

CONFERENCE PAPER

Treatment of Mental Health Disorders in the Safavid and Ottoman Empires: A Comparative Socio-historical Analysis


Abstract

This comparative-historical analysis explores how mental disorders were treated in the Safavid and Ottoman empires. Both empires shared a common foundation based on humoral medicine and a holistic understanding of the mind-body connection. Treatments encompassed physical methods, such as diets, herbal remedies, and cupping, as well as spiritual therapies, including Quranic recitation, prayer, and pilgrimage. However, there were notable differences in the role of the state and the institutionalization of mental health care. The Ottoman state, particularly in the 16th century, developed a more institutionalized and centralized system by establishing charitable institutions known as *Darüşşifa* (house of healing). This trend culminated in the 19th century with the modernization of Ottoman medicine. In contrast, the Safavid Empire did not have a comparable institutionalized and centralized network, and the responsibility for treatment largely rested on the community, family, and local healers. This decentralized, community-based approach remained in place throughout the Safavid era and did not evolve into a centralized, state-run psychiatric system.

Key words: History of Medicine, Mental Health, Ottoman, Safavid


Received: 10 Jul 2025; Accepted: 4 Sep 2025; Online published: 7 Oct 2025

Research on History of Medicine/ 2025 Oct; 14(Suppl. 1): S3-S6.

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Citation:

Ahansazan, H., Esmacalzadeh, N., Ayati, M.H., Zargaran, A., 2025. Treatment of Mental Health Disorders in the Safavid and Ottoman Empires: A Comparative Socio-historical Analysis. *Res Hist Med*, 14(Suppl. 1), pp. S3-S6. doi: 10.30476/rhm.2025.51244.

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Introduction

The early modern Islamic world, particularly represented by the Ottoman and Safavid Empires, developed sophisticated approaches to mental health that were deeply rooted in their social, religious, and medical contexts. Both empires shared a common heritage of Greco-Persian humoral theory and religious cosmology; however, the practical application of this knowledge and the institutional treatment of the mentally ill—often referred to as *majnun*, *deli*, or *meczub*—varied significantly. These differences reflected each empire's unique political structures and its distinct paths to modernization (Shefer-Mossensohn, 2023).

Materials and Methods

This study is focused on the treatment of mental health disorders in the Safavid and Ottoman Empire as a comparative socio-historical analysis. A qualitative approach employing a library-based research method was adopted in this study. Data was gathered from Persian, English and Turkish sources, including medical treatises and scholarly investigations. Sources were retrieved using a combination of some related keywords, such as “*Persian medicine*”, “*Mental Health*”, “*Ottoman history*”, and “*Psychological Disorders*” in databases such as PubMed, Science Direct, Elsevier. The extracted data were then used in the analysis of the subject.

Findings

A Shared Medical and Conceptual Foundation

Both empires operated within a holistic medical framework that viewed the mind and body as an integrated whole. The dominant Galenic humoral system posited that mental disorders, like physical ailments, resulted from an imbalance of the four humors: blood, phlegm, yellow bile, and black bile. Consequently, treatments were primarily physical, focusing on restoring balance through dietary regimens, herbal remedies, bloodletting, and purging. This scientific approach coexisted with religious and spiritual interpretations. Mental distress could also be attributed to supernatural factors, such as possession by jinn or the evil eye. As a result, treatment options were diverse. Patients and their families could seek assistance from trained physicians (*hakim*), religious scholars, dervishes, local healers, and even magicians. Spiritual treatments, such as *Qur'anic* recitation, prayers, amulets, and visits to shrines, were regarded as valid and effective complementary therapies (Beygi *et al.*, 2024). This diversity meant that institutional confinement was never the sole or primary response to madness.

Divergence in Institutionalization and State Control

A critical point of divergence lies in the role of the state and the development of dedicated institutions in healthcare. The Ottoman state, particularly at its peak in the 16th century, was a major patron of large-scale public health facilities. Imperial complexes often included a *dartişşifa* (house of healing), which functioned as a general hospital treating both physical and mental ailments. Notable examples like the Süleymaniye *Dartişşifa* in Istanbul and the Edirne *Dartişşifa* were waqf-funded charitable institutions that provided music therapy, flowing water, gardens, and clean air as part of their therapeutic environments. Confinement in these pre-modern institutions was typically temporary and action-



based, triggered by an individual being deemed dangerous. Control was not solely in the hands of the state; families and neighborhood communities played significant roles (Çınaroğlu, 2024, pp. 80–103).

In contrast, the Safavid Empire did not develop a comparable network of large, state-sponsored hospitals. As suggested by Shefer-Mossensohn's work, institutionalized medical care was less formalized. Care for those experiencing mental distress was primarily handled by families and communities, with a diverse array of local healers and religious figures providing treatment. Smaller, often religiously affiliated establishments, such as dervish lodges, acted as de facto asylums. For instance, the lodge of Karacaahmet was known for treating the mentally ill through methods like confinement, special diets, and spiritual practices. This indicates a more decentralized and socially integrated, albeit less institutionalized, system of care compared to the Ottoman model (Shefer-Mossensohn, 2023).

The Impact of Modernization: A Growing Ottoman State Apparatus

The most striking contrast appears with the onset of modernization in the 19th century. During this time, the Ottoman Empire initiated a comprehensive program for medical westernization and institutional reform, marking a dramatic shift from integrative approaches to exclusion and increased state control over the mentally ill (Boyar, 2018).

A landmark moment in this transformation was the 1876 Regulation on mental asylums, which drew inspiration from European models. This regulation required families to report mentally-ill members to the state and established procedures for confinement that involved police-appointed physicians. It also placed bimarhanes (mental asylums) directly under the supervision of the Ministry of Police. The primary asylum in Istanbul, the Toptaşı Bimarhanesi, became emblematic of this new era. During the reign of Sultan Abdülhamid II, it evolved into a tightly controlled facility where visitors were banned, releases were rare, and the asylum itself gained a reputation as a place from which there was no return, much like a prison for political dissidents. This shift exemplifies Michel Foucault's concept of medicine as a disciplinary mechanism for social control. However, this control was not uniformly effective across the vast empire, with institutions in Edirne and Manisa lagging behind Istanbul's modernization efforts (Ozturk and Volkan, 1971).

In contrast, the Safavid Empire, which collapsed in the mid-18th century, did not undergo a similar process of medical modernization. Its approach to mental health remained grounded in a pre-modern, pluralistic model until its demise. Consequently, there was no equivalent to the Ottoman centralization of medical authority or the establishment of a state-run psychiatric bureaucracy, nor was confinement widely used as a tool of biopolitical control.

Conclusion

In conclusion, a comparative analysis reveals two distinct paths taken by the Ottoman and Safavid empires in their approaches to mental health. Both empires initially shared a holistic understanding of mental health, combining humoral medicine with spiritual care and relying on a decentralized network of practitioners.

The primary difference between the two lies in the extent of state involvement and the impact of modernity. The Ottoman Empire developed a more centralized and insti-



tutionalized approach from an early stage. This system underwent a radical transformation through 19th-century reforms, which turned mental health care into a tool of state control and exclusion. In contrast, the Safavid Empire maintained a community-based and pluralistic system with less state intervention and no significant push for medical modernization.

The Ottoman experience illustrates how mental health treatment became a reflection of the expanding power of a modernizing state, a phenomenon that the Safavid Empire, due to its earlier historical context, did not experience.

Authors' Contribution

Hamed Ahansazan: Conceptualisation, Writing original draft, Investigation, Methodology; Niusha Esmaealzadeh: Conceptualisation, Writing- Review and Editing; Mohammad Hossein Ayati: Supervision; Arman Zargaran: Project administration. All authors read and approved the final version of the work.

Funding

None.

Conflict of Interest

The authors declared no conflicts of interest with respect to the research, authorship, and/or publication of this article.

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