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Case Study of the Treatment of Endometrial Cancer Using *al-Ṭibb al-Nabawī*

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Abstract

This case study looks into the treatment of endometrial cancer using *al-ṭibb al-nabawī*. The subject, a 55-year-old female Malay, had a medically-baffling condition but was later diagnosed with endometrial cancer. Her CA 19.9 pancreatic cancer marker had risen from 49 U/ml to 1878 U/ml, astronomically exceeding the normal 37 U/ml. She also had a hypermetabolic lesion measuring 1.0 cm × 0.8 cm with SUVmax 9.1 on the fundus of her uterus. She underwent jinn exorcism and underwent intensive *al-ṭibb al-nabawī* treatments for two weeks. Her health condition improved remarkably, with the CA 19.9 decreasing to 161 U/ml within a short period. The lesion was later reduced to 0.6 cm × 0.8 cm with SUVmax 2.98. This case study looks into the intensive *al-ṭibb al-nabawī* treatment programme that she underwent. It also aims to find alternative explanations for the cause of her endometrial cancer based on Islamic epistemology and ontology. Her rapid recovery is consistent with jinn possession as the underlying cause, and is comparable with a few other cases of jinn possession with extraordinary rapid recovery. The likely explanation is that the jinn inside her produced toxins that resulted in her endometrial cancer and extraordinarily high readings of CA 19.9.

The exorcism of jinn had removed the source of the toxins, enabling supplementary food recommended by *al-ṭibb al-nabawī* to be effective in the healing process. The upliftment of spirituality also contributed to the extraordinary speed of recovery.

Keywords

al-ṭibb al-nabawī – complementary medicine – jinn possession – prophetic medicine

1 Introduction¹

Cancer is a major global health problem, and there are multiple theories concerning the explanation of its origin and development. This paper is a case study of a female endometrial cancer subject. Tests indicated that the cancer had spread to her pancreas, with readings of the pancreatic cancer marker going well beyond normal. At one point, she was hinted that she probably has less than six months to live. However, at the same time, medical experts had conflicting opinions on her case. Her disease profile did not match the diagnosis, and tests gave conflicting results.

It is not uncommon for the public to think that someone with cancer will eventually die from it, especially if the cancer is at stage IV at the time of diagnosis. Faced with imminent death, one would succumb to the news and do nothing. The subject in this case study took a radically different approach. Instead of just accepting what medical professionals have told her, she searched for an alternative explanation of her medical condition. She concluded that her medical condition was caused by *sīhr*, and she became determined to fight it using *al-ṭibb al-nabawī* (Prophetic Medicine) as the dominant form of treatment. This case study looks into the successful treatment of endometrial cancer using *al-ṭibb al-nabawī*.

2 Endometrial Cancer

The endometrium is the inner lining body of the uterus, a hollow muscular organ in a woman's pelvis. The outer layer is called the myometrium, a thick layer of muscles needed to push the baby during birth. The uterus is where the foetus grows. The physiological functions of the endometrium are menstruation in the absence of pregnancy, the preparation for implantation in the case

¹ Date of Submission: 18.03.2022; Date of Acceptance: 12.05.2023.

of pregnancy, and the maintenance of pregnancy. Endometrial cancer is a disease where malignant (cancer) cells form in the tissues of the endometrium. It is one of the most common cancers of the female reproductive system. Those with endometrial cancer often have hypertension, diabetes and obesity. A systematic study has found that obesity is a major risk factor for endometrial cancer.² Obesity with a BMI (Body Mass Index) of 30 is responsible for up to 81% of diagnosed cases.³ The earlier-onset of obesity has dramatically caused endometrial cancer in young women in the past decade.⁴ There is a high correlation between metabolic syndrome and endometrial cancer. Metabolic syndrome is the clustering of three of the followings: central obesity, high blood sugar, high blood pressure, high serum triglycerides and low serum high-density lipoprotein. It has been suggested that endometrial cancer can be inhibited by interfering with the tumour metabolic micro-environment molecular signals.⁵ The survival rate of endometrial cancer in the UK, for example, varies from 15% for stage IV to 95% for stage I.⁶

In general, endometrial cancer is classified into two types. The most common form is Type I, with 70% of cases. The tumours of Type I, known as endometrioid adenocarcinoma, are associated with unopposed estrogen stimulation. Type II is of papillary serous or clear cell histologic type. Type I tumours are generally low-grade, with Type II tumors more likely high grade.⁷ The most commonly used test for its diagnosis is the endometrial biopsy, whereby a very thin, flexible tube is inserted into the uterus through the cervix.⁸ An unintrusive method for the diagnosis of endometrial cancer has also been suggested.⁹

2 Raglan, Olivia, Ilkka Kalliala, Georgios Markozannes, Sofia Cividini, Marc J. Gunter, Jaya Nautiyal, Hani Gabra, et al. "Risk Factors for Endometrial Cancer: An Umbrella Review of the Literature." *International Journal of Cancer*, 145/7, 2019, pp. 1719–1730. <https://doi.org/10.1002/ijc.31961>.

3 Moore, Kathleen, and Molly A. Brewer. "Endometrial Cancer: Is This a New Disease?" *American Society of Clinical Oncology Educational Book*, 37, 2017, pp. 435–442. https://doi.org/10.14694/edbk_175666.

4 *Ibid.*

5 Yang, Xiao, and Jian Liu Wang. "The Role of Metabolic Syndrome in Endometrial Cancer: A Review." *Frontiers in Oncology*, 9, 2019, pp. 1–14.

6 Cancer Research UK. n.d. "Uterine Cancer Statistics." Accessed May 9, 2023b. <https://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/uterine-cancer>.

7 Braun, Michael M., Erika A. Overbeek-Wager, and Robert J. Grumbo. "Diagnosis and Management of Endometrial Cancer." *American Family Physician*, 93/6, 2016, pp. 468–474.

8 American Cancer Society. n.d. "What Is Endometrial Cancer?" Accessed May 2, 2023. <https://www.cancer.org/cancer/endometrial-cancer/about/what-is-endometrial-cancer.html>.

9 Jones, Eleanor R, Helena O'Flynn, Kelechi Njoku, and Emma J. Crosbie. "Detecting Endometrial Cancer." *The Obstetrician & Gynaecologist*, 23/2, 2021, pp. 103–112. <https://doi.org/10.1111/tog.12722>.

Treatment can be in hormone therapy, chemotherapy, radiotherapy or surgical operations for patients with very early lesions to improve their survival, but the effectiveness is still uncertain. Four stages are used to denote the severity of the cancer. Stage I is the early stage where the cancer is in the womb. Stage II means that the cancer has grown into the cervix. Stage III means cancer has spread outside the womb but still within the pelvis, and Stage IV has spread to other body parts.¹⁰ After diagnosis, tests are carried out to find if the cancer cells have spread within the uterus or to other body parts.

Various cancer markers are used to denote the severity of cancer in other parts of the body. For example, the Carbohydrate CA 19.9 is a tumour marker commonly associated with pancreatic cancer. The normal range is between 0 and 37 U/mL. Those with pancreatic cancer will have higher levels. The growth of the tumours can be monitored through various tests. Among them is the CT-Scan, a series of high-resolution X-rays that gives a 3-D image; the MRI, or magnetic resonance imaging, builds a 3-D image using radio and magnetic waves; and the positron emission tomography or PET Scan, which is specifically designed to identify cancers. PET using fluorine-18-labelled fluorodeoxyglucose (FDG) provides information about tissue glucose metabolism. Standardised uptake value is the measurement of the uptake of FDG by malignant tissues. Values of 2.5 or higher are considered to be indicative of malignant (cancer) tissues. The measurement of the SUV in the maximum region of interest (ROI max) is called the SUVmax, *i.e.* the maximum standardised uptake value. SUVmax is widely used for the measurement of the uptake of FDG by malignant tissues. PET can image and quantify any increased FDG uptake values, reflecting the viability of cancer cells.

3 Scope and Methodology

This is a case study on a female subject who had endometrial cancer but at the same time had conflicting opinions from medical experts. She was still functioning normally in her daily life, but tests gave extremely alarming results. Her disease profile did not match the given diagnosis. Data is taken from transcripts of her WhatsApp communications with family members over two years. Records of test results were also made available for the study.

¹⁰ Cancer Research UK. n.d. "https://www.cancerresearchuk.org/about-cancer/womb-cancer/stages." Accessed May 2, 2023. https://www.cancerresearchuk.org/about-cancer/womb-cancer/stages.

This case study into the treatment of endometrial cancer from the perspective of Islamic epistemology and ontology compared to Western epistemology and ontology. Islam and the West have different epistemology and ontology. Epistemology is the theory of knowledge, especially in the method, validity and scope. The source of knowledge of Western medicine is scientific findings. Islam, on the other hand, has two sources of knowledge. The first is *naqli* knowledge, or knowledge from Allah that is revealed through the Prophet. The second is *aqli* knowledge or knowledge derived from human reasoning, *e.g.* scientific findings and logical reasoning. *Naqli* knowledge includes knowledge of the unseen that is impossible to be achieved through human thinking. Islam acknowledges the importance of *aqli* knowledge and, in the case of using forensic evidence to clear Prophet Yusuf from the allegation that he tried to seduce a woman. The location of the tear on his shirt, whether in the front or the back, was presented as evidence of whether he was guilty or innocent. Ontology is knowledge about beings. Western ontology does not believe in unseen creatures, *e.g.* jinn. The knowledge of these unseen creatures can only be obtained from *naqli* knowledge.

4 Case Presentation

The subject, a 55-year-old female Malay living in Malaysia, started getting pain on the right side of her uterus. She had previously been tested for pancreatic cancer in 2016 when her pancreatic tumour marker CA 19.9 was 46 U/mL. That reading was higher than the normal value of zero to 37 U/mL. The test results revealed that her pancreatic tumour marker CA 19.9, taken in December 2018, when she felt the pain, had risen to 82 U/mL. Her amylase was also above the normal range. Amylase is an enzyme produced that helps to digest carbohydrates in food. About 40% of the amylase is made by the pancreas. The high level of amylase may be associated with pancreatic cancer.¹¹ Her weight also reduced to 44 kg, a loss of 4 kg from her normal weight. Her blood pressure was also high at 190/102.

Her CA 19.9 was 82 U/mL, so she was informed that one of her doctor's patients only lived for six months after the tumour marker reached 60 U/mL. She continued with her daily life despite the remarks from her doctor and survived more than six months than what her doctor had expected. About a

11 University of Rochester Medical Centre. n.d. "Amylase (Blood)." Accessed May 9, 2023. https://www.urmc.rochester.edu/encyclopedia/content.aspx?contenttypeid=167&contentid=amylase_blood.

year and a half later, in June 2020, her CA 19.9 increased astronomically to over 800 U/mL. This created a tremendous alarm on her, and she took the issue of survival very seriously. She had also been looking after her bedridden elderly father, who was in his 90s, for many years, and her main worry then was who would look after her father if she died.

Further examinations of her condition revealed more problems with her health. A lesion was found in the muscles. A hypermetabolic lesion measuring 1.0 cm × 0.8 cm with SUVMax 9.1 was observed on the fundus of the uterus through a positron emission tomography (PET) scan and MRI. However, the tumour marker for endometrial cancer was negative. In typical cases, even those with stage three endometrial cancer will still have normal CA 19.9 readings, but in her case, the readings were exceptionally far above normal. The medical consultant informed her that her disease profile did not match the cancer. A lesion is an area of abnormal tissue, and it may be benign, *i.e.* not cancerous, or malignant, *i.e.* cancerous.¹² The lesion made her case look like sarcoma cancer. Soft tissue sarcomas are a group of rare cancers that affect connective and supporting tissues in the body.¹³ Doctors were baffled as there were discrepancies between her symptoms and the cancer diagnosis. Two weeks later, in early July 2020, she went for a biopsy and other tests for further investigation while maintaining endometrial cancer as a working diagnosis.

Working diagnosis is used when there is a possibility of many diagnoses. In this case, it means that cancer was the likely diagnosis even though other possible diagnoses had not been ruled out. However, the biopsy result a week later indicated that she had endometrial adenocarcinoma cancer. An 11 × 5 × 5 cm intermediate signal area was seen close to the fundus on the right side when an MRI scan was done in mid-July 2020. It also showed a low signal on the T1 weighted sequence with mild enhancement with contrast. There was no evidence of adenomyosis or fibroid. Her CA 19.9 reading in mid-August 2020 rose to an alarming 1878 U/mL, far above the normal upper limit of 37 U/mL.

5 Narrative of Alternative Diagnosis by the Subject

With medical diagnosis pointing to endometrial cancer, CA 19.9 readings far above normal, and the prospect of imminent near death, one will usually succumb to fate and wait for the inevitable death soon. The discrepancies

12 National Cancer Institute. n.d. "National Cancer Institute Dictionary." Accessed May 9, 2023. <https://www.cancer.gov/publications/dictionaries/cancer-terms/def/lesion>.

13 NHS UK. n.d. "Soft Tissue Sarcomas." Accessed May 9, 2023. <https://www.nhs.uk/conditions/soft-tissue-sarcoma/>.

between her symptoms and the diagnosis also baffled her. She wanted to know why there were discrepancies and why her CA 19.9 had gone beyond imagination. Those who are obese are more likely to get endometrial cancer, but she was, in fact, underweight. She was convinced that her case was not a typical medical condition and there must be an alternative explanation for her medical condition. As a Muslim, she believes in jinn possession, which can cause physical illnesses, psychological disorders, or both. In Islamic epistemology and ontology, jinn is an invisible being with intellect and can transform itself from one state to another and enter the human body. The transformation of the physical state is likened to the transformation of H₂O, which can exist in three different states, *i.e.* solid ice, liquid water and gaseous water vapour. This ability to transform itself from one state to another enables jinn to enter the human body. A jinn inside the body is considered a parasite and, over time, will harm the person physically or mentally. Modern medicine rejects jinn's existence and concludes that jinn possession is an impossibility.

The subject had experienced jinn possession about ten years prior to that and had undergone Islamic treatments for jinn possession. She believed that the reason for the jinn possession then was *sihr*, or sorcery, in an attempt to kill her. *Sihr* is a contract between a sorcerer and a jinn to harm someone clandestinely. She survived that and believed that her current medical condition was another *sihr* attempt to kill her. *Sihr* can result in a phenomenon that can defy logic and science. Science does not have answers to everything, and phenomena exhibited by *sihr* should be regarded as knowledge still yet to be discovered by science. This is proved in the case of an Indonesian lady who had 2000 nails in her body. The first response of psychologists or psychiatrists on hearing this, is normally to question whether the lady had a mental disorder and had swallowed the nails. However, the lady was admitted to a hospital and X-rays revealed many nails in the legs, thus dismissing any possibility that she had swallowed them. The nails were taken out through surgical operations, and to the surgeon's astonishment, new nails appeared a few days later while the patient was in the hospital. On one occasion, a long nail appeared near her elbow while in the hospital, making it impossible for her to flex her arm. The nail was tangible and visible via X-ray. The surgeon decided to call an Islamic *ruqyah* practitioner to treat the lady. She spat a nail from her mouth when *ruqyah* was read on her.¹⁴ *Ruqyah* is a popular therapy for jinn

14 Rahman, Nor Azian Ab, Sagiran Sukardi, and Supyan Hussin. "A Case Study of Modern Medical Practice and Islamic Complementary Therapy on a Patient with Over 2000 Embedded Nails." *International Journal of Public Health Science*, 4/4, 2015, pp. 310–314. <http://www.iaesjournal.com/online/index.php/IJPHS/article/view/8895>.

possession.¹⁵ It involves the incantation of selected verses of the Quran, salutations of the Prophet, supplications and others that are compliant with the Islamic shari'ah.¹⁶ *Ruqyah* therapy is not limited to the treatment of jinn possession. However, it has also been known to act as an antidote for poison during the time of the Prophet, where a companion of the Prophet treated the chief of a tribe by reciting surah al-Fatihah.¹⁷ It has also been known to be successful in treating other ailments, such as in the case study of the treatment of a person with cluster headaches. In the case related to the cluster headache, the subject's condition got worse through modern medication, and he only responded to morphine during any episode. Intensive *ruqyah* sessions enabled him to recover fully from cluster headaches.¹⁸ *Ruqyah* is an incantation through the recitation of Quranic verses or other recitations that complies with Islamic shariah, such as salutations of the Prophet or supplications, as long as they do not contain any polytheistic content. The case showed that science still cannot explain certain phenomena. Therefore, medical doctors should not dismiss their patients' accounts of jinn possessions and sorcery.

The subject was convinced that her endometrial cancer must have been caused by jinn possession. Islamic epistemology and ontology accept the existence of jinn, which can cause diseases, and believing in that makes more sense than being baffled by contradictory explanations of Western medicine. So she started looking for complementary Islamic therapies to solve her health problems.

6 Health Progress during Complementary Treatment

The subject's CA 19.9 reading in mid-August was 1878 U/mL, and she was told that she had to undergo a surgical operation promptly. She was convinced

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- 15 Eneborg, Yusuf Muslim. 2013. "Ruqya Shariya: Observing the Rise of a New Faith Healing Tradition amongst Muslims in East London." *Mental Health, Religion & Culture*, 16/10(2013), pp. 1080–1096. <https://doi.org/https://doi.org/10.1080/13674676.2012.740631>.
 - 16 Khadher, Ahmad, Mohd Anuar Ramli, and Nor Azian Ab Rahman. "Pemahaman Terhadap Aspek Penggunaan Ruqyah Dalam Rawatan Penyakit: Analisis Berasaskan Fiqh Al-Hadith Imam Al-Bukhari." *Al-Bayan – Journal of Qur'an and Hadith Studies*, 14, 2016, pp. 168–205. <https://doi.org/10.1163/22321969-12340038>.
 - 17 Al-Bukhārī, Mohammed bin Ismā'īl, Ṣaḥīḥ al-Bukhārī Vol. 7 (1st ed.). Damascus: Dar al-Taseel, Hadith No. 5736, (2012), pp. 379–380.
 - 18 Rahman, Hamidi Abdul, and Supyan Hussin. "Case Study of Using Ruqyah Complementary Therapy on a British Muslim Patient with Cluster Headache." *European Journal of Medical and Health Sciences*, 3/1, 2021, pp. 5–7. <https://doi.org/10.24018/ejmed.2021.3.1.635>.

that her condition was caused by jinn possession. She believed that *al-ṭibb al-nabawī* complementary treatment could help her recover and possibly have no need for any surgical operation. The concept of *al-ṭibb al-nabawī* is not limited to supplementary food intake. It includes all forms of treatment approved by the Prophet, whether physical or spiritual. The subject underwent numerous sessions of Islamic exorcism treatments from different practitioners. Every practitioner's approach or method is normally based on their knowledge and experience. The different approaches complemented each other. She also changed her diet to include food supplements as recommended by *al-ṭibb al-nabawī*, and food supplements are also recommended by traditional Malay medicine. Traditional Malay medicine is based on *al-ṭibb al-nabawī* but focuses on local substances such as local herbs or local plants. Hijama or wet cupping is also recommended in Islam and falls within *al-ṭibb al-nabawī*. Hijama is a quick detoxication of the body by extracting surface blood from just beneath the skin. A surgical blade is used to scratch the skin after a suction by a vacuum pump is applied. This process releases toxic blood. She had many sessions of hijama from different hijama practitioners. In addition to all those efforts, she also increased her Islamic spiritual practices. The spiritual practices include recitation of the Quran, various salutations (*salawat*) of the Prophet, supplications (*duas*) and recommended (*mandub*) prayers in addition to the obligatory prayers. In the Islamic faith, some verses of the Quran can be used to cure ailments. This is mentioned in the Quran (Al-Quran 17:82). Spirituality is also acknowledged as a contributor to health in many studies. She had been engaging in those efforts prior to that but on a much lesser scale.

The subject was convinced that the jinn inside her body had caused many health issues, and her priority was to get rid of the jinn. In one of the shari'ah-compliant Islamic exorcism treatments that she underwent, a jinn was forced out of her body. The exit of the jinn had a positive effect on her health. Her CA 19.9 reduced to 161 U/mL in late August 2020, a remarkable drop from 1878 U/mL just two weeks after she embarked on the intensive complementary treatments.

A surgical operation was set for the end of September 2020 as the doctor relied on results of the biopsy rather than the tumour marker readings. However, in mid-September 2020, her CA 19.9 result dropped further to 86.8 U/mL. Her surgery appointment was later cancelled. Her health continued to progress, and her CA-19 in mid-December 2020 dropped to 45.7 U/mL. At the end of December 2020, the hypermetabolic lesion had become smaller, measuring 0.6 cm × 0.8 cm with a SUVmax of 2.98.

7 Results

The intensive *al-ṭibb al-nabawī* treatment programme had astonishing results that baffled modern medicine. The reduction of the CA 19.9 cancer marker by 1717 U/mL within two weeks was unbelievable but true as they were measured using medical equipment. Those medical instruments have validity and reliability, and their readings cannot be disputed. The alternative explanation is that the medical instruments malfunction every time a reading was taken on her, but that does not make sense. Her CA 19.9 cancer marker dropped a further 72 U/mL in the next two weeks and dropped another 41 U/mL six weeks later. Her doctors could not explain those decrease as she had not taken any medication nor had she had any surgical operations. The size of the hyper metabolic lesion had also reduced within six months of discovery. The positive results could only be attributed to her intensive *al-ṭibb al-nabawī* treatment programme. More than four years have elapsed since her doctor told her she had only six months to live. She is currently functioning as normal.

8 Discussion

The belief in possession exists in many cultures. ICD-11 describes “Possession trance disorder” as a person’s identity being replaced by an external ‘possessing’ identity.¹⁹ Different cultures refer to the “possessing identity” with different names depending on the species. Publications in academic journals commonly used the term “spirit possession.” “Demon possession” is also used to denote possession by evil spirits, differentiating them from good spirits. For Muslims, the external ‘possessing’ identity refers to jinn. The term “jinn possession” is now used for possession within the Muslim community instead of spirit or demon possession. Jinn possession is when there is one or more jinn in the human body, and the presence of jinn in the body may or may not cause a trance. Jinn possession may also not exhibit any visible symptoms of physical diseases. The evidence of jinn possession in the Quran lies in verse 275 of Surah al-Baqarah, which states that in the hereafter, a person who took usury will not be able to stand with stability as if he is possessed by jinn.²⁰

19 WHO. “ICD-11 for Mortality and Morbidity Statistics (Version: 09/2020),” 2020. <https://icd.who.int/browse11/l-m/en#/http://id.who.int/icd/entity/1374925579>.

20 Al-Qurtubi, Abi Abdillah Muhammad. *Al-Jāmi’ li al-Aḥkam al-Qur’ān Volume 10*. 1st ed. Beirut-Lebanon: Al-Resalah Publishers, 2006, p. 42.

Jinn can enter the human body for nine reasons. The first and most popular reason is *sihr*. This is when the jinn enter the human body as a mercenary and tries to execute commands given by the sorcerer. The second is through *susuk* or charm needles to create the illusion of beauty for the opposite sex. This practice is common in the Malay world, and charm needles can be seen via X-rays.^{21,22} The third is an act of revenge by the jinn in response to actions done by the human, such as unknowingly urinating on the jinn. The fourth is the malicious intention, whereby the jinn enters the human body for fun or malicious intentions. The jinn may or may not know that entering the human body is forbidden by God. The fifth is to deviate the human from the true path as promised by *iblis* (Al-Quran 38:77–78). The sixth is when the person exposes himself or herself to activities or rituals associated with jinn, such as playing the Ouija board. The seventh is using jinn in martial arts, knowingly or unknowingly.²³ The eighth is when a jinn falls in love with the person.²⁴ This may result in the person having difficulty in marriage or problems with sexual intercourse, such as vaginismus in women and selective erectile dysfunction in men.²⁵ The ninth is inheritance through ancestral agreement to do a particular task. This is common in the Malay world and the term “saka” is used to refer to this type of jinn.

From the Islamic perspective, jinn can cause diseases or mental disorders. Jinn is spiritually similar to humans; they also have psyches or minds. Western psychology divides humans into two parts. The first part is the tangible component, called the soma or body, and the second part is the intangible component, called the psyche or mind. In Islam, the tangible component is called the *jasad*, and the intangible component comprises the *aql* and *qalb*. The *aql* is the intellect component of the psyche, and the *qalb* equivalent is the cognitive component of the psyche. Imam al-Ghazalī gave two definitions for *qalb*. The first refers to the physical heart organ, and the second refers to an intangible

21 Nambiar, Phrabhakaran, Norliza Ibrahim, Yeti Rosalina Muslim Tandjung, and P. Shanmuhasuntharam. “Susuks (Charm Needles) in the Craniofacial Region.” *Oral Radiology*, 24/1 (2008), pp. 10–15. <https://doi.org/10.1007/s11282-008-0069-3>.

22 Erle Chuen-Hian, Lim, Ng Tsong-Haur, and Seet Raymond Chee-Seong. “A Woman Whose Radiographs Showed Subcutaneous Metallic Objects.” *JAMC*, 173/2, 2005, p. 150.

23 Amran, Kasimin. “Silat Melalui Perantaraan Jin Lebih Memudaratkan.” Utusan Online. http://www.utusan.com.my/utusan/info.asp?y=2004&dt=0516&pub=Utusan_Malaysia&sec=Bicara_Agama&pg=ba_02.htm, 2004.

24 Al-Shibli, Badr al-Din Muhammad ibn Abdullah. 2017. *Akām al-Marjān fī Ahkam al-Jānn*. 1st ed. Beirut: Dar al-Farabi, 2017, pp. 152–159.

25 Rahman, Hamidi Abdul, Supyan Hussin, and Zaharom Ridzwan. “Islamic Existential Psychotherapy as Intervention for Inter-Psyche Conflicts in Jinn Possession.” *Global Journal Al-Thaqafah*, Special Issue, 24, 2022, pp. 23–35.

component whereby a person can perceive knowledge and experiences and be accountable for his or her actions. This intangible component is linked to the physical heart component.²⁶ The presence of jinn inside a human body results in multiple psyches, and this can cause inter-psyche conflicts between the human psyche and the jinn psyche. These conflicts can cause symptoms.²⁷ Jinn, a living creature, needs food to survive, and there is numerous evidence in the Islamic text that jinn eats and drinks.²⁸ Food consumption also means that the jinn will also have to excrete wastes, which are toxins to the human body. Over time, the build-up of toxins can affect the human body's homeostasis. The homeostasis imbalance can harm human organs, decreasing their efficiency and functional capability and even lead to organ malfunction. In severe cases, this may lead to death.

There is more advantages for jinn to be inside the body rather than on the outside. Once inside the body, the jinn may take partial or full control of the human central nervous system. These lead to partial or total possession. Total possession can be in two forms. The first is when the jinn takes full control and uses the victim's personality. The public will not be able to notice any changes, but the victim will not be able to remember anything that happened during the period of possession. The second time of possession is when the jinn exhibits its personality, and the public can see the personality change, but the victim cannot recall anything that happened. Partial possession is where the jinn can only have partial control of the human psyche. Partial possession is also of two types. The first is when the person is aware of being possessed but may or may not take back control. The second type is when the jinn imitates the person's thoughts without the person realising it. This will result in irrational thoughts such as suicidal ideation. By controlling the central nervous system, the jinn can control the human muscular system to cause conditions such as vaginismus or selective erectile dysfunction. Furthermore, the production of toxins inside the human body to cause physical damage to the person can only happen when the jinn is inside.

A quantitative study identified 23 significant and 11 non-significant symptoms of jinn possession.²⁹ The significant symptoms are as in Table 1. Based on

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- 26 Abu Ḥamid al-Ghazālī. *Iḥyā' Ulum al-Dīn*. 1st ed. Beirut-Lebanon: Dar Ibn Hazim, 2005, p. 877.
- 27 Rahman, H. A., Mokhtar, M. K., Roseliza-Murni, A. R., & Kasim, A. C. Intra and Inter-psyche Conflicts and Analysis of Symptoms of Jinn Possession. *Malaysian Journal of Medicine and Health Sciences*, 15/SUPP1, 2019, pp. 110–113.
- 28 Al-Shibli, Badr al-Din Muhammad ibn Abdullah. 2017. *Akām al-Marjān fī Aḥkām al-Jānn*. 1st ed. Beirut: Dar al-Farabi, 2017, pp. 72–76.
- 29 Rahman, Hamidi Abdul, Mostafa Kamal Mokhtar, Ab Rahman Roseliza-Murni, and Arena Che Kasim. "Intra and Inter-Psyche Conflicts and Analysis of Symptoms of Jinn Possession." *Malaysian Journal of Medicine and Health Sciences*, 15/SUPP1, 2019, pp. 110–113.

TABLE 1 Significant symptoms of jinn possession

Category	Symptom
Abnormal Thoughts	Paranoid Ill thoughts Loner Inability to focus
Faith Delusion	Doubtful of Islam Strong feeling towards non-Islamic elements Feeling suicidal Loss of meaning of life
Scary Dreams	Dream of falling from high place Dream of poisonous or predatory animals Dream against Islam Dream of filthy place Dream of strange features Dream of ghosts Dream of deserted road
Sleep Disturbances	Crying during sleep Laughing during sleep
Low Mood	Extreme tiredness Aversion from remembering Allah Laziness Absent-mindedness
Hallucinations	Seeing things Hearing voices

the symptoms of jinn possession, the subject had 11 significant symptoms, *i.e.* “aversion from remembering Allah,” “absent-mindedness,” “laziness,” “seeing things,” “dream of falling from a high place,” “dream of a filthy place,” “dream of a deserted road,” “dream of strange features,” “extreme tiredness,” “inability to focus” and “ill thoughts.” She also had three non-significant symptoms, *i.e.* “inability to fall asleep,” “frequent headaches” and “extreme anger.” A scale for diagnosing jinn possession based on the symptoms of jinn possession had been developed and validated against a new set of 188 subjects.³⁰ The scale

30 Rahman, Hamidi Abdul, Supyan Husin, and Zaharom Ridzwan. “Scale for Positive Identification of Jinn Possession.” *Sains Insani*, 6/3, 2021, pp. 21–26. <https://doi.org/https://doi.org/10.33102/sainsinsani.vol6no3.357>.

measures the possibility of jinn possession, and any score above 1.9 is considered positive jinn possession. The subject's jinn possession score was 5.896, indicating positive jinn possession. The expulsion of jinn in one of her exorcism treatments also confirms that she had jinn possession.

Jinn possession can cause physical as well as mental health problems. Many of the subject's symptoms also indicated that her mental health was affected. However, her mind was strong, and she could function normally. The exorcism of the jinn was a turning point toward her recovery. A possible explanation that can be given is that the jinn inside her body had been producing enormous toxins. This had caused an abnormality in the fundus of her uterus. It also caused problems to her pancreas as shown by the CA 19.9 readings. After the expulsion of the jinn, no new toxins were produced, and the CA 19.9 reading improved towards normality in a short time. A similar phenomenon was observed in the case of a female patient with severe eczema.³¹ Her skin condition was extremely bad and watery with extreme itchiness. Piles of dead skin covered her bed every time she goes to bed, and she could only wear loose and slippery clothes. She had been using moisturising lotions, but that had no effect. She, too had several symptoms of jinn possession, *i.e.* seeing things, hearing voices, paranoia, laziness, loss of meaning of life, ill thoughts, and crying while asleep. Her jinn possession score was 4.61, indicating positive jinn possession. She underwent a 3-day intensive *ruqyah* therapy. In one of the sessions on the second day, the jinn in her body went out. Her skin condition improved remarkably after that. Within four days from the start of treatment, her skin condition went back to normal. Her recovery was not due to any medication because she had none. This could only mean that the remarkable improvement could be attributed to no new toxins being produced in her body after the jinn was expelled. A similar phenomenon may have happened in the case of this subject with endometrial cancer.

In this case, she embarked on several *al-ṭibb al-nabawī* treatments. These include the increase in Islamic spiritual practices, many sessions of hijama, adhering to recommended food and diet based on the *al-ṭibb al-nabawī*, and many sessions of *ruqyah*.

Factors that contributed to the subject's recovery were:

- i. The inconsistency between the symptoms and diagnosis by modern medicine has led her to seek an alternative explanation for the illness. She was convinced it was a case of jinn possession and that the appropriate spiritual actions and complementary therapies had resulted in

31 Rahman, Hamidi Abdul, and Supyan Hussin. "Case Study of Ruqyah Therapy On Muslim Patient with Eczema." *European Journal of Medical and Health Sciences*, 3/1, 2021, pp. 41-43. <https://doi.org/10.24018/ejmed.2021.3.1.696>.

therapeutic benefit. When jinn possession is the underlying cause of a disease, treatment will be meaningless unless the issue of jinn possession is addressed. There are some similarities between her case and the cases of the person with severe eczema, the person with cluster headache, and the person with 2000 nails, as mentioned earlier. In the case of the person with 2000 nails, the surgeon was battling with the reappearance of nails whilst the patient was still in the hospital. That reappearance only stopped after the issue of jinn possession was sorted out.

- ii. The subject's determination to win the fight has significantly weakened the jinn and made the balance of power in her favour. The intensification of her efforts in increasing her spirituality, and the observation of her prophetic diet for treatment had weakened the jinn significantly. Before that, the jinn was strong and could cause harm to her without facing many challenges from her. By embarking on the *al-ṭibb al-nabawī* treatment programme, she became a stronger person both spiritually and physically. The jinn had to face a stronger challenger and realised it was fighting for its survival. The jinn had to choose between fighting or fleeing, and the result was clear. The jinn left her body. Determination is vital in the fight against diseases or disorders. This can be enhanced through psychotherapy or Islamic spiritual methods like tasawwuf.
- iii. The subject's firm belief that *shifa* (cure) comes from Allah gave her hope. It made her very determined to put all efforts into recovery and trust Allah despite her doctor hinting that her condition could only get worse, with near death as the likely outcome. She was not in denial of the possibility of her death. This was shown by the concern about who will take care of her bedridden father if she died. Muslims believe that death is a transition from one realm to another. A person's primary and everlasting component is the *ruh* or soul. In Islamic belief, the soul was created much-much earlier, in the realm of the soul. It then lives in another realm, the realm of the mother's womb. Upon birth, the soul enters the third realm, the current worldly realm, where the physical body is just a vehicle for existence on Earth. Upon death, the soul lives in the realm of the grave and finally will enter the realm of the hereafter. This belief in the transition from one realm to another brings hope of a better life in the final realm, *i.e.* the realm of the hereafter. This is in contrast to those who do not believe in the hereafter. These people will consider death as a total loss. They will go through different stages of grief in Western psychology as defined by Kübler-Ross, *i.e.* denial, anger, bargaining, depression and acceptance.³²

32 Psycom, "The Five Stages of Grief," 2022. <https://www.psycom.net/stages-of-grief>.

Western medicine does not believe in the existence of jinn and limits their explanation based on scientific findings. Many findings are based on correlational studies. It is important to note that correlation does not mean causation. For example, there is a correlation between schizophrenia and an increase in dopamine levels. However, the increase in dopamine levels is not the cause of schizophrenia. If we use Islamic epistemology, we can have an alternative explanation *e.g.* schizophrenia is caused by jinn possession, and the presence of jinn causes an increase in dopamine levels. Similarly, in this case study, we can propose that the endometrial cancer was caused by jinn possession, and the presence of jinn in the body resulted in the formation of lesions in the fundus and the increase in the pancreatic cancer marker. Surgical intervention can remove the lesion but will not be able to remove the jinn, and new lesions will appear in the uterus. However, if the jinn is removed, then new lesions will not appear. The existing lesion may be treated using a medication, if any, or through complementary medicine such as *al-ṭibb al-nabawī*.

9 Recommendations for Further Research

There are many diseases that still have no effective treatment. Modern medicine, although mainstream, does not have answers to all diseases. On the other hand, traditional and complementary medicine (TCM), which has its own beliefs and theories, does have cases of success where modern medicine failed. For that reason, the World Health Organisation wanted to harness the potential of TCM and developed a strategy to support member states.³³ *Al-ṭibb al-nabawī* is a TCM that can potentially become mainstream if more scientific research is conducted on its effectiveness.

The presence of jinn possession in this endometrial cancer case brings the possibility that endometrial cancer may be caused by jinn possession. Western medicine is inclined to use invasive methods, *i.e.* surgical interventions to remove the cancerous tissues or organs to prevent the cancer from spreading. With the jinn still inside the body, the possibility of the cancer spreading is high, and this will require further surgical interventions to remove more parts of the human body. These will inevitably lead to further medical complications. If after many organs have been removed and the patient is found to have jinn possession, it may be too late to do anything.

33 WHO. WHO *Traditional Medicine Strategy 2014–2023*. World Health Organization (WHO), 2013.

A better approach would be to start with a non-invasive method to check the possibility of jinn possession. A validated scale for the diagnosis of jinn possession is already available. This has the advantages of being non-invasive, providing quicker results, and can be used by anyone without the need to learn *ruqyah* or other methods to diagnose jinn possession. Those with endometrial cancer should first be checked for jinn possession. If positive, complementary therapy for the treatment of jinn possession should also be done alongside any necessary medical interventions. Research on this is necessary as any positive result can reduce unnecessary surgical operations and save many lives.

10 Conclusion

The Prophet said that Allah does not send down a disease without a remedy.³⁴ The search for remedies for diseases initiated the translation movement during the Abbasid Caliphate, which translated books from other languages into Arabic for almost 300 years. The impact of the translation was significant, giving the Muslims advanced knowledge of medicine and other disciplines.

With only one case in the study, it is impossible to conclude. However, the events that have unfolded suggest a few things. Firstly, one or more jinn in a body can cause physical diseases, and the severity of the disease can increase as long as the jinn remains in the body. Secondly, once the jinn has left the body, recuperation can happen by taking *al-ṭibb al-nabawī* food or substances. Thirdly, spiritual effort and strength, a firm belief that a cure comes from Allah, is necessary to give someone hope for recovery and embark on intensive treatment.

It was impossible to identify the level of contributions of each food, substance, or therapy in the *al-ṭibb al-nabawī* treatment plan that contributes to the recovery. Major positive changes happened within the first two weeks whilst the subject focused on maximum engagement with *al-ṭibb al-nabawī*. However, this shows that *al-ṭibb al-nabawī* has something to offer to cure cancer that modern medicine cannot provide. The interest in complementary medicine is gaining momentum, and more focus should be given to research on *al-ṭibb al-nabawī*. The effect of *ruqyah* is not only on Muslims but has also been shown to be effective on non-Muslims.³⁵ Modern medicine relies on only

34 Al-Bukhārī, Mohammed bin Ismā'īl, Ṣaḥīḥ al-Bukhārī Vol. 7 (1st ed.). Beirut-Lebanon: Dar al-Taseel, Hadith No. 5678, 2012, p. 353.

35 York, Carrie M. "The Effects of Ruqya on a Non-Muslim: A Multiple Case Study Exploration." *Institute of Transpersonal Psychology* PhD dissertation, 2011.

one source of knowledge, *i.e.* *aqli* knowledge. *Al-ṭibb al-nabawī* has two sources of knowledge, *i.e.* *aqli* and *naqli* knowledge. This gives *al-ṭibb al-nabawī* the potential to become a serious alternative to modern medicine.

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