

Saving Human Life and Preventive Health in Islam:

An Islamic Vision for Transplantation, Genetic Screening, and Communicable Disease Control

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Objective: The purpose of writing this article is to convince the Muslim communities worldwide – the second largest religious entity of the world - to embrace modern medicine which provides a safety net by preventing the transmission of disease.

Methods & Discussion: Muslims are highly influenced by their religion. They do not consider science equal to their religion. It is thus quite difficult for the authorities to enforce norms in the medical sector through acts or ordinances. This is why the canonical source of Shariah can communicate this message easily. The masses practice their daily affairs as per Shariah as they believe it to be the fountain of divine wisdom. Hence, we have provided religious sources in this research paper to communicate the findings from scientific studies.

Abstract: *This article articulates an Islamic vision for preventive medicine and bioethics that places the preservation of human life - Hifd al-Nafs at the center of policy and personal conduct. Grounded in the Qur'ani maxim that saving one life is akin to saving all humanity (Q 5:32), it argues that contemporary health interventions can be integrated into Islamic norms through the objectives of Maqasid al-Shariah and the rule of averting Harm (La Darar). The analysis first examines life-saving interventions, including organ transplantation and blood transfusion, highlighting the dominant Fiqhi view that these procedures are permissible from Muslim and non-Muslim donors when governed by valid consent, respect for the deceased, and clinical necessity. It then addresses the burden of inherited disorders associated with consanguineous marriage, using thalassemia syndromes and hereditary bleeding disorders (including Hemophilia and severe von Willebrand disease) as illustrations, and frames premarital carrier screening as a communal safeguard that protects prospective spouses, future children, and the integrity of the marriage contract. Third, the article considers communicable threats such as HIV and viral hepatitis, emphasizing that the invisibility of infection makes screening ethically comparable to other routine protective measures. Concealment of carrier status is analyzed as deception that undermines meaningful marital consent and exposes spouses to foreseeable harm. Nabawi Hidayah on avoiding contagion, together with the juristic reception of quarantine principles, supports disclosure duties, harm-reduction practices, and proportionate public regulation, including enforceable confidentiality and anti-stigma safeguards. Finally, the paper proposes an applied Shariah framework for counseling and governance: competent and trustworthy medical advice, strict confidentiality, intelligible communication sensitive to religious commitments, and targeted*

legislation that conditions marriage registration on premarital testing while ensuring procedural fairness. For couples with positive results, it outlines Shariah-consistent pathways, including contraception by mutual consent, guardianship of orphans without altering lineage, prohibition of third-party gamete donation, and regulated prenatal diagnosis with juristic oversight, including consideration of early termination for grave fetal conditions within established limits. Overall, the study positions premarital screening as a Shariah-aligned public health tool that operationalizes mercy, justice, and responsibility, and invites sustained collaboration between Ulama, clinicians, and legislators across Muslim societies in practice.

Keywords: Shariah; Nafs; organ transplantation; blood transfusion; premarital screening; consanguinity; thalassemia; hereditary bleeding disorders; HIV; hepatitis; confidentiality; public health legislation.

1. Saving Human Life; an Islamic Vision:

As per Qur'an saving of human life is considered to be one of the highest merits in Islam: [1]

"... and he who saves a human life, it shall be as though he saved the entire humanity."

The majority of Ulama consider transplantation Halal (permissible) from Muslim and non-Muslim donors, based on the principle that the needs of the living supersede those of the dead. This practice is becoming accepted in Muslim countries. Drawing and transfusing blood and blood products is permissible, both from Muslims and non-Muslims.

2. Prevention of Genetic Disorders:

Genetic disorders due to family marriages are common medical conditions in many countries.

Dr. Al Aqeel states in this regard: [2]

A strategic approach for curing hereditary health disorders could be by adopting methodology of the Shariah, which is the canon source of Islam and that provide us weighing scale, on which one can judge each matter. Similarly, principles of the Shariah help seekers of guidance, irrespective of subject, time and place.

Diseases like thalassemia syndrome, a heterogeneous group of inherited anemia characterized by defects in the synthesis of one or more of the globin chain subunits, the hemoglobin tetramer. Thalassemia syndrome is seen in all ethnic groups and geographic areas but is most common in the Mediterranean region. Homozygous state manifests as Beta Thalassemia Major, leading to transfusion dependent anemia. Heterozygotes (Thalassemia minor) are carriers. Prevalence rate of carriers ranges between 4-8% in different regions and ethnic groups. Carriers are clinically normal but can genetically transmit the disease to the next generation. If a couple has thalassemia trait, there is 25% chance in every pregnancy that the offspring will be thalassemia major [3]. Hemophilia – a sex-linked hereditary coagulopathy – occurs due to the deficiency of clotting factors VIII and IX (hemophilia A and B respectively). The hallmark sign of hemophilia is painful bleeding in the joints, muscles and body tissues leading to chronic inflammation and disability [4]. Similarly, as a result of family marriages, rare autosomal recessive disorders like congenital coagulation bleeding, platelet functional disorders and type III Von Willebrand Disease (VWD) have become common and these run in close families and

tribes. In certain instances many kindred within an extended family or a tribe are commonly seen with phenotypic expression of the disease. The subsequent inbreeding, however, leads to increased homozygosity, which, in turn, leads to an increased risk of premature morbidity and mortality among the children. One possible method to prevent the spread of these diseases is pre-marital blood screening among all intending couples in order to safeguard the institution of marriage, and to decrease the burden of disease in the community.

AIDS and Hepatitis: These are dangerous health hazards which have captured the global attention. The spread of these is quite alarming, and if not controlled, may cause an epidemic. It transmits through sex, the transfusion of blood and blood related products, use of non-sterilized syringes, blades and from the mother to the child through placenta. It is regrettable that Muslim countries - where claimants of modesty and chastity live - are infected with these health hazards either legitimate or illegitimate means. The infection and spread of the disease in our region is quite disheartening. According to unofficial statistics, large numbers of Muslim patients, both male and female, are carrying the most deadly HIV and Hepatitis virus in their blood. And these are mostly married couples.

3. Need of Pre-Marriage Screening:

Since the disease is not visible, it cannot be identified through merely looking at patients. If a female intending to get married is asked to undergo blood screening, the intention is not to question her chastity and insult her but just to safeguard her herself, her future husband and family, and the institution of marriage. Similarly, a male should also follow the same procedure keeping aside his pride. Transmitting the disease to the spouse is an offence and hiding the fact of being a carrier would tantamount to fraud. Both crimes are strongly punishable from the Shariah point of view. Amir al Mumineen, Ali ibn Abi Talib (as), instructed in clear terms: [5] "It is compulsory upon the Imam to arrest Fasiq Ulama and quack (fraudulent and ignorant) medical practitioner(S)."

There are men that know very well that they are HIV/Hepatitis positive but deliberately insist on marrying and spending their private life with the help of protection. Although this will reduce the risk of transmission of sexually transmitted infections (STIs) and pregnancy, they do not completely eliminate the possibility of these. The woman however will not agree to the use of condoms throughout her life as she desires to have children, nor will the husband be able to restrain himself. Therefore, the woman will be at the risk of contracting these. There are women who have lost their husbands due to such diseases. After the completion of Iddah [6] if they wish to re-marry, only pre-marital screening can save their prospective spouse. The same applies for the man as well. Furthermore, a woman can break her marriage through Khula [7] if her husband is subsequently discovered to be a carrier. The wife receives her Mahr [8] and compensation due to the divorce.

Pre-marital screening is looked down upon and is likely to incite uproar. Nonetheless, the issue of pre-marital screening should not be taken for granted because the very essence of marriage as a religious obligation is to regenerate and bring happiness, not to eliminate and cause

trauma to the family. In menses, foul blood releases therefore we can say that bleeding is discussed in the Qur'an. Study the following Ayah which invites our attention. [9]

"They ask you (O Muhammad) about menses. Say: This is a period of stress, therefore, withhold (yourselves) from women during menstruation and do not approach them until they have become clean again. Once they are clean you may have intercourse with them in the way Allah has commanded you. Allah loves those who are repentant and those who clean themselves."

Human intellect cannot reach the Hikmah (divine wisdom) of the Qur'an but medical research has proved that sexual intercourse during menstruation is one of the major cause of transmission and spread of infections, as Hadith guides: [10]

Umm'e Salama reported: While I was lying with Rasulullah(S) in a bed cover I menstruated, so I slipped away and I took up the clothes (which I wore) in menses. Upon this Rasulullah(S) asked: Have you menstruated? I said: Yes. He called me and I lay down

For compulsory blood screening as a pre-requisite for the marriage contract, government should introduce legislation in this regard. We see people who make their house help or employees undergo this but when it comes to marriage, they resist it. Only those with something to hide will resist this.

4. How infected couples establish marital ties:

Those infected have the liberty to marry but they are highly encouraged to use protection during copulation for reducing the risk of transmission. They must take additional safety measures to avoid conception and to prevent the infection since the AIDS virus transforms inside the body and repeated infection could increase the growth of the disease. If one of the spouses is an AIDS/hepatitis patient, the other can refuse sexual intercourse since this has been medically recognized to be the most important cause in the communication of AIDS. In case any healthy spouse approves sexual intercourse, sufficient safety measures should be taken to decrease the threat of infection and conception.

Transmission of AIDS through breast-feeding is rare. Yet, as per medical opinion, if the child has access to other choices, breast-feeding should be avoided. If choices are not accessible, it is in the child's interest to feed on the mother's milk as the risk of virus by AIDS is slightly less than with other diseases. Necessary steps and health precautions are indispensable to prevent transmission of the virus, as the mother would not be considered a risk to her child. Such precautions ensure that her blood - in case of a cut or wound or during menstruation - would not enter the infant's blood stream or mucous membranes. The chance of the virus being found in mother's milk, saliva, sweat and urine is certainly low. The risk would only be eminent if the nipples are cut or cracked resulting in bleeding, and hence, blood being consumed through the mouth along with the milk by the infant.

The Qur'an guides us about the two most important objectives of marital relationship. These are the preservation of chastity, and the bond of love and compassion between the spouses. These objectives get lost if either one of the spouse suffers from a disease or is handicapped which negatively affects the other or renders him or her incapable of satisfying the natural desires of

the other. In general, the basic teaching of Islam regarding release of wife by way of Talaq is clear and that is an injunction of Qur'an: [11]

"Keep her [wife] with kindness and release her with generosity [from marriage in case of incompatibility]."

Marriage should not be a source of causing harm to the spouse or transgressing divine limits. If there is no option for dissolution on certain afflictions, this principle is certainly to be violated. Moreover, marriage proposal and engagement can be terminated if one of future partners has a history of mental illness in the family. From the Muslim point of view, the existence of communicable diseases and the need to take sufficient preventive measures from contacting them is well documented. The following Hadith provides us guidance on the prevention of disease: [12]

"Keep away from the (infectious) leper as you do from a lion."

A Hadith says: [13 - see supplementary material]

"If you hear that there is an epidemic, do not enter it [place], if the deadly disease breaks out where you are; do not leave it [place] to escape the deadly disease."

Al Kafi differs with what Al Bukhari has declared above. According to Al Kafi, Ubaydullah al-Halabi asked Al Imam Jafar al-Sadiq (as) whether a person was allowed to move out of a place where plague had broken out. The Imam replied:

"There is no harm. Rasulullah (S) only forbade leaving a place which was situated in front of the enemy position."

These traditions highlight the significance of quarantine as a technique to avoid the spread of communicable and epidemic diseases which are transmissible.

In addition, Islam is protective of the reproductive health of human beings; it therefore forbids all sources of corruption which may lead to HIV and AIDS. The Qur'an says: [14]

"Women impure [corrupt] are for men impure [corrupt] and men impure are for women impure. And women of purity [clean] are for men of purity [clean]. And men of purity are for women of purity. These are not infected by what people say [false accusations]. For them, there is forgiveness and an honorable provision [sustain]."

If the screening result of couples is positive, they can choose these alternatives:

i. Contraception and Sterilization:

Contraception is acceptable if both the spouses approve. Nevertheless, sterilization is not recommended except when the health of the mother is in danger. Infertile couples spend money, time and energy to have a child. In such conditions, when a couple already had more than two or three congenitally-affected children and a minor number unaffected, they can then select sterilization and should consult prominent Muslim Jurists.

ii. Adoption:

As per Shariah, an adopted child is not acceptable as an heir. Lineage is important for heir ship where birth has taken place from legal pregnancy, only through marriage. The Qur'an says: [15- see supplementary material]

"...nor has He [Allah] made your adopted sons your [real] sons. These are only your wordings which have no reality."

Islam however considers the guardianship of orphans a good deed. The pedigree of the baby should remain with his actual father.

iii. Donation of sperm, ovum or pre-embryo:

With the help of un-natural processes such as semen reserves and in vitro fertilization, barren couples worldwide take the help of these modern techniques. Shariah has restricted procreation to within the wedlock, only between husband and wife, and does not allow use of any of these technologies.

iv. Diagnosis during pregnancy & permission of Abortion

With new methods such as cell free fetal DNA from maternal blood, Chorionic villus sampling (CVS) and amniocentesis, it is now possible to diagnose congenital malformation, genetic diseases and chromosomal abnormality. CVS can be carried out during the 12th week of pregnancy to detect suspected genetic and chromosomal defects. Similarly, amniocentesis can diagnose such defects, but at a later stage of pregnancy (14-16 weeks). The couple can approach for Shariah ruling from the concerned scholars for abortion methodology in case of a serious hereditary condition such as Thalassemia Major before 120 days of conception. [\[16-see supplementary material\]](#)

5. Counseling by the trustworthy:

We discuss the issue under the guidance of these Ahadith: [\[17\]](#)

i). "Religion (Islam) is sincere counseling and good advice."

ii). "The counselor should be trustworthy."

The meaning of trustworthy in the above Hadith is that the counselor should be skilled and proficient in the field in which they are opining.

According to a Hadith: [\[18\]](#)

"If a person practices medicine without due knowledge then that person is liable."

Another Hadith confirms the value of experience: [\[19\]](#)

"No one is wise except through experience."

Besides this, the counselor should maintain absolute confidentiality of the patient(s) and their family. A Hadith states: [\[20\]](#)

"Whoever guards the secrets of a Muslim, Allah will guard their secret in this life and on resurrection day."

The counselor should consider the religion of the patient when providing their opinion and should not impose their view. Opinion should be in understandable wordings. No religion provides independence and liberty as much as Islam. Qur'an says: [\[21\]](#)

"There should be no compulsion in religion"

6. Suggestions under the Guidance of Shariah:

Shariah concentrates on prevention of the disease rather than cure. Islam encourages marriage and prohibits fornication and adultery. The Qur'an informs: [22]

"Safeguard yourselves with full awareness of divine laws before your Lord who created you from a single soul, and from it created its mate, and from the two of them spread men and women in multitudes..."

An Ayah orders the unmarried to get married: [23]

"Marry those who are single among you."

A Hadith explained: [24]

"Marriage is my tradition; those who shun my practice are not from me (my follower)."

Sexually transmitted diseases could be managed if sexual desires are followed through the institution of marriage, as directed by Islam and recommended by all religions. Fornication, adultery, and sodomy are great sins and highly punishable crimes, as per the Shariah. Alcohol is completely prohibited, as well as any chemical substance that can cause mental disturbance and inherited irregularity. Similarly, the use of tobacco can contribute towards abortion and hereditary anomalies. It is prohibited as per laws of the Shariah and many Fatwas (rulings) have reiterated this. [25]

Any substance that is going to be harmful to the baby (i.e. teratogenic) should be avoided as per the instruction of the following Hadith: [26]

"Do No Harm"

7. Concluding Remarks:

An Islamic approach to health policy begins with the sanctity of life and the duty to prevent foreseeable harm. On this basis, life-saving measures-such as transfusion and transplantation-are widely treated as permissible when necessity, consent, and human dignity are secured. The same moral logic supports structured prevention: premarital screening for hereditary and communicable diseases serves not to impugn chastity, but to protect spouses, offspring, and the very purposes of marriage-tranquility, compassion, and preservation of lineage. Because many serious conditions remain clinically invisible, non-disclosure of carrier or infection status risks vitiating informed marital consent and may amount to actionable deception. Shariah's preventive ethos-reflected in guidance on avoiding contagion and endorsing quarantine-like measures-permits proportionate regulation, especially where community-level morbidity is demonstrably high. Accordingly, carefully drafted legislation can make premarital testing a procedural prerequisite for registration of marriage, while simultaneously mandating confidentiality, counseling, and anti-discrimination protections.

Where results are positive, Shariah-compliant options should be clearly articulated: responsible family planning by mutual consent; guardianship of orphans without distorting lineage; avoidance of third-party reproductive material; and prenatal diagnosis within recognized juristic limits for grave conditions. Ultimately, effective implementation depends on trustworthy counseling and coordinated leadership-clinicians providing competent care, scholars offering principled guidance, and the state ensuring equitable, humane public health safeguards. An Islamic government is bound to provide its citizens all necessary protective health measures to

keep them safe. In Iran, performing hemoglobin electrophoresis for the detection of Thalassemia carriers is now imperative for all couples before marriage. In Malaysia, as per law, couples proposing for marriage should get an HIV negative certificate from a government recognized institution. This is because one great advantage of pre-marital screening is the potential of helping individuals live peaceful and healthier lives. It is hoped that Muslims will take advantage from this. The Ulama (Muslim clergy) and Madrasahs (Seminaries) have a pivotal role to influence health education and in its promotion amongst members of the Muslim community. They can provide potential access to people for raising understanding and encouraging blood donor drives.

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Authors' contributions: MB and AB drafted the manuscript and conceived the work. AB conducted the literature overview and both authors contributed to the discussion and debate. Both authors read and approved the final manuscript.

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- [5] Tehzib al-Ahk'am, vol. 6, p.319, Hadith 878; Mun La Yahdarah al-Faqhi, vol.3, p.31, Hadith 3266
- [6] Iddah=4 months 10 days compulsory period of stay in seclusion for the deceased's wife as per the injunction of Qur'an
- [7] Khula=Wife's exclusive right of divorce in Muslim law through which she can release herself from the bond of marriage
- [8] Mahr= It is a compulsory gifted amount decided prior to marriage and payable before the conjugal act among Muslims. See for details: *Mahar: Neglected Rights of Wife*, by Qazi Dr. Shaikh Abbas Borhany al-Waleed, www.durrenajat.com
- [9] The Qur'an: Ayah 222: Surah al-Baqarah-2
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[25] For further references: Use of Tobacco in Islam, By: Qazi Dr. Shaikh Abbas Borhany al-Waleed,
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[26] Al Kafi, Muhammad b. Yaqub al Kuleni, vol. 5, p. 292, Qum, Iran

Supplementary Material:

[Ref. No. 13] [When plague broke out and the people began to flee from it, Muhammad Rasulullah(S) directed: "He, who fled from there, would be considered to have run away from a battlefield". Muhammad Rasulullah (S) declared this because he did not want Muslims to desert their position. It is clear from the explanation provided by Moula Abi Abdillah al Imam Jafar al-Sadiq (as) that the reason why Muhammad Rasulullah (S) forbade fleeing from the plague on a particular occasion was because he wanted to impress upon the Muslims that they must stick to their duty at battlefield and must not expose themselves to a bigger risk. He did not issue a general instruction that Muslims should not take precautionary measures against plague and should simply accept what was in store for them. A Muslim is duty bound to protect his life and property. As the Hadith passed through a number of transmitters, it took the shape of a general rule as we find it in its present form in "al-Bukhari". Fortunately the real intention of Muhammad Rasulullah (S) has been disclosed by Al Imam Jafar al-Sadiq (as) who naturally knew it better than anybody else, for he himself was a member of Ahl al-Bayt.

[Ref. No. 15] Mahram are those with whom marriage is not allowed as per the law of Islam. It is permissible for a person to adopt a child, but the child is not considered as his own son or daughter; the child remains a stranger (non-Mahram) to him or his wife and he or she does not inherit the person who has adopted him or her. The child cannot use the name of the adoptee as their father. It should be noted that the relationship gained by the adopter and adoptee is not that of the Mahram. The adopted should understand this Hadith:

"Mun Nasaba ila Ghairi Abehe Fa Alehe La'anah". The one who referred to the lineage of the other as his own, upon them is my La'anah (they are far removed from the Rahmah or the blessings of Allah).

[Ref. No. 16] [The Fatwa of the Islamic Jurisprudence Council of the World Islamic League at its 12th session (10-17 February, 1990) in Makkah, agreed by a majority vote to allow for the option of abortion under certain specific conditions. The fatwa determined that an abortion may take place only

if a committee of specialized, competent physicians has decided that the fetus is grossly malformed, and that its life would be a calamity for both the family and itself. The malformation must be untreatable, unmanageable and very serious, and the abortion may only be carried out prior to the 120th day of conception (computed from the date of fertilization, not the last menstrual cycle). On the basis of this Fatwa, abortions of serious congenital disease are carried out in the hospitals of Saudi Arabia. Many dilemmas remain. Is it allowable to abort a Down syndrome fetus, which if carried to term and given birth, could likely live a quiet, peaceful and love-giving life? Is it acceptable to abort if the Huntington disease gene is detected - the disease is unlikely to appear until the person is 40 years, or even 60 years old? Is it permissible to abort those who are homozygous for sickle-cell disease or thalassemia, or phenylketonuria or homocystinuria; the latter two diseases can be cured simply by avoiding foods containing phenylalanine or methionine? Similarly, treatment exists for the haemolytic anaemias by way of blood transfusion and iron chelation therapy.

The Islamic Jurisprudence Council of Makkah (the Islamic World League) passed a Fatwa No. 4 (Legal Ruling) in its 12th session held in 15-22 Rajab 1410H (10-17 February 1990) which allowed abortion if the fetus is grossly malformed with untreatable severe condition proved by medical investigations and decided upon by a committee formed by competent trustworthy physicians. The abortion of course has to be requested by the parents. Human life begins at the time, which is stated in the Hadith to be at 120th day from the moment of conception, which is equivalent to 134 days from the last menstrual period (LMP) used by obstetricians. This Fatwa was a landmark as the previous Fatwas only allowed abortion in the first 40 days of conception. At such a period it was almost impossible to ascertain any type of congenital or hereditary diseases. By extending the time of permissible abortion to 120 days computed from the moment of conception (i.e. 134 days from LMP), it gives ample time to ascertain the diagnosis of severely affected embryos and fetuses.] Ethical considerations in the prevention and management of genetic disorders with special Emphasis on religious considerations. Dr. Mohammed Ali Albar.

[Like many of the Sunni scholars, Shi'i Ithna Ashar Marja'e-Taqlid does not condone abortion on the grounds of expected illness or deformity. Shi'i Ithna Ashar Marja, Ayatullah Sistani shares this view. Sometimes the doctors reach the following conclusion: this fetus is afflicted with a very serious disease; it is therefore preferable that it should be aborted because if the child is born, it will be deformed or will die soon after birth. Is it, therefore, permissible for the doctor to abort the fetus? Is it permissible for the mother to agree to the abortion? And who of the two will become liable for indemnity?

Answer: *Just the fact that the child will be deformed or that it will not live for a long time after his birth does not ever justify the termination of the pregnancy. Therefore, it is not permissible for the mother to consent to the abortion just as it is not permissible for the doctor to go ahead with the procedure. And whoever performs the abortion will become liable for the payment of indemnity]*

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