

CRITICAL REVIEW OF MARMA W.S.R TO SHANKHA MARMA**Dr. Shweta Kherde***

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INTRODUCTION

Marmas are a common topic in three great Ayurveda classics of Charak, Sushruta and Vagbhata, which provides a wealth of information on their location, function and application. Ayurveda considered some vital parts of body as Prana sthana (where life resides) & these vital points termed as Marma. The injury to these Marma points may be responsible for serious consequences, while use of Marma therapy help to treat many pathological conditions and the major advantage of Marma therapy is that it is a non invasive therapy. The classical text of ayurveda described 107 Marmas points.

Sadhyopranhar, Kalantarpranhar, Vaikalyakar, Vishalyaghna, Rujakar are Marma described anciently. Dhamani, Sira, Asthi, Mamsa, Kandara, Sandhi and Snayu are the sthana (sites) used for Marma chikitsa where Abhyanga (massage) and Mardana (Acupressure) performed. Marma points also help to balance Tridoshas and Trigunas since it involve various pranas like; vayu, sattva, agni, rajas and atma

Marma Sharira is an ancient traumatological anatomy presented by both Sushruta and Vagabhata. Though the presentations are grossly similar, whereas Charaka given Trimarma. Shankha Marma is considered as Sadhyapranahara Marma, injury to this area leads to sudden death which is located in head region plays a important role in clinical aspect during the head injuries, the head injuries are considered serious part due to the brain involvement, where in most of the head injury occurs during the road accidents, patients dies or get the serious deformities. Here in Shankha Marma the structures like anterior branch of middle meningeal artery which supplies to brain part, due to its injury the person may dies or may get physical deformities. The pterion which marks the union of 4 bones of the cranium is located superior to the zygomatic arch and posterior to the frontozygomatic suture. It is an important neurosurgical landmark for the lateral/pterional approach and has racial differences in both its location and pattern of union of the bones. In Ayurveda also head region is considered the Uthamanga compare to other body part. We need the detail anatomical structures of Shankha

Marma to diagnose and treat the diseases especially in surgical aspect. In our routine work specially in driving the vehicles we can prevent from head injuries. The pterion which marks the union of 4 bones of the cranium is located superior to the zygomatic arch and posterior to the frontozygomatic suture. It is an important neurosurgical landmark for the lateral/pterional approach and has racial differences in both its location and pattern of union of the bones

SHANKHA MARMA

Acharya Sushrut included Shankha Marma in Sadhyapranahara Marma and Asthi Marma, located in urdhvajatru pradesh. Abhigata to this Marma leads to sudden death. Puchanthayorupari karna lalatayormadhye shankhounama, tatra sadhyomaranam. Its anatomical place is just superior to lateral part of outer canthus, in between ear and forehead. This place is taken as temporal region where temporal bone is present, even its classification is also asthi marma. Pterion is usually indicated by an H-shaped formation of sutures that unite the frontal, parietal, sphenoid (greater wing), and temporal bones. Less commonly, the frontal and temporal bone articulate, sometimes all bones meet at a point. The pterion corresponds to the site of anterolateral fontanelle of neonatal skull which closes in the third month after birth. The joints of the cranial vault are sutural joints which ossify in membranes. As the bones are growing, the non-ossified sutural membranes connect the periosteum covering the outer and inner surface of the bone, which helps in growth as well as binding the bones

together to their apposed margins. A sutural bone is sometimes present at the pterion. This bone is called pterion ossicle or Epipteric bone or flower's.

MATERIALS AND METHEDOLOGY

Literature of Ayurvedic and modern science available from vedic era to present era.

Marma Therapy Utilization of external stimulation, pulling techniques, panchkarma and massage etc. are the part of Marma therapy along with Abhyanga and Mardana. Marma is related to the Prana which associated with Vata Dosha therefore Marma mainly deal with Vata Vyadhi depending upon involvement of Vata such as; Prana Vata, Udana Vata, Vyana Vata, Samana Vata and Apana Vata. Marma therapy not only helps in Vata Vyadhi but also helps to clear the channels (shrotas) and improves circulation of body. It develops physical & mental flexibility, removes ama (toxins) & clinically applied for many disease specially heart problem. Marma therapy provides stimulation of vital points and thus removes blockages from the shrotas & offer physical and psychological repose. Marma therapy applied around the Asthi, Snayu, Sira & Sandhi etc. since this therapy mainly covers diseases related to neuromuscular system, nervous system, loco motor system and blood circulation systems. Marma Chikitsa help to flow positive prana through the various channels using pressure on Marma points and this prana manage to treat diseases such as; headache, joints pain, paralysis Hridaya Roga, mental stress and muscular sprain, etc. Various therapies such as; Swedana, Abhyanga, Pizhichil and Kizhi are recommended by the traditional text of Ayurveda as Marma Chikitsa. Abhyanga (Shiroabhyanga) help in diseases such as; shirshoola, hanustambha, manyastambha, badhira etc.

Kurcha Marma Relates with digestive process, improves flow of prana for sensory activity.

Kurchashira Promotes visual activity & reproductive stimulation.

Kshipra Associated with functioning of heart & lungs. Talahridaya Boost immune system

Marma help to treat following disease conditions

Joint pain
Respiratory obstructions
Nervous system disorders
Muscular pain
Headaches & migraines
Fatigue
Mental stress
Paralysis
Blood pressure
Hridaya Roga

Clinical Role of Some Specific Marma

Gulpha Marma

Gulpha Marma positioned at Gulpha region (Pada and Jangha meet together), it is used for Siravedha and ankle

joint. The injury to Gulpha Marma (Gulpha region) may causes: Ruja, khanjata and stabdha padata. It is used clinically in the management of joint injury, muscular sprain and pain.

Adhipati Marma

Adhipati Marma is resides at top of skull and superior sinus is a place of Adhipati marma. It is also considered as Sandhi marma due to the abundance of veins around this region. Clinically it associated with pathological symptoms such as; Murcha, Bhram and Pralap.

Lohitaksha Marma

Lohitaksha Marma found in lower limb in femoral triangle lateral to pubic symphysis. It is a Vaikalyakar Marma and also described as Sira Marma. It surrounded by skin, superficial fascia, fascia lata, femoral artery, femoral nerve and femoral vein. It is clinically responsible for hemorrhage due to the injury.

Urvi Marma Urvi Marma related to the Sira and positioned at adductor canal, the structural component of this Marma site are femoral vein with Adductor Magnus, Sartorius and Vastus Medialis etc. It is clinically responsible for hemorrhage due to the injury.

CONCLUSION

Marmas are vital points, centers for the Prana. They can be used specifically for the diagnosis and treatment of disease or generally for promoting health and longevity. Marmas are integral to all Ayurvedic therapies from simple self treatments to complex clinical procedures. They form one of the main pillars of Ayurvedic thought and practice. Marma therapy can be used along with all Ayurvedic therapies like panchakarma.

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