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CONCEPTUAL REVIEW ON ADHO SHAKHAGATA MARMA

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ABSTRACT

Ayurveda believes that one can be a good physician and surgeon both only when he has practically observed and learned all about the human anatomy. Marma is such a unique principle. It can be explained as sandhisthanam or jeevasthanam. Its first and foremost literature is seen in brihattrayee. However acharyacharak described only trimarma (shira, hridaya and basti). Marma are meeting place of five elements of the body namely – Mamsa, Sira, Snayu, Asthi and Sandhi.

KEYWORDS:- Marma, Sandhisthanam, Jeevasthanam.

INTRODUCTION

Marma are those points whose damage cause intense pain simulating death and can cause permanent change in strength and sensation.'Dalhana' a critic of susruta has cleared this by saying, "Damage to these vulnerable areas may cause death. Vagabhata in his explanation also stated the same i.e. injury to marma may cause death. It consist Agni, Soma, Vayu, Satva, Raja and Tama. If these constituents of the body are disturbed or damaged it is obvious that the man will die or suffer. This also causes the imbalance of doshas (vata, pitta, kapha) and gunas (satva, raja, tama). According to regional classification there are 22 marma in inferior extremity namely- Kshipra, Talahridaya, Kurca, Kurchasiras, Gulpha, Indrabasti, Janu, Ani, Urvi, Lohitaksa, Vitap.

Aim

To study the Anatomical Manifestation of Adho Shakhagata Marma.

MATERIAL AND METHOD

Literary and conceptual study will be on the data completions from the bruhatrayees, laghutrayees and other classical books including journals, presented papers, previous work done and co-related, analyzed with the knowledge of contemporary science on the subject.

Discussion of adho shakhagata marma

Marma are the centres for the vital force or prana. The concept of marma includes a whole range of anatomical structures like the skin, bones, joints, nerves and internal organs. Susruta in his samhita stated that marma are the vital points there is collection (sannipata) of Mamsa (Muscle), Sira (vessels), Snayu (Tendon), Asthi (Bones) and Sandhi (Joints and nerves). These are the points where 'prana' exist. Which when get injured kills the man3.Marma points consist Agni, Soma, Vayu, Satva, Raja and Tama. If these constituents of the body are disturbed or damaged it is obvious that the man will die or suffer. The dislocation of 'jananendrias' with the subject they are meant for can cause unconsciousness. This also causes the imbalance of doshas (vata, pitta, kapha) and gunas (satva, raja, tama). This may cause the physiological imbalance in the body. Marmas connect to the nadi (subtle nerves) and chakras (energy centres) of the subtle body and the mind.

Adho shakha gata marma

Kshipra marma

This marma is situated between the big toe/thumb and second toe/index finger of the foot/hand. It is 4 in number, 2 in the foot and 2 in the hand. It is 1/2 angula pramana and kalantarapranahara. This marma is predominant of snayu, which is one of the constituent of the marma rachana.[5] Modern Anatomy of Kshipra Marma-For good understanding of this marma with respect to rachana. There is a need of study of anatomy particularly area between big toe and second toe or thumb and index finger. On the dorsum of the foot following structures are to be considered.

1. Extensor halluces longus
2. Extensor halluces brevis
3. Dorsalis pedis artery
4. Flexor hellucis longus

The presence of dorsal pedis artery and the middle terminal branch of the peroneal nerve favours the condition of the tetanus, since the deep wound after hemorrhage favours

multiplication in devoid of oxygen. The exotoxins travel through this vasculo nervous tissue and get fixed in the anterior horn cells.

Talahridaya marma

Talahridaya marma is situated in the central of the sole of the foot in a straight line drawn from the root of the madhyama anguli (middle toe). It is 4 in number, 2 in upper limb and 2 in lower limb. This marma is predominantly made up of mamsa. It is classified under kalantarapranahara marma. It occupy space of 1/2 angula dimension.[7] Modern Anatomy of Talahridaya Marma-In the middle of the sole, deep and superficial plantar arches are situated and in palm contemporary deep and superficial palmer arches covered with tendons and plantar and palmer aponeurosis respectively. The lower extremity is more prone from Clostridial myocitis; it is associated with pain, swelling, oedema and toxemia, which usually develops within 48 hours.

Kurcha marma

The name of kurcha marma indicates the shape i.e. brush like scattered at one end and tied up on the other end. It is 4 in number. 2 in upper limb and 2 in lower limb. This marma belongs to snayu rachana prakar marma, four angula in measurement and is vaikalyakar in parinam. It is situated above the kshipra marma on both sides.[9]

Modern Anatomy of Kurcha Marma-This is bilaterally situated predominantly constituted by snayu. The probable anatomical structure would be the flexor and extensor tendons coming out of the retinaculae and spread out distally like the open end of brush.

Kurchasira marma

It is located distal to the gulpha sandhi in both foot. It is 4 in number, 2 in hands and 2 in foot. Predominantly made up of snayu, 1 angula in measurement and is rujakara in parinam.[11]

Modern Anatomy of Kurchasira Marma-The structures, which are considered as kurchashira at dorsal aspect of foot are tendon of extensor digitorum longus along with peroneus tertius tendon surrounded by a common synovial sheath as they pass beneath the extensor retinacula.

Gulpha marma

It is situated at the junction of the foot and the leg. It is 2 in number. It is predominantly made up of sandhi, i.e. the joint and components making ankle joint, 2 angula in measurement and is rujakara in parinam.[13]

Modern Anatomy of Gulpha Marma-The gulpha marma described in Ayurvedic classics at the junction of foot and leg and trauma in this area causes pain, restriction of movement or limping. This description draws the attention towards ankle joints. Structures falling in the area of gulpha marma are ankle joint, distal tibio-fibular articulation, medial malleolar ligament, anterior ligament, longus ligament, deltoid ligament, posterior ligament, anterior talo-fibular ligament, posterior talo-calcaneal ligament, fibula calcaneal ligament, lateral talo-calcaneal ligament, tarsal articulations.

Indrabasti marma

Indrabasti is situated in between jangha (calf) and parshni (heel) or situated twelve fingers above the heel and at the middle of the jangha (calf). It is 4 in number- 2 in upper limb and 2 in lower limb. It is predominantly made up of mamsa. 1/2 angula in measurement and is kalantarapranahara in parinam.[15]

Modern Anatomy of Indrabasti Marma- The muscle of the calf are present in two groups superficial and deep. Gastrocnemius, planteris and soleus fall under the formar group while the later group contains popleteus, flexor hellusis longus, flexor digitorum longus and tibialis posterior. The calf muscle and the muscle of the sole are enclosed within the deep fascia. The traumatic effect depends on the amount of tissue involved, amount of blood loss.

Janu marma

It is situated at the junction of the ‘jangha’ and ‘uru’ i.e. leg and the thigh. It means the knee joint. It is 2 in number. It is predominantly made up of sandhi. 3 angula in measurement and is vaikalyakara in parinam.[17]

Modern Anatomy of janu marma-The knee is the largest joint of the body. It actually consists of three joints-

1. An intermediate patella femoral joint between the patella and the patellar surface of the femur
2. A lateral tibio femoral joint between the lateral condyle of the femur, lateral meniscus and lateral condyle of the tibia.
3. A medial tibiofemoral joint is a gliding joint and the lateral and mediotibiofemoral joints are modified hinge joints.

Ani marma

It is situated 3 inches above the knee. It is 4 in number- 2 in upper limb and 2 in lower limb. It is predominantly made up of snayu. 1/2 angula in measurement and is vaikalyakara in parinam.[19]

Modern Anatomy of Ani Marma- The surface anatomy and the rachana of the marma impress upon common tendon of quadriceps muscle in lower extremity. In lower extremity this tendon protects the knee joint from sliding during full flexion.

Urvi marma

It is situated in the middle of the thigh. It is 2 in number. It is predominantly made up of sira. 1 angula in measurement and is vaikalyakara in parinam.[21]

Modern Anatomy of Urvi Marma- The femoral artery and vein run along the bottom of the femoral triangle along a boundary line that separates two independent motor nerve territories the femoral vein in its upper part lies medial to the femoral artery in the femoral triangle.

Lohitaksha marma

It is situated above the urvi and below the hip joint; i.e. at the root of the thigh. It is 4 in number- 2 in upper limb and 2 in lower limb. It is predominantly made up of sira. 1/2 angula in measurement and is vaikalyakara in parinam.

Modern Anatomy of Lohitaksha Marma- This is the area of the femoral triangle, which contains femoral artery, vein and nerve.

Vitapa marma

It is situated at the junction of the thigh and scrotum (Inguinal area). It is 2 in number. It is predominantly made up of snayu. 1 angula in measurement and is vaikalyakara in parinam.[25]
Modern Anatomy of Vitap Marma- This area is of inguinal canal, which contains the spermatic cord, in which there is testicular artery along with the vasa, plexus of veins and nerves of the testes.

CONCLUSION

After the discussion on adho shakhagata marma. It is concluded that adho shakhagata marma are important marma as clinical and surgical point of view. Injury to them can cause loss of function and sometimes it can also became the cause of death.

REFERENCES

1. Thatte D.G, editor. A text book of human anatomy. Varanasi: Chawkhamba Sanskrit series office, 592-593.
2. Radakanta dev. Varda Prasad, editor. Shabdakalpadruma. Delhi: Naga Publishers, 1987; 5: 792.
3. Thatte D.G, editor. A text book of human anatomy. Varanasi: Chawkhamba Sanskrit series office, 591.
4. Dr. David frawley, Dr. Subhash Ranade and Dr. ArvindLele. Ayurveda and Marma Therapy. Chaukhambha Sanskrit Pratisthan, 2005; 33-34.
5. Dr. Raghuram .Y.S. KshipraMarma: Anatomical location, Effect of injury- Easy Ayurveda, 2017; 6: 6. Retrieved from https://easyayurveda.com>kshi...
6. Mishra J. N, editor. Marma & its management. Varanasi; Chaukhambhaorientalia, 2005; 59-62.
7. Dr. Raghuram .Y.S. Talahridaya Marma: Anatomical location, Effect of injury- Easy Ayurveda, 2017; 6: 6. Retrieved from https://easyayurveda.com>talah...
8. Mishra J. N, editor. Marma & its management. Varanasi; Chaukhambhaorientalia, 2005; 63-65.
9. Dr. Raghuram .Y.S. Koorcha Marma: Anatomical location, Effect of injury- Easy Ayurveda, 2017; 6: 6. Retrieved from https://easyayurveda.com>koor...
10. Mishra J. N, editor. Marma & its management. Varanasi; Chaukhambhaorientalia, 2005; 66 - 67.
11. Dr. Raghuram .Y.S. KurchashiraMarma: Anatomical location, Effect of injury- Easy Ayurveda, 2017; 6: 6. Retrieved from https://easyayurveda.com>kurc...
12. Mishra J. N, editor. Marma & its management. Varanasi; Chaukhambhaorientalia, 2005; 69: 70.
13. Dr. Raghuram. Y. S. Gulpha Marma: Anatomical location, Effect of injury- Easy Ayurveda, 2017; 6: 6. Retrieved from https://easyayurveda.com>gulp...
14. Mishra J. N, editor. Marma & its management. Varanasi; Chaukhambhaorientalia, 2005; 81- 83.
15. Dr. Raghuram. Y. S. Indrabasti Marma: Anatomical location, Effect of injury- Easy Ayurveda, 2017; 6: 6. Retrieved from https://easyayurveda.com>indra...
16. Mishra J.N, editor. Marma & its management. Varanasi; Chaukhambhaorientalia, 2005; 84-86.

17. Dr. Raghuram. Y. S. jaanu Marma: Anatomical location, Effect of injury- Easy Ayurveda, 2017; 6: 12. Retrieved from https://easyayurveda.com>jaan...
18. Mishra J. N, editor. Marma & its management. Varanasi; Chaukhambhaorientalia, 2005; 88-95.
19. Dr. Raghuram .Y.S. Aani Marma: Anatomical location, Effect of injury- Easy Ayurveda 2017; 6: 7. Retrieved from https://easyayurveda.com>aani...
20. Mishra J. N, editor. Marma & its management. Varanasi; Chaukhambhaorientalia, 2005; 03-105.
21. Dr. Raghuram. Y. S. Urvi Marma: Anatomical location, Effect of injury- Easy Ayurveda, 2017; 6: 7. Retrieved from https://easyayurveda.com>urvi...
22. Mishra J. N, editor. Marma & its management. Varanasi; Chaukhambhaorientalia, 2005; 06-108.
23. Dr. Raghuram. Y. S. LohitakshaMarma: Anatomical location, Effect of injury- Easy Ayurveda, 2017; 6: 7. Retrieved from https://easyayurveda.com>lohit...
24. Mishra J. N, editor. Marma & its management. Varanasi; Chaukhambhaorientalia, 2005; 110.
25. Dr. Raghuram .Y.S. VitapaMarma: Anatomical location, Effect of injury- Easy Ayurveda, 2017; 6: 12. Retrieved from https://easyayurveda.com>vitap...
26. Mishra J. N, editor. Marma & its management. Varanasi; Chaukhambhaorientalia, 2005; 114.