammurabi sought to regulate the medical profession by establishing fixed wages for physicians and introducing legal provisions to address medical malpractice²⁵. The Code of Hammurabi, which consists of 282 articles, contains laws on medical practice in articles 215 to 223. These provisions outline both the fees that physicians could charge and the penalties for malpractice²⁶.

Among the punishments for medical errors under Hammurabi's Code was the following: if a patient died under a surgeon's scalpel, or if a surgical mistake occurred, severe penalties were imposed²⁷, the physician's hand would be amputated²⁸. If a doctor caused a free patient to go blind, they faced amputation of their hand. However, if the victim was a slave, the physician was only required to compensate

the owner by providing another slave²⁹. If a doctor's mistake resulted in severe injury³⁰, they were required to pay compensation to the patient³¹.

While these laws appeared strict, their enforcement was inconsistent. For instance, hand amputation was often substituted with financial penalties after appeals or negotiations³². During the Assyrian period, despite the rigid legal system, medical malpractice was treated with leniency³³. Physicians who committed errors were expected to seek divine forgiveness rather than face legal repercussions³⁴. Like earlier civilizations, Assyrians continued to view priests as the primary healers³⁵, and priest-physicians were exempt from punishment, reinforcing their privileged position in society³⁶.

2.3. Medical Error in Ancient Maghreb

The Ancient Maghreb witnessed the succession of various civilizations, both indigenous and foreign, including the Phoenician, Carthaginian, and Numidian civilizations, followed by later colonizers such as the Romans and Vandals³⁷. Despite the abundance of historical records, little documentation exists regarding medicine and physician accountability in the region. Major works have focused primarily on political and cultural aspects, often neglecting medical systems. Accordingly, this study relies on comparative analysis and historical inference, particularly through the examination of religious practices³⁸. Inference is drawn particularly through the examination of religious practices. Religious beliefs in the Ancient Maghreb were deeply influenced by Middle Eastern civilizations, such as the Phoenicians, who introduced their beliefs and cultural traditions to the region. These influences were reciprocal, as Egyptians also adopted certain Maghrebian spiritual customs³⁹. Similar to Egyptian and Mesopotamian civilizations, religious practices in the Ancient Maghreb involved priestly intermediaries who served as mediators between humans and deities⁴⁰. This suggests that healing was primarily performed by priests within temples, with medical treatment deeply intertwined with religious rituals⁴¹. The inhabitants of the

region relied on magic, amulets, tattoos, and incantations as integral elements of their medical practices⁴².

2.4. Medical Error in the Pre-Islamic Era

In pre-Islamic Arabia, medicine was regarded as a necessity for human survival and was primarily practiced by soothsayers (*‘arrāfūn*). Poetic references highlight this role, such as the verse by ‘Urwa ibn Hizām, who addressed a healer by saying: *"So I said to the soothsayer of al-Yamāmah, heal me, for if you can cure me, then indeed you are a true physician."*⁴³ Treatments mainly consisted of herbal medicines and natural remedies⁴⁴. However, the prevailing belief among pre-Islamic Arabs was that diseases and death were controlled by fate and time rather than human actions. This notion is reflected in the Qur’anic verse: *"And they say, ‘There is nothing but our worldly life; we die and live, and nothing destroys us except time.’ Yet they have no knowledge of this; they merely speculate."*⁴⁵. They also believed that human actions were predetermined, with no personal responsibility for their illnesses. As a result, physicians were not held accountable for medical errors, since diseases and misfortunes were attributed to destiny and the forces of time⁴⁶. With the advent of Islam, the foundations of medicine shifted from superstition and sorcery to a science-based approach with clear medical principles and treatment methods⁴⁷.

3. Medical Error in the Islamic Era

3.1. Medical Error During the Time of Prophet Muhammad (PBUH) and the Rightly Guided Caliphs

With the advent of Islam, which spread across the world, great emphasis was placed on human health and well-being. Islam encouraged the pursuit of medical treatment and the use of medicines, as reflected in several Prophetic traditions (*Ahadith*). Prophet Muhammad (PBUH) explicitly urged Muslims to seek medical treatment, affirming that for every illness, there is a cure. This is evident in the following narrations:

In several Prophetic traditions (*Ahadith*), Prophet Muhammad (PBUH) emphasized the importance of seeking medical treatment. He affirmed that for every illness, there is a cure. Muslim reports from Jabir ibn Abdullah that the Prophet (PBUH) said: *"For every disease, there is a cure. If the correct remedy is applied, the disease will be healed by the will of Allah."* Similarly, both Al-Bukhari and Muslim report from Abu Huraira that the Prophet (PBUH) stated: *"Allah has not sent down a disease except that He has also sent down its cure."* Furthermore, Imam Ahmad narrates in his *Musnad* that when a group of Bedouins asked the Prophet (PBUH) if they should seek medical treatment, he replied: *"Yes, for Allah has not created a disease without also creating its cure—except for one disease, old age."*⁴⁸.

These *hadiths* emphasize Islam's encouragement of medicine as a legitimate means of healing, distinct from superstition. Islam shifted medical practice toward a scientific approach, recognizing diseases as treatable and highlighting the vital role of physicians. Prophet Muhammad (PBUH) prohibited seeking treatment from sorcerers and soothsayers, condemning such practices as misguided. The Prophet Muhammad (PBUH) strongly condemned practices associated with sorcery and soothsaying. He stated: *"The astrologer is a soothsayer, the soothsayer is a sorcerer, and the sorcerer is a disbeliever."* Jundub (RA) narrated that the punishment for a sorcerer is execution by the sword. Additionally, the Prophet (PBUH) warned: *"Whoever wears an amulet has committed shirk (associating partners with Allah)."*⁴⁹ Another hadith further emphasizes that *"Whoever goes to a soothsayer or a sorcerer and believes in what they say has disbelieved in what was revealed to Muhammad (PBUH)."* These statements highlight the serious stance Islam takes against such practices.⁵⁰

Furthermore, in *Sahih Muslim*, the Prophet (PBUH) warned:

These statements highlight the Islamic rejection of pre-Islamic healing practices, which often relied on magic, sorcery, and unscientific rituals. Accountability for Medical Errors in Islam the Prophet (PBUH) took a strict stance against those who falsely claimed medical expertise, as medicine was no longer viewed as a mystical art

but rather as a scientific discipline requiring knowledge and skill. He held fraudulent practitioners accountable, stating: *"Whoever practices medicine without proper knowledge is liable for any harm caused."*⁵¹ This implies that anyone who practiced medicine without adequate expertise was considered a deceiver, akin to a sorcerer, and had no place among Muslims—especially if their actions resulted in the death of a patient⁵².

Following these teachings, Muslims actively translated medical texts from Greek, Indian, and other civilizations, leading to significant advancements in Islamic medical knowledge. The prophet (PBUH) distinguished between:

- Skilled and competent physicians, who were not punished for honest mistakes made in good faith.
- Unqualified individuals, who faced legal consequences if their actions harmed patients⁵³.

Thus, Islam established a legal and ethical framework for medical practice, eliminating superstition while promoting scientific and evidence-based medicine.

3.2. Medical Error During the Umayyad and Abbasid Caliphates

All Islamic states that succeeded one another in governing the Muslim world based their approach to medical accountability on the teachings of Prophet Muhammad (PBUH). Both the Umayyad and Abbasid dynasties upheld the Prophet's guidance on medical ethics, emphasizing that intentional medical errors were considered sinful and carried significant religious consequences⁵⁴. During the Umayyad Caliphate, medical practice was primarily based on the traditions inherited from early Muslim physicians, particularly those from the time of the Prophet Muhammad (PBUH). The Umayyads relied on traditional remedies, including those endorsed by the Prophet, while also advancing their medical knowledge through the translation and study of Greek medical texts. In terms of medical accountability, Islamic law held that a physician who committed an error was considered sinful, especially if the mistake was intentional⁵⁵.

However, no formal legal punishment was imposed beyond moral and religious condemnation unless the physician had acted with deliberate negligence. During the Abbasid Caliphate, medical knowledge expanded significantly. Unlike the Umayyads, who primarily relied on inherited knowledge, the Abbasids took active steps to institutionalize medicine by establishing universities dedicated to medical studies, building hospitals to provide structured healthcare, and encouraging the production of scholarly works on medicine and medical ethics. To address medical errors and professional standards, the Abbasid state issued several decrees⁵⁶.

One of the most significant measures was the requirement that no one could practice medicine without first undergoing formal training under the supervision of an experienced physician. This requirement was fully institutionalized during the reign of Caliph Al-Muqtadir Billah, making medical licensing mandatory throughout the Abbasid Caliphate⁵⁷.

As a result, scholars began to document medical guidelines and professional standards. Notable works included:

- "Al-Adwiyah Al-Mufradah" (Simple Medicines) by Ishaq ibn Hunayn.
- "Sharh Kitab Al-Masa'il fi Al-Tibb" (A Commentary on the Book of Medical Issues) by Abdul Rahman ibn Abi Sadiq⁵⁸.

Additionally, the Hisbah system—an Islamic institution overseeing market regulations and ethical standards—was expanded to monitor the medical profession. Inspectors (Muhtasibs) were assigned to:

- Ensure medical practitioners were properly qualified.
- Protect patients from fraudulent healers and quack doctors⁵⁹.
- Enforce compliance with Islamic medical ethics⁶⁰.

Despite these advancements, the general public did not always hold physicians responsible for errors. Many believed that illness and death were predestined by God, and that physicians could not alter divine fate. This belief was reflected in Abbasid poetry, such as:

- Ibn Nubata Al-Sa'di, who wrote: *"A doctor administers medicine when we are sick, but can medicine heal death?"*
- Another poet remarked: *"We choose a doctor, but can he delay What fate has already decreed?"*⁶¹.
- A similar sentiment was expressed: *"The doctor, despite his knowledge and remedies, cannot repel what destiny has ordained." "Why does the healer himself die of illness, Though he once cured others with certainty?"*⁶².

However, some poets criticized medical errors, acknowledging their dangers. Ibn Al-Rumi, after experiencing a misdiagnosis by the physician Ismail, lamented:

- *"The doctor made a fatal mistake in treating me, Yet no remedy could reverse the damage."*
- *"People blame the doctor for his mistake, But in truth, his error was fate itself."*⁶³

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3.3. Medicine During the Mamluk⁶⁴ and Ottoman⁶⁵ Eras

During the Mamluk period, medicine flourished with the emergence of specialized physicians and the widespread publication of medical texts. The Mamluks expanded their interest beyond physical medicine to include spiritual and psychological healing⁶⁶. However, available historical sources do not provide explicit references to medical errors and their consequences. Based on the general framework of Islamic medical ethics, it is likely that no strict punitive laws were enforced against physicians for errors, apart from religious and moral accountability. The prevailing belief was that a negligent doctor would be held accountable before God, in accordance with the Prophetic teachings previously discussed. In their commitment to safeguarding public health, the Mamluk state implemented strict regulations governing the practice of medicine, aiming to prevent any harm that might result from medical errors or other forms of malpractice. Among these measures was the imposition of specific requirements that physicians had to meet, most notably: "...to master, with full understanding, the sciences that prevent errors

in treatment... not to act arbitrarily in a way that would lead to mistakes...". Physicians were required to undergo examinations conducted by the Chief Physician to verify their competence before being granted a license to practice. Following the examination, the Chief Physician would inform the *muhtasib* (the official appointed by the Mamluk Sultan to oversee public morality and professional practices) of the results. Successful candidates were permitted to practice medicine, while those who failed were prohibited from doing so. Furthermore, the Chief Physician maintained continuous oversight by subjecting physicians to periodic reexaminations to ensure the preservation of their skills, as he viewed the lives of people as a sacred trust. Physicians were also required to take an oath before the *muhtasib*, pledging to perform their duties competently and to consult more experienced physicians when unable to treat certain illnesses. As for the penalties for medical errors during the Mamluk period, they primarily involved the physician's dismissal from office, bearing moral guilt, and ultimately facing divine punishment from Allah Almighty for the harm caused to the patient⁶⁷.

Similarly, during the Ottoman Caliphate, medical practices followed the traditions of previous Islamic dynasties. No distinct legal provisions concerning medical malpractice were documented in historical sources. If formal punishments for medical errors had been implemented, they would likely have been mentioned in historical records. However, scattered references suggest that the Ottoman state took measures to regulate healthcare quality, with inspectors in some hospitals monitoring patient care conditions.⁶⁸ By the 19th century, debates arose on whether physicians should be prosecuted for medical errors. Some argued that legal action could harm public trust in healthcare and damage doctors' reputations, deterring future professionals. Islamic jurists agreed that physicians should only face legal consequences if their mistakes caused significant harm, balancing patient rights with maintaining trust in the medical profession.⁶⁹ Despite the death of the daughter of Ottoman Sultan Abdul Hamid II due to the physicians' inability to treat her, the Sultan

did not take any action against them and merely accepted the outcome as fate. Similarly, as mentioned by his daughter, Princess Ayşe Osmanoglu, in her memoirs regarding her father's illness: "...an illness resulting from the improper treatment of a small abscess...", she did not mention any penalties imposed on the physician. This suggests that there were no punitive laws in place at that time to hold physicians accountable for medical errors.⁷⁰

3.4. Medical Error in Arab States in the Contemporary Era

After independence, Arab nations focused on national development, including reforms in healthcare. Laws were introduced to protect patient rights, ensure accountability for medical errors, and define the responsibilities of physicians. In Algeria, 2009 saw over 200 cases of medical errors recorded, with 150 legal cases filed regarding malpractice.⁷¹

In the contemporary period, most Arab countries have reached a consensus regarding the type of sanction imposed on physicians who commit medical errors resulting in harm to their patients. In Egypt, for example, the physician is legally required to compensate the patient for damages caused by a medical error, as stipulated in Article 163 of the Civil Code. The amount of compensation varies depending on the severity of the harm: if the harm is minor, the compensation awarded is relatively modest. Moreover, the physician may be exempt from liability if the damage is attributable to external factors beyond his control, such as an unforeseen accident, force majeure, contributory negligence by the injured party, or fault committed by a third party, in accordance with Article 165.⁷²

Under Libyan law, a physician who causes harm to a patient through medical error due to negligence or recklessness is summoned to court and prosecuted. If the error is proven, the court may order the physician to compensate the patient. However, the physician is exempted from liability if the harm results from external factors, described as "...exceptional circumstances that cannot be avoided even by the most skilled physicians..."⁷³.

Similarly, in Kuwait, physicians who cause harm to their patients due to medical errors are required to provide compensation in accordance with Article 293 of the Kuwaiti Civil Code, which states: "...unless the physician proves that the harm suffered by the patient, or the failure or delay in fulfilling his obligations, was due to an external cause beyond his control..."⁷⁴. Likewise, in Jordan, physicians are obligated to compensate patients if the harm they suffered was the result of a medical error. The amount of compensation varies depending on the extent of the damage: if the harm is minor, the compensation is relatively modest. Physicians are exempt from liability if the harm is found to have resulted from other external factors⁷⁵.

- CONCLUSION

Throughout ancient civilizations, medicine was considered a sacred profession, practiced exclusively by priests. These societies attributed illness to supernatural forces, and consequently, priest-physicians were not held accountable for medical errors. However, as medicine evolved and moved beyond priestly control, societies enforced stricter laws against medical malpractice. In early legal codes, punishments for errors included hand amputation or execution.

With the rise of Islam, medical ethics became more structured. Prophet Muhammad (PBUH) established a balanced system where:

- Unqualified individuals falsely claiming to be physicians were held accountable for any harm they caused.
- Competent and skilled physicians who made unintentional mistakes were not punished.

This principle of medical accountability continued across various Islamic states, including the Umayyad, Abbasid, Mamluk, and Ottoman periods. During the Mamluk period, the penalty imposed on physicians for medical errors consisted of dismissal from office and the expectation of divine punishment from Allah Almighty.

In the modern era, Arab states have formally codified medical

liability laws, ensuring that medical malpractice is properly regulated. From the foregoing, it can be concluded that most Arab countries today have agreed on a unified approach to medical errors, primarily requiring physicians to compensate patients for harm caused by their mistakes. However, physicians are exempt from this obligation if the damage is proven to result from external factors beyond their control. This codification has played a crucial role in reducing medical errors, particularly given the rapid expansion of healthcare services.

- Endnotes:

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- ²¹ Raghib al-Serjani: Previous reference, p. 14.

- ²² See: Abdel Hakim al-Dhunun (1992-2000): *Al-Tashri'āt al-Bābilīyyah* (Babylonian Legislation), 1st edition, Alaa al-Din Publications, Damascus, p. 32. Hammurabi describes himself saying: "...I am Hammurabi, the complete king ... as the god Marduk entrusted to me the reins of the people's rule, and I did not waste time ... I took care of the sacred places for all the people, removed oppression from their shoulders, and illuminated the way for them...". See also: Horst Klinckle (1990): *Hammurabi al-Bābilī wa 'Asruḥ* (Babylonian Hammurabi and His Era), translated by Muhammad Wahid Khayata, 1st edition, Al-Manarah Publishing, Translation, and Studies, Syria, p. 14..
- ²³ Will Durant: Previous reference, p. 252.
- ²⁴ Horst Klinckle (1990): Previous reference, pp. 185, 236-237. See also: Kha'zāl al-Majdi (1998): *Bukhūr al-Ālihah* (Incense of the Gods), Previous reference, p. 165. See also: Abdel Hakim al-Dhunun (1992-2000): Previous reference, p. 69. See also: Unknown (2007): *Shari'ah Hammurabi*, translated by Mahmoud al-Amin, 1st edition, Al-Warraq Publishing, London, p. 60. See also: Osama Sirās (1993): *Shari'ah Hammurabi wa Asl al-Tashri' fī al-Sharq al-Qadīm* (The Code of Hammurabi and the Origin of Legislation in the Ancient East), 2nd edition, Alaa al-Din Publishing, Damascus, pp. 37-38.
- ²⁵ Horst Klinckle: Previous reference, p. 237.
- ²⁶ Raghib al-Serjani: Previous reference, p. 14.
- ²⁷ Horst Klinckle: Previous reference, p. 237.
- ²⁸ Will Durant: Previous reference, p. 252.
- ²⁹ Horst Klinckle: Previous reference, p. 237. See also: Will Durant: Previous reference, p. 252.
- ³⁰ Will Durant: Previous reference, p. 252.
- ³¹ Septimio Muscani: Previous reference, p. 101.
- ³² Fareha Kamal: Previous reference, p. 4.
- ³³ Septimio Muscani: Previous reference, pp. 77-78.
- ³⁴ Phoenicia or the Phoenicians: This is the name given by the Greeks to the region extending from the Gulf of Alexandretta in the north to the Sinai Desert in the south. To the west, it is bordered by the western Lebanon mountains, and to the east, it is bordered by the Mediterranean Sea. These Phoenicians migrated from their homeland and moved towards the Maghreb region, deciding to settle there. They had economic and social reasons, among other factors, for this migration. For more details, see: Mohammad Saghir Ghanem (1982): *Al-Tawassu' al-Finīqī fī Gharbī al-Baḥr al-Mutawassiṭ* (Phoenician Expansion in the Western Mediterranean), 2nd edition, University Publications, Algeria, University Foundation for Studies and Publications, Lebanon, pp. 12-41. They established several cities along the Mediterranean coast, such as Tipaza, Tangiers, and others. For more details, see: Abd al-Malik Slataniyyah (no date): *Al-Mustawṭanāt al-Finīqīyah-Būnīyah fī al-Ḥawḍ al-Gharbī li al-Mutawassiṭ* (Phoenician-Punic Settlements in the Western Mediterranean Basin), Doctoral Thesis, Department of History and Archaeology, Mentouri University, Constantine, pp. 181-182-167.

- ³⁵ Mohammad al-‘Arabi Aqqoun (2008): *Al-Iqtisād wa al-Mujtama’ fī al-Shamāl al-Ifriqī* (Economy and Society in North Africa), University Publications, Algeria, p. 245.
- ³⁶ Abd al-Rahman Khlefah (2007-2008): *Al-Diyānāt al-Wathaniyyah al-Maghāribīyah al-Qadīmah* (Ancient Maghreb Pagan Religions: From Genesis to the Fall of Carthage 146 BC), Master's Thesis, Mentouri University, Constantine, pp. 235-157.
- ³⁷ Sulaiman ibn al-Saadi (2008-2009): *‘Alāqāt Miṣr bi al-Maghrib al-Qadīm* (Relations Between Egypt and Ancient Maghreb from the Dawn of History to the 7th Century BC), Master's Thesis, Mentouri University, Constantine, pp. 5-6. See also: Abd al-Rahman Khlefah: Previous reference, pp. 115-198. See also: Charles-André Julien (2011): *Tārīkh Ifrīqīyah al-Shamālīyah* (History of North Africa: Tunisia, Algeria, Morocco from the Beginning to the Islamic Conquest 647 AD), translated by Muhammad Mazali and Bashir bin Salama, Tawalth Cultural Foundation, p. 66.
- ³⁸ Mohammad al-Hadi Harsh (no date): *Al-Tārīkh al-Maghāribī* (Political and Civilizational History of the Maghreb), Algerian Printing Foundation, Algeria, p. 148.
- ³⁹ Abd al-Rahman Khlefah: Previous reference, pp. 38-44.
- ⁴⁰ Raghib al-Serjani: Previous reference, p. 26.
- ⁴¹ *Ibid.*, p. 26.
- ⁴² Verse 24 of Surah Al-Jathiya.
- ⁴³ Raghib al-Serjani: Previous reference, p. 28. According to Ibn Kathir's interpretation of this verse, it explains that the people of ignorance believed that the night or day would be their doom, and that after some time, they would inevitably return to life again. He relied on a hadith from the Prophet Muhammad (PBUH) in this regard. For more details, see: Ibn Kathir Ismail ibn Umar (no date): *Tafsīr al-Qur’ān al-‘Azīm* (Exegesis of the Great Qur'an), Dar al-Kitāb al-Ḥadīth, Vol. 4, p. 1895.
- ⁴⁴ Raghib al-Serjani: Previous reference, p. 28.
- ⁴⁵ Shams al-Dīn Abī ‘Abd Allāh Muhammad ibn al-Qayyim al-Jawziyyah (2006): *Al-Ṭibb al-Nabawī* (Prophetic Medicine), edited by Shu'ayb al-Arna'ūt and ‘Abd al-Qādir al-Arna'ūt, Al-Risalah Publishers, Beirut, Lebanon, 1428H/2006M, p. 19.
- ⁴⁶ Abd al-Latif Muwaffaq al-Din al-Baghdadi (1994): *Al-Ṭibb min al-Kitāb wa al-Sunnah* (Medicine from the Qur'an and Sunnah), edited by Abdul-Mu'ti Amin Qalaji, 3rd edition, Dar al-Ma'rifah, Beirut, Lebanon, p. 21.
- ⁴⁷ Abu al-Nu'aym Ahmad ibn Abdullah al-Asfahani (1996): *Hilyat al-Awliya' wa Ṭabaqāt al-Aṣfiyā'* (The Ornament of the Saints and the Classes of the Righteous), Al-Khanji Library, Cairo, Dar al-Fikr, Beirut, Lebanon, Vol. 5, p. 104.
- ⁴⁸ Raghib al-Serjani: Previous reference, p. 30.
- ⁴⁹ Muwaffaq al-Din Abd al-Latif al-Baghdadi: Previous reference, p. 20.
- ⁵⁰ Ahmad Isa (no date): *Tārīkh al-Nabāt 'Ind al-‘Arab* (History of Plants Among the Arabs), Cairo, p. 51. See also: Raghib al-Serjani: Previous reference, p. 30.

- ⁵¹ Raghib al-Serjani: Previous reference, pp. 32-33.
- ⁵² Ibid., p. 33.
- ⁵³ Islam Subhi al-Mazni (2006): *Rawā'i' Tārīkh al-Ṭibb wa al-Ṭabībīn al-Muslimīn* (Masterpieces of the History of Medicine and Muslim Doctors), Dar al-Kutub al-ʿIlmiyyah, Beirut, Lebanon, p. 34.
- ⁵⁴ Ibid., p. 34.
- ⁵⁵ Ni'mah Allah Haykal and Ilyas Meliha (1991): *Mawsū'at 'Ulamā' al-Ṭibb ma'a I'nāyah Khāṣṣah bi al-'Ulamā' al-'Arab* (Encyclopedia of Medical Scholars with Special Attention to Arab Doctors), 1st edition, Dar al-Kutub al-ʿIlmiyyah, Beirut, Lebanon, pp. 88-183.
- ⁵⁶ Al-Ḥisbah: In the administrative system, it was used to refer to state accounts, the office of accounting and inheritance, and the diwan for the inspection of weights and measures. Later, it became specifically associated with the police and was referred to as the police in markets and public morality, tasked with monitoring the social, economic, and cultural life, or anything related to public welfare. For more details, see: Musa Laqbal (1971): *Al-Ḥisbah al-Madhabīyyah fī Bilād al-Maghrib al-'Arabī* (The Religious Police in the Maghreb: Its Origins and Development), 1st edition, National Company for Publishing and Distribution, Algeria, December, pp. 20-21.
- ⁵⁷ Fareha Kamal: Previous reference, p. 3.
- ⁵⁸ For more details, see: Muhammad Abd al-Rahim (no date): *Al-Ṭibb fī al-Shi'r al-'Arabī* (Medicine in Arabic Poetry), 1st edition, Dar al-Ratib al-Jāmi'iyyah, Beirut, Lebanon, pp. 13-21.
- ⁵⁹ Ibid., p. 21.
- ⁶⁰ Ahmad Hassan Sayh (2002): *Diwān Ibn al-Rūmī* (The Diwan of Ibn al-Rūmī), 3rd edition, Dar al-Kutub al-ʿIlmiyyah, Beirut, Lebanon, Vol. 2, p. 146.
- ⁶¹ Raghib al-Serjani: Previous reference, p. 38
- ⁶² Ibid., p. 33.
- ⁶³ Ahmad Awdat and Others: *Tārīkh al-Maghūl wa al-Mamlūkīn* (History of the Mongols and Mamluks), Previous reference, p. 172.
- ⁶⁴ Mamluk Era: The Mamluks were slaves, or military captives, brought from Europe or Asia and sold in the markets of their family. For more details, see: Ahmad Awdat and Others (1990): *Tārīkh al-Maghūl wa al-Mamlūkīn min al-Qarn al-Sābi' al-Hijrī ḥattā al-Qarn al-Thālith 'Ashar Hijrī* (History of the Mongols and Mamluks from the 7th Century AH to the 13th Century AH), Dar al-Kindī, Irbid, pp. 61-70-132. See also: Muhammad Suhail Taqoush (1997): *Tārīkh al-Mamlūkīn fī Miṣr wa al-Shām* (History of the Mamluks in Egypt and the Levant, 648H/1250M-933H/1517M), 1st edition, Dar al-Nafa'is, Cairo, pp. 7-9.
- ⁶⁵ The Ottoman state traces its origins to Osman ibn Ertuğrul, who is considered its true founder. During the reign of Sultan Selim I, the Ottoman state evolved into an Islamic Caliphate. For further details, see: Mohamed Farid Bek Al-Muhami (1981), *Tārīkh al-Dawla al-'Aliyya al-'Uthmāniyya* (The History of the Sublime Ottoman State), edited by Ihsan Haqqi, 1st edition, Dar Al-Nafaes, Beirut, 1401H/1981AD, pp. 116-195.

- ⁶⁶ Sayyid Muhammad Sayyid Mahmoud (2007): *Tārīkh al-Dawlah al-‘Uthmāniyyah* (The History of the Ottoman State: Its Establishment and Prosperity), according to contemporary Ottom studies, 1st edition, Library of Al-Adab, Cairo, p. 442.
- ⁶⁷ Abu Atiya Abu Huwaishil (2012), *Al-Aḥwāl al-Ṣiḥḥiyya wa al-Ṭibbiyya fī Miṣr wa Bilād al-Shām fī al-‘Aṣr al-Mamlūkī (648H–923H / 1250AD–1517AD)* (The Health and Medical Conditions in Egypt and the Levant During the Mamluk Era (648H–923H / 1250AD–1517AD)), Master's Thesis, Faculty of Arts, Department of History and Archaeology, Islamic University of Gaza, pp. 204–207–213–214–215–218–219.
- ⁶⁸ Fareha Kamal: Previous reference, p. 4.
- ⁶⁹ Waznah Sayki (2011): *Ithbāt al-Khaṭā’ al-Ṭibbī amām al-Qāḍī al-Madani* (Proving Medical Error Before the Civil Judge), Master's Thesis, Faculty of Law and Political Science, Mouloud Mammeri University, Tizi Ouzou, pp. 56.
- ⁷⁰ Al-Amira Aisha Othman Oglu (1991), *Walidi Sultan Abdul Hamid al-Thani* (My Father Sultan Abdul Hamid II) (Translated into Arabic by Saleh Saadawi Saleh), Dar Al-Bashir, Amman, Jordan, 1411H/1991AD, pp. 97–106.
- ⁷¹ ⁷¹ Muhammad Ramadan Shaush, al-Ghawthi bin Hamdan (2011): *Irshād al-Ḥā’ir ilā Athār Adabā’ al-Jazā’ir* (Guidance for the Confused to the Works of Algerian Writers), Dar al-Basa’ir, Algeria, Vol. 2.
- ⁷² Hayam Ismail Abdel Fattah Al-Sahmawi (2023), *Khaṭā’ Marīḍ Faqr al-Dam al-Manjali wa Atharuhu ‘alā In ‘iqād al-Mas’ūliyya al-Ṭibbiyya: Dirāsa Muqārana* (The Error of a Sick Cell Anemia Patient and Its Impact on the Establishment of Medical Liability: A Comparative Study), *Majallat al-Sharī’a wa al-Qānūn*, Kulliyyat al-Sharī’a wa al-Qānūn, Jāmi‘at al-Azhar, al-Qāhira, issue 42, p. 1145. Yunzaru ilā: Hashem Mahmoud Al-Ali (2021), *Ṭabī‘at al-Mas’ūliyya al-Madanīyya li-l-Ṭabīb* (The Nature of Civil Liability of the Doctor), Civil Law Department, Faculty of Law, University of Mansoura, pp. 40–41, footnote no. 3, p. 3. Yunzaru ilā: Mohammed Hassan Mansour (n.d.), *Al-Mas’ūliyya al-Ṭibbiyya al-Madanīyya li-Kulli min al-Aṭibbā’ al-Jarrāḥīn, Aṭibbā’ al-Asnān, al-Ṣayādila, al-Mustashfayāt al-‘Amma wa al-Khāṣṣa, wa al-Mumarriḍīn wa al-Mumarriḍāt* (The Civil Medical Liability of Surgeons, Dentists, Pharmacists, Public and Private Hospitals, and Nurses), *Manshat al-Ma‘ārif*, Alexandria, p. 144.
- ⁷³ Mohamed Ali Mohamed Al-Taeb (2019), *Aḥkām al-Mas’ūliyya al-Jinā’iyya li-l-Aṭibbā’ fī al-Qānūn al-Lībī* (The Rules of Criminal Liability of Doctors in Libyan Law), *Abḥāth Qānūniyya*, issue 6, pp. 206–207–208–213–217.
- ⁷⁴ Walid Huwaimel Oujan (2013), *Al-Mas’ūliyya al-Madanīyya li-l-Farīq al-Ṭibbī bayna al-Sharī’a al-Islāmiyya wa al-Qānūn al-Kuwaytī* (The Civil Liability of the Medical Team Between Islamic Sharia and Kuwaiti Law), Master's Thesis, Faculty of Law, Department of Private Law, Middle East University, pp. 84–85.
- ⁷⁵ Hashem Mahmoud Al-Ali (2021), *Ṭabī‘at al-Mas’ūliyya al-Madanīyya li-l-Ṭabīb* (The Nature of the Civil Liability of the Doctor), Civil Law Department, Faculty of Law, University of Mansoura, pp. 40–41, Yunzaru ilā:

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