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An Analysis of Examples of Responsibility in the Performance of Ethical Doctors in the Abbasid Era (132- 656 AH)

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ABSTRACT

Medical ethics encompasses the moral duties and responsibilities that doctors have toward their patients. When entering the medical profession, doctors are required to adhere to the ethical principles that guide their practice. One of the most crucial responsibilities of a doctor is their duty to their patients. Focusing on this ethical aspect forms the foundation for patient trust and enhances the overall treatment process. During the Abbasid era, as medical knowledge expanded, Muslim scholars placed significant emphasis on the ethical responsibilities of physicians. This topic was extensively explored in numerous texts. A key aspect of a doctor's responsibility is to provide care to all patients, irrespective of their ethnicity, culture, religion, social class, type of illness, or gender. Additionally, patience, precision, offering hope, and understanding the patient's situation were regarded as crucial elements of the responsibility of Muslim physicians. This research aims to explore the role of the ethical component of responsibility from the viewpoint of prominent Muslim doctors during the Abbasid era, employing a descriptive-analytical approach and utilizing library sources. The research showed that prominent Muslim doctors of the Abbasid era paid due attention to the principle of ethics in their work, along with the profession of medicine. A substantial portion of their written works is devoted to discussing ethics in this profession. The results of the survey show that medical ethics has been very important in Muslim medical texts. Doctors highly valued responsibility as a fundamental aspect of medical ethics during the Abbasid era. Ali bin Sahl Raban Tabari, Ali bin Ishaq Rahawi, Muhammad bin Zakariya Razi, Ali bin Abbas Ahwazi, Ibn Sina, and Seyyed Ismail Jorjani were among the most trusted and prominent doctors of their time, who placed great emphasis on this moral component and provided numerous examples of it in their works. Patience and attentiveness in patient examination, skill, and expertise in disease treatment, offering hope, and following up on patients are the most important examples of responsibility that can be traced in their works.

Keywords: *Medical ethics, Responsibility, Ethical examples, Abbasid era, Famous doctors*

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In the medical field, the physician and the patient are two essential components that work together towards the shared objective of preserving health and enhancing disease outcomes. A crucial factor influencing the disease improvement and treatment process is the establishment of the patient's trust in the physician. Given that patients are among the most vulnerable groups due to their particular physical, mental, social, and economic circumstances, they require increased attention.

In the field of medicine, the manner in which a physician interacts with a patient significantly influences the development of trust and enhances the effectiveness of treatment. Consequently, a stronger connection has been formed between medicine and ethics. Medical ethics outlines the moral obligations and responsibilities a physician has towards their patients. Focusing on this aspect ensures that the physician's objective is not merely to treat the illness by any means but to prioritize the method of treatment and the relationship with the patient over the mere act of curing the disease.

Medical ethics has a long history. This branch of medical knowledge has been formed since the time when humans felt pain, and people sought to reduce their pain and suffering. Throughout history, each of the different tribes and nations has tried to justify its origin and necessity in a specific way ([Mohaqeq, 1995](#), p. 76).

Islamic civilization has placed greater emphasis on medical ethics compared to other civilizations. Within this civilization, humans are regarded with dignity and hold a significant status, with God overseeing all their actions and behaviors. Based on this religious perspective, a physician is obligated to cultivate moral virtues for two reasons: firstly, because he is a human being, and secondly, because his profession involves the life, health, and dignity of individuals. While the first reason applies to doctors and non-doctors ([Ameli, 2013](#), p. 169), the second reason pertains specifically to the unique relationship involved in caring for the life, health, and honor of ill individuals. This is because a physician's proper service safeguards the life and health of society's members, whereas any negligence or pursuit of personal desires (such as fame, money, or wealth) can lead to harm, prolonged illness, and, ultimately, the death of individuals.

In this society, medical ethics encompasses several elements, including trustworthiness, responsibility, and good morals ([Ghaffari, 2009](#), p. 13). Among these, responsibility stands out as a crucial component, influencing other ethical aspects as well. Focusing on this ethical element ensures that doctors refrain from causing harm to patients and enhances the treatment process through appropriate and commendable conduct ([Hasanvand & Mirzaeifar, 2021](#), p. 50).

The Abbasid era is regarded as a golden age in Islamic civilization, marked by a significant emphasis on medical science and ethics. During this time, doctors were trained to be ethical and trustworthy, contributing to the advancement of both medical knowledge and professional ethics. Physicians of this period authored numerous medical texts that not only covered the fundamentals of medicine but also highlighted the ethical dimensions of the profession, providing extensive commentary on these aspects ([Larijani, 2004](#), p. 1/27).

Research Background

No independent studies have specifically explored the aspect of responsibility from the viewpoint of ethical physicians during the Abbasid era. Nonetheless, some relevant information is available in various articles and books. [Larijani \(2004\)](#) addressed ethical considerations in the medical field across two volumes. In the first volume, he briefly touched upon medical ethics during the Abbasid era but did not directly focus on the ethical components from the physicians' perspective. [Khaghanizadeh and Maleki \(2009\)](#) discussed medical ethics from an Islamic viewpoint. Although their article elaborated on Islamic ethical principles and their application in medicine, it did not delve into the medical ethics of the Abbasid era or provide examples of responsibility from the physicians' perspective of that time. [Tavakoli and Sarnizadeh \(2014\)](#) explored medical ethics from Razi's perspective, discussing the doctor's responsibilities towards the patient within the doctor-patient relationship, but only briefly and without a comprehensive examination of this ethical component. [Ameli \(2013\)](#) investigated medical ethics and etiquette in Islam, offering useful insights into Abbasid-era medical ethics but lacking a coherent and systematic analysis of the topic, mentioning the component only in passing. [Khaje Hassani et al. \(2019\)](#) examined the role of professional ethics and responsibility in organizational commitment, providing a general overview of professional ethics without a historical perspective.

Method

The research method employed in this study is historical in nature. This approach involves a descriptive-analytical examination of primary texts on medical history and ethics from the Abbasid era, adhering to principles of honesty and trustworthiness to address the research problem. The study focuses on analyzing examples of responsibility among ethical physicians of the Abbasid period, utilizing both primary and secondary sources. The research is divided into two main parts. Initially, sources related to medical ethics were gathered, and their data was extracted. Subsequently, materials from primary sources on medical history were collected, and relevant statements were identified. These sources provide extensive information, highlighting ethical themes alongside general medical practices and disease management. Although the data from the mentioned sources are often indirect and not specifically aimed at discussing medical ethics, they are crucial for understanding the practical aspects of ethics. Hence, secondary sources, including recent research, were also consulted. Ultimately, the collected data were categorized and analyzed to draw scientific conclusions.

Findings

Based on the analysis of data collected from primary and secondary sources related to the research topic, it was determined that the Abbasid era (132-656 AH) is considered one of the brilliant periods in the history of medicine in Islamic civilization. The caliphs of this era paved the way for the advancement of this science by providing the necessary conditions. In this era, renowned physicians were raised who, from the very beginning of medical writings, paid great attention to the ethical issues of this profession, especially responsibility. For example, Abu al-Hasan Ali ibn Sahl Rabban al-Tabari, in the third century AH, in the book *Ferdaws al-Hekmah*—the oldest written work of Muslim physicians—synchronized medicine with ethics. The

importance of ethics in medicine led Ali ibn Ishaq Rahawi to write a comprehensive and independent book in this field in the same century by writing *Adab al-Tabib*. At the end of the same century, Abu Bakr Muhammad ibn Zakaria also wrote *Al-Hawi fi al-Tabib* and *Akhlaq al-Tabib*, expressing valuable ethical guidelines and recommendations in this field. Attention to ethical issues in the medical profession continued to be of interest to physicians of this era. In the fourth century, Ali ibn Abbas Ahwazi was not unaware of ethical issues in his book *Kamil al-Sina'ah al-Tabbiyyah*. At the beginning of his book, by citing the Hippocratic Oath, he directly referred to the importance of ethics in this profession. In the middle of his book, he also referred to it practically. The trend of attention to medical ethics continued to be at the forefront of physicians' attention. As in the second half of the fourth century and the beginning of the fifth century AH, Ibn Sina, by writing the book *Qanun fi al-Tibb*, paid attention to ethical issues in this profession throughout his work. After him, Sayyid Ismail al-Jorjani also referred to the ethical dos and don'ts of physicians in his book *Zakhirah al-Khwarizmshahi*.

An analysis of data sourced from both primary and secondary materials concerning the research topic reveals that the Abbasid era (132-656 AH) is regarded as a significant period in the history of medicine within Islamic civilization. During this time, the caliphs paved the way for the advancement of this science by providing the necessary conditions. This era saw the emergence of distinguished physicians who, from the inception of medical literature, emphasized the ethical dimensions of the profession, particularly the aspect of responsibility. For instance, in the third century AH, Abu al-Hasan Ali ibn Sahl Rabban al-Tabari, in his work "*Ferdaws al-Hekmah*"—the earliest extant medical text by a Muslim physician—integrated medical practice with ethical considerations. The significance of ethics in medicine prompted Ali ibn Ishaq Rahawi to author a comprehensive and dedicated treatise on the subject, titled "*Adab al-Tabib*," in the same century. Towards the century's end, Abu Bakr Muhammad ibn Zakaria composed "*Al-Hawi fi al-Tabib*" and "*Akhlaq al-Tabib*," offering valuable ethical guidelines and recommendations. The focus on ethical issues within the medical profession persisted among physicians of this era. In the fourth century, Ali ibn Abbas Ahwazi addressed ethical concerns in his book "*Kamil al-Sina'ah al-Tabbiyyah*," referencing the Hippocratic Oath at the outset to underscore the importance of ethics and revisiting the topic practically in the book's midsection. This emphasis on medical ethics remained prominent, as evidenced by Ibn Sina, who incorporated ethical considerations in the latter half of the fourth century and the early fifth century AH throughout his seminal work "*Qanun fi al-Tibb*." Subsequently, Sayyid Ismail Jorjani also highlighted the ethical imperatives for physicians in his book "*Zakhirah Khwarizmshahi*."

Discussion

Responsibility in the Medical Profession

Responsibility is a core element of professional ethics, derived from the Persian root word "*sāl*," which means accountability (Ibn Manzur, 1993, p. 11/318). In this context, it involves both accepting responsibility and having the ability to fulfill it. Individuals are not responsible until they are assigned a task or duty, but once they accept and are capable of handling it, they become committed to fulfilling the associated obligations (Malek, 2018, p. 16). Teaching responsibility

involves three key components: recognizing responsibility, practicing responsible behavior, and being accountable (Khaje Hassani et al., 2019, p. 28).

In the medical profession, the concept of responsibility is paramount in ensuring equitable benefits for all patients, irrespective of ethnic, cultural, religious, socioeconomic, disease-related, or gender differences. The provision of patient benefits should not be driven solely by compassion or arbitrary methods; instead, it must adhere to established medical laws and be supported by appropriate training. The initial step in this process involves exercising patience and meticulousness during patient examinations, which is crucial for the ongoing treatment of diseases. Accurate diagnosis forms the cornerstone of effective treatment, as successful therapeutic outcomes are contingent upon correctly identifying the disease (Mohaqeq, 1995, p. 205). Competence and proficiency in diagnosing and treating illnesses are further manifestations of medical responsibility. A physician lacking in knowledge and expertise poses a significant risk to patient safety. Continuous efforts to enhance skills, gain experience, and stay informed are essential for expediting diagnosis and treatment, thereby minimizing patient suffering (Motavassel, 2014, p. 295).

During the treatment process, fostering hope is another critical duty of the physician. While hope may not significantly impact other professions, it serves dual purposes in medicine. Firstly, it prevents physicians from becoming disheartened by unsuccessful treatment attempts, encouraging them to explore alternative solutions. Secondly, instilling hope in patients enhances their resilience against illness and bolsters their motivation to adhere to medical guidance (Esfahani, 2002, pp. 93-97).

Another key responsibility of physicians is to monitor the patient's treatment journey. Physicians must provide care to all patients, irrespective of racial, cultural, or socioeconomic differences, and consistently oversee their medical progress to ensure equitable access to medical expertise (Khaghanizadeh & Maleki, 2009, p.42).

The ethical considerations inherent in these responsibilities have long been a focus for physicians, as reflected in the Hippocratic Oath (Najmabadi, 1992, p.123). During the Abbasid era, a period marked by significant scientific and cultural advancements, factors such as the relocation of the capital from Damascus to Baghdad, the prevalence of infectious diseases, and the emergence of new terminal illnesses among Muslims catalyzed the growth of medical science. In the capital, the caliphs facilitated this progress by offering both material and spiritual support to physicians and medical institutions, fostering an environment of tolerance and ethical training (Al-Goud, 1973, p. 245).

In this era, the government emphasized the importance of medical education. Prospective medical practitioners were required to pass examinations before receiving a license to practice (Halabi, 2003, p. 220). Post-licensure, government-appointed auditors monitored the ethical conduct of physicians to safeguard patient welfare (Shizri, 2003, pp. 259-261).

Educational and clinical institutions were cognizant of these ethical standards, although the teaching methods were indirect and lacked specialized courses or instructors (Zarinkoub, 1969, p. 52). Nonetheless, ethical considerations were integral to the curriculum alongside theoretical and clinical training. In the Abbasid era, only those physicians who demonstrated ethical integrity and could impart these values to students were permitted to teach (Shahmoradi, 2017, p.

81). Medical centers provide practical and observational ethics training, allowing trainees to witness firsthand the ethical responsibilities of the profession (Issabek, 1992, pp. 35-36).

The trained and trusted physicians of the Abbasid era paid great attention to the ethical component of responsibility. Prominent physicians such as Ali ibn Sahl Rabban al-Tabari (d. 3rd century AH), author of *Firdaws al-Hikmah*, Ali ibn Ishaq al-Rahawi (d. 3rd century AH), author of *Adab al-Tabib*, Muhammad ibn Zakariyya al-Razi (313-251 AH), author of *Al-Hawi fi al-Tibb*, Ali ibn Abbas al-Ahwazi (318-383 AH), author of *Al-Kamil al-Sina'ah fi al-Tibbiyyah*, Ibn Sina (370-428 AH), author of *Qanun fi al-Tibb*, and Sayyed Ismail al-Jorjani (434-531 AH), author of *Al-Zihar al-Khwarizmishahi*, were among the Muslim physicians of this era who emphasized the ethical dimension of responsibility in both theory and practice. Their works provide numerous examples of this commitment to ethical medical practice.

Responsibility from the Viewpoint of Abbasid physicians

Upon joining the medical profession, physicians are bound by a commitment to uphold ethical principles and foundations. A key duty of a physician is responsibility, which centers on benefiting patients. This is accomplished through various means, such as demonstrating patience and thoroughness in examinations, applying skill and expertise in treating illnesses, instilling hope in patients, and diligently monitoring their treatment progress. Historical texts on medical ethics from the Abbasid era highlight examples of such responsibility, as reflected in the ethical conduct of physicians from that time, which are detailed below.

Patience and Attention to Detail in Examining the Patient

In the medical profession, patience and attention to detail are significantly more crucial and sensitive than in other fields, as neglecting these qualities can lead to irreparable harm to human lives. Patience enables doctors to communicate more effectively with patients, treat them with greater calmness and reduced anxiety, and make optimal decisions regarding their treatment (Ebrahimi, 2017, p. 46).

Physicians during the Abbasid era placed significant emphasis on this aspect. In the first half of the third century AH, Ali ibn Sahl Rabban al-Tabari, in his book "*Firdaws al-Hikmah*"—the oldest known medical text—established that the primary focus of medicine should be on maintaining health, followed by treating patients according to medical principles. He emphasized that an accurate diagnosis is crucial for selecting the appropriate treatment and prescribing medication, which he achieved through questioning and conducting various tests (Tabari, 2013, p. 32). Similarly, Rahawi (2010, p. 69), a renowned physician of the third century AH and author of "*Adab al-Tabeeb*," the first book on medical ethics in the Islamic period, also considered factors such as the patient's age, temperament, habits, behaviors, occupation, and place of residence. He stressed the importance of having a thorough understanding of the body and diseases for precise diagnosis. Rahawi also took into account external factors like water quality, dietary habits, and occupation when examining conditions such as tooth decay to identify the underlying cause of the disease and determine the correct treatment approach.

Razi (2013, p. 1/219; 3/41, 75, 100) believed it was essential to carefully observe and question patients to accurately identify diseases. By examining each symptom individually and

considering all factors, such as the season and skin color, he aimed to determine the cause of the disease and distinguish between different conditions. This approach enabled him to make the best decisions for his patients and tailor treatments to their habits. His detailed inquiries into patients suffering from headaches, burns, fever, and other ailments demonstrate his meticulous approach.

[Ibn Sina \(2010\)](#) placed significant emphasis on the ethical aspects of medicine. He meticulously studied diseases that lacked specific external symptoms or where the pain was not proportional to the disease's location to identify their origins. He believed that skull fractures might not show external signs like ruptures and that the pain from colic or kidney disease could manifest in other areas, such as the intestines or lumbar region. Therefore, these conditions require thorough examination. In this context, he did not consider such fractures to be simple or straightforward and confidently performed scalp incisions to determine the fracture's origin ([Ibn Sina, 2010](#), p. 4/216; 6/574; 1/503).

Even in the late Abbasid period, physicians maintained their focus on patience and thoroughness when examining patients. [Jorjani](#), a renowned 6th-century AH physician and author of "Zakhir-e-Kharazmshahi," the first medical text in Persian, took a meticulous approach to diagnosing diseases. He did not rush to conclusions based on a single symptom but considered additional factors such as the season. For instance, when treating diarrhea, a symptom common to many illnesses, he refrained from immediately prescribing astringent medications. Instead, he assessed whether the diarrhea was related to seasonal changes, ensuring that the treatment was appropriate. [Jorjani](#) also carefully monitored patients who required both constipation and diarrhea treatments simultaneously to determine the most effective treatment method ([Jorjani, 2016](#), p. 3/80).

Skills and Expertise in Treating Patients

Possessing expertise and skills is crucial for every profession. This matter holds such significance that it is even emphasized in religious teachings¹. In the medical field, which directly impacts patients' lives, any negligence can lead to the loss of countless lives. Expertise in this field encompasses all stages of patient care, from evaluating symptoms to prescribing medication. As medical science continually evolves with the discovery of new diseases and treatments, it is imperative for doctors to keep their knowledge current, making it one of their most vital responsibilities ([Tavakoli & Sarnizadeh , 2014](#), p. 54).

Physicians during the Abbasid era placed significant emphasis on this matter. For instance, [Tabari \(2013, p. 33\)](#) regarded expertise and patience as essential ethical responsibilities for physicians and consistently encouraged them to seek further knowledge. Similarly, [Rahawi](#) emphasized the necessity of skill and proficiency in diagnosing and treating diseases for physicians. He believed that a physician should be so adept in their field that they could diagnose certain illnesses simply by asking questions. This is due to the fact that some diseases cannot be detected through the senses alone and require inquiries directed at the patient and their companions. According to [Rahawi](#), even the act of questioning demands skills such as determining the appropriate number and sequence of questions to prevent irrelevant inquiries

¹ Surah Al-Qasas/26; Surah Yusuf/55.

from diverting attention from the primary goal—treating the patient—and to avoid causing distrust or wasting the patient's time (Rahawi, 2010, p. 111).

Razi (2013, p. 13/530) also placed significant emphasis on specialization and skill acquisition. He advocated for enhancing doctors' awareness by studying historical medical texts, gaining practical experience in hospitals, and thoroughly examining patients' dietary and medical histories to ensure accurate diagnoses and effective treatments. His meticulous documentation of the medical histories of patients like Abu Abdullah Jihani, Ibn Khalil, Abu al-Hasan Khayyat, Khalid Tabari, and Abu Abdullah bin Sawada exemplifies his dedication to this approach (Razi, 2013, p. 13/586).

The three primary treatment methods—diet therapy, drug therapy, and surgery—are the most common approaches², and their sequence is crucial for the patient's health and recovery, requiring the doctor's expertise. Some treatments can resolve diseases more quickly but may have adverse effects on the patient. Consequently, Razi avoided the fastest and most hazardous methods, opting instead to treat patients with dietary advice first, followed by medication, and resorting to surgery only when necessary. For instance, when dealing with certain boils and glands, he preferred drug therapy over surgery to minimize complications. When prescribing medication, Razi ensured that the drugs provided more than just temporary relief and did not cause long-term issues for the patient (Razi, 2013, p. 8/73). In his approach to drug therapy, he tailored specific medications to each disease and considered the patient's capacity and method of consumption. From the outset of treatment, he avoided using strong drugs, instead starting with milder ones to gradually build the patient's strength before moving to stronger medications. Razi refrained from prescribing potent drugs to children, the elderly, thin individuals, and disabled patients until the seventh day due to their physical frailty (Razi, 2013, p. 8/246).

Ahwazi (2009) also regarded specialization as a crucial factor in earning patients' trust, emphasizing that the aim of specialization should be to eliminate the disease rather than provide temporary relief. He believed that a true specialist is a doctor who, upon arriving in a new city for treatment, first conducts a thorough examination of the city's climate, common diseases, and the prevalence of illnesses among different age groups. This allows the doctor to make necessary predictions. When a patient visits, the doctor takes the time to ask questions, considers all symptoms collectively, and begins treatment based on the most significant symptom (Ahwazi, 2009, p. 1/75).

Like other physicians, Ibn Sina, a renowned physician of the early fifth century AH, considered the physicians responsible to their patients. He emphasized that acquiring skills and expertise in diagnosing and treating patients is beneficial to the patients. He stated that understanding parts of the body and being familiar with various diseases, especially rare ones, is crucial for a physician's expertise. This knowledge enables the physician to identify different types of pulse, fever, and fractures, treat them according to medical principles without anxiety, and be prepared for unforeseen events (Ibn Sina, 2010, p. 3/292).

² In addition to these three main methods of treating diseases, there are other side methods such as bloodletting, cupping, cupping, etc.

In his book *Zakhir-e-Kharazmshahi*, Jorjani emphasized the importance of acquiring skills and keeping information current as key responsibilities of a physician (Jorjani, 2016, p. 2/125). He believed that possessing this moral quality enables a physician to remain hopeful when faced with challenges and to make the best decisions for patients by thoroughly examining information and observing carefully. Jorjani also focused on prescribing medicine in a way that ensures a remedy beneficial for one ailment does not cause another ailment. For instance, although Surenjan (Colchicum) medicine is used to strengthen the pores after vomiting, it can be harmful to the stomach. To mitigate this, Jorjani combined it with cumin and ginger (Jorjani, 2016, p. 5/329). While he preferred drug therapy over surgery, he regarded the complications from surgery as less severe than those from potent drugs. Consequently, during surgery, he took care not to remove excessive muscle during anal operations, and in femoral surgery, he aimed to heat the infection located at the back and head of the femur rather than shaving and eliminating the infections to preserve as much flesh as possible (Jorjani, 2016, p. 5/427).

Offering Hope to the Patient

Hope serves as the primary driving force for human progress and holds significant importance in life. While maintaining a hopeful spirit may not greatly impact others in certain professions, in the medical field, instilling hope in patients is a crucial responsibility of doctors. This practice brings warmth and joy to patients (Sohrabi et al., 2023, p. 16).

Physicians during the Abbasid era placed great importance on this ethical example. Rahawi emphasized that instilling hope in patients is a crucial responsibility of a physician, as it significantly aids in controlling and improving the disease. Beyond providing hope for health and recovery, he ensured that nurses and patient companions behaved appropriately, following the doctor's instructions and avoiding discouraging remarks that could harm the patient (Rahawi, 2010, p. 159). Similarly, Razi prioritized hope throughout his treatment process and refrained from making definitive judgments about a patient's life or death. He believed that physicians should offer patients hope for recovery, even if they personally doubted it, and should not be discouraged by the failure of one treatment method but instead optimistically try another. To instill hope, he would calmly sit with the patient at each stage of treatment, examine their symptoms, take their pulse, and discuss the treatment process to select an easy and safe method (Razi, 2013, p. 8/246).

Like Rahawi, Razi recognized the importance of involving patients in every stage of their treatment. He engaged in discussions with patients about the disease and treatment options, ensuring they understood and accepted the process, which encouraged greater cooperation until the desired results were achieved. Razi avoided forcing patients to take medicine, opting instead to mix bitter medicines with dates to increase patient motivation (Razi, 2013, p. 8/133).

Similarly, Jorjani prioritized patient satisfaction throughout the treatment process. He did not compel patients to accept treatment or take medication, preferring to inspire them through alternative methods. For instance, he suggested solutions like chewing gum to help patients who struggled with taking medicine (Jorjani, 2016, p. 2/250).

Monitoring the Patient's Treatment Progress

Doctors have a responsibility to monitor their patients' medical conditions, regardless of their appearance. Throughout the day, many patients visit doctors; some are treated as outpatients and receive necessary advice and prescriptions, while others require hospitalization for continuous monitoring and regular review of their treatment progress.

During the Abbasid era, doctors were attentive to this responsibility. For instance, Razi, a renowned physician and head of the hospital, did not discriminate when examining and treating patients. He considered himself responsible for treating all patients at every stage of medicine, irrespective of race, religion, or social class. His treatment of a sick Zoroastrian child, a Christian woman, Abu al-Hasan, the tailor, and Qattan al-Tuwil al-Azim al-Lahiyyah³ exemplified his sense of duty (Razi, 1977, p. 16).

Similarly, Ali ibn Abbas Ahwazi, a distinguished physician of the fourth century AH, treated patients regardless of social class. Despite being (Azd al-Dawlah), the governor's personal physician, he remained committed to treating patients from lower social classes. His treatment of a carrier's patient illustrates his dedication and attention to patient care (Ahwazi, 2009, p. 3/312). Like his contemporaries, Ibn Sina also treated all patients and diligently followed their progress in their treatment. He believed patient care should never be neglected, even if results were delayed. To achieve the best outcomes, he meticulously managed each stage of treatment, acting swiftly and with patience. For urgent cases, such as poisoning or cataracts, he responded quickly, while for conditions like fractures and painful wounds, he exercised patience and conducted further research before proceeding (Ibn Sina, 2010, p. 3/190).

Conclusion

This research focused on analyzing and examining the components of responsibility during the Abbasid era by studying sources on medical history and ethics from the Islamic period. A key topic in medical ethics, an important branch of Islamic medical history, is the discussion of the qualities that are essential in a physician or sage. Among the most significant moral traits and duties of a physician are their responsibility within the medical profession, towards patients and their treatment, and their responsibility in embracing modern medical and health education.

By reviewing the sources and references related to medical history and ethics, the research followed a structured path, leading to valuable insights through data analysis. These insights can be summarized as follows:

- During the Abbasid era, ethics became central to medical science, with ethical physicians integrating it into their knowledge and practice. The existence of numerous works that address this topic, both directly and indirectly, supports this assertion.
- Monitoring a patient's treatment progress was considered one of the most crucial aspects of a doctor's responsibility. Physicians of this era meticulously examined all symptoms and refrained from initiating treatment until they had accurately diagnosed the disease. They also continuously monitored the patient's condition throughout all stages of treatment.

³ A cotton seller with a thick beard.

- Acquiring skills and expertise has been vital for all professions, but it held particular significance in the medical field. Doctors of this era sought to enhance their skills by gaining experience and learning from the knowledge of other physicians.
- Providing hope was another key aspect of responsibility. This element played a crucial role in accelerating patient recovery. Doctors of this era even observed the behavior of nurses and patients' companions to uplift patients' morale, ensuring that discouraging words did not hinder their willingness to continue treatment.

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Conflict of Interests

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