

Original Article

Malay Medical *Tibb* Manuscripts from The Perspective of Civilization, Ethics, and Health Rights

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Abstract

This study examines selected Malay Tibb medical manuscripts which namely MSS 813, MSS 845, MSS 1796, MSS 1820, MSS 1875, MSS 1923, MSS 2468(D), and MSS 2483(G), as expressions of a traditional medical knowledge system shaped by Islamic principles and local experience. These manuscripts document herbal formulations, therapeutic practices, and spiritual elements that reflect an integrated understanding of physical and spiritual healing. The study focuses on three analytical dimensions: (i) Malay-Islamic civilizational values embedded in the transmission of medical knowledge, (ii) ethical principles governing medical practice, and (iii) ethical conceptions of health, culture, and spirituality that may be discussed in relation to contemporary human-rights discourse. Employing qualitative textual and thematic analysis, the study examines the selected manuscripts through the analytical framework of maqasid al-shari'ah, with comparative reference to selected principles of the Universal Declaration of Human Rights (1948). The findings suggest that Malay Tibb manuscripts function not merely as records of traditional medicine but as civilizational texts that integrate medical practice with ethical responsibility, cultural continuity, and spiritual awareness. Rather than projecting modern legal categories onto pre-modern texts, this study demonstrates how the ethical values embedded in these manuscripts resonate with contemporary discussions on access to healthcare, cultural sustainability, and human dignity. The article contributes to manuscript studies, medical humanities, and Islamic ethics by highlighting the relevance of Malay Tibb manuscripts for rethinking holistic and value-based approaches to health in plural and global contexts.

Keywords: Civilization; Ethics; Knowledge; Medicine; *Tibb*.

Introduction

The Malay *Tibb* manuscripts constitute a significant intellectual heritage of Malay-Islamic civilization, reflecting the capacity of early Malay society to develop a coherent medical knowledge system integrating empirical experience, spiritual values, and philosophical reflection grounded in divine revelation.¹ Within the Islamic intellectual tradition, *tibb* extends beyond physical healing to encompass holistic well-being, emphasizing the interrelated dimensions of body, soul, and spirit. Health is thus understood as a divinely entrusted balance between the material and metaphysical, shaped by the principle of *tawhid*.² Prior to the introduction of Western biomedical systems, Malay society had already established an organized medical tradition embedded within religious and cultural life. Healers such as *tabib*, *bomoh*, *bidan*, *mudim*, and *lebai*, served not only as practitioners of medicine but also as moral and spiritual guides.³ The transmission of medical knowledge required prolonged

¹ Nurulwahidah Fauzi and others, 'Digitalizing Malay Medical Manuscripts: A Database-Driven Approach to Preservation, Knowledge Management and Intellectual Property', *Journal of Al-Tamaddun*, 20.2 (2025), 199–210 <<https://doi.org/10.22452/JAT.vol20no2.14>>.

² Tariq Ibrahim Abdul Razzaq Al-Masoud, 'The Axiology of Health in Islam: A Philosophical Perspective on Human Well-Being', *Cultura. International Journal of Philosophy of Culture and Axiology*, 22.1 (2025), 631–59 <<https://doi.org/https://doi.org/10.70082/cijpca.v22i1.1480>>.

³ Constantin Canavas, '8 Homeopathy and Islam in Malaysia', in *Situating Religion and Medicine in Asia* (Manchester University Press, 2023), pp. 305–40 <<https://doi.org/10.7765/9781526160027.00020>>.



apprenticeship and spiritual discipline (*mujahadah* and *taẓkiyah al-nafs*), reflecting the view that healing was a sacred trust (*amanah*) and an act of worship (*ibadah*), rather than a purely technical or commercial profession.⁴

Manuscript collections such as MSS 813, MSS 845, MSS 853, MSS 1796, MSS 1820, MSS 1875, MSS 1923, MSS 2468(D), and MSS 2483(G) demonstrate that Malay medicine constituted a structured and integrated knowledge system rather than fragmented folk practices.⁵ These texts document a wide range of treatments, from common physical ailments to psychological and spiritual disturbances that reveal a consistent conceptualization of health as equilibrium among physical, psychological, and spiritual dimensions, all ultimately grounded in reliance upon the Divine.⁶ Beyond therapeutic guidance, the manuscripts articulate ethical and spiritual norms governing both healers and patients. Practitioners were required to maintain personal purity, sincerity of intention, and regular worship, while patients were encouraged toward repentance (*istighfar*) and trust in God (*tawakkul*).⁷ Such prescriptions indicate that Malay-Islamic medical practice was deeply informed by ethical responsibility and spiritual consciousness. Conceptually, this worldview resonates with Imam al-Ghazali's emphasis on the inseparability of physical effort and spiritual discipline in the pursuit of healing, understood here as an intellectual parallel rather than direct theoretical dependence.⁸

The manuscripts also reflect the intellectual openness of Malay-Islamic civilization in selectively assimilating external medical traditions which particularly Arab-Islamic, Indian, and Greco-Islamic knowledge, through a process of localization and ethical filtering.⁹ Concepts derived from humoral theory were reinterpreted using indigenous categories such as *angin*, *darah*, *lendir*, and *empedu*, illustrating an organic Islamization of knowledge rather than uncritical adoption. From a socio-historical perspective, Malay *Tibb* manuscripts embody a community-oriented healthcare ethos grounded in compassion, justice, and collective responsibility.¹⁰ This ethos aligns conceptually with the objectives of *maqasid al-shari'ah*, particularly the preservation of life (*hifẓ al-nafs*), intellect (*hifẓ al-'aql*), and religion (*hifẓ al-din*), framing medical practice as an expression of holistic human welfare.¹¹

Despite growing scholarship on Malay traditional medicine, existing studies have largely focused on pharmacological validation or descriptive cataloguing of manuscripts.¹² Limited attention has been given to these texts as epistemic and civilizational documents that integrate medical practice, ethical discipline, and spiritual worldview. Addressing this gap, the present study examines selected Malay *Tibb* manuscripts through thematic and integrative analysis to demonstrate their enduring relevance as a holistic and ethically grounded medical knowledge system, capable of contributing meaningfully

⁴ Achmad Sauqi, 'From Mystical Unveiling to Spiritual Therapy: Kasyf and the Reconstruction of Sufi Healing in the Syadzilyyah', *Tribakti: Jurnal Pemikiran Keislaman*, 37.1 (2026) <<https://doi.org/https://doi.org/10.33367/tribakti.v37i1.8008>>.

⁵ Muhammad Alif Basar and others, 'Expert Evaluation of the Traditional Malay Medicine Kitab Tib Melayu Database', *Malaysian Journal of Library and Information Science*, 30.3 (2025), 67–92 <<https://doi.org/10.22452/mjlis.vol30no3.4>>.

⁶ Jeff Levin, 'New Age Healing: Origins, Definitions, and Implications for Religion and Medicine', *Religions*, 13.9 (2022), 777 <<https://doi.org/10.3390/rel13090777>>.

⁷ Abukari Kwame and Baba Mananu, "'Healing Is Having Faith in Allah, the Healer, and the Medicine": An Exploratory Qualitative Study of Islamic-Based Healing Practices in Northern Ghana', 2023 <<https://doi.org/10.32388/42IGK5>>.

⁸ M. Samsul Hady and others, 'Cultural Transformation: Religious Moderation from Manuscripts Heritage to Living Tradition in Indonesia and Malaysia', *Cogent Education*, 12.1 (2025) <<https://doi.org/10.1080/2331186X.2025.2556891>>.

⁹ Yating Wen and Marzudi Md Yunus, 'A Saussurean Semiotic Study of Symbolism in Keringkam Motifs: Interpreting Sarawak Malay Embroidery Within an Islamic Cultural Framework', *TEXTILE*, 2026, 1–18 <<https://doi.org/10.1080/14759756.2026.2619939>>.

¹⁰ Mohd Azmi Mohd Razif, 'Dating Kitab Tibb MSS 3290: Watermark Analysis and Orthographic Evolution in Malay Medical Manuscripts', *Ulum Islamiyyah*, 37.03 (2025), 19–34 <<https://doi.org/10.33102/uj.vol37no03.691>>.

¹¹ Najihah Mohamad Sabri, Nur Azira Tukiran and Raihanah Roslan, 'Jubebe in Malay Medical Manuscript: A Comparison from Scientific and Islamic Perspectives', *Jurnal Sains Kesihatan Malaysia*, 22.1 (2024), 63–70 <<https://doi.org/10.17576/JSKM-2024-2201-07>>.

¹² Ida Syazrina Ibrahim and others, 'Authentication of Marantodes Pumilum (Blume) Kuntze: A Systematic Review', *Frontiers in Pharmacology*, 13 (2022) <<https://doi.org/10.3389/fphar.2022.855384>>.



to contemporary discussions on health, ethics, and inclusive policy frameworks informed by *maqasid al-shari'ah*.¹³

Method

This study adopts a qualitative textual analysis approach focusing on selected Malay *Tibb* medical manuscripts dated between the seventeenth and nineteenth centuries. This approach is chosen because it enables the exploration of implicit meanings, value structures, and worldviews embedded within traditional texts, beyond their surface linguistic or philological features. Such a method is particularly suitable for manuscripts that are rich in religious symbolism, Malay-Islamic cosmology, and customary expressions of knowledge. The analysis is conducted through three complementary analytical layers: (i) textual–thematic analysis of the manuscripts, (ii) a Malay-Islamic civilizational framework, and (iii) an ethical analysis informed by the principles of *maqasid al-shari'ah*. Together, these layers facilitate a comprehensive understanding of Malay *Tibb* manuscripts as texts that integrate medical knowledge, ethical orientation, and conceptions of human well-being.

Results and Discussions

The analysis of selected Malay *Tibb* medical manuscripts reveals the existence of an integrated system of knowledge that unites empirical medical practice, ethical discipline, and spiritual consciousness.¹⁴ These findings demonstrate that Malay medical manuscripts function not merely as guides for disease treatment but as civilizational documents reflecting the Malay-Islamic worldview. Malay *Tibb* manuscripts reflect the intellectual sophistication and coherent organization of knowledge within Malay-Islamic civilization, rejecting any rigid dichotomy between science and religion.¹⁵ Health is not conceived merely as a biological condition but as a state of harmony between body, soul, and spirit, rooted in divine will. This worldview is consistent with Qur'anic affirmations that ultimate healing originates from Allah SWT, as expressed in Surah al-Shu'ara' (26:80): “And when I am ill, it is He who cures me.”¹⁶

Manuscripts such as MSS 813, MSS 845, and MSS 853 illustrate how physical treatment using natural substances is consistently accompanied by spiritual practices. Remedies for ailments including postpartum disorders, fevers, seizures, skin diseases, and digestive problems employ local herbs, barks, and roots, while being reinforced by prayers and invocations intended to restore both physical balance and spiritual well-being. Similarly, MSS 2468(D) documents treatments for wounds and poisonous bites that integrate herbal substances such as Cendana Jingga with healing prayers, indicating that physical recovery and spiritual strength were viewed as inseparable.¹⁷

The medical system reflected in these manuscripts is grounded in the principle of *tawāzun* (balance), referring to equilibrium among bodily elements such as heat, coldness, moisture, and dryness.¹⁸ While influenced by Greco-Islamic humoral theory, this concept was localized within the Malay context through indigenous categories such as *angin*, *darab*, *lendir* and *empedu*. Manuscripts including MSS 1796 and MSS 1875 demonstrate how this principle of balance informed diagnosis and treatment across different bodily conditions, reinforcing a holistic approach adapted to the tropical environment of the Malay world. Furthermore, the civilizational worldview embedded in

¹³ Mohd Razif.

¹⁴ Tiana Milanda and others, 'Poikilospermum Suaveolens (Blume) Merr.: Phytochemical, Ethnomedicinal Uses, and Pharmacological Potential', *Drug Design, Development and Therapy*, Volume 19 (2025), 11863–83 <<https://doi.org/10.2147/DDDT.S533657>>.

¹⁵ Nur Fatin Idayu Zamri and others, 'A Scoping Review on Medicinal Properties of Piper Betle (Sirih) Based on Malay Medical Manuscripts and Scientific Literatures', *Malaysian Journal of Medical Sciences*, 30.5 (2023), 23–39 <<https://doi.org/10.21315/mjms2023.30.5.3>>.

¹⁶ Shreyanshi Kulshreshtha and others, 'Volkameria (L.): A Comprehensive Review of Its Traditional Medicine Uses, Phytochemistry and Pharmacology', *Medicinal Chemistry Research*, 2026 <<https://doi.org/10.1007/s00044-026-03531-8>>.

¹⁷ Mohd Annas Shafiq Ayob, Fariza Md Sham and Jamsari Alias, 'Exploring the Interplay of Religion and Spirituality: An Islamic Perspective on Spiritual Seeking and Human Existence', *Journal of Religious Education*, 73.2 (2025), 189–205 <<https://doi.org/10.1007/s40839-025-00259-2>>.

¹⁸ Vahid Tafazoli and others, 'Approach of Persian Medicine to Health and Disease', *Advances in Integrative Medicine*, 9.1 (2022), 3–8 <<https://doi.org/10.1016/j.aimed.2021.07.007>>.



Malay *Tibb* manuscripts emphasizes harmonious relationships between humans, nature, and the Divine.¹⁹ Natural substances are not treated merely as exploitable resources but as part of a divinely created order entrusted to humankind.²⁰ This perception positions biodiversity as ayat *kawniyyah* that cosmic signs that invite reflection upon divine wisdom, thereby integrating environmental awareness, medical practice, and spiritual responsibility within a unified framework of knowledge.²¹

The second dimension emerging from the findings highlights the centrality of ethics (*adab*) and moral conduct in Malay medical practice. Across the manuscripts, healing is consistently portrayed as a morally charged activity governed by sincerity of intention (*ikhtlas*), trust (*amanah*), and compassion (*ihsan*), rather than as a commercial or purely technical endeavor.²² Manuscripts such as MSS 1923 and MSS 2483(G) emphasize the ethical and spiritual preparedness required of healers prior to administering treatment. Practitioners are instructed to maintain personal purity, observe regular prayers, and begin treatment with *basmalah* and supplications, underscoring the belief that medical efficacy is inseparable from moral integrity.²³ These ethical prescriptions position the healer not merely as a technician but as a servant entrusted with the well-being of others. Patients, in turn, are guided toward patience, repentance (*istighfar*), and reliance upon Allah (*tawakkul*). Illness is framed as both a physical condition and a spiritual trial that offers opportunities for self-reflection and moral refinement.²⁴ This ethical orientation is particularly evident in MSS 1820, which focuses on women's health and emphasizes modesty, emotional well-being, and spiritual discipline alongside physical treatment.²⁵ The ethical framework articulated in Malay *Tibb* manuscripts resonates conceptually with Imam al-Ghazali's emphasis on the integration of physical effort (*ikhtiar*) and spiritual strength in achieving true healing. Healing thus becomes an act of *taẓkiyah al-nafs* (self-purification), reinforcing the notion of '*ilm beradab*' which means knowledge that refines character, nurtures compassion, and upholds human dignity.²⁶

The third dimension of the findings reveals that Malay *Tibb* manuscripts implicitly recognize health as a fundamental aspect of human dignity and communal responsibility. Although modern terminology such as "human rights" is absent, the values embedded in these texts demonstrate awareness of rights related to health, culture, and spirituality.²⁷ *First*, the manuscripts affirm the right to alternative and culturally appropriate treatment. Texts such as MSS 813, MSS 845, and MSS 1875 document diverse therapeutic options, including herbal remedies, massage, cupping (*bekam*), prayers, and ritual practices allowing individuals to seek healing in accordance with their beliefs and social context. This principle aligns conceptually with *hifẓ al-nafs* (preservation of life) within *maqasid al-*

¹⁹ Jarman Arroisi, Syamsuddin Arif and Muhammad Alif Rahmadi, 'Tbn Sina's Biopsychosocial Balance: Insights for Mental Health Preservation and Islamic Psychology', *Journal of Islamic Thought and Civilization*, 14.2 (2024), 125–39 <<https://doi.org/10.32350/jitc.142.08>>.

²⁰ Nadia Rahma, Catur Sugiyanto and Akhmad Akbar Susanto, 'Bridging Circular Economy and Islamic Economic Principles: Toward a Sustainable Economic Model', *International Journal of Ethics and Systems*, 2025, 1–22 <<https://doi.org/10.1108/IJOES-01-2025-0038>>.

²¹ Umar Faruq Thohir, Achmad Gunaryo and Raharjo Raharjo, 'Islamic Environmental Conservation', *ESENSIA: Jurnal Ilmu-Ilmu Ushuluddin*, 24.1 (2023), 41–50 <<https://doi.org/10.14421/esensia.v24i1.4363>>.

²² Mohamad Iqbal Bin Kunji Mohamad and others, 'Third-Party Consent To Medical Treatment in Malaysia: A Critical Analysis from Ethical and Malaysian Legal Perspectives', *Health Care Analysis*, 2025 <<https://doi.org/10.1007/s10728-025-00531-4>>.

²³ Meiling Zhao, Yi Li and Zhang Wang, 'Mercury and Mercury-Containing Preparations: History of Use, Clinical Applications, Pharmacology, Toxicology, and Pharmacokinetics in Traditional Chinese Medicine', *Frontiers in Pharmacology*, 13 (2022) <<https://doi.org/10.3389/fphar.2022.807807>>.

²⁴ Niyati Pandya and Rachana Bhangaokar, 'Suffering and Self-Refinement: Moral Perspectives from a Hindu, Indian Worldview', *Psychology and Developing Societies*, 37.1 (2025), 93–117 <<https://doi.org/10.1177/09713336251372670>>.

²⁵ Salua Omais and Manoel Antônio dos Santos, 'An Islamic Paradigm of Psychology and Mental Health Based on the Quran and the Sunnah: A Literature Review', *Pastoral Psychology*, 75.1 (2026), 85–98 <<https://doi.org/10.1007/s11089-025-01268-6>>.

²⁶ Muhammad Faiz, 'Maqāsid Al-Qur'ān and Human Development: Reflections on Qur'ānic Objectives and Prophetic Practices', *MAQOLAT: Journal of Islamic Studies*, 3.4 (2025), 446–64 <<https://doi.org/10.58355/maqolat.v3i4.195>>.

²⁷ Syazwani Mohd Nasir and others, 'Free Expression and Human Dignity: Looking into the Malay Cultural Expression', *Pertanika Journal of Social Sciences and Humanities*, 33.5 (2025) <<https://doi.org/10.47836/pjssh.33.5.08>>.



shari'ah and resonates with Article 25 of the Universal Declaration of Human Rights (UDHR, 1948).²⁸ *Second*, Malay *Tibb* manuscripts embody the right to culture and heritage. The systematic recording and transmission of medical knowledge in manuscripts such as MSS 1796 and MSS 1820 reflect the community's right to preserve indigenous knowledge systems and cultural identity. In contemporary terms, this supports recognition of traditional medicine as part of cultural rights, consistent with Article 27 of the UDHR.²⁹ *Third*, the integration of prayers, Qur'anic verses, and spiritual practices in manuscripts such as MSS 1923 and MSS 2468(D) underscores the right to religion and spirituality within healthcare. Healing is not restricted to physical intervention but includes spiritual engagement as a legitimate and respected dimension of well-being. This holistic perspective parallels modern discussions on patient-centered and spiritually sensitive healthcare.³⁰ Overall, the findings demonstrate that Malay *Tibb* manuscripts articulate a value-based medical framework grounded in balance (*tawazun*), trust (*amanah*), and human dignity (*karamah insaniyyah*). These manuscripts thus offer enduring insights for contemporary efforts to develop ethical, inclusive, and culturally responsive healthcare systems rooted in Islamic values.³¹

Conclusion

This study concludes that Malay *Tibb* medical manuscripts may be understood not merely as pre-modern medical texts but as civilizational documents that integrate knowledge, ethics, and conceptions of human well-being within a unified Malay-Islamic framework. The analysis demonstrates that health, within this worldview, is not defined solely as the absence of disease but as a condition of harmony between the physical, psychological, and spiritual dimensions of human life, grounded in the principle of tawhid and the divinely ordained balance of creation. The findings further indicate that traditional Malay medical knowledge extended beyond technical or empirical concerns to encompass an ethical orientation often described as '*ilm beradab*' which means knowledge guided by moral responsibility and spiritual consciousness. Healing practices documented in the manuscripts reflect an understanding of the human–nature relationship based on trust (*amanah*), moderation, and respect, rather than exploitation. Natural substances used in treatment are consistently framed as part of a divinely ordered world, suggesting that engagement with biodiversity was shaped by ethical and spiritual considerations. At the ethical level, the manuscripts portray healing as a morally grounded practice in which both healer and patient are situated within a framework of responsibility, sincerity, and reliance upon the Divine. Healers are expected to embody compassion (*ihسان*), integrity, and humility, while patients are encouraged to cultivate patience and trust in God. These ethical orientations resonate conceptually with the objectives of *maqasid al-shari'ah*, particularly the preservation of life (*hifz al-nafs*) and the promotion of human well-being (*maslahah insaniyyah*). From a contemporary analytical perspective, the values embedded in Malay *Tibb* manuscripts may be interpreted as conceptually resonant with modern discussions on health ethics, cultural rights, and spiritual well-being. Although the language of "human rights" is a modern construct, the manuscripts' emphasis on access to healing, respect for cultural knowledge, and integration of spiritual care highlights ethical concerns that continue to be relevant in present-day healthcare discourse. Accordingly, Malay *Tibb* manuscripts can be positioned as valuable epistemological and moral resources for rethinking holistic approaches to health that do not negate scientific progress but complement it with ethical and cultural sensitivity. Principles such as balance (*tawazun*), compassion (*ihسان*), and social responsibility offer meaningful insights for strengthening

²⁸ Zohora Azmin Shompa, Mohamed Aslam Akbar and Hazwani Mohd Mohadis, 'Harmonizing Maqasid Al-Shari'ah with Sustainable Waste Management Practices: A Conceptual Framework for Principles and Implementation', *International Journal of Islamic and Middle Eastern Finance and Management*, 18.1 (2025), 142–65 <<https://doi.org/10.1108/IMEFM-02-2024-0061>>.

²⁹ Ananya Pandey and Achyutananda Mishra, 'Conflict and Coexistence of Human Rights: An Exploratory Study with Reference to Intellectual Property Rights', *Journal of Human Rights and Social Work*, 10.1 (2025), 43–54 <<https://doi.org/10.1007/s41134-024-00361-9>>.

³⁰ Harold G. Koenig, 'Person-Centered Mindfulness: A Culturally and Spiritually Sensitive Approach to Clinical Practice', *Journal of Religion and Health*, 62.3 (2023), 1884–96 <<https://doi.org/10.1007/s10943-023-01768-w>>.

³¹ Hazem Mathker S. Alotaibi, Wamadeva Balachandran and Ziad Hunaiti, 'Ethical Integration of AI in Healthcare Project Management: Islamic and Cultural Perspectives', *AI*, 6.12 (2025), 307 <<https://doi.org/10.3390/ai6120307>>.



value-based healthcare frameworks, particularly within Muslim societies navigating the challenges of globalization and healthcare commercialization. Finally, this study underscores the importance of preserving, transliterating, and digitizing Malay *Tibb* manuscripts to ensure their accessibility for future scholarships. Such efforts not only safeguard cultural heritage but also open interdisciplinary avenues connecting medical history, Islamic ethics, health anthropology, and public policy. In this sense, Malay *Tibb* manuscripts may be understood as bridging heritage and contemporary discourse, offering enduring insights for the development of ethically grounded and culturally informed conceptions of health and human well-being.

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