Study of Ensuring Human Health Issues in Religious Doctrine

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Received 18th Feb 2022, Accepted 19th Mar 2022, Online 30th Apr 2022

Abstract:
After the fall of the Roman Empire in the 5th century CE, the Middle Ages lasted until the fall of Constantinople in 1453. The Western Christian civilization had its own roots of religious interactions with health and medicine until about a millennium ago. The population of pre-Christian Europe was quite limited, and people lived in small villages. As a result, they were less prone to contract infections since they did not generate human waste or litter, which attracted disease-carrying insects and animals, as densely populated metropolitan areas do.

Keywords: religion, medicine, religious doctrine, Europe, doctor, Greek, Christianity, Islam.

Despite the fact that post-Christian European medicine was associated with a variety of religious foundations, it also absorbed some pre-Christian medical foundations. Sources on the history of medicine in the Byzantine Empire today – Pergamon's Oribasi's "Medical Collection", "Synopsis", "Medicines for everyone" (IV–V), The Book of the Four by Aetius, the first Byzantine Christian physician from Amida and a servant of the Emperor Justinian (VI), Alexander from Troll (VI–VII), also in the library of the Medical Faculty of the University of Valencia in Venice is a collection of Paul's "Six Seasons" (VII) from the island of Egina.

Despite the fact that Greek physicians and philosophers authored medical literature hundreds of years before the Middle Ages, Western European physicians did not study the Greek medical model until the twelfth century. Prior to this, the Carolingians had gained a non-theoretical style of medicine that contained systematic physician traditions as well as some knowledge from early medieval European medical practitioners' Latin sources, primarily herbal medicines, as practical medicine. The Anglo-Saxon plant work, which was translated from Latin into Old English and is a Christianized version of Apuleius Platonicus' Hervarium, is the largest surviving Anglo-Saxon medicinal book. This book is centered on the use of plants to treat common ailments, which was the basis for European pharmacology at the time.

Christian physicians resorted to Bald's Lichbook book for surgical procedures until the Middle Ages, indicating that this work was the most essential guide to medicine and surgery, translated into Latin. Lichbuk, a book by Bald, has been demonstrated to have little to do with Greek or other Mediterranean medicine, and provides instruments for treating medical disorders based on religious rituals.

Another text that influenced the development of Christian European medicine is Lakhnunga. Anglo-Saxon medicinal writings and prayers can be found in ancient English and Latin manuscripts. It is the most important pre-pagan medicine bridge, containing Teutonic medicine's "pagan magic, charms, and spells." It also included the Guilds Lorika, which comprised a list of prayers protecting various parts of the human body, starting at the top and working down, establishing the foundation of early Christian anatomical knowledge.

The Middle Ages saw Greek medicine adapt to Christianity for a variety of reasons, not the least of which being the conflict between science and religion. It was also a challenge for Christians who believed that being healed by God's hands was more effective and safer than going to the doctor. "In fact, these gods relied on the foundations of reason through science," wrote the author of the Decorum, "in fact, these gods relied on the foundations of reason through science." Galen's idea of a "moral, godly physician" operating in a divinely created being attracted Christians. There have also been some instances in which Galen's personal teachings have been criticized. He has been openly criticized for his agnostic views on the spirit, but rejection of Galen's practice has been rarely observed in primary medical users.

For medieval medical scholars, the Church's spiritual activity in health care was not restricted to the Holy Bible. Ideas about the disease's causes can also be found in a variety of existing works. The 38 sins were established as a beginning point for describing illness, punishment, misery, and suffering in Ecclesiasticus. This link between sin and disease was used by Christians to develop medical practice, which was eventually regulated by Lateran councils and official pronouncements. The Fourth Lateran Council saw disease as a result of sin and ordered that the sick person be summoned by a doctor before any therapy to confess his fault, as well as prohibiting any doctor from recommending "sinful treatments" for bodily health.

Over Christian doctrines, there was even more social antagonism between medicine and religion in Europe. "Tres medici, duo athei" was a frequent expression in Europe during the Middle Ages, which meant "where there are three doctors, there are two atheists." This saying concludes that medical knowledge is in direct antagonism to religious practice in the Christian religion. Physicians have questioned Christianity because of society's fear of pre-Christian idolatry medicine, which is characterized by doubt, sorcery, and ineffectiveness. As Valerie Flint put it, "they have a healing position between sainthood and witchcraft, but there is no clear boundary between the two."

Another foundation of Christian medicine included "miraculous healing." "Miracles" replaced ancient idol-worshiping customs and traditions with Christian rites, but did not completely eliminate the ancient traditional practices; on the contrary, it strengthened them with a sense of holiness. Christian theologians used Galen’s

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2 The same source. - p.63.
3 Gildas, Lorica. (1899). pp. 289-293
4 Rubin, Medieval English Medicine, P. 65.
6 Biller and Ziegler, ed. Religion and Medicine in the Middle Ages, P. 9.
7 Ullmann, Islamic Medicine, P. 22.
8 Ecclesiasticus- 1. Ecclesiasticus – belonging to the church (scriptores Hier), 2. Ecclesiasticus – the administration of churches, as well as the name of one of the biblical books written by Ben-Sira (x) directly from Jesus.
9 Biller and Ziegler, ed. Religion and Medicine in the Middle Ages, P. 39.
11 The same place, 120.
12 Biller and Ziegler, ed. Religion and Medicine in the Middle Ages, P. 22.
13 Rubin, Medieval English Medicine, P. 72.
philosophical works to illuminate issues of teaching and medicine because it helped their divine views. For Galen, medicine is limited to understanding the body, which is where he put forward very powerful ideas 14.

Christianity has struggled with the question of how much medicine and doctors are needed within religion. In Christianity, it was not clear when a person should see a doctor, because the Old Testament (the Torah) was based on the idea that “salvation requires suffering” 15. This attitude of salvation and suffering continued in the New Testament (the Bible). Therefore, if suffering is necessary for salvation, the question arises as to how much a physician is called in to alleviate the suffering. Also, according to the Christian faith, God is powerful and merciful, so the problem of the need for a medical professional to help a sick Christian heal is also crossed out. Augustine makes a sarcastic conclusion about faith in God and faith in medicine: “O God! Send me death, hasten my days, but when sickness comes, they will run, doctors will be brought, money and rewards will be promised” 16.

The link between Christianity and medicine in the Middle Ages was varied and complex. Christians' medicinal procedures have remained unchanged since the beginning of time. Doctors' opinions on sexuality, astral determinism, and the interconnectedness of physical and psychological states have been cautious. These were seen to be concerns that could lead to a contradiction between medical explanation and divine teaching requirements. When advocating sexual or hereditary treatments to maintain physiological balance, Christian physicians have widened religious bounds, but this has not meant a full departure from these restrictions. Furthermore, Christian physicians favored religious law over the medical norms they practiced 17.

Another foundation for the interplay of medicine and theology in the Middle Ages was the separation of the body and the soul. Church historians have written about two forms of medicine practiced by various doctors. The priests administered the high level, which was considered a medication for the soul, while the medical professionals suggested the low level medicine for the body 18. As a result, between the medical and spiritual approaches to disease in the Middle Ages, body and soul healers complemented one other, although there was some ambiguity in them because there was no clear line between them 19.

The medieval Christian Church fought hard against the notion that mental and physical health were two separate entities. This has had an impact on how Christians approach health care. The church also worked in various ways to prevent Christians from accessing Jewish or Muslim medical or surgical services, while Christian theologians believed that treating the soul rather than the body was more important than grieving 20.

The fact that faith in the health of the soul is even more important was evident in the relationship of baptism and midwifery. The midwives were usually not priests, and may even be non-Christian in some communities, but the church believed that it was more important for a baby to be baptized by a midwife than to die and be sent to hell.

"All who are baptized in the name of the Holy Trinity or in the name of Christ are considered baptized, regardless of who performed this baptism - Jewish, Christian, or idolatrous," Pope Nicholas I wrote to the

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14 Biller and Ziegler, ed. Religion and Medicine in the Middle Ages. P. 27.
17 Biller and Ziegler, ed. Religion and Medicine in the Middle Ages. P. 40.
19 The same place. - B. 4.
Bulgarians in the ninth century\(^{21}\). This situation can also be seen in the history of Paris, where in 1311 the church Synod decided to baptize a child who might die, or if the mother died, the importance of having a caesarean section to baptize the child\(^{22}\). Baptism in this way became the only sacred rite obligatory.

Religious shrines are also beneficial to both the soul and the body's healing. Hundreds, if not thousands, of pilgrims flocked to the shrine to pray, some seeking healing. The priests frequently told doctors not to treat the patients and treated them themselves. As a result of the influx of pilgrims to the shrines, as well as the rise in the number of priests and "church physicians," the number of important medical libraries grew, and therapeutic methods expanded\(^{23}\). Priests who had studied medical practice or had prior medical practice expertise were later recruited to the church for medical practice. Medical practitioners have been frequently participating with the church in the process of becoming saints since the second half of the thirteenth century. For this process of sanctification, physicians have been accused of eliminating medical justifications for therapy or cure\(^{24}\).

In the Middle Ages, the foundations of health were based on Greek works and adapted to Christian culture through an explanatory translation of the Bible — a mixture of biblical texts. In the Middle Ages, there were also aspects of medicine devoid of more "magical" beliefs. In the Middle Ages, the miracles, prayers, and worship of saints were widespread, laying the foundation for the connection between religion and medicine.

The Bible and other religious writings influenced medieval medical thought. The New Testament (Bible) describes a number of miraculous treatments, such as when Jesus healed paralysis and "lift up your mat and go home" (Luke 5: 24-25). Evidence written in the fourth century shows that Christians witnessed many miraculous healings and therefore sought divine help to restore their health\(^{25}\). In his works, Augustine focuses on detailed events of human suffering and miracles. In less than two years, he recorded 70 miraculous healings available in the community at Hippo, and listed ten of them in Jerusalem, the "city of God". The authors, who agree with Bede and his views, tried to convince those who were skeptical about the existence of a miraculous cure. Bede is an eighth-century agiographic author who has written extensively about the early English saints and about miraculous healing. The medical details and miraculous healing mixed with these sacred texts indicated that Christianity was stronger than the idolatrous faith\(^{26}\).

Medieval Christians not only believed in miraculous healing, but from the 4th century onwards a high degree of respect for martyrs and saints became popular, believing that their belongings also had supernatural powers\(^{27}\). It was regarded as hallowed everything from the saint's tooth to the actual piece of the cross. Some of these monuments were thought to have a particular power, and their therapeutic properties drew travelers. The objective of such sacred structures was to worship the saints as well as to heal them. Christians could pray to a specific saint or, in many cases, visit shrines to visit the shrine of that saint. To be treated, believers might touch the saint's monuments, drink the water soaked in the monument, or sleep near the saint's tomb in the shrines\(^{28}\).

\(^{21}\) Biller and Ziegler, ed. Religion and Medicine in the Middle Ages. P. 81.

\(^{22}\) Here, - Б. 83.


\(^{24}\) Biller and Ziegler, ed. Religion and Medicine in the Middle Ages. P. 175.

\(^{25}\) York, Health and Wellness in Antiquity Through the Middle Ages. P. 56.

\(^{26}\) Rubin, Medieval English Medicine. P. 76.

\(^{27}\) Marty and Vaux, ed. Health/Medicine and the Faith Traditions. P. 104.

\(^{28}\) York, Health and Wellness in Antiquity Through the Middle Ages. P. 56.
The lives of the saints became the main literary form in the Middle Ages, and the saint’s followers were able to learn more about the saints, their lives, and as much medical treatment as possible. Many saints' activities were linked to ailments that plagued the populace, such as plague, mental illness, or leprosy, maladies that medieval medical specialists could easily recognize. Saints Sebastian and Roch were known for treating plague, St. Lazarus for leprosy, St. Agatha for breast cancer, and St. Maturin for mental illness during the Middle Ages.

The positive effects of signs, wonders, miracles, and religious monuments were accepted by the ordinary people throughout the Middle Ages. The bulk of the poor were either doubtful of medical science's scientific validity or simply stated that it was more expensive. Also, because doctors were generally located in urban areas and had little opportunity to contact them, obtaining therapy through church prayers had a distinct benefit. The sick were treated in the Middle Ages by priests spreading aloe oil on them, despite medical sources to the contrary.

As a result of the development of medicine in the Middle Ages, the effect of miracle healing as the mainstay decreased. By the end of the 11th century, universities had begun to teach medicine according to Muslim and Greek traditions, and at the same time physicians began to be increasingly skeptical of miraculous healing and religious folk medicine. However, believing in miraculous cures is the first step, and such traditional folk medicine was not completely excluded from the field of medicine during the Middle Ages. This has served as a knot in Christianity that keeps a small component of the relationship between health and its religious management constant.

Medical curricula were based on Greek medical books when medical instruction was implemented in medieval Western colleges. Greek writings were used in Christian medicine's elementary curriculum, and Hippocrates and Galen’s works were considered primary sources. These publications represented not only the treatment of ailments, but also the establishment of the medical profession and the advancement of science over time. The Hippocratic Corps is the oldest of these Greek medical writings, dating from 420-350 BC. They are a collection of almost 60 works by the 5th century BC physician Cos. This work also includes Epidemic I, which describes the structure of the medical institution. In Epidemic I, Hippocrates stated that "art (medicine) has three factors: disease, patient, physician. The physician is the servant of art. The patient must cooperate with the physician in the fight against the disease.”

The pre-Islamic Middle Eastern population was nomadic Bedouins, along with only a few major cities such as Alexandria, Edessa, and Constantinople. In Arabic poetry specific to these societies, ideas about body healing and spiritual maturity are conveyed orally. The 15th century Islamic historian Ibn Khaldun wrote in his Muqaddima: “Cultural Bedouins have a type of medicine based mainly on individual experience. They inherit from the old men and women of the tribe how to use it.” Such a peculiar medicine of the Arab Bedouin tribes may not have been studied experimentally, but it has shown its result in anatomy. Ancient Arabic poetry mentions important internal organs such as the liver, heart, spleen, stomach and intestines, as well as the

30 York, Health and Wellness in Antiquity Through the Middle Ages. P. 57.
32 York, Health and Wellness in Antiquity Through the Middle Ages. P. 57.
33 York, Health and Wellness in Antiquity Through the Middle Ages. P. 5.
34 Here, - p. 3.
names of diseases. The fact that pre-Islamic Bedouins knew the names of these known diseases or ailments was often consistent with the treatments that emerged in Tibb an-Nabawi after the advent of Islam.

Aside from Arab Bedouin culture, the Arab world's center position had a significant impact on Islamic medicine. The transfer of medical knowledge and medications to the Muslim populace has been made possible by trade routes and relationships with Asia. Medical influences from pre-Islamic Eastern civilizations and cultures were partially embraced by Islamic medicine. In contrast to Greek influences, Egyptian, Mesopotamian, Indian, Chinese, and ancient Iranian medicine centered on surgery and herbal treatment. The Sassanid Empire, Zoroastrian believers and Christians created their own medical traditions during the Sassanid rule, which included Pahlavi translations of Greek works and later translations of Islamic sources.

The belief in the "evil eye" was prevalent in medieval Islamic culture, and it was also regarded a curse on someone who was usually ignorant. People wore amulets and protective jewelry to ward off the evil eye, and the Qur'an forbids the worship and belief in numerous signs and stars in Islam. The constant belief in the healing and protective powers of these tumors was also included in the sources by some medical practitioners in the Middle Ages who could not get rid of these habits.

Greek medicine was also influenced by the Islamic world. Being outside the scope of the Western Roman Empire had a positive impact on the Islamic world, especially as Alexandria became a major refuge for the Greek thinker. After Justinian I closed the academy in Athens in 529, a large influx of scholars fled to Alexandria. The battle between Christians and pagans in Europe accelerated medical scholars' flight to the East, bringing with them Greek enlightenment and culture. The expansion of Islam over the world accelerated after the Prophet Muhammad's (s.a.v.) death, indigenous oriental languages developed, and Greek became a universal language. Scholars have translated Greek literature into languages such as Aramaic in Syria and Iraq, Coptic in Egypt, and Pahlavi in Iran. Greek had previously been acknowledged as a general scientific language, but translations into Arabic under the patronage of the Abbasid caliphs and other nobility became the language of science. Hunayn ibn Ishaq, who lived from 808 to 873, soon became the most important translator into Arabic, as well as writing famous works on eye diseases. Hunayn ibn Ishaq was educated by John ibn Masavi, a physician at the Baghdad court and chairman of the House of Wisdom. Although Hippocrates and Galen were the founders of the medieval medical tradition, later ancient Alexandrian translations and curricula shaped medieval Islamic medicine on a very large scale. In the early days, Muslim physicians carefully studied the works written before them in medical science. Ali ibn Abbas, the physician of Sultan Azudud Dawla, writes about this: "I have yet to come across an antique text that has everything ideal and necessary for the study of medicine." Buqrot writes succinctly and succinctly. The majority of his interpretations are ambiguous and require clarification. In addition, Jolinus' works only cover one component

37 Peter E. Pormann and Emily Savaj-Smith, Medieval Islamic Medicine (Edinburgh: University of Edinburgh Publishing House, 2007), 23.
38 Here, 16.
39 Rahman, health and medicine in the Islamic tradition, 34-35.
40 Here, 13.
43 Pormann and Savaj-Smith, Medieval Islamic Medicine, 12.
of medical research. Its authorship, on the other hand, is lengthy, with numerous repetitions. "I didn't find any books in his library that were worth studying"."44

The Qur'an does not go into detail regarding medical practice or the role of doctors in society, but it does mention their Islamic purpose of helping others and giving. The Qur'an answers numerous concerns concerning human life, however it does not address specific anti-disease treatments, although providing items and laws that are beneficial to human health. The hadiths and sunnahs of Muhammad (s.a.v.) do, however, provide instructions on disease prevention and treatment, as well as how doctors and patients should be instructed. These themes are discussed in the hadith collections' "Book of Medicine" section. At the same time, a branch of medicine known as "Tibb an-Nabawi" evolved, in which each ailment was categorized into typologies, the origins, prevention, and treatment of which were supported by hadiths and sunnah. Historians, on the other hand, have analyzed the sources of difficulties associated to Tibb an-Nabawi. As a result, Tibb an-Nabawi has come to be regarded as the most authoritative source of information on health and treatment. 45

Necessary rules for daily life, cleanliness and hygiene, which are emphasized in many places in the hadiths, formed the basis of medical prevention. Tibb an-Nabawi was based on Arabic and Greek sources and was used to oppose concepts that were considered supernatural Greek medicine.46 In addition to the hadiths, the works of al-Nabawi also describe medical issues that are close to the sunnah, such as minimally invasive surgeries, and very few invasive methods, such as blood transfusions or cannings. Prophylactic actions of dietary regulation, as well as natural medicines, along with herbal treatment, have been described as the basis for health47.

It is narrated on the authority of al-Tirmidhi that 'Usama ibn Sharik said, 'The Arabs said,' O Messenger of Allah, shall we not be cured? '. The Messenger of Allaah (peace and blessings of Allaah be upon him) replied, 'Yes, seek treatment. Indeed, Allah has sent down His cure for whatever disease He has afflicted. There is no cure for a single disease.' The Companions asked: O Messenger of Allah, what is it? The Messenger of Allaah (peace and blessings of Allaah be upon him) said: "Old age!" they said.48 This hadith makes it very clear in the Islamic faith that healing is from Allah and emphasizes the importance of man's connection with medicine. In addition, Abu Bakr Rabi ibn Ahmad al-Ahwini al-Bukhari wrote in his “Handbook for Students” about the importance of medicine in theology: «Thinkers emphasize that it is the responsibility of every human being to study the Shari'ah, and that if a person knows the Shari'ah, he will avoid going astray. Second, he also needs to know some medications to maintain his health and not get sick"49. This doctrine is also mentioned in Tibb an-Nabawi, and the foundation of Islamic medicine was laid on this basis.

In the Middle Ages, the interaction of medicine and religion in the Islamic world was not without contradictions. In the development of medicine, Islam also adopted ancient Greek medicine, but regulated some issues on the basis of Sharia. Islamic sharia contradicted treatments in Greek medical texts for a number of reasons. However, Islamic law has been somewhat softened in some areas of this controversy. An example of this is the fact that Sharia law prohibits men and women from examining and treating each other in cases of illness. It was considered permissible for women to treat men and vice versa so that they could look at and

45Here, 7.
46Ullmann, Islamic Medicine, 5.
47York, health and healthy living in ancient times through the Middle Ages, 55.
48Rahman, health and medicine in the Islamic tradition, 34.
49Here, 39.
examine each other. The women even went to battles to treat the wounded. However, it should be noted that this flexibility also has clear limits. Islamic sharia re-established the basis of Greek medical treatment on the basis of sharia, "treatment in medicine with something forbidden in the religion is also forbidden" 50. Treatments involving any treatment method used on the body parts of pigs are prohibited, and the medical principles have been rewritten to exclude animals that are considered unclean. It was also excluded from the treatment types as alcohol was also banned 51.

Just as Islam dominated social life in the Middle Ages, Greek medical works laid the foundations of medieval medical science. Islamic medicine has reached its zenith by adapting ancient Greek medicine to Sharia law. Manfred Ullman writes: "Islamic medicine did not originate in the Arabian Peninsula. On the contrary, it was formed in the ninth century AD on the basis of later Greek artifacts formed in Arabic in the southern and western Mediterranean" 52.

Hippocrates, in his work on the nature of man, says that there is a definite balance in every human body, and that there are four fluids in the body: blood, sputum, bile (cholera) and black bile (melancholy) 53. Medieval Islamic physicians expanded this Greek idea by establishing originality in the proportions of fluid in the body. According to him, ancient Greek medicine did not tighten the balance of liquids. In the Middle Ages, Muslim physicians believed that the fluid in each person was specific to a particular behavior or the color of a person’s face.

Proponents of Galenism, on the other hand, continued the idea of Hippocratic naturalism and balance. Galen wrote commentaries on the texts of Hippocrates and adapted the teachings of Hippocrates to his philosophy. Galen not only addressed the four fluids in his teachings, but also taught the six ecological, physiological, and psychological states he called "unnatural" 54. Galen wrote that these unnatural elements also affect health and that anyone can control them. In Ars Parva’s work, Galen emphasizes that the human regimen is critical to managing the unnatural elements we encounter on a daily basis, and that helping physicians regulate these factors is an "important task" 55. Islam, on the other hand, has regulated this man's daily routine with daily prayers and clear rules 56.

By the IX–XI centuries, the science of medicine reached its peak in Muslim countries. Abu Ali ibn Sina's achievements in the field of medicine were also recognized, and the scientific literature written by him was later accepted as the primary source all over the world, especially in the universities of Western Europe. Ibn Sina's "Al-Qanun Fit Tib" (Laws of Medicine) was published in 1473 in Milan, Europe. By 1500, this work had been published sixteen times.

Born in a town near Tehran in 865, Abu Bakr Muhammad ibn Zakariya Razi, a Muslim physician, wrote about 230 books, including "Al-Mansuri", "Al-Hawi", “Burus Sa’a” and others. Razi's "Medical Citizen" was published forty times between 1498 and 1866.

50 Here, 51.
51 Ullmann, Islamic Medicine, 31.
52 Ullmann, Islamic Medicine, Xi.
53 York, health and healthy living in ancient times through the Middle Ages, 6.
54 Here, 8.
56 Biller and Ziegler, ed. Religion and medicine in the Middle Ages, 19.
During this period, Muslim physicians and encyclopedic scholars made significant contributions to the renaissance of the Islamic world. In particular, Ibn Rushd's “al-Kulliyat”, Hunayn ibn Ishaq's “Esoguchi”, Ali ibn Abbas's “Kitab al-Malaki”, Ibn al-Jazzar's “Zodul Musafir”, Ibn Jazla's “Taqqiymul Abdan”, Abul Qasim az-Zahrawi's "At-tasriyf liman ajaza anit ta'lif", Ibn az-Zahr's works on medical science, such as “At-Taysir fil Mudowati wat-Tadbiyr”, are among the encyclopedic works. Ibn Abu Usaybi, who lived at the beginning of the 13th century, describes the activities and works of 399 Muslim physicians who lived and worked in the IX-XII centuries in his book “Uyyunul anbaa fii tobaqati atibbaa” (A source of messages about the layers of doctors).

In the IX-XI centuries, large libraries, pharmacies and schools were built in major cities of the East, such as Alexandria, Baghdad, Damascus, Cairo. The Majlis al-Ulama (Society of Scholars) was established in the Bait al-Hikma in Baghdad, where scientific works on Oriental medicine were created and other medical sources were translated. Abu Yusuf ibn Ishaq Kindi (800-879), 30 works on medicine, more than a hundred works by Hunayn ibn Ishaq (810-873), translations of the works of Hippocrates and Galen, the famous surgeon of Ibn Sina's contemporary Abul Qasim az-Zahrawi The 30-volume Kitab at-Tasrif, 106 medical works by Abu Bakr Muhammad ibn Zakariya Raziya (865-925) and the 30-volume Al-Jame' al-Kabir and Qad urifa bil-Khavi were written at the center.

According to Lobar Asrorova's “Abu Hafs Kabir Bukhari and Hanafi Fiqh”, since the eighth century, Muslim countries have had a variety of surgical instruments needed for doctors - scalpels, postoperative wounds, intestinal and skin sutures, and needles. The drugs are prepared in different ways.