ABSTRACT

Objectives: This study aims to explore the Islamic Sharia's guidelines on marriage, specifically identifying which female relatives a man is forbidden to marry and which are permissible. It also seeks to examine the medical implications of consanguineous marriages, particularly in terms of genetic disease transmission and fetal deformities. The study's ultimate objective is to reconcile religious principles with modern medical advice to ensure both the stability of the family and the health and safety of future generations.

Methods: The study will analyze Islamic Sharia texts and Algerian law to determine the specific categories of female relatives a man is either prohibited or permitted to marry. It will also review medical literature on the risks associated with consanguineous marriages, focusing on genetic disorders and the prevalence of fetal deformities. The research will include consultations with both religious scholars and medical experts to provide a comprehensive understanding of the issue.

Results: The findings are expected to clarify the Islamic Sharia's stance on permissible and forbidden marriages among relatives, highlighting the wisdom behind these rulings in the context of family stability and protection from diseases. Additionally, the study will identify the medical risks associated with consanguineous marriages, reinforcing modern medicine's strong advice against such practices due to the potential for genetic diseases and fetal deformities.

Conclusion: The study concludes that while Islamic Sharia provides clear guidelines on permissible and forbidden marriages, modern medicine emphasizes the risks associated with consanguineous marriages. To ensure the health and safety of future generations, it is crucial to consider both religious principles and medical advice. This balanced approach can help prevent genetic disorders and protect the integrity of the family, aligning religious practices with contemporary health considerations.

Keywords: marriage, fetal deformities, genetic diseases, medical examination, abortion.

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CASAMENTO CONSANGUÍNEO ENTRE SHARIA, LEI E MEDICINA

RESUMO

Objetivos: Este estudo visa explorar as diretrizes da Sharia Islâmica sobre casamento, identificando especificamente com quais parentes femininas um homem está proibido de se casar e quais são permitidas. Ele também busca examinar as implicações médicas dos casamentos consanguíneos, particularmente em termos de transmissão de doenças genéticas e deformidades fetais. O objetivo final do estudo é reconciliar princípios religiosos com aconselhamento médico moderno para garantir tanto a estabilidade da família quanto a saúde e segurança das gerações futuras.

Métodos: O estudo analisará textos da Sharia Islâmica e a lei argelina para determinar as categorias específicas de parentes femininas com as quais um homem está proibido ou autorizado a se casar. Ele também revisará a literatura médica sobre os riscos associados aos casamentos consanguíneos, com foco em distúrbios genéticos e na prevalência de deformidades fetais. A pesquisa incluirá consultas com estudiosos religiosos e especialistas médicos para fornecer uma compreensão abrangente do problema.

Resultados: Espera-se que as descobertas esclareçam a posição da Sharia Islâmica sobre casamentos permitidos e proibidos entre parentes, destacando a sabedoria por trás dessas decisões no contexto da estabilidade familiar e proteção contra doenças. Além disso, o estudo identificará os riscos médicos associados a casamentos consanguíneos, reforçando o forte conselho da medicina moderna contra tais práticas devido ao potencial de doenças genéticas e deformidades fetais.

Conclusão: O estudo conclui que, embora a Sharia Islâmica forneça diretrizes claras sobre casamentos permitidos e proibidos, a medicina moderna enfatiza os riscos associados a casamentos consanguíneos. Para garantir a saúde e a segurança das gerações futuras, é crucial considerar os princípios religiosos e o conselho médico. Essa abordagem equilibrada pode ajudar a prevenir distúrbios genéticos e proteger a integridade da família, alinhando as práticas religiosas com as considerações contemporâneas de saúde.

Palavras-chave: casamento, deformidades fetais, doenças genéticas, exame médico, aborto.

MATRIMONIO CONSANGUÍNEO ENTRE SHARIA, LEY Y MEDICINA

RESUMEN

Objetivos: Este estudio tiene como objetivo explorar las directrices de la Sharia islámica sobre el matrimonio, identificando específicamente con qué parientes femeninos un hombre tiene prohibido casarse y con cuáles está permitido. También busca examinar las implicaciones médicas de los matrimonios consanguíneos, en particular en términos de transmisión de enfermedades genéticas y malformaciones fetales. El objetivo final del estudio es reconciliar los principios religiosos con el asesoramiento médico moderno para garantizar tanto la estabilidad de la familia como la salud y seguridad de las generaciones futuras.

Métodos: El estudio analizará los textos de la Sharia islámica y la ley argelina para determinar las categorías específicas de parientes femeninos con las que un hombre tiene prohibido o permitido casarse. También revisará la literatura médica sobre los riesgos asociados con los matrimonios consanguíneos, centrándose en los trastornos genéticos y la prevalencia de malformaciones fetales. La investigación incluirá consultas con eruditos religiosos y expertos médicos para proporcionar una comprensión integral del tema.

Resultados: Se espera que los hallazgos aclaren la postura de la Sharia islámica sobre los matrimonios permitidos y prohibidos entre parientes, destacando la sabiduría detrás de estas decisiones en el contexto de la estabilidad familiar y la protección contra las enfermedades. Además, el estudio identificará los riesgos médicos asociados con los matrimonios...
consanguíneos, reforzando el fuerte consejo de la medicina moderna contra tales prácticas debido al potencial de enfermedades genéticas y malformaciones fetales.

**Conclusión:** El estudio concluye que, si bien la Sharia islámica proporciona pautas claras sobre los matrimonios permitidos y prohibidos, la medicina moderna enfatiza los riesgos asociados con los matrimonios consanguíneos. Para garantizar la salud y la seguridad de las generaciones futuras, es crucial considerar tanto los principios religiosos como el asesoramiento médico. Este enfoque equilibrado puede ayudar a prevenir los trastornos genéticos y proteger la integridad de la familia, alineando las prácticas religiosas con las consideraciones de salud contemporáneas.

**Palabras clave:** matrimonio, deformidades fetales, enfermedades genéticas, examen médico, aborto.

1 INTRODUCTION

In ancient times, Arabs were keen on marrying relatives due to its social benefits, protection of customs and traditions, preservation of women's honor, and achieving compatibility in lineage. When Islam came, it did not prohibit this practice but rather organized it in a way that preserved the health of the fetus and maintained family ties. To this day, many Arab regions adhere to cousin marriages. For example, in Algeria, the rate of cousin marriages in Tebessa reaches 88%, in Ghardaia 56%, and in Bouira 50%.

However, modern medicine warns us against cousin marriages entirely, considering it a cause for the transmission of genetic diseases and fetal deformities. These deformities are transmitted through genes that humans carry from generation to generation. With the increasing prevalence of malformed fetuses, especially recently, it raises questions about the relationship between this phenomenon and cousin marriages.

This is what prompted us to choose this research. Its importance lies in its connection to marriage, which is the foundation of family formation, and the health of the offspring, who are the fruit of this marriage. Through this study, we aim to determine the relationship between cousin marriages and fetal deformities and how these deformities can be avoided.

The increasing prevalence of malformed fetuses, especially recently, raises questions about the relationship between this phenomenon and cousin marriages. This led us to pose the following problem: To what extent are the provisions of Islamic Sharia in harmony with legal texts and medical guidelines in addressing fetal deformities resulting from cousin marriages?
To answer the posed problem, we followed the descriptive method to describe the phenomenon of fetal deformities and the analytical method to analyze texts and reach conclusions. We also occasionally used the comparative method to compare Sharia rules, medical guidelines, and legal texts.

We divided the topic into two main sections:

1. **First Section: Cousin Marriages in Sharia and Law**
   
   2. **Second Section: The Impact of Cousin Marriages on Causing Fetal Deformities and Proposed Solutions**

We concluded our research with a set of findings and suggestions.

**First Section: Cousin Marriages in Sharia and Law**

By referring to the provisions of Islamic Sharia, we find that it has addressed many marriage rules in the Quran and the Sunnah of the Prophet. Among these rules are those related to women who are permanently prohibited from marriage, those temporarily prohibited, and women who are permissible to marry. These rules are also stipulated in the Algerian Family Code.

**Firstly: Women Permanently Prohibited from Marriage**

Verse 23 of Surah An-Nisa in the Quran outlines three categories of women permanently prohibited from marriage: those prohibited due to kinship, those prohibited due to breastfeeding, and those prohibited due to marriage ties.

1. **Prohibited Due to Kinship** There are seven categories:
   - Mothers
   - Daughters
   - Sisters
   - Paternal aunts
   - Maternal aunts
   - Nieces (daughters of brothers)
   - Nieces (daughters of sisters)

   The term "mothers" includes all grandmothers from both the mother's and father's sides. The term "daughters" encompasses all female descendants. The term "sisters" includes all types of sisters, whether they share the same mother, father, or both.

   The Algerian Family Code adopts the same ruling in Article 25, which states that "those prohibited due to kinship are: mothers, daughters, sisters, paternal aunts, maternal aunts, daughters of brothers, and daughters of sisters." Since Article 222 refers to the
provisions of Islamic Sharia, it adheres to what is mentioned in the books of interpretation as noted above.

2. Prohibited Due to Breastfeeding

Although Verse 23 of Surah An-Nisa mentions only two types of women prohibited due to breastfeeding—mothers through breastfeeding and sisters through breastfeeding—the Sunnah of the Prophet has affirmed that the same prohibitions apply to breastfeeding as they do to blood relations.

The conditions for breastfeeding to result in prohibition are that the milk must be in its natural state, without any change in color or taste, and that the breastfeeding occurs during the nursing period, which is within two full years from the child’s birth. Even a single act of breastfeeding is sufficient to establish the prohibition.

The Algerian Family Code follows the opinion of the majority of jurists regarding those prohibited through breastfeeding. Article 27 states that "what is prohibited by breastfeeding is the same as what is prohibited by lineage." Article 28 specifies that "the nursed child alone, without his siblings, is considered a child of the nursing woman and her husband, and a sibling to all their children, and the prohibition applies to him and his descendants." Article 29 declares that "breastfeeding is only prohibitive if it occurs before weaning or within two years, whether the milk is little or much."

The wisdom behind prohibiting marriage due to breastfeeding is that the nursing woman is similar to the biological mother in nurturing the infant. If the biological mother nourishes the infant with her blood through the umbilical cord to grow and develop in the womb, the nursing woman’s milk nourishes the child after birth to grow and develop as well. Therefore, God has made both women prohibited for the child.

Scientifically, it has been established that the milk a child consumes from the nursing woman carries certain immune genes that are transferred to the child through breastfeeding, thereby making the child similar in some genetic traits to his or her breastfeeding siblings.

3. Prohibited Due to Marriage Ties

From Verse 23 of Surah An-Nisa, we infer that the women prohibited due to marriage ties are:

A. Mothers-in-Law: This includes all female ancestors of the wife and the prohibition applies whether the marriage has been consummated or not.
B. **Stepdaughters:** The prohibition applies if the marriage with the mother has been consummated.

C. **Former Wives of Sons:** A man is prohibited from marrying the wife of his biological son or his son's widow as soon as the marriage contract is completed, even if the marriage was not consummated. This applies only to biological sons, not to fostered or adopted sons.

D. **Former Wives of Fathers:** It is prohibited to marry one's father's wife, and jurists have unanimously agreed on the prohibition of marrying one's grandfather's wife, regardless of how far up the line of ascendants goes.

The Algerian Family Code adheres to the provisions of Islamic Sharia regarding women prohibited by marriage ties. Article 25 states: "Those prohibited by marriage ties are:

1. The wife's ascendants upon the conclusion of the marriage contract;
2. The wife's descendants if the marriage has been consummated;
3. The widows or divorcees of the husband's ascendants, regardless of how far up the line of ascendants goes;
4. The widows or divorcees of the husband's descendants, regardless of how far down the line of descendants goes."

The text of this article is consistent with Islamic jurisprudence regarding women prohibited by marriage ties.

4. **Prohibited Due to Li’an**

Li’an is the process where a husband accuses his wife of adultery but is unable to provide the required evidence. The Holy Quran, in Surah An-Nur, verses 6-9, states: "And those who accuse their wives [of adultery] and have no witnesses except themselves - then the witness of one of them [shall be] four testimonies [swearing] by Allah that indeed, he is of the truthful. And the fifth [oath will be] that the curse of Allah be upon him if he should be among the liars. But it will prevent punishment from her if she gives four testimonies [swearing] by Allah that indeed, he is of the liars. And the fifth [oath will be] that the wrath of Allah be upon her if he was of the truthful."

For Li’an to be valid, the following conditions must be met:

- There must be a valid marriage contract between the spouses.
- It must be conducted before a judge.
- It must take place in a mosque.
• At least four upright witnesses must be present.
• The procedure must follow the specific wording in the Quranic verse.
• It must occur within eight days of the knowledge of the pregnancy that is being denied.4

If Li'an occurs between the spouses, the judge will rule for their separation. The wife is considered irrevocably divorced and permanently prohibited from remarrying her husband. The child will not be attributed to the husband, who will not be responsible for the child's maintenance, and the child will not inherit from the husband. Instead, the child will be attributed to the mother and will inherit from her.

The Algerian Family Code does not explicitly mention Li'an. However, referring to a decision of the Supreme Court in 19975 regarding the attribution of paternity, it states: "The judicial ruling to annul the marriage contract with a permanent prohibition and to attribute the child's lineage to the mother is upheld. Li'an is not to be conducted in court but in a mosque within eight days of the knowledge of the pregnancy to be denied."

Secondly: Women Temporarily Prohibited from Marriage

Temporary prohibitions refer to those that last for a certain period and then end. Once the reason for the prohibition is removed, the woman becomes permissible to marry. The temporarily prohibited women include:

• A married woman (the chaste);
• A woman in her waiting period (iddah) due to divorce or the death of her husband;
• Combining women who are prohibited to be married simultaneously (such as sisters);
• A Muslim woman marrying a non-Muslim.

1. Prohibition of Marrying a Chaste Woman (Married Woman)

Every married woman is prohibited from marrying another man unless she is a slave taken as war booty and has a husband. In this case, it is permissible to have intercourse with her.

2. Prohibition of Marrying a Woman in Her Waiting Period

It is prohibited to marry a woman until her waiting period (iddah) is over. The waiting period for a widow is four months and ten days, while for a divorced woman, it is three menstrual cycles if she menstruates, three months if she does not menstruate, or until she gives birth if she is pregnant. These periods are specified in the Quran, Surah Al-Baqarah, verse 228.
The wisdom behind prohibiting marriage during the waiting period is to preserve lineage and prevent confusion regarding paternity. This is a temporary prohibition, as the woman can marry after the waiting period is completed.

3. Prohibition of Combining Women Who Are Prohibited to Be Married Simultaneously

In pre-Islamic times, a man could marry a woman and her sister, her aunt, or her maternal aunt. Islam prohibited this practice due to its social and health harms. The wisdom behind this prohibition is to maintain family ties.

4. Prohibition of a Muslim Woman Marrying a Non-Muslim or a Muslim Marrying a Non-Kitabi (Non-People of the Book)

A Muslim woman is not permitted to marry a non-Muslim, even if he is from the People of the Book. The wisdom behind this prohibition is that the husband holds authority in the household, and the wife is required to obey her husband. If the husband is an unbeliever, it would be difficult for the wife to adhere to her faith.

Similarly, a Muslim man is prohibited from marrying a polytheist or an atheist until she believes and declares her Islam, as affirmed in Surah Al-Baqarah, verse 221. However, verse 5 of Surah Al-Ma'idah permits Muslim men to marry chaste women from the People of the Book, meaning free women, not slaves.

The Algerian Family Code addresses temporarily prohibited women in Article 30, which aligns with the provisions of Islamic Sharia. This article states: "Women temporarily prohibited from marriage are:

- The chaste;
- The woman in her waiting period due to divorce or death;
- The woman divorced thrice;
- It is also temporarily prohibited to:
  - Combine two sisters, or a woman and her paternal or maternal aunt, whether full, half, or through breastfeeding;
  - A Muslim woman marrying a non-Muslim."

These are called temporary prohibitions because the reasons for the prohibition can be removed, making the marriage permissible, unlike permanent prohibitions which remain forever and do not lose their prohibitive status.

Thirdly: The Ruling on Marrying One of the Prohibited Women
One of the conditions for a valid marriage contract is that the woman must be free from any Sharia prohibitions. Any violation of this condition renders the marriage invalid and it must be annulled both before and after consummation. However, the paternity of any resulting child is established, and the woman must observe the waiting period (iddah) after separation.

The Algerian Family Code reflects this in Article 34: "Any marriage to one of the prohibited women is annulled before and after consummation, and paternity and the requirement of the waiting period (istibra') are established."

Here, the legislator equates marriages involving permanently prohibited women and temporarily prohibited women in terms of consequences. The marriage is annulled both before and after consummation. To protect the child born from such a union, the woman must observe the waiting period and paternity is established if the child is born within the minimum and maximum gestation periods.

**Fourthly: Permissibility of Marrying Certain Female Relatives**

While the identification of women who are permanently or temporarily prohibited logically implies that all other women are permissible to marry, the provisions of Sharia confirm this permissibility with specific texts. In Surah Al-Ahzab, verse 50, Allah permitted the Prophet Muhammad (peace be upon him) and the believers to marry the daughters of their paternal uncles, paternal aunts, maternal uncles, and maternal aunts, whether they are close or distant relatives.

There are examples of this in the Sunnah. The Prophet Muhammad (peace be upon him) married his cousin Zainab bint Jahsh, and he married his daughter Fatima (may Allah be pleased with her) to his cousin Ali ibn Abi Talib (may Allah be pleased with him). He also married his daughter Zainab to her cousin Amr ibn al-As. No historian has mentioned the presence of a deformed child in the family of the Prophet (peace be upon him).

The Algerian Family Code follows the path of Islamic Sharia by categorizing women who are permanently and temporarily prohibited from marriage. However, it does not specify the women permissible for marriage. This is logical since any woman not permanently or temporarily prohibited is permissible for marriage.

**Second Section: The Impact of Cousin Marriages on Fetal Deformities and Proposed Solutions**

Most modern studies indicate that cousin marriages have a significant impact on fetal deformities. The closer the degree of kinship, the higher the rate of fetal deformities.
Therefore, it is recommended to avoid cousin marriages altogether as a preventive measure against the transmission of genetic diseases. If preventing cousin marriages is not possible, at least prospective couples should be required to undergo pre-marital medical examinations and early fetal deformity screenings at the beginning of pregnancy. This allows the couple to make informed decisions regarding the affected child.

**Firstly: Pre-Marital Medical Examination**

To prevent the transmission of genetic diseases to offspring, Islamic jurists and medical professionals encourage pre-marital medical examinations for prospective couples. These examinations ensure that both parties are free from hereditary diseases that can be transmitted to their children or infectious diseases. They can also verify their fertility. The results of the examination should be disclosed to both parties, who then have the right to proceed with the marriage or postpone it.

The Algerian Family Code mandates pre-marital medical examinations. Article 7 bis requires those intending to marry to provide a medical certificate dated no more than three months prior, confirming they are free from contagious diseases or any factors that might pose a risk to the marriage. The notary or civil status officer must verify this examination has been conducted and that the parties are aware of the results before drafting the marriage contract, and this must be noted in the marriage contract.

It is important to note that the medical examination stipulated in Article 7 bis of the Family Code is not a condition for the validity of the marriage contract. Even if the examination is not conducted, as long as the essential elements of the marriage are present, the marriage is valid. The examination is a procedural requirement that the civil status officer must verify before drafting the contract. Even if a hereditary or infectious disease is detected, the civil status officer or notary cannot refuse to draft the contract if the parties express their wish to proceed despite the examination results.

The purpose of this examination is to protect both parties from infectious diseases and to protect the offspring from genetic diseases and deformities. This gives the couple the freedom to choose whether to proceed with the marriage, postpone it, or cancel it. Additionally, monitoring the fetus from its earliest days and conducting deformity screenings can enable early treatment or abortion before the soul is breathed into the fetus.

**Secondly: Early Fetal Screening**

A malformed fetus is one with congenital or neurological defects and is still alive within the womb. The deformities can be categorized into the following groups:
• **Group One**: Deformities incompatible with fetal life in the womb, leading to miscarriage in the first months of pregnancy. These include defects in the nervous system, internal organs, or chromosomal abnormalities.

• **Group Two**: Deformities compatible with fetal life in the womb but not with life after birth, such as heart and vascular defects, tracheal obstruction, kidney atrophy, or brain growth deficiencies. Medical advances have enabled some of these children to survive, but they often require significant medical support and have limited functionality.

• **Group Three**: Congenital deformities that do not disrupt fetal life before or after birth but result in the child living with deformities, such as cleft lip, limb deformities, or intellectual disabilities due to brain growth deficiencies. Some of these conditions can be treated with medical interventions.

Fetal deformities are diagnosed using various technological means, including:

• **Genetic Counseling Before Marriage**: This helps identify hereditary diseases in the couple that could be passed on to their offspring after marriage.

• **Prenatal Diagnosis**: This includes techniques that allow the detection of all organic deformities and hereditary diseases affecting the fetus from the moment of fertilization until birth. These techniques include ultrasound imaging, maternal blood tests, and amniocentesis.

If a deformity is detected in the fetus that would prevent it from surviving after birth, Islamic jurists permit the abortion of the fetus before the soul is breathed into it, which they define as 120 days.

The Algerian Penal Code only permits abortion in one specific case, as stated in Article 308, which is to save the mother's life. However, the Health Law allows prenatal diagnosis by medical order to detect hereditary diseases and deformities in the embryo or fetus within the womb, as stated in Article 76. Article 77 allows for the therapeutic termination of pregnancy when the mother's life, mental, or psychological balance is threatened by the pregnancy. This can be interpreted as a potential gateway to abort malformed fetuses, as no mother would know she is carrying a deformed child without experiencing psychological distress.
2 PROPOSED SOLUTIONS

1. Pre-Marital Medical Examination

To prevent the transmission of genetic diseases to children, Islamic scholars and medical professionals advocate for pre-marital medical examinations for couples. These exams ensure both parties are free from hereditary diseases that could be transmitted to their children or infectious diseases. They can also verify their fertility. The results are disclosed to both parties, who then have the right to proceed with the marriage or postpone it.

The Algerian Family Code mandates pre-marital medical examinations, making them obligatory for all intending to marry, as stated in Article 7 bis. This article requires prospective spouses to present a medical certificate no older than three months, confirming they are free from contagious diseases or any factors that might pose a risk to the marriage. The notary or civil status officer must verify this examination and that the parties are aware of the results before drafting the marriage contract, which must be noted in the contract.

2. Early Fetal Screening

Early fetal screening helps detect congenital and hereditary diseases that affect the fetus from conception until birth. Techniques include ultrasound imaging, maternal blood tests, and amniocentesis. If a severe deformity incompatible with life after birth is detected, Islamic scholars permit abortion before the soul is breathed into the fetus, defined as 120 days. The Algerian Health Law allows prenatal diagnosis for detecting hereditary diseases and deformities in the embryo or fetus, and therapeutic termination of pregnancy if the mother's life, mental, or psychological balance is threatened. This interpretation could allow for the abortion of malformed fetuses, as carrying a deformed child would likely cause significant psychological distress to the mother.

3 CONCLUSION

In conclusion, cousin marriage can be a factor in fetal deformities, but it is not the only factor. There is no contradiction between the provisions of Islamic Sharia, law, and medicine regarding the protection of fetuses from deformities. Islamic Sharia prohibits marriage between first and second-degree relatives permanently because it can result in
the transmission of hereditary traits to the offspring. However, it permits marriage to certain relatives, such as the daughters of paternal uncles and aunts, and the daughters of maternal uncles and aunts, as the transmission of hereditary traits is minimal.

3.1 KEY FINDINGS

- The Algerian legislator has aligned with Islamic Sharia regarding cousin marriage.
- Islamic Sharia balances societal cohesion through the permissibility of cousin marriage, which provides stability and development, with the avoidance of hereditary diseases by prohibiting marriages between first-degree relatives.
- The legislator mandates pre-marital medical examinations but does not impose strict penalties for non-compliance.
- Article 77 of the Health Law could lead to the abortion of malformed fetuses at any stage of pregnancy.
- The causes of fetal deformities are varied, some known and others still unidentified by medicine, and not all are linked to cousin marriages.

3.2 RECOMMENDATIONS

- Establish specialized centers for early prenatal screening across all provinces to enable parents to detect deformities early in pregnancy, before the soul is breathed into the fetus, allowing them to make informed decisions about abortion.
- Implement penal sanctions for non-compliance with the pre-marital medical examination requirement.
- Amend the Algerian Health Law by adding a second paragraph to Article 77, allowing for voluntary termination of pregnancy when a medical report confirms that the fetus is deformed and unlikely to survive.
- Amend the Algerian Penal Code by adding a second paragraph to Article 308 stating, "No penalty shall be imposed for abortion when a medical report confirms that the fetus is deformed and cannot survive in the future."

These measures aim to provide comprehensive care and legal frameworks to address the issues related to cousin marriages and the health of future generations.
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