Letter

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# Hospital Management in the Medieval Islamic World

Seyyed Abulghasem Foroozani, and Seyyed Alireza Golshani<sup>2,\*</sup>

<sup>1</sup>Department of History, Faculty of Literature and Humanities, Shiraz University, Shiraz, Iran

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## Dear Editor,

Hospital management was among many of the innovative approaches of Islamic culture and civilization in the third and fourth centuries. This approach was created in order to utilize more effectively those facilities with limited financial and economic resources. This was an innovation in the world history, never before experienced in any past civilization or culture. The present study examines the different forms of this managerial system.

Hospital Management

Similar to the current practice, the dean of the hospital was not a physician but a volunteer civilian accepting this honorary title. This position was almost always saved for princes and commanders. In practice, deans of hospitals delegated their duties to someone else. The hospital deputy was an important governmental position, and those selected for this job received great respect. Whoever occupied the deputy role (known as saoor) cooperated in all administrative issues with the deans of the three major divisions, especially the chief physician and chief of surgery. The position of the dean of the hospital (known as motevalli) was similar to that of today's executive director and he was a physician. For instance, Rhazes was among the motevallis of Rey Hospital, later reprising the same role in what was later known as Baghdad's old hospital. Al-Jurjani had the same role in Khwarezm where the director of the hospital was called timardar (1-3). The director was assisted by two subordinates called sharaf or gavam. Together, they formed a charity organization that collected volunteer donations and goods bequeathed to the hospital by donors in their wills. Further, a number of brokers worked in hospitals holding titles such as lawyer, supervisor, treasurer, and guard (4).

Hospitals were entirely dependent on waqf (mortmains). However, it was either insufficient or misappropriated shortly thereafter, making good hospitals suscep-

tible to mismanagement. Nevertheless, if the government in the medieval Islamic world enjoyed stability, numerous hospitals spawned due to progress and prosperity (5).

Hospitals had laboratories, drugstores, out-patient clinics, offices, bathrooms, libraries, mosques, and reading rooms, with beautiful spaces built for psychiatric patients. Patients, women or men, rich or poor, free or slaves, were treated for free. In the financial system, patients received money upon being discharged so that they would have time to convalesce and would not have to start working immediately. Those receiving treatment for conditions like insomnia listened to story-tellers or received books to read (6).

In an anecdote concerning the selection of a director for a hospital in early-fourth-century Baghdad, we read about 100 skilled physicians (6). In fact, except for the noted historical data belonging to Baghdad, we have no precise information regarding the management of hospitals in this or other cities.

There are discrepancies among reports of the biographies of physicians and management of hospitals. Thus, we have a very limited view of the matter. Important hospitals were described as possessing enough administrative and other staff members. However, the exact number is not mentioned. In certain situations, we find a complete managerial system and staff who served a powerful king during his reign. Accurate numbers concerning these populations remain scarce, however. Still, the fact that a precise hospital management system existed in the medieval Islamic world, for the first time, reflects an innovative movement in the history of hospital management.

#### **Supplementary Material**

Supplementary material(s) is available here [To read supplementary materials, please refer to the journal web-

<sup>&</sup>lt;sup>2</sup>Department of History, Faculty of Literature and Humanities- Dr Ali Shariati, Ferdowsi University of Mashhad, Mashhad, Iran

<sup>\*</sup>Corresponding author: Seyyed Alireza Golshani, Department of History, Faculty of Literature and Humanities- Dr Ali Shariati, Ferdowsi University of Mashhad, Mashhad, Iran. E-mail: golshani\_22@yahoo.com

### site and open PDF/HTML].

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