

THE PROFILE OF DIAGNOSTIC OF UNCATEGORIZED SYNDROME TREATED BY ISLAMIC SPECIFIC PRAYER IN NUR HIDAYAH HOSPITAL

Sagiran¹, Tesaviani Kusumastiwi², Adang M.Gugun³, Iman Permana⁴
^{1,2,3,4} Universitas Muhammadiyah Yogyakarta

Abstrak

In daily practice, there are many patients that medically are not sick but suffer from illness. Those syndrome categories to be psychosomatic disorder (ICD 10). Islam believes about the power of an evil spirit. It can invade and attack a person caused illness. Physical exam and laboratory finding can be normal. They need islamic specific praying to relieve their suffering. The research design is a cross sectional study. Subjects in this study are patients at Nur Hidayah Hospital in 2014 - 2019 to whom receiving Islamic specific praying (ruqyah syar'iyah). There are 369 patients treated by Islamic specific praying, but in the beginning, there is no standardized recording. The complete data of 22 patient are collected and statistically analyzed. The medical diagnosis of the subjects is: gastrointestinal disorders (10; 45%); cephalgia-epilepsy (5; 22%) anxiety disorders (4; 18%), sexual disorders (3; 13%). The reaction of treatment is vomiting, headache, heat sensation, and delirium. After those kinds of reaction, the patient relief from suffering and cure their illness. It is studied the diagnostic profile of Islamic specific praying in Nur Hidayah Hospital. Ruqyah Syar'iyah can be used as complementary treatment.

Keyword: Psychosomatic Disorder, Islamic Specific Praying, Complementary Treatment

**Correspondent Author: Suryanto.
Email : suryapatklin63@gmail.com*



INTRODUCTION

There is an increasing interest regarding prayer in healthcare. Prayer is an activity related to spirituality and religion. Positive outcomes have been identified regarding spirituality in health. (Simão et al., 2016) In this life, humans endlessly experience problems that come and go. Problems that come in a barrage can disrupt someone's body and psyche. Health problems may become a big burden of human life. In the daily practice of doctor in the hospital, there are so many diseases, treated with drugs, physical therapy, chemotherapy even surgery accordingly. There are also many diseases that medically, the person is not sick but suffers from illness.(Hanifah, 2015) The psyche is getting sick but

the body is suffering. According to ICD 10 those syndrome categories to be Psychosomatic disorder.

Islamic thought believes about the power of an evil spirit (Jinn or Satan). It can invade and attack a person caused illness. As a Moslem, there are in believing of a jinn invasions. The symptom and science of those ailments are mostly the same as Psychosomatic disorder. Some Moslem scholar judge that physical disease is can be caused by jinn invasions, on the other hand jinn invasions can appear the same as disease in common conventional medicine treated by a conventional doctor. Physical exam and laboratory finding can be normal. They need islamic specific praying to relieve their suffering.

This belief that religious faiths are able to influence physical and emotional improvement is not a new phenomenon. As in all the religions, resorting to God along with special prayers and devotions is a common thing. In Islam there is also this belief that praising divine names, attributes of God and Quranic verses make peace upon the hearts and minds and is effective on treatment of the illnesses; it also should be noted that healing is concerned with divine fate and degree of devotion and faith (Asadzandi et al., 2011). The National Center for Complementary and Alternative Medicine (NCCAM), sponsored by the National Institutes of Health (NIH), considers prayer as one of many types of complementary and alternative endeavors towards improved health. (Jors et al., 2015)

In many journals or studies illustrate that the facts also exist and have been investigated. Various cases that look like normal illness, apparently there is interference from the genie (jinn). Or people who are initially physically ill but due to a weak immune system and continued disruption then their spiritual endurance is weak so that the genie (jinn) is entered with symptoms that medically find no special syndrome.(2) The main treatment done for this case is with prayers (Ruqyah Syariyyah).

Nur Hidayah Hospital is one of the hospitals in Yogyakarta, experienced with treating a patient with Jinn attack named Supiyati in 2012, she was suffered from more than 2000 nails pulled out from her body. The patient underwent surgery many times because the nails appeared again and again. Finally, ruqyah syar'iyah was applied intensively, combined with conventional medical treatment. She was cured and getting healthy whether physically or spirituality. Following this occasion, there are many patients come to seek ruqyah syar'iyah in hospital. Since the year 2014 Nur Hidayah established a Ruqyah Syariyyah clinic, in collaboration with Rumah Terapi Tauhid (RTT), the place provide Religious Treatment located around this hospital. (Andrade & Radhakrishnan, 2009)

METHOD

The research design is a cross sectional study. The data was collected from the hospital medical record and RTT patient notes. Subjects in this study are patient's medical records at Nur Hidayah Hospital in 2014 - 2019 to whom receiving Islamic specific praying (ruqyah syar'iyah). There are no criteria of eligibility related to medical diagnosis. All patient referred to this program of ruqyah syar'iyah treatment are still managed by Specialties accordingly. It means that ruqyah syar'iyah treatment is to be complementary management of patient. General consent is obtained as a routine/standard operating procedure. All the subject is included into the study. The data collected then was analyzed

statistically to describe the characteristics of the subject, the profile of medical diagnostic and also analyzed whether the characteristic is related to response of the treatment.

The characteristics of the subject observed are: sex (male/female), age (under 40/above 40), job (unemployed/employee). The response of treatment is vomiting, heat sensation, dizziness and delirium. The patient with uncomplete medical record data is excluded from the study.

RESULTS AND DISCUSSION

According to the findings, there are 369 patients treated by Islamic specific praying, but in the beginning of this treatment program, there is no standardized medical recording. The complete data of 22 patient are collected and statistically analyzed. The characteristics of the subject is as follow: Percentage of the participants included is 15 (68 %) females and 7 (32%) males. Age distribution is 12 (54%) under 40 and 10 (46%) above 40 (Fig 1.); Percentage of patient's job is 12 (54%) employee and 10 (46%) unemployed (Fig 2.); Response of treatment is 11 (46%) vomiting, 8 (33%) heat sensation, 3 (13%) dizziness/headache, 2 (8%) delirium (Fig 3.). After those kinds of reaction, the patient relief from suffering and cure their illness. For further follow up, patients still see the doctor (medical conventional treatment) and ruqyah therapist as needed. Some of them need several session of treatment.

Figure 1. Age distribution

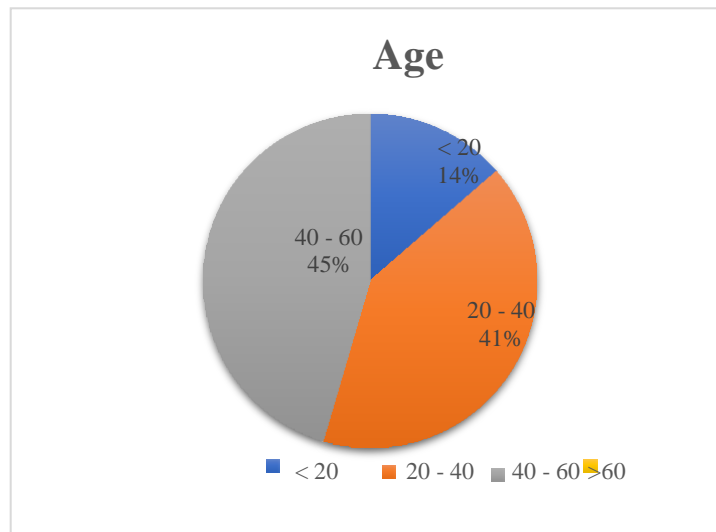


Table 2. Job

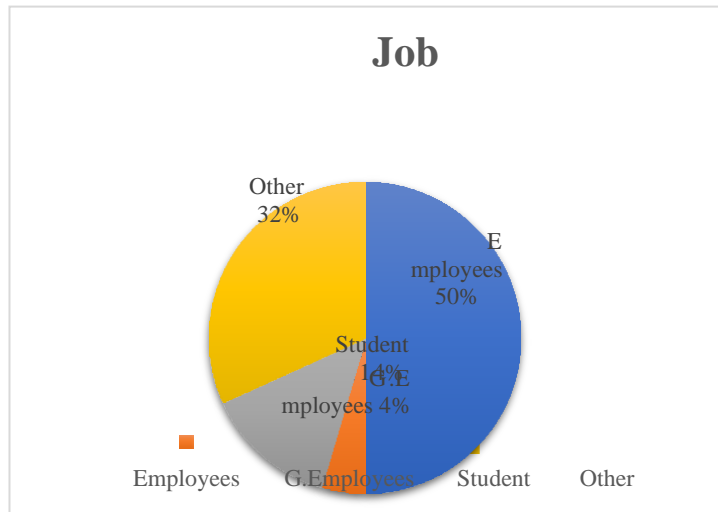


Table 3. Response after Ruqyah

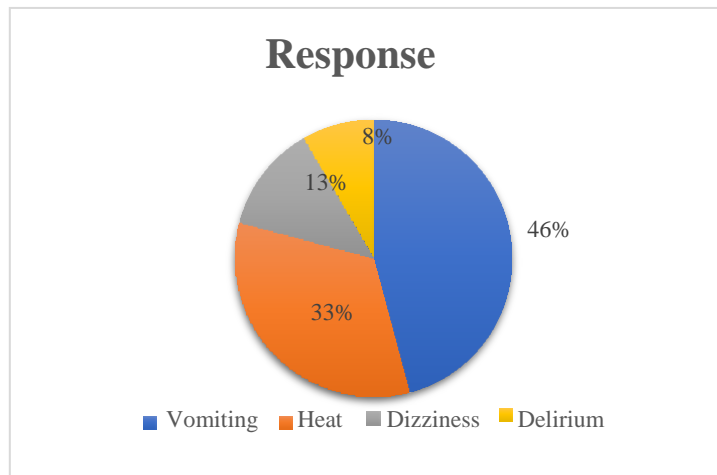


Table 1, describes about the medical diagnosis of the subjects is: gastrointestinal disorders (10; 45%); cephalgia-epilepsy (5; 22%) anxiety disorders (4; 18%), sexual disorders (3; 13%). Medical diagnosis included: gastrointestinal disorders of GERD (gastroesophageal reflux disease), Gastritis, dyspepsia and ascites; Cephalgia-dizziness-epilepsy; anxiety disorder of distress, paranoid, schizoid; sexual disorders of HIV, infertility, erectile dysfunction.

Table 1. Profile of Diagnosis

Sub Category	n	%
Gastrointestinal disorder	10	45%
Cephalgia - Epilepsy	5	22%
Anxiety disorder	4	18%

Sexual disorder	3	13%
-----------------	---	-----

The relationship between sex factors with the response to vomiting during therapy showed that female reacted vomiting dominantly, it is significant compared to male. The relationship between job and vomiting response to therapy showed that people who work more dominantly react to vomiting significantly compared to people who do not work. The relationship between age and vomiting response during therapy showed that the younger age group reacted more than the old age group, but this difference was not statistically significant.

The relationship between sex and heat response during therapy showed that females had a more significant heat reaction than males. The relationship between age factors and heat response when therapy shows that young age groups are more responsive to heat than the old age group. The relationship between job and heat response when therapy shows that people who do not work react more to heat than people who work. However, the difference is not significant statistics.

The relationship between age factors and dizzy response during therapy showed that young age groups reacted dizzy while the older age groups did not react dizzy. The relationship between sex and dizzy response during therapy shows that females react more to dizziness than males. The relationship between job and dizzy response during therapy shows that people who do not work react more to dizziness than people who work.

When a person gets ill, he/she experiences stress over the changes in life then eventually looks for evident reasons or solutions for cure, and when the medical system fails to do so, then patient begins to look towards spirituality for healing in other way. Those who were not religious previously may turn to religion for comfort and acquired it as a new method of coping. (Jawaid, 2014)

One of the largest and most detailed studies from Great Britain examined the prevalence of religious delusions among inpatients (n = 193) with schizophrenia. There are 59 Subjects with religious delusions (24%) had more severe symptoms, especially hallucinations and bizarre delusions, poorer functioning, longer duration of illness, and were on higher doses of antipsychotic medication, compared with patients with other kinds of delusions. (9)

The most common symptoms after ruqyah are vomiting and heat in certain parts of the body. Generally, after ruqyah syar'iyah, effects will occur which are divided into 3 categories:

- 1) There is no reaction at all
- 2) Mild reactions such as trembling or feeling his body heat, feeling excessive sleepiness, pain in body parts certain, irregular moving eyes and flickering, crying, feeling dizzy, nauseous or vomiting.
- 3) Severe reactions such as anger or loud shouting, issuing movements like martial arts. This shows the existence of jinn which disturbs and reacts to verses and prayers the recited ma'tsur.(10)

In the treatment of Al-Qur'an therapy using the ruqyah syar'iyah method, we pray to Allah for healing our illness feel because the Qur'an is an antidote for sick people. This

matter According to the theory, the Qur'an is Ash-Shifa, which means medicine. Not medicine any drug, but excellent drugs for physical or physical birth or mental illness. (11)

CONCLUSION

It is studied the diagnostic profile of Islamic specific praying (Ruqyah Syar'iyah) in Nur Hidayah Hospital. Spesific Prayer in Islam (Ruqyah Syariyyah) is eligible for Complementary Treatment in medical services. It can be recommended to other general hospital using this modality to manage the patient especially who are in uncategorized syndrome.

REFERENSI

- Andrade, C., & Radhakrishnan, R. (2009). Prayer and healing: A medical and scientific perspective on randomized controlled trials. *Indian Journal of Psychiatry*, 51(4), 247.
- Asadzandi, M., Taghizade Karati, K., Tadrissi, S. D., & Abbas, E. (2011). Effect of prayer on severity of patients illness in intensive care units. *Iran J Crit Care Nurs*, 4(1), 1–6.
- Hanifah, M. (2015). *Dampak Terapi Ruqyah Syar'iyah dalam Pemulihan Kesehatan Mental Pasien di Rumah Ruqyah Indonesia Cililitan Jakarta Timur*.
- Jawaid, H. (2014). Impact of religion/spirituality on health: What are the evidences. *Journal of Psychiatry*, 17(6), 1–5.
- Jors, K., Büssing, A., Hvidt, N. C., & Baumann, K. (2015). Personal prayer in patients dealing with chronic illness: a review of the research literature. *Evidence-Based Complementary and Alternative Medicine*, 2015.
- Simão, T. P., Caldeira, S., & De Carvalho, E. C. (2016). The effect of prayer on patients' health: systematic literature review. *Religions*, 7(1), 11.
- 2020 ICD-10-CM Diagnosis Code F45.9: Somatoform disorder, unspecified [Internet]. [cited 2020 Jan 15]. Available from: <https://www.icd10data.com/ICD10CM/Codes/F01-F99/F40-F48/F45-/F45.9>
- Abdullah BNBC. ampos [Internet] [skripsi]. Universitas Islam Negeri Sumatera Utara Medan; 2019[cited 2019 Dec 2]. Available from: <http://repository.uinsu.ac.id/6639/>
- Kisah dokter muslim melawan santet [Internet]. myedisi.com. [cited 2020 Feb 2]. Available from: <https://www.myedisi.com/hidayatullah/2483/6123/kisah-dokter-muslim-melawan-santet>
- Qadarusman H, Ag S. EFEKTIFITAS PENGGUNAAN AYAT-AYAT AL-QURAN SEBAGAI RUQYAHDIRUQYAH BEKAM CENTER KLATEN. :155.
- Rahma A, Mujahid I. TERAPI AL-QUR'AN DENGAN METODE RUQYAH SYAR'IYYAH DALAM PENYEMBUHAN GANGGUAN PSIKIS DI RUMAH RUQYAH SOLO [Internet] [skripsi]. Institut AgamaIslam Negeri Surakarta; 2018 [cited 2019 Dec 2]. Available from: <http://eprints.iain-surakarta.ac.id/1964/>
- Ingle K. The power of prayer: Science proves it works, has positive physiological effects [Internet]. Fox News. 2019 [cited 2020 Feb 2]. Available from: <https://www.foxnews.com/opinion/the-power-of-prayer-science-proves-it-works-has-positive-physiological-effects>



© 2021 by the authors. Submitted for possible open access publication under the terms and conditions of the Creative Commons Attribution (CC BY SA) license (<https://creativecommons.org/licenses/by-sa/4.0/>).