Miraculous Medical Recoveries and the Islamic Tradition

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As an extension of a concept known as *tawheed,* nothing lies outside of The Jurisdiction of Divine Intervention; nor is God the deist’s watchmaker, winding up reality and watching various Newtonian-like mechanized processes play themselves out.† Once this latter deist notion is embraced, and given a particular subtle type of human propensity for self-exaltation (a type which is by definition not within the secular humanist’s recognition but well-known to the world’s yedic and abrahamic faith traditions), it is only a matter of time before God is cast out of the ontological picture and these alleged processes are themselves seen as absolute and self-existent—they themselves become all powerful “deities” which some day will be clearly elucidated.

The Qur’an, as an entity not derived of human intellect or some other human machination, but as Divine Disclosure about God and reality itself, informs humanity that God is both immanent and transcendent. As an extension of this, God possesses attributes of enveloping intimacy and utterly remote majesty, attributes which are purely abstract as well as anthropomorphic, and attributes that include both compassion and rigor. The manifestation of attributes of The Near, The Present, The Creator, The Sustainer, The Annihilator, and The Sovereign—an ontological view known in modern parlance as occasionalism, domi

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‡The medley of theoreductionist or theophobic paradigms that characterize many modern secular humanist attempts at “explaining it all” suffers from a dangerous myopia of sorts when analyzed through the lens of Qur’anic theo-centric doctrine. Such myopia mistakes the observed cosmological “imper-sonal” attributes of Divine Manifestation as “blind forces” in and of themselves. Why such a paradigm dominates both popular and academic thought is multifactorial, but it stems from empirical observations made by a small clique of men regarding a small subset of the spatiotemporal order. Such occurred during a brief moment of history in western Europe. Some of them, and a great host after them, projected this paradigm onto the entirety of existence and for psychosocial and political reasons, such projections were wielded to attack long-held authentically transmitted information about metaphysics and God; in the idiom of religious expression, this paradigm, or faith in its all encompassing nature, became an idol. What is alarming about the spread of antireligious sentiment in the name of this paradigm is that despite its overthrow as an absolute rule outside severely limited parameters of human perception (as proven with the advent of quantum physics and quantum theory), modern civilizations pride themselves on rejecting God based on being “scientific.” This is, in the traditional intellectual tradition, not scientific at all; rather, it is a modern superstition known as scientism.

§The use of incantations during healing interventions is a practice encouraged based on accounts of the practices of Muhammad and his apostles. The term *ayat-ullah* (communication, sign, symbol [from/of God]) is used in numerous places to refer to phenomenon occurring as a result of what humans would consider both a natural, as well as a supernatural, order of events. The same term is used to refer to a verse of the Qur’an.

¶It is imperative to note that the Qur’an does not see itself bringing any new information about God, cosmology, or the nature of the human condition, both earthly and postmortally. It is simply rejuvenation, the last of its kind, of the primordial way of Abraham which was affirmed and elaborated by prophetic figures and messengers such as Moses and Jesus. It is literally God’s Words to humankind, and invites humans to practice their religions sincerely, and affirms that, given a sincerity of practice notwithstanding human frailty and weakness, that the *Shari’ah* (methodology of engaging earthly life) of Muhammad is the most authentic and optimal, but not the only, means to salvation.

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The Qur’an narrates the accounts in which Jesus, The Christ, Spirit of God, Word of God made flesh, and son of the Exalted and Blessed Virgin Mary, restored physiologic wellness to the afflicted through supraphysiologic interventions. Both the Qur’an and the New Testament use the identical phrase, “by the Permission” or ‘Authority of God’ (similar in sense to ‘by my Father’s Name’). In this way, Jesus was a locus of manifestation for an expression of Divine Effectuation through nonconventional causality—the results of which in English are called miracles. What is critical to note is that the Qur’an also refers to such acts through Jesus with the same term as it does with the workings of what moderns call ‘the natural order’—these were ayaat (signs or symbols of God). All aspects of ontology, sensational or not, including causality and its derivative manifestations which we may dismiss as either mundane, or those which puzzle us and seems miraculous, are ayaat-ullah.

Lastly, the Qur’an, and the elaborated Islamic tradition based upon the Prophet Muhammad, as well as based upon the saintly men and women who walked his path, assure us that the human discursive methodology as an epistemological faculty can only take one so far to: a) know and effectively bear witness to God, b) gain vision and insight to the metaphysical aspects of reality, and c) just as important, psycho-spiritually contend with many of life’s exigencies in an objectively spiritually healthy manner. Of course this is in contradistinction to the secular humanist atheist, who in the name of “science,” quite nonscientifically and arbitrarily dismisses epistemology of the suprarational order, and jumps to his own speculative metaphysical assumptions in a childish faith-like manner. He views ‘progress’ in the empirical scientific endeavor as that process which will reveal the truth behind things, and if elements of causality have not been discovered, they will be, and with that will be the end of the emotionally regressed notion of God and the metaphysical. In this manner, ‘scientism’ (not to be confused with the practice of science) is a religion which deifies causality, and sees in it some vague infinite inertia (called progress, meta-needs, bi-historical determinism, cosmopolitical plan, evolution, gaea, collective consciousness, complexity consciousness, transhumanism, etc—the names are legion and ill-defined, but have a few traits which may define them. First, they seek substitutive and futuristic terms which invariably allow theoreductionism, which given time and the existing human condition degrades into theophobia and frank rejection of God; in addition, these outlooks seem to be eminently dissatisfied with classical metaphysics, as well as hostile to the idea of the necessity and validity of revealed ritual. These latter elements are common to all revealed traditions–be they Vedic, or Abrahamic).

With this backdrop, the Islamic cosmological tradition has developed terms for what in English are known as miracles. When miracles occur through the medium of a prophet or messenger of God, they are called mua’jizat (derived from the root word meaning permission). When they occur through the working of a Saint, they are known as Karamaat (derived from the term graciousness). There is additional terminology that is found related to such occurrences in the Islamic metaphysical and intellectual heritage. For instance, these phenomena are termed kharg-al-’ada (which roughly translates to “breaking of the habitual” [cosmological mechanisms]). When a saint is deputized to serve to actualize such an action, they exhibit tasarruf (which is derived from the context of a money changer, who gives you a twenty for two tens) – which relates to someone who is given jurisdiction or disposal over a certain segment of cosmology, but can not really add or subtract anything on their own, only shuffle things around or expedite, or delay, again, only with the permission and authority of God (Correspondence with Dr. Amer Latif, Professor of Religion, Marlboro College, VT).

Anything of fortune which occurs falls under the rubric of Baraka (grace or blessing). Hence, one may hear that to pray in a particular location or at a particular time has special Baraka attached to it. The idea that just like a geographical topography, there is a spiritual topography of Baraka in relation to individuals, places, objects, and temporality (diurnal or annual) that is orthodox.

It must be emphasized that these miraculous occurrences are never seen as independent of God’s decree. Nor are they ever at the command or behest of the human locus. This is one of the implied lessons for Muslims as they read about the indifference and unresponsiveness displayed by Muhammad toward the miracle mongers, taunters, and skeptics who would demand a miracle of a prophet to prove the truth of the particular prophet or of the message. Challenges would be put forth to open the sky or call down the angels if you are true. This is not unlike the demands of Herod or Pilate. The fact that the challenges were not met as demanded has several meanings; the first of which is that such occurrences and interventions were not at the behest of Muhammad, Jesus, nor Moses, nor at the behest of the skeptical or scientifically curious demands of others. This is related to the saying in the Christian tradition, “Thou shall not tempt thy Lord.” In addition, The Qur’an states that if what is normally hidden was to erupt into the spatiotemporal order as demanded by such hasty folks—such a display would lead to their ultimate condemnation. In this manner, not giving in to these demands was actually seen as a mercy to them. Elsewhere, the Qur’an

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1. May God’s Blessings and Peace be upon him. Mentioning the name of a prophet or messenger without adding a suffix of respect is considered a reprehensible act; from hereon, it is the author’s wish to state that this is implied when such a name is found in the article.

2. Used by one of the greatest metaphysicians of the Muslim intellectual and spiritual tradition—ibn Arabi.

**The Islamic tradition is infused with an almost paranoid doctrinal current against the human tendency to deify objects, persons, or beings other than God.**
asserts that there are many who, no matter what they are shown, will find cause to reject the deposit of faith which was being rejuvenated by Muhammad. Lastly, this inaction, inability, or refusal of the Prophets to work miracles at their own behest or at the behest of others offers the message that sensational and allegedly miraculous works should never be a guarantor for spiritual authenticity, nor spiritual authority. Moreover, such demands may be cast into a bargaining type dynamic whereby “if X is done, only then will God be acceptable to me” and such a dynamic may not be empowered by God to elicit a response.††

The element of sobriety in which the Islamic doctrine injects into the subject of miracles sends a clear message to avoid those agendas or individuals who advertise themselves through alleged miracles, sensational feats, or displays of awesomeness, or who ask for material advantage or reward. Sorcery or Sahr is defined as attempting to probe causality in order to manipulate it for egoistic or base ends. The fruit of sorcery may also result in occurrences which seem sensational, and even serve utilitarian ends. As such, splitting the atom for the sake of aggrandizing political power and terrorizing others would be considered a most crass form of sorcery. Psychological manipulation such as marketing psychology, neurolinguistic programming, and hypnosis are avenues for sorcery (not necessarily sorcery themselves). The Islamic tradition also validates the existence of what in the west is known as witchcraft and the occult—dabbling in this is a categorical sin, and according to many legalists—punishable by death.

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The sentence simply underscores that “demanding from God” may originate from a particular attitude which God may deem (and hence is in reality) insincere and repugnant. To assume God will do X such that they precipitate a state of higher God-consciousness since they are after all, Ayaat-ullah.

One may hear a condemnation of the slavish way many Muslims ape the mental secular humanist habits of the modern West in the name of “progress,” or “advancement,” simply because of the awesome feats of material advancement spewing forth in Western lands. This is simply one form of being seduced by “miracles,” or the “sensational.” The soul is lost in the process of “mimicking” the fashions of thought and habits of the modern Western secular culture. Voices within the Western religious traditions echo the same complaints.

It is critical to note that prophets and messengers are considered paragons of saintliness in the Qur’anic ethos. Hence the Muslim would dismiss the above-mentioned notwithstanding, the Qur’an does mention miracles in the context of strengthening or confirming the faith of a particular audience or validating the authenticity of a prophet (at the behest of God). However, without the unavoidable fruit which we may call a “religious vehicle” which by nature stems from a legitimate Depositum of Faith, the sensational and mysterious just becomes distraction and trickery, and may even prove to be an agent which ruins the soul and leads to tremendous torment. The concept of “religious vehicle”—which inculcates proper doctrine, behavior, and ritual—is covered by the term sharia.##

**In The Medical Context**

Because Muhammad himself sought material and physiologic intervention for ailments, and encouraged such for others, medicine has a long history in the Islamic tradition. He explicitly encouraged the seeking out of individuals who were known for their mastery of medical practice; this practice was grounded in material and physiologic intervention.

OH Lord, Increase my Wonderment of Thee” was a prayer uttered by Muhammad. Many see in this a call to make the heart sensitive to the wondrousness and sensational aspects of everyday natural phenomenon such that they precipitate a state of higher God-consciousness since they are after all, Ayaat-ullah.

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The Sharia of the mind’s understanding of reality, or specifically speaking, doctrine, is known as Aqeeda. Right thinking or correct thinking is a term that approaches the meaning. In this sense, there can be a world of difference between thinking for one’s self, and thinking correctly. Tibb-al-nabvi (medicine/healing through prophetic example) is the term used for the study of healing that was based on prophetic practice and endorsement.)
The Islamic medical tradition would be considered both allopathic, as well as ‘alternative.’ On the alternative side, not only was there practice using modalities of a material/physiologic nature, but Muhammad also endorsed supraphysiologic means to restore physiological wellness and comfort. In this manner, there is no essential conflict between modalities which nowadays would be called usual interventions, alternative but material/physiologic interventions, or ‘supraphysiologic’ interventions such as those that seem ‘miraculous,’ since they have no discernable medium through which they act. These included Qur’anic incantations, laying on of hands, blowing upon a patient, and of course, intercessionary prayer. All of these modalities, including a full embrace of modern allopathic medicines, are found in the Muslim populations of Europe, Asia and Africa, and now among the immigrants in the west.

There is a higher likelihood that such populations would consider psychogenic forces to play a role in physiologic derangements. By the term psychogenic, I do not mean in the modern misuse of the prefix psych. By psyche, we mean soul. Hence, somatic derangements, pains and ailments may be attributed to a disturbed soul, or a soul which has been afflicted by the malevolence of another. The reality of malevolent influences which may proceed consciously or unconsciously from another and result in physiologic or psychological affliction is explicitly recognized in the Islamic tradition; Muhammad was targeted by it.

Many sufferers are apt to try hakims (alternative practitioners but literally–Wise One/Sage), or Holy Persons (Awliyya – Friend of God, Saint) to cure their ailments before seeking allopathic means. Hakims may or may not be Holy Persons. Hakims do use physiological pathways to heal, (ayurvedic, herbal, diet, oils, and pharmaceuticals) but holy personalities may use these and in addition use invocation of prayers, written scrolls, amulets, laying hands, and Qur’anic incantations to heal. The preferential consultation of holy persons is all the more likely when it comes to behavioral disorders, seizures, or psychological illness. Restoration of health by these means would not necessarily be considered miraculous in the sense that many in the modern world or Christendom understand the term. It would simply imply the efficacy of a given mode of cause and effect – well understood or not. All such fortune that comes through any modality is considered Baraka.

With this mentioned, it is also important to note that because of the dazzling display of material superiority and technological advancement which characterizes things Western, allopathic physicians are also highly regarded, so one may see folks mixing modalities. I know of one patient who went into the operating room with a scroll lying across her forehead which was ordered to be placed upon her by one of the Awliyya.

Accounts of healing that baffle conventional understanding and that are indeed sensational occur in the Islamic tradition to this day. Disappearances of tumors, recovery from vegetative states, and miraculous recoveries from critical illnesses are associated with the intercession of holy persons, or Qur’anic incantation. Fertility is often bestowed after a couple visits the tomb of a saint and makes a binding vow. Exorcisms often resolve aberrant behavior and psychological ailments. There is still causality at work in these instances, but it is not through the intercession of conventionally known material forces, it is rather an intercession of a nonmaterial nature. One will also note that sensational healings occur in other traditions as well, or even in the absence of any supraphysiological intervention.

Is there a point of conflict for the modern allopathic physician in this? Potentially, the first depends on the doctor’s belief in the efficacy of what they would likely consider either a purely placebo psychological auto-suggestion, or the objective efficacy of modalities which have their source in sacred tradition. Either way, if an efficacy is seen, there can be no medical contraindications in advocating its use. If the doctor sees zero benefit, and only harm (through avoidance of proper interventions) in such practices, then yes, there is an ideological conflict.

Assuming efficacy is acknowledged, the question becomes one of triage, and clinical context. From the traditional Islamic point of view, all interventions, be they prayers, incantations, thrombolytic infusion, or surgical excision are channels for Baraka, of which one is restoration of wellness. There is no scenario in the acute/critical care context for a practicing Muslim where a religious conviction would contraindicate heeding a modern allopathic physician’s advice on how to proceed for the sake of praying for a miraculous cure. An account of Muhammad narrates that after a companion named Saad suffered from chest pain, the prophet’s hands were laid on him, and he felt better, but the prophet still advised him to seek the care of a Jewish physician known to reside in a nearby town. This was despite the fact that Saad felt better immediately. The case may be different in the chronic care scenario–arthritis, headaches, cancer, inflammatory bowel disease, congestive heart failure, peripheral vascular disease, etc.—such conditions may slowly become debilitating and patients or families may justifiably lose confidence in allopathic approaches. It is natural and logically sound for patients and families to place their hope elsewhere.

What does an allopathic doctor do if a patient states they would rely on the intercession of their saint rather than the

†††See Coyote Medicine by Native American healer and MD Lewis Miehl-Madrona. As an intern researching thyroid emergencies, I came across a case reporting a patient who emerged from myxedema coma with all traces of lymphoma gone. Of course, the Jews have Tzadiqs (or Holy Friends of God) who may effectuate healing and who also provide amulets and scrolls; the Catholics have the saints, relics, and other articles known for their healing blessings.

*†Talks with local Indian Hindus and Muslims at a mosque built near the tomb of a Muslim Holy Saint (Awliyya – Friend of God) in New Delhi.
ICU for a patient in refractory septic shock? In the West, the scenario is not likely since most immigrants hold conventional allopathic medicine in high regard. In Europe, Africa, Asia, and occasionally in the US, what is likely is that the patient arrives in refractory septic shock when the intercession of the Holy Man, or other nonallopathic means was clearly not yielding the desired baraka of cure. However, all any doctor can do ethically is his or her best to explain the diagnosis and plan to the patient or the family—and offer what the doctor would offer their own. What almost all patients want is to 1) make sure that the doctor understands and respects their perspectives and their concerns for wellness, and 2) once the patient trusts that the doctor has understood all relevant psychospiritual and medical concerns, they desire that the doctor handle their care as they would for their own family. Whether this falls into what the patient or family sees as appropriate or not is fundamentally not the doctor’s responsibility as long as the doctor has done his best to educate the patient on the medical perspective. From the traditional Islamic perspective, there is a strong premise to heed the advice of the doctor, and hence, disagreements and noncompliance with medical interventions of proven benefit cannot take place based on religious grounds; rather such noncompliance is necessarily the personal opinion of the refusing patient. In this regard, respecting the patient’s understanding of prayers and supraphysiologic means of obtaining wellness is important, especially as a means of enhancing comfort and compliance with an allopathic modality which they may otherwise believe has no value when compared to prayer or invocation to God for restoration of health.

I recall one hospitalized Baptist elderly lady who was refusing a treatment modality to improve her lung function. She told me she would rather not take the medication now that she was stabilized but instead would rely on God to fix her. I smiled and struck up more conversation while my team was watching and probably waiting impatiently, as we had been on call the night before and our census was enormous. Her sweetness, resolve, piety, and sincerity were readily apparent. My words to her meandered around to an anecdote which has analogues in all faith traditions. It is about the behavior of a woman during a flood.

As she is moving, climbing higher and higher in her house, away from the rising water, a neighbor in a canoe rides by, and offers her a lift – she kindly declines and replies, “God will take care of me.” The water rises some more and an hour later—a motor boat passes, and the driver offers her shelter. Her response is the same. Finally, trapped on the roof, she sees a helicopter hover and stop over her—lowering a litter for her to sit in so she can board. Her response is the same. “God will take care of me.” She drowns.

Meeting God, she begins to complain about how she championed the notion of “trusting in His Direct Help and Succour” (known in Arabic as tawakkul) and that she feels awfully let down. God replies, “Well, I sent you a canoe, a motor boat, and even a helicopter!!” We shared a chuckle, and she agreed to comply with the treatment. Of course, the anecdote has to do with the notion of secondary causes and their relationship with divine will, a discussion that becomes quite complex and may often raise more difficult questions. However, in this encounter, it may have been that she was convinced, but equally likely is the possibility that through this exchange, she simply felt more comfortable and less alienated from the hospital experience, or simply appreciated my respect for her sentiment. As much of the literature documents, often times a theistically psychospiritually oriented patient may deepen their trust and enhance their compliance with a physician if they perceive a concordant outlook in their doctor.5

As a Muslim physician, I see no conflict in encouraging the harnessing of healing baraka via the intercession of a holy person, amulet, or prayer, or the water from the holy well of zam-zam in Mecca. Because of my understanding of causality as willed by God in the realm of pathophysiology, I would do my utmost to convince a patient with an acute abdomen to go to the operating room versus seeking the intercession of a holy person. This does not equate with denying the efficacy of the intercession of pious souls, or places charged with baraka—it is simply one of recognizing what is called for by the shariah in a given instance. This is, in essence, a matter of correct triage. It is also to be grateful and amazed at the baraka (blessing in the form of healing) to be found in ventilatory support, pressor management, and the thermodynamic and chemical properties of antibiotic infusions—all obeying the Amr-ullah (the command of God) and miraculous in their own right. This perspective must be explained to patients who may be considering abandoning modalities which have a clear-cut benefit under the excuse of “relying on God.”

What does an allopathic physician do with a terminal cancer patient who tells them they are on their way to the tomb of the prophets’ daughter to pray for a miracle rather than go through their Xth round of chemo? As a Muslim, I cannot deny the efficacy of petitionary prayer, nor the efficacy of the intercession of pious souls, be they dead or alive. All I may ethically do is offer advice as I would to my own. Judging by the methodologies and at times spurious

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5The Sufi master, Doctor of Islamic Law, and Metaphysician Ibn Arabi says that we are to honor secondary causes; they are part and parcel of our world and our experience as humans.

6It is critical to understand the Islamic doctrinal stance regarding seeking the intercession of a pious soul, alive or dead, in petitionary prayer to God. It is not the holy person that is being prayed to—this is to be guilty of Shirk, or partnering another with God; rather, it is their intercession with God that is being sought. Standing before God, you are asking the holy person to advocate for you due to their love for humanity, and due to their rank (maqaam) in God’s eyes. This mechanism is not independent of God’s mercy—simply a manifestation of it. Available at: www. ummah.net/Al_adaab/tawas_nuh.html.
statistical inferences used by an oncology industry in their research results, which claim to justify their protocols, an endeavor which is fed by the tremendous fiscal inertia of the pharmaceutical industry—it might not at all be an incorrect decision to forego chemotherapeutics and seek other means of comfort or even cure.\textsuperscript{6–9} However, in cases where there is clear benefit to allopathic intervention, I can try to convince the patient to make room for both avenues in an optimal manner. As an example, Pt. X is now ready for her 3\textsuperscript{rd} round of chemotherapy for metastatic lung cancer. It is toward the end of the holy month of Ramadan and she wishes to visit a mosque and holy site which is known for its \textit{baraka}. She states she is open to the possibility of a miraculous recovery after the visit. This would throw off her chemotherapy regimen, and she is even considering refusing chemotherapy and may end up reconciling herself with her terminal condition due to the potential transformation of her consciousness during her stay. This of course can be seen as ‘giving up.’ As a Muslim physician, I would likely defer to her wishes, unless there was solid evidence that altering the time regimen would definitely lead to harm. As an academic physician, I am sure that there is no such study that can clearly demonstrate this fact in this context.

However, let us assume there was such harm, or I suspected that she was at risk for infection, or that she just had a pulmonary embolus – according to Islamic doctrine, my sincere advice to her as a physician to cancel her plans allows her a dispensation recognized and honored by God from fulfilling her desired rites. All actions are responded to in accord with intention. She intended to make a pilgrimage to a place of \textit{baraka} out of respect for God’s intercession in her illness. She is unable. Hence, she is to perform what she can of rites and supplications, and the \textit{baraka} which may have been destined to flow to her from the mosque (in the form of cure, or another form), will still flow to her. Although God commands secondary causes, His will is not limited by them.

### Counting on the Miracle

Although seldom necessary, one of the pastoral functions I may be called to play is to remind the supplicant who seeks a miraculous cure of a concept which is considered an article of faith known as \textit{Qadar}\textsuperscript{111}—that misfortune and fortune for a soul is a thing measured out and apportioned. From this perspective, God’s decree for whatever comes of illness may overrule any and all attempts to reverse a situation, just as God’s decree for cure may effectuate through means far from conventional. Moreover, Islamic doctrine clearly sees a purificatory, atoning role for affliction, and coping with it. Moreover, there are powerful blessings within and unique to affliction. In other words, there is \textit{baraka} for the soul through the very act of coping with illness (ie, if cure is not attained). The caveat to this is that a sincere supplication is never unheeded—and if not satisfied in the mortal realm, it is magnified in the coming postmortal states, which are far more real than what we know as earthly life. The following is an extra-Qur’anic saying (hadith) from Mohummad which has been repeated in countless places and times:

The believer will see in his record, on the day of resurrection, some merits he knew he did not earn, nor know anything about the good deeds responsible for them. He will be asked, “Do you recognize these?” So he will say, “I do not know how I came by these.” Then he will be told, “These are compensations for the supplications you made during your earthly life [which were not fulfilled in the manner you desired].\textsuperscript{10}

The role of misfortune in the soul’s journey during earthly life would take us far beyond the present article. Doctors, who choose to engage in some sort of pastoral discussion, should be versed in this perspective in case a patient wishes to deepen the therapeutic relationship by discussing with the doctor about what would become a very pertinent topic.

### References

9. American College for the Advancement of Medicine. Available at: www.acam.org

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\textsuperscript{111}It is the doctor who is ultimately a patient advocate against the corporate/industrial encroachment upon medical decision-making. There are clear-cut cases where downright fraudulent or statistically weak data are used to advocate interventions which have tremendous profit motive. The same holds true for the cardiovascular industry and in general the pharmaceutical industry.

\textsuperscript{11}Literally, “measuring out.” This doctrinal premise is often conflated with predeterminism and predestination by modernists.