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THE IMPACT OF DIETARY PATTERNS IN PREVENTING DEGENERATIVE DISEASES: A HADITH PERSPECTIVE

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ABSTRACT

Degenerative diseases such as diabetes, hypertension, and heart disease are increasing in Indonesia, primarily due to an imbalanced diet and unhealthy lifestyle. Islam, through the hadiths of Prophet Muhammad (peace be upon him), offers guidance on healthy eating to maintain the trust of bodily health. This study explores the contributions of hadith values to healthy eating patterns to prevent degenerative diseases. A qualitative research method with a descriptive-analytical approach was employed, examining hadith texts from *Kutub Tis'ah* and modern health literature. Data analysis was conducted using content analysis methods to understand the textual and contextual meanings of the hadith concerning modern health concepts. The findings reveal that the moderation principle, as highlighted in the hadith, prevents overindulgence and promotes a balance between food, drink, and breathing space. These guidelines are relevant for preventing degenerative diseases and strengthening a holistic health approach grounded in religious values. These findings provide significant theoretical contributions to preventive health strategies and emphasize the synergy between religious principles and health sciences.

Keywords: Diet; prevention; degenerative diseases; hadith

1. INTRODUCTION

Degenerative diseases such as diabetes, hypertension, and heart disease are on the rise in Indonesia, primarily due to unbalanced diets and unhealthy lifestyles. Diets high in saturated fats, sugar and low fibre intake are among the leading causes of these diseases. According to the Ministry of Health, the prevalence of non-communicable diseases in Indonesia has shown a steady upward trend, indicating the need for lifestyle improvements, particularly in fostering regulated and mindful eating behaviours to prevent degenerative diseases.¹

¹ Kemenkes RI, *Profil Kesehatan Indonesia 2021*, 1st edn (Jakarta: Kementerian Kesehatan Republik Indonesia, 2022), h. 236.

Data from Indonesia's 2020 population census show that 70.72% of the total population falls within the productive age group (15–64 years), while 9.78% are categorized as elderly (>64 years). In South Sumatra Province, the highest cancer prevalence across all age groups is recorded among individuals aged 45–54 years, at 0.45%. In Palembang City, the prevalence of diabetes mellitus across all age groups stands at 1.61%, with the highest rates observed in the 55–64 age group. For heart disease, the highest prevalence across all age groups in South Sumatra is found among the elderly (>64 years). ²

In Islamic thought, dietary practices are considered physiological necessities with significant spiritual dimensions. The Prophet Muhammad (peace be upon him), through his hadiths, often provided guidance on the importance of balance and mindfulness in eating habits. For example, the Prophet encouraged eating moderately and avoiding overindulgence, which aligns with the principles of balanced nutrition in modern health sciences.³ Thus, hadiths serve as valuable references for developing healthy and preventive eating patterns against degenerative diseases, offering a robust foundation for disease prevention through guidance derived from religious values.

Furthermore, the perspective of hadith teaches that maintaining bodily health is a trust that must be upheld. Several narrations emphasize that the body has rights over an individual, including the right to be treated well by consuming nutritious and beneficial food. The healthy dietary practices recommended in the hadiths, such as consuming foods that benefit the body and avoiding those harmful to health, are highly relevant to efforts to prevent degenerative diseases. This approach supports physical health and contributes to mental and spiritual well-being.

This study on healthy eating habits from the perspective of hadith aims to provide significant theoretical contributions to preventing degenerative diseases. Several studies have demonstrated a relationship between balanced and regulated eating patterns and a reduced risk of degenerative diseases.⁵ Therefore, incorporating Islamic values into health practices strengthens the spiritual dimension and enhances the effectiveness of preventive efforts against diseases that can potentially diminish the quality of life.

Previous studies have analyzed preventive measures against degenerative diseases, such as the research conducted by Amila et al. (2021) titled "Deteksi Dini dan Pencegahan Penyakit Degeneratif pada Masyarakat Wilayah Mutiara Home Care" This study began with community service activities aimed at raising awareness and educating the community to detect early signs of potential degenerative diseases at a health clinic.⁶

² Indah Purnama Sari and others, 'Skrining Dan Konseling Gizi Rutin Dapat Meningkatan Kewaspadaan Terhadap Penyakit Degeneratif', *Jurnal Pengabdian Masyarakat: Humanity and Medicine*, 3.1 (2022), 1–13 https://doi.org/10.32539/hummed.v3i1.74.

³ Abī 'Īsā Muḥammad bin 'Isā bin Saurah Al-Tirmi*ż*ī, *Al-Jāmi* '*Al-Timiżī*, Juz 4, (Riyadh: Baitul Afkar al-Dauliyah, 1998), h. 168.

⁴ Muḥammad bin Ismā'īl bin Ibrāhīm bin al-Mugīrah al-Ju'fī Al-Bukhārī, *Al-Jāmi' Al-Musnad Al-Ṣaḥīḥ Al-Mukhtaṣar Min Umūri Rasūlullah Sallallahu 'Alaīḥi Wasallah Wa Sunanuhū Wa Ayyāmuhū*, Cet.1, Juz 3, (Dār al-Tāsīl, 2012), h. 38.

⁵ Lihat misalnya, Sari and others.

⁶ Amila, Evarina Sembiring, and Novita Aryani, 'Deteksi Dini Dan Pencegahan Penyakit Degeneratif Pada Masyarakat Wilayah Mutiara Home Care', *Jurnal Kreativitas Pengabdian Kepada Masyarakat (Pkm)*, 4.1 (2021), 102–12.

Another study by Hasby, Mauliza, and Mastura, titled "Pemanfaatan Tanaman Obat Sebagai Pencegahan Penyakit Degeneratif" (2019), focused on community education about various medicinal plants that can be used as preventive measures against degenerative diseases. The findings showed strong community enthusiasm to learn about and directly use these medicinal plants following educational activities on planting and utilization. The study reported an increase in community knowledge regarding the use of these medicinal plants.⁷

While these studies primarily analyzed preventive measures for degenerative diseases through dietary, behavioural management and the use of herbal remedies, this study differs by examining one of the hadiths of the Prophet Muhammad (peace be upon him) that discusses dietary habits and substantively analyzing the regulations and principles embedded within the hadith.

This research employs a literature analysis approach, combining hadith studies and contemporary scientific findings to explore how the values embedded in the hadiths can contribute to developing healthy dietary practices and preventing degenerative diseases. This study will likely provide comprehensive insights supporting public health through a holistic and religiously grounded approach, reinforcing the synergy between modern health sciences and religious perspectives in disease prevention.

2. METHODS

This study adopts a qualitative research method with a descriptive-analytical approach. This method is suitable for exploring textual and contextual dimensions of hadiths related to dietary practices as preventive measures against degenerative diseases. By utilizing a descriptive-analytical approach, the researcher aims to systematically describe and analyze the meanings embedded in the selected hadiths, linking them to modern health theories on nutrition and disease prevention. Combining religious and scientific perspectives enables a comprehensive exploration of the subject matter.

Data Sources

The data in this research are classified into primary and secondary sources.

1. Primary Sources

The primary data are extracted from various hadith compilations, focusing on the nine canonical hadith collections (*Kutub Tis'ah*), which include *Sahih Bukhari*, *Sahih Muslim*, *Sunan Abu Dawud*, *Jami' at-Tirmidhi*, *Sunan an-Nasa'i*, *Sunan Ibn Majah*, *Musnad Ahmad*, *Muwatta Malik*, and *Sunan ad-Darimi*. In addition, works of *sharh al-hadith* (hadith commentaries) and linguistic references (*al-lughah*) are consulted to uncover nuanced meanings in the hadith texts.

2. Secondary Sources

Secondary data are derived from various academic resources, including books, journals, theses, dissertations, and relevant scientific articles. These sources provide contextual insights into

⁷ Hasby, Mauliza, and Mastura, 'Pemanfaatan Tanaman Obat Sebagai Pencegahan Penyakit Degeneratif', *JPPM (Jurnal Pengabdian Dan Pemberdayaan Masyarakat)*, 3.1 (2019), 55–61 https://doi.org/10.30595/jppm.v3i1.3581.

degenerative diseases and dietary practices from the perspectives of modern health sciences, enhancing the interdisciplinary nature of the research.

Data Collection

The data collection process is conducted through a comprehensive library research approach. This involves identifying, gathering, and examining relevant literature from the aforementioned sources. The research focuses on hadiths that explicitly or implicitly discuss dietary habits and health, utilizing tools such as *Al-Mu'jam al-Mufahras li Alfāz al-Ḥadīs an-Nabawī* (a hadith index), *Maktabah Shamila* (a digital library), and other textual resources to locate pertinent narrations.

The selection of hadiths is guided by specific criteria, such as relevance to the theme of healthy eating, the prevention of diseases, and the quality and authenticity of the hadiths, which are assessed during the validation stage.

Data Analysis

The study employs content analysis to examine the collected data. This method is particularly effective for exploring the textual (literal meanings), intertextual (connections between hadiths and other religious texts), and contextual (relevance to contemporary health issues) dimensions of the selected hadiths. The content analysis is conducted in several stages:

1. Textual Analysis

This involves dissecting the linguistic and semantic elements of the hadiths to understand their explicit meanings. Key terms and phrases related to dietary practices are analyzed in light of their usage in classical Arabic and Islamic scholarship.

2. Intertextual Analysis

Connections between the selected hadiths and related texts, such as Quranic verses and other prophetic traditions, are explored to provide a holistic understanding of the guidance on dietary practices.

3. Contextual Analysis

The implications of the hadiths are examined in the context of modern health sciences. This includes correlating the prophetic guidance on dietary moderation with current theories and findings in nutrition and preventive healthcare.

Data Validation

To ensure the reliability and validity of the research findings, *takhrij al-hadith* is conducted. This involves tracing the selected hadiths' transmission chains (*sanad*) to verify their authenticity and credibility. The *sand* is evaluated based on the narrator's reliability and the chain's continuity. At the same time, the *matan* (text) is critically analyzed for consistency with established Islamic principles and scientific understanding.

The validation process also includes consultations with established classifications of hadith quality, such as *sahih* (authentic), *hasan* (good), and *da'if* (weak). Commentaries from classical

scholars, such as Imam al-Bukhari, Imam Muslim, and al-Tirmidhi, strengthen the assessment of the authenticity of the hadiths.

Integration of Religious and Scientific Perspectives

One of the key objectives of this study is to bridge religious guidance with modern scientific insights. After analyzing the hadiths, their relevance to current health practices is discussed, focusing on preventive measures against degenerative diseases. For instance, the prophetic recommendation to eat in moderation and avoid overindulgence is aligned with modern dietary principles, such as caloric balance and portion control.

Moreover, the study explores how the values embedded in the hadiths can contribute to fostering a holistic approach to health that integrates physical, mental, and spiritual well-being. This interdisciplinary framework ensures that the findings are grounded in Islamic teachings and applicable to contemporary public health strategies.

Justification for the Methodology

The qualitative and descriptive-analytical approach is particularly suited for this study as it allows for an in-depth exploration of the hadiths' textual and contextual dimensions. By combining library research with rigorous content analysis, the methodology provides a robust framework for understanding the interplay between religious teachings and modern health practices. This approach also facilitates articulating theoretical contributions rooted in Islamic values relevant to preventing degenerative diseases.

3. RESULTS AND DISCUSSION

Theoretical Framework

a. Definition of Degenerative Diseases

Degenerative refers to a condition characterized by the gradual decline in the function of nerve cells without a known definitive cause. This condition impacts neurons that initially function well but progressively deteriorate until they cease functioning entirely. The degenerative process involves damage to neurons, myelin, and body tissues, with significant acceleration due to degenerative byproducts and massive cellular destruction responses. Symptoms of this condition include weakening neural resilience, ultimately leading to faster cell death. ⁸

Degenerative diseases are often associated with ageing, but unhealthy lifestyles also play a significant role in accelerating their onset. Degenerative diseases typically manifest in old age but are common among younger individuals. These diseases result in a decline in the quality of tissues or organs, thereby affecting a person's overall health. In many cases, degenerative diseases are often equated with non-communicable diseases, although there are differences. Many non-communicable diseases, such as heart disease and diabetes, emerge as consequences of degenerative processes within the body.

⁸ Suiraoke IP, *Penyakit Degeneratif: Mengenal, Mencegah Dan Mengurangi Faktor Risiko 9 Penyakit Degeneratif*, 1st edn (Yogyakarta: Nuha Medika, 2012), h. 7.

In his book Epidemiology of Non-Communicable Diseases, Irwan explains that most non-communicable diseases fall within the category of degenerative diseases, with their prevalence being exceptionally high among the elderly. This highlights that lifestyle habits—whether healthy or unhealthy—significantly impact an individual's future health. Thus, degenerative diseases are not merely an issue of ageing or old age;⁹ They are closely linked to lifestyle practices established from a young age.¹⁰ For this reason, maintaining good health is essential to prevent the premature decline in organ function.

b. Risk Factors for Degenerative Diseases

Degenerative diseases can be minimized by managing the risk factors that accelerate tissue and organ damage. Chronic illnesses such as hypertension, coronary heart disease, diabetes, and cancer are increasingly prevalent in society, with most cases stemming from unhealthy lifestyle choices. Unhealthy habits, lack of physical activity, smoking, and heightened stress levels significantly contribute to worsening health conditions and triggering degenerative diseases. Understanding these risk factors allows for formulating preventive measures to maintain long-term health.

One of the primary factors is an unhealthy diet. Socioeconomic changes and modern food preferences often lead people to choose fast food or meals high in fat, sugar, and salt. These habits result in nutritional imbalances, with high saturated fat intake but low fibre and micronutrient consumption. Such dietary patterns negatively impact health, increasing the risk of obesity and accelerating the production of free radicals in the body. The effects are not only limited to an elevated risk of chronic diseases but also include a shift in disease patterns from infectious to non-infectious, chronic, and degenerative conditions.

Lack of physical activity also contributes to the rise in degenerative diseases. Physical activity is crucial for maintaining physical and mental health, improving fitness, and strengthening the body's immunity against diseases. However, technological advancements have made daily activities more convenient, such as using transportation that reduces the need for walking or active movement. This convenience has led many to become less physically active, declining overall health quality. Adequate physical activity can help prevent degenerative conditions by maintaining optimal bodily function.

Another significant factor is smoking and increased stressors in daily life. Cigarettes contain various harmful chemicals, including nicotine and tar, which severely damage the body. Additionally, high stress levels in work environments or personal life can encourage unhealthy

⁹ The elderly are those who have exceeded the age of 60 and have experienced changes in the body anatomically, physiologically, and biochemically that impact the overall function and strength of the body. The WHO divides the elderly group into four stages, namely: 1) Age 45-59 years is called middle age (middle age); 2) Age 60-74 years is called elderly; 3) At the age of 75-90 years, it is called old age; 4) At the age of more than 90 years is called ancient age. According to Hurlock, the elderly are divided into two stages, namely, 1) A person's age between 60-70 years is called early old age, and 2) When someone is more than 70 years old, it is called advanced old age. Meanwhile, the Indonesian Ministry of Health categorizes the elderly into five parts, namely: 1) Pralansia (prasenilis) to people who are aged between 45-59 years; 2) Elderly (aged 60 years or more); 3) Highrisk elderly (aged ≥ 70 or ≥ 60 years with health problems); 4) Potential elderly, namely elderly who can still do goods/services work, and; 5) Non-potential elderly are elderly who have no power to earn a living and only depend on the helping hands of others. See, Erni Setiyorini and Ning Arti Wulandari, *Asuhan Keperawatan Lanjut Usia Dengan Penyakit Degeneratif*, 1st edn (Malang: Media Nusa Creative, 2018), h. 1-2.

¹⁰ Anies, *Penyakit Degeneratif*, Cet.1 (Yogyakarta: Ar-Ruzz Media, 2018), h. 13.

behaviours, such as smoking, excessive alcohol consumption, and drug use. These habits further escalate the risk of developing degenerative diseases. Stress also accelerates cellular ageing and weakens the immune system, making the body more susceptible to degenerative conditions. Managing stress and adopting a healthy lifestyle are essential steps to maintaining future health.¹¹

Therefore, a healthy lifestyle is crucial in preventing and reducing the risk of degenerative diseases. Through a balanced diet, consistent physical activity, avoiding smoking, and managing stress, individuals can improve their quality of life and avoid degenerative diseases, whether in youth or old age.

c. Types of Degenerative Diseases

Changes in the structure and function of human organs associated with ageing significantly contribute to the risk of degenerative diseases. Lifestyle, dietary habits, and physiological factors also play a role in influencing these risks. Common degenerative diseases observed in older adults include:

1. Hypertension

Hypertension, often referred to as the "silent killer," is a degenerative disease frequently experienced without the awareness of the sufferer. According to the 2018 Basic Health Research (Riskesdas), the prevalence of hypertension in Indonesia reached 34.1%, up from 25.8% in 2013. However, only about one-third of cases are detected.¹²

Hypertension is classified into two types: primary and secondary. Primary hypertension often occurs without a clear cause, but factors such as genetics, high-fat and high-salt diets, smoking, and stress are thought to contribute. Secondary hypertension, on the other hand, is caused by other medical conditions, such as kidney or endocrine disorders. Symptoms of hypertension include headaches, fatigue, blurred vision, chest pain, and irregular heartbeats, which can be identified through regular blood pressure monitoring.¹³ Preventive measures include adopting a healthy lifestyle, such as a balanced diet, reducing salt intake, and exercising regularly.

2. Stroke

Stroke, also known as cerebrovascular accident (CVA), occurs due to a disruption of blood flow to the brain. This condition causes sudden brain dysfunction, potentially leading to paralysis, speech disorders, and memory problems. Strokes are categorized into two types: ischemic, caused by blood vessel blockages, and hemorrhagic, caused by ruptured blood vessels in the brain. Additionally, transient ischemic attacks (TIA), or mini-strokes, may occur due to temporary blood flow disruptions to the brain. While most strokes occur in older adults, they are

¹¹ Suiraoke. IP, Penyakit Degeneratif: Mengenal, Mencegah Dan Mengurangi Faktor Risiko 9 Penyakit Degeneratif, 1st edn (Yogyakarta: Nuha Medika, 2012), h. 12-21.

Kemenkes RI, 'Hipertensi Penyebab Utama Penyakit Jantung, Gagal Ginjal, Dan Stroke', 2021 [accessed 8 November 2024].

¹³ Setiyorini and Wulandari.

not uncommon in younger individuals.¹⁴ Preventive efforts include regular exercise, a healthy diet, avoiding smoking, and maintaining a positive mindset to reduce stress.

3. Coronary Heart Disease

Coronary heart disease is caused by damage to the walls of blood vessels due to factors such as free radicals from pollution, smoking, high cholesterol, hypertension, and diabetes. Cholesterol buildup in the arteries can obstruct blood flow, forcing the heart to work harder to pump blood. Over time, this leads to the hardening and narrowing of coronary arteries, known as atherosclerosis. Prevention includes a balanced diet, regular exercise, adequate rest, and maintaining a healthy weight to reduce the risk of this disease.¹⁵

4. Diabetes Mellitus

Diabetes mellitus is a chronic disease resulting from the pancreas's inability to produce sufficient insulin or the body's inability to use insulin effectively, causing abnormal blood sugar levels. Type 2 diabetes, in particular, occurs when the body becomes less responsive to insulin. In 2015, the number of type 2 diabetes patients in Indonesia was estimated at around 10 million. Risk factors include genetics, age, unhealthy lifestyles, and stress. While diabetes cannot be cured, complications can be prevented by adopting a healthy lifestyle, such as a controlled diet, regular exercise, and avoiding alcohol and smoking.¹⁶

5. Gout (Uric Acid)

Gout is a condition that causes joint pain, particularly in the fingers, knees, ankles, and toes, due to the accumulation of uric acid crystals. This occurs when uric acid levels in the body increase, resulting from the breakdown of purine substances. When uric acid production exceeds the body's ability to excrete it, sharp crystals form in the joints, causing inflammation. Risk factors include consuming purine-rich foods like organic meats, seafood, red meat, and sugary and alcoholic beverages.¹⁷

6. Cancer

Cancer is a disease characterized by the uncontrolled growth of abnormal cells, which can spread to other parts of the body. It can affect various organs but is more common in individuals over 40. Different types of cancer, such as leukaemia, liver, skin, and stomach cancer, share similar preventive measures. Prevention includes reviewing genetic history, avoiding foods with preservatives, refraining from smoking, exercising regularly, and maintaining a diet high in fibre and vitamins.¹⁸

These degenerative diseases represent only a fraction of the many conditions, some of which are interconnected or lead to complications. For instance, diabetes can increase the risk of coronary heart disease. While each disease has unique characteristics and specific risks, preventive measures are generally similar, focusing on dietary management, stress reduction, and consistent physical activity.

¹⁶ Anies; Setiyorini and Wulandari.

¹⁴ Setiyorini and Wulandari; Anies.

¹⁵ Anies.

¹⁷ Anies.

¹⁸ I Putu Yuda Hananta and Harry Freitag, *Deteksi Dini Dan Pencegahan Kanker*, 1st edn (Jakarta: MedPress, 2011), h. 3.

This study aims to examine hadiths related to preventing degenerative diseases through explicit commands and implicit guidance, including preventing conditions that have yet to be fully explained medically.

d. Hadith on Regulating Eating Habits

1. Text and Quality of the Hadith

Based on the researcher's search in several hadith collections, utilizing various hadith dictionaries such as *Al-Mu'jam al-Mufahras li Alfāz al-Ḥadīs al-Nabawī*, *Mausū'ah al-Aṭrāf*, and the *Maktabah Syamilah* application, the researcher identified a specific hadith that discusses eating habits according to the recommendations of the Prophet (peace be upon him). The text of the hadith is as follows:

حَدَّثَنَا هِشَامُ بْنُ عَبْدِ الْمَلِكِ الْحِمْصِيُّ قَالَ: حَدَّثَنَا مُحَمَّدُ بْنُ حَرْبٍ قَالَ: حَدَّثَنْنِي أُمِّي، عَنْ أُمِّهَا، أَنَّهَا سَمِعَتِ الْمَقْدَامَ بْنَ مَعْدِ يكَرِبَ، يَقُولُ: سَمِعْتُ رَسُول اللهِ صَلَّى اللهُ عَلَيْهِ وَسَلَّمَ يَقُولُ: «مَا مَلَأَ آدَمِيٌّ وعَاءً شَرَّا مِنْ الْمَقْدَامَ بْنَ مَعْدِ يكَرِبَ، يَقُولُ: سَمِعْتُ رَسُول اللهِ صَلَّى اللهُ عَلَيْهِ وَسَلَّمَ يَقُولُ: «مَا مَلَأَ آدَمِيٌّ وعَاءً شَرَّا مِنْ الْمَقْدَامُ وَثُلْثُ الْمَادِمِيِّ وَقُلْتُ اللَّمَّرَابِ، وَثُلْتُ لِللَّعَامِ، وَثُلْتُ لِللَّعَامِ، وَثُلْتُ لِللَّعَامِ، وَثُلْتُ اللَّهَ اللهَ اللهَ اللهُ عَلَيْهِ اللهُ اللهُولِ اللهُ الللهُ اللهُ اللهُ اللهُ اللهُ اللهُ اللهُ اللهُ اللهُ ال

Translation:

It was narrated to us by Hisyam bin Abdul Malik Al Himshi, who said: Muhammad bin Harb narrated to us, who said: My mother told me from her mother, who said that she heard Al Miqdām bin Ma'dīkarib saying: "I heard the Messenger of Allah (peace be upon him) say: 'The son of Adam does not fill a worse vessel than his stomach. The measure for the son of Adam is a few bites to keep his back straight. If his soul overcomes him, then a third for food, a third for drink, and a third for air.'"

This hadith is also reported by several renowned scholars in their collections, including Musnad Aḥmad bin Ḥanbāl, Sunan Ibn Mājah, Sunan al-Tirmiżī, Sunan al-Kubra, Ṣaḥīḥ Ibn Ḥibbān, al-Mu'jam al-Kabīr, and al-Mustadrak al-Ṣahīḥain, each reporting the hadith from different chains, except for Sunan al-Kubra, which reports two chains. This hadith is only narrated by one companion, Miqdām bin Ma'dīkarib, which indicates that this hadith does not have a shahid (supporting narration). However, it has mutābi' (concordant narrations) from four Tabi'in, including Yahya bin Jabir, the grandfather of Muhammad bin Harb, Yahya bin al-Miqdam, and Ṣāliḥ bin Yaḥyā.

Several scholars have commented on its authenticity. Al-Tirmidhi classified this hadith as \hbar as \hbar as \hbar (sound and authentic)²⁰. Ibn μ ibbān included it in his \hbar and al- μ in stated that the hadith's chain is \hbar and \hbar even though Bukhari or Muslim does not report it. Based on the evaluations of these hadith scholars, it can be understood that this hadith regarding eating habits is classified as \hbar (authentic).

¹⁹ Ibnu Mājah Abū 'Abdillah Muḥammad bin Yazīd Al-Qazwaīnī, Sunan Ibnu Mājah, ed. by Baīt al-Afkār Al-Daūliyyah (Riyāḍ), Juz 2, h. 1111.

²⁰ Al-Tirmīzī, *Al-Jāmi* '*Al-Kabīr-Sunan Al-Tirmizī*, Juz 2, (Beirūt: Dār al-Garb al-Islāmi, 1998), h. 296.

²¹ Ibn Ḥibbān, Ṣaḥīḥ Ibn Ḥibbān Bi Tartībi Ibn Bilbān, Cet 2, Juz 12, (Beīrūt: Mu'assasah al-Risālah, 1993), h. 41.

²² Abu 'Abdillah al-Hakim Muhammad bin 'Abdillah bin Muhammad bin Hamduyah bin Nu'aim bin Al-Hakim, *Al-Mustadrak 'ala Al-Sahihain*, Cet.1, Juz 4, (Beirut: Dar al-Kutub al-'Ilmiyyah, 1990), h. 367.

2. Content of the Hadith

Textually, this hadith can be understood by examining the use of words and the structure of the sentences. Therefore, the researcher will break down the hadith text into several parts for analysis:

"The son of Adam does not fill a worse vessel than his stomach." One of humanity's errors regarding consumption is treating the stomach like other containers filled with various items. In contrast, the stomach was created to support the body's function, namely eating in moderation according to need. The word وعَاءً (vessel) in this sentence symbolizes the stomach, which the (stomach) Prophet (peace be upon him) likens to a container for food. Meanwhile, the word بَطْنِ: consists of the letters $b\bar{a}'$, $t\bar{a}'$, and $n\bar{u}n$, which carry meanings related to the forgetting of something and the subsequent matter. بَطْنِ also signifies the opposite of *punggung* (back).²³ The phrase "the forgetting of something" indicates that humans often neglect the proper eating etiquette, such as avoiding excess, which may lead to negative consequences in the future.

"A few bites are enough for the son of Adam to keep his back straight." The fundamental principle of eating is maintaining the body's strength for optimal functioning. The Prophet (peace be upon him) taught that one should eat only enough to restore energy to continue activities. This advice is also found in the narration of *Ibn Majah*, which uses the term لُقَيْمَاتُ (a few bites), the plural form of *lugāmatun*. Meanwhile, the word أَكُلاَتُ is the plural form of *akl*, which in the Magayīs al-Lugah dictionary is defined as 'to reduce.'. Therefore, this term does not only refer to food but could have a broader meaning, as exemplified in QS. al-Bagarah/2:188:

Translation:

"Do not consume each other's wealth unjustly..." 25

This verse implies a broad meaning, encompassing all forms of reduction, not only in eating but also in financial matters. The portion of the hadith emphasizes that for humans, particularly the son of Adam, eating moderately is sufficient to sustain life and continue acts of worship. By following this principle, a person will feel lighter, more energetic, and agile and be protected from various diseases.

This statement offers a guideline that can be followed when eating beyond the recommended limits while still adhering to the set proportions. The portions are divided into three parts: one-third for food, one-third for drink, and one-third for breathing.

 $^{^{23}}$ Ahmad bin Faris bin Zakariyya, $Mu'jam\ Maqayis\ Al-Lugah,\ Juz\ 1,$ (Beirut: Dar al-Fikr), h. 259. 24 Zakariyya, Juz\ 1, h. 122.

²⁵ Kementerian Agama RI, *Al-Qur'an Dan Terjemahanya* (Jakarta: Lajnah Pentashihan Mushaf Al-Qur'an, 2019), h. 38.

Imam al-Ṭibbi explains that the stomach's right is not to consume more than the amount needed to sustain the body in fulfilling its duties to Allah SWT. However, if one wishes to eat more than that, one must still maintain the balance of these three parts to avoid excess.²⁶

From the explanation of this section of the hadith, it can be concluded that the Prophet (peace be upon him) guided humanity to eat in moderation, enough to restore physical strength consistently. If this minimal portion is deemed insufficient, it is better to divide the meal into three parts: one-third for food, one-third for drink, and one-third for air. The goal is for a person not to feel suffocated after eating because the space for breathing has been taken up by food and drink.

As a religion that governs all aspects of human life, Islam provides guidance on wise consumption habits. It not only addresses the nutritional content of the food consumed but also emphasizes the importance of the food's halal origin, as mentioned in QS. al-Baqarah/2:168:

Translation:

"O humanity, eat from whatever is on the earth, that which is lawful and good, and do not follow the footsteps of Satan. Indeed, he is to you a clear enemy." 27

The word $kul\bar{u}$ in this verse is an imperative verb (fi'il amr) derived from al-akl, meaning to consume food. The researcher chose this word, considering the subsequent explanation provided. This word is a metaphor, similar to the Arabic expression " $akalat\ al$ - $n\bar{a}r\ al$ -khatib" (the fire consumed the wood). ²⁸

According to Quraish Shihab, this verse invites the believers and all of humanity without exception. It implies that Allah has prepared the earth for all people, both believers and non-believers. Every person strives to acquire resources, sometimes excessively, whether on a small or large scale—within families, tribes, or nations. Actions that harm others contradict Allah's commands.²⁹

Meanwhile, the word *halal* in this verse is understood by some scholars to originate from the root word *al-ḥallu*, meaning *al-ibāḥah* (something permitted according to Sharia).³⁰ Al-Razi mentions that this term is the opposite of *al-'aqd*, which means a binding contract.³¹ For example, *Aqd al-nikāh* refers to the marriage contract, which begins with the *ijab qabul* (the formal agreement). After this process, both parties are legally bound in the relationship of husband and wife.

²⁶ Abū al-'Ala Muḥammad 'Abdil Raḥman bin 'Abdul Raḥīm Al-Mubarakfūri, *Tuḥfah Al-Aḥważī Bi Syarḥ Jāmi' Al-Tirmiżī*, Juz 7, (Beirūt: Dār al-Kutub al-'Ilmiyyah), h. 43.

²⁷ Lajnah Pentashihan Mushaf al-Qur'an Kemenag RI, *al-Qur'an dan Terjemahnya*, h. 34.

²⁸ Al-Ragīb Al-Aṣfahānī, *Al-Mufradāt Fī Garīb Al-Qur'ān*, Juz 1, (Beirūt: Dar al-Qalam, 1412), h. 80.

²⁹ M. Quraish Shihab, *Tafsir Al-Misbah*, Cet.5, Jilid 1, (Jakarta: Lentera Hati, 2005), h. 380.

³⁰ Muḥammad Rawās Qal'ajī and Ḥamid Sādiq Qanyabī, *Mu'jam Lugah Al-Fuqahā*, 2nd edn (Beirūt: Dar al-Nafais, 1988), h. 184.

³¹ Fakhr al-Dīn Al-Rāzī, *Mafātiḥ Al-Gaīb*, Juz 5, (Beirūt: Dār Iḥyā' al-Turas al-'Arabī, 1999), h. 185.

In the context of food, the term *halal* refers to all types of food permitted in Islamic law. food can become *haram* either due to its substance (such as pork, carrion, or blood) or its source (for example, obtained through theft or fraud).

Quraish Shihab explains the term tayyib as referring to physically clean food, free from spoilage or contamination, and does not pose any harmful effects physically or mentally. *Tayyib* also means food-safe, balanced food that must be *halal*, as in the verse where *halal* is paired with *tayyib*.

Healthy food contains balanced nutrients suitable for the individual's needs, whether for children or adults. Safe food provides comfort and supports health, with the recommendation to avoid *syubhat* food, which refers to food whose halal status is doubtful.³² The Prophet Muhammad (peace be upon him) addressed this issue in a hadith narrated by Nu'man bin Bashir in *Sahīh al-Bukhārī*.

حَدَّثَنَا أَبُو نُعَيْمٍ، حَدَّثَنَا زَكَرِيَّاءُ، عَنْ عَامِرٍ، قَالَ: سَمِعْتُ النُّعْمَانَ بْنَ بَشِيرٍ، يَقُولُ: سَمِعْتُ رَسُولَ اللَّهِ صَلَّى اللهُ عَلَيْهِ وَسَلَّمَ يَقُولُ: " الْحَلَالُ بَيِّنٌ، وَالْحَرَامُ بَيِّنٌ، وَبَيْنَهُمَا مُشَبَّهَاتٌ لاَّ يَعْلَمُهَا كَثِيرٌ مِنَ النَّاسِ، فَمَنِ اتَّقَى المُشْبَهَاتِ المُشْبَهَاتِ السَّبُهَاتِ الْمُشْبَهَاتِ المَثْبُهَاتِ الْمَشْبُهَاتِ الْمُشْبَهَاتِ الْمُشْبَهَاتِ الْمَثْبُهَاتِ الْمُشْبَهَاتِ الْمُسْبَهَاتِ الْمُسْبَهَاتِ الْمُسْبَهَاتِ الْمُسْبَهَاتِ الْمُشْبَهَاتِ الْمُسْبَهَاتِ اللهُ الْمُسْبَهَاتِ اللهُ الْمُسْبَهُاتِ الْمُسْبَهُاتِ الْمُسْبَهُاتِ الْمُسْبَهُاتِ الْمُسْبَعُهُا اللهُ اللهُ اللهُ اللهُ اللهُ اللهُ وَإِنَّ فِي الْجَسَدِ مُضْعَةً: إِذَا صَلَحَتْ صَلَحَ الْجَسَدُ كُلُهُ، وَإِنَّ فِي الْجَسَدِ مُضْعَةً: إِذَا صَلَحَتْ صَلَحَ الْجَسَدُ كُلُّهُ، وَإِذَا فَسَدَتْ فَسَدَ الْجَسَدُ كُلُهُ، أَلاً وَهِيَ الْقَلْبُ

Translation:

The following hadith is narrated by Abu Nu'aim, who reported from Zakaria, from 'Amir, who said: I heard An-Nu'man bin Bashir saying: "I heard the Messenger of Allah (peace be upon him) say: 'The halal is clear, and the haram is clear. Moreover, between the two are ambiguous matters many people do not know. Whoever avoids these doubtful matters has preserved his religion and his honour. Nevertheless, whoever falls into these doubtful matters is like a shepherd who grazes his flocks near a prohibited pasture. He will likely fall into it. Know that every king has a special area, and the boundaries set by Allah on His earth are His prohibitions. Furthermore, know that there is a piece of flesh in the body, which, if it becomes good, the whole body becomes good, and if it becomes corrupt, the whole body becomes corrupt. That piece of flesh is the heart.""

This hadith is significant in explaining the concept of *halal* (lawful) and *haram* (unlawful) in Islamic teachings while also addressing the concept of *syubhat* (doubtful matters), which are not known as halal or haram.

Ibn Battal's understanding of the statement, "Whoever avoids the doubtful matters has preserved his religion and his honour", emphasizes the importance of caution in determining the halal and haram status of actions and things. In Islamic jurisprudence, it is recommended that collective decisions regarding the status of actions be made to ensure the correctness of the ruling. Scholars' views on *syubhat* vary, but generally, they interpret *syubhat* as something that leads toward *haram*. This interpretation is supported by the Prophet's (peace be upon him) statement that those who fall into doubtful matters are like a shepherd grazing near the edge of a prohibited pasture, with the risk of falling into it.³³

³² Shihab, Jilid 3, h. 26.

³³ Ibn Baṭṭāl Abū al-Ḥasan 'Alī bin Khallaf bin 'Abdil Malik, *Syarḥ Ṣaḥīḥ Al-Bukhārī Li Ibn Baṭṭāl*, Cet.2, Juz 6, (Riyāḍ: Maktabah al-Rusyd, 2003), h. 192.

From this explanation, it is clear that Islamic teachings on food do not merely emphasize nutritional aspects but also focus on the origins of the food. Surah al-Baqarah, verse 168, commands all humanity to consume *halal* and *ṭayyib* (pure and sound) food. The opposite of *halal* is *haram*, which is prohibited by religion. Scholars categorize *haram* into two types: due to its substance, such as those mentioned in the Qur'an (e.g., pork, carrion, blood), and *haram*, due to its origin, such as food obtained through theft or fraud. Food derived from *haram* sources is believed to affect the consumer's physical and spiritual health.

The impact of incorrect eating patterns, from the perspective of modern health science, can significantly affect an individual's physical health. The explanation follows as outlined:³⁴

a. Disorders of the Esophagus

Excessive eating and drinking beyond the stomach's capacity can cause the stomach contents to be pushed upward, triggering reflux and regurgitation. Reflux occurs when stomach contents reach the oesophagus, while regurgitation occurs when stomach contents reach the mouth. This condition is characterized by the sensation of stomach acid and pepsin enzymes flowing back into the oesophagus.

This disorder is typically caused by stomach acid's continuous irritation of the oesophagal mucosa. Stomach acid is corrosive, capable of eroding the tissue surface and causing damage when exposure occurs over extended periods. In severe cases of regurgitation, stomach contents may enter the lungs via the pharynx, potentially leading to aspiration pneumonia, which is lung inflammation caused by inhaled stomach contents.

b. Gastric Diseases

1. Peptic Ulcer

A peptic ulcer is a medical condition involving sores on the lining of the stomach and duodenum (the first part of the small intestine) caused by irritation from stomach acid. This condition arises due to an imbalance between aggressive factors (such as stomach acid and pepsin) and the protective defence of the stomach lining.

Early symptoms of peptic ulcer include pain in the upper abdomen, which tends to subside after taking antacid medication. However, these symptoms can remain temporarily and later recur with greater intensity. Patients often experience vomiting, particularly at night.

Duodenal ulcers cause more pronounced pain at night and in the early morning. In contrast, gastric ulcers typically cause mild pain in the upper abdomen that intensifies after eating. Gastric ulcers are often associated with low-fiber, high-fat foods. Because eating induces pain, sufferers of peptic ulcers often avoid eating, which can worsen their health condition.

2. Gastritis

Gastritis is an inflammation of the stomach lining that affects the mucosal layer and is greatly influenced by stomach acid. This disease results from an imbalance between aggressive stomach acid and the protective properties of the stomach lining. Helicobacter pylori bacteria

³⁴ Sohrah, 'Etika Makan Dan Minum Dalam Pandangan Syariah', *Hukum Pidana Dan Ketatanegaraan*, 5.1 (2016), 21–41 http://journal.uin-alauddin.ac.id/index.php/al daulah>.

are a significant cause of gastritis. This bacterium can be transmitted through contaminated food, faeces, or direct contact like saliva exchange during kissing.

Gastritis symptoms are generally similar to gastric ulcers, including heartburn, bloating, nausea and vomiting, loss of appetite, chest burning sensations that may radiate to the back, and occasional shortness of breath and headache. These symptoms can interfere with comfort and lower the quality of life if not properly managed.

c. Obesity

Azaz Black states that the calories consumed must balance with the calories expended to maintain good health. This principle emphasizes that bodily health is achieved through energy balance. Energy imbalance, such as excessive calorie intake without sufficient energy expenditure, leads to obesity. Obesity occurs when the body's fat volume increases due to a greater energy intake than energy expenditure. Unhealthy eating patterns and lack of physical activity are the main factors contributing to obesity. A person who overeats and does not exercise is at a high risk of developing this condition.

The impact of obesity extends beyond fat accumulation and can lead to joint inflammation. This is due to the increasing load on the skeletal system, as the bones bear more weight, causing continuous pressure. Over time, this pressure results in mechanical friction, leading to joint inflammation. Furthermore, obesity has genetic factors. If both parents are obese, the likelihood of their child being obese is 80%. If only one parent is obese, the chance of the child becoming obese is about 14%.³⁵

Imam al-Ghazali, in his work *Ihya' Ulumuddin*, stated that poor eating habits can adversely affect a person's soul, and he identified six diseases that arise from excessive eating. First, frequent feelings of fullness can erode piety to Allah, as a person may forget that the food consumed is a blessing from Allah, not merely the result of one's efforts. Second, fullness can cause laziness in worship and activity, prompting a person to prefer lying down or sleeping. **Third**, excessive fullness leads to a loss of empathy for others, as one assumes others are also full. Fourth, the heart and ears become closed to advice, wisdom, and guidance. Fifth, when someone in this state offers advice, their words tend to be ineffective and quickly forgotten. Sixth, excessive fullness can invite various physical illnesses and facilitate the influence of Satan.36

This explanation emphasizes that eating habits have a significant impact on both the body and soul. In the hadith, recommended eating habits are about the quantity and quality of food consumed. Islam teaches that every person should proportionally consume halal (permissible) food in terms of its substance and source. This hadith regulates two aspects of food: the object, which refers to the food consumed, and the subject, which refers to the individual's eating habits.

In the modern context, some individuals suffer from gastric diseases, requiring them to eat more frequently to prevent relapses, though in smaller portions. Eating five times a day with

³⁶ Imam Al-Gazali, *Ihya' Ulumuddin*, ed. by Moh. Zuhri Dkk (Semarang: CV. Asy-Syifa', 1992).

³⁵ Kartika Suryaputra and Siti Rahayu Hadhirah, 'Perbedaan Pola Makan Dan Aktifitas Fisik Antara Remaja Obesitas Dan Non Obesitas', Makara Kesehatan, 16.1 (2012), 45-50 http://repository.unair.ac.id/id/eprint/125304>.

limited volume aligns with the essence of this hadith, which aims to prevent illness through proper dietary management.

This study teaches Muslims to think about immediate satisfaction and the long-term effects of their eating habits. Scholars emphasize the importance of self-discipline in meeting physical needs, which, in health science, refers to regulating calorie and nutrient intake to prevent degenerative diseases. Disease prevention techniques, such as obesity and diabetes, include balanced diets (including regulating food, drink, and air in thirds), regular physical activity, and avoiding excessive stress that can trigger overeating.

Following the teachings of Prophet Muhammad (peace be upon him) on moderation in eating has been scientifically proven to help prevent degenerative diseases. By managing eating habits wisely, one can balance nutrients and energy, keeping the body healthy and free from chronic diseases.

4. CONCLUSION

Healthy eating plays a crucial role in preventing degenerative diseases such as diabetes, hypertension, and heart disease. The hadith of Prophet Muhammad (peace be upon him) guides eating in moderation and avoiding overeating, which aligns with modern health principles. This hadith emphasizes the importance of balance in food, drink, and breathing space, which helps maintain bodily health and prevent disease. Thus, this guidance supports physical and spiritual well-being, showing Islam offers a comprehensive framework for maintaining health through balanced eating habits.

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