

WORLD JOURNAL OF PHARMACEUTICAL AND MEDICAL RESEARCH

www.wjpmr.com

SJIF Impact Factor: 5.922

Review Article
ISSN 2455-3301

WJPMR

STUDY OF KSHIPRAMARMA W.S.R. TO URDHVA AND ADHASAKHA

Dr. Gyanadatta Pradhan¹*, Dr. Nidhi Maurya², Dr. Pinki Maheshwari³, Dr. Sunita Kumari⁴ and Dr. Arvind Kumar⁵

¹²³MD Scholar.

⁴Associate Professor and H.O.D.

⁵Assistant Professor P.G. Dept. of Rachanasharir RAC, Lucknow, India.

*Corresponding Author: Dr. Gyanadatta Pradhan

MD Scholar.

Article Received on 31/01/2021

Article Revised on 21/02/2021

Article Accepted on 11/03/2021

ABSTRACT

Ayurveda is a science of life which holistic approach to health and personalized medicine. It is one of the oldest medical systems, which comprises thousands of medical concepts and hypothesis. Every concept has its own importance it should be understand with the help of references in different samhitas. Marma is one of the important considerations as per Ayurveda. Marma are the critical point of body associated with different type of muscles, vein, bones, ligament and joint meet with each other. In the ancient time the knowledge of marmavigyan was used in various fields such as surgery and different type of pain management. There are 107 marma developed by ancient Indian surgeon, Sushrut among them. Kshipramarma is one of the sakhagatamarma. After collecting from different ancient book and cadaveric observation, the site of marma and best treatment available at that time, but now it is necessary to explore this knowledge on the basis of modern medical science to contribute highest in this field.

KEYWORDS: Every concept has its own importance it should be understand with the help of references in different samhitas.

INTRODUCTION

Marma are the site where prana or vital energy resides. The literature of marma is seen in Brihatrayeegranthas which is described in the sixth chapter of sushruta samhita shareer sthan pratyekmarmanirdeshsharir. Ayurveda is a treasure of knowledge which was developed and discovered by our great ancestors. Marmavigyan was developed as science of war there are so many references from vedas regarding attack on marmasthanof enemis and protecting one's marma by wearing protectants. The description of marma is speciality of Avurveda sharirsthan such as a description is not seen in any of the medical system. The time period of Acharya Charaka, Sushruta and Vagbhatta. Acharya mentioned the total numbers of Marmas are 107.[1] Acharya Sushruta classified marma as Mamsamarma, Siramarma, Snayumarma, Asthimarma Sandhimarma. ^[2] In Ashtanga Hridya Acharya Vagbhatta described the marmasharir in 4th chapter of Sharirsthan. Acharya Vaghbhata added one or more classification as Dhamanimarma respectable.

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. Marmas are meeting point of mamsa (muscles), asthi (bones), snayu (tendons), dhamani (arteries), sira (veins) and sandhi (joints) and it also consist of Agni, Soma, Vayu, Satva, Raja and Tama. [3] If these constituents of the body are disturbed or damaged it is obvious that the man will die or suffer. According to parinam there are five types of marma such as Sadhyo-pranahara, Kalantara- pranahara, Vishalyaghna, Vaikalyakara and Rujakara. There are 107 marmas in the body, 44 sakhagatamarma, and 11 marma on each sakha. All the sakhagatamarma kshipra is one of them.

According to Shabdakalpadruma, Kshipra takes from the root word 'kship' and has been assigned with the synonyms 'Sheeghra' and 'Twarita'. [4] According to Monier William's Sanskrit – English dictionary it is meant as to throw, cast, send, Dispatch etc. [5] The Kshipramarma is situated in UrdhvaShakha. On the basis of constitution it is explained as Snayumarma and Kalantarapranhara or Sadyopranharamarma based on prognosis of injury. Total kshipra is four in number. Kshipra Marma which is located in the upper and lower

www.wjpmr.com Vol 7, Issue 4, 2021. ISO 9001:2015 Certified Journal 120

limb in between the thumb and index finger (i.e 1st metacarpal and 2nd metacarpal bone) in hand and in between the big toe and second toe of the foot (i.e. 1st metatarsal and 2nd metatarsal bone). [6] Injury to Kshipramarma results in marana (death) due to akshepaka (convulsions). Arunadatta has detailed that the Akshepaka mentioned here is the Vatavyadhi. In akshepakaroga the aggravated vatadosha permeates all dhamanis leading to frequent & repeated convulsions and spasm of muscles. Here the terminology of dhamani has been detailed as nadi. Acharya Dalhana has suggesting the involvement of nervous system in it. Dalhana has also mentioned that in this akshepaka whole of the body takes place. Arunadatta has interpreted the word 'Aakshipati' as 'Aakramati' or attacking. [7] It has also been mentioned that when the limbs get severed, the blood vessels get contracted to allow only little haemorrhage and such persons, though having severe affliction, do not die like tree with several branches cut off survives.

OBJECTIVES

- 1) To Review the KshipraMarma.
- 2) To Know the Location of KshipraMarma.
- To co-relate the Structure comes at the site of KshipraMarma.

METHODOLOGY

- 1. LiteraryStudy from the Brihatrayees, Laghutrayees and other Classical and Modern books.
- Method of the collection of the Data: Books, Thesis, Internet Materials, Journals etc. will be reviewed and related information will be collected and analyzed.

Study of kshipramarma

"MarayantiIti Marmaani". [9] According to Acharya Vagbhatta and Susruta, The part of body which on injury causes to death is called as marma. "Jeevasthanamtu MarmaSyaat". According to Raj Nighantu Marma is the seat for Jeeva. Marmas are the vital points in our body where structures i.e. Mamsa, Asthi, Snayu, Dhamani, Sira and Sandhi meet together. Although it is said that at a time there is simultaneously presence of all the structures, sometimes some of the structures are seen to be recessive. On the above criteria, the Marmas are placed in different groups and given some special names. Such as (according to Rachana) MamsaMarma (11), SiraMarma (41), SnayuMarma(27), AsthiMarma (08), SandhiMarma(20). Acc. to Parinama as Sadhya PranaharaMarma (19), Kalantara Pranahara Marma (33), Vishalghyna Marma(03), Vaikalyakara Marma (44), RujakaraMarma (08). Acc.to Shadanga – Shakhagata (44), Madhyaanga (26), Shirogreva(37).

The site of Kshipramarma is given in Sushruta samhita as

"TatrapaadsyaangusthaamanguliyormadhyeKshipra NaamMarma, TatraVidhasyaakshepaken maran". [9]

The word Kshipra means Quick. Literally it means 'fast' the marma which has fastest action or the marma which provides the fastest relief is called the KshipraMarma. In human body it is 04 in number 02 in upper limb and 02 in lower limb. It is situated in between the Great Toe and second Toe of the plantar side of the foot injury to it may leads to Convulsions leading to the death in due course of time. [10]

Clinical significance of kshipramarma

According to Sushruta samhita siravedha is the half of the therapeutic measures in Shalyatantra as Basti in Kayachikitsa. Half of the health hazards can be managed by siravedha. Siravedha is a significant therapeutic tool in the emergency management to achieve the better result. Siravedha is one of the methods of Raktamokshana, Acharya Sushruta had given detail description regarding the Raktamokshana in his Samhita because rakta is being chief causative factor in the disease manifestation.

According to Ayurveda shodhana chikista is the most beneficial treatment in present time. This shodhana chikista is 5 types, among these raktamokshna (siravedha) in one of them. According to shodhana therapy where the doshas are eliminated from its nearest route and in our Samhita we can find no. of diseases treated by siravedha in minimum duration. Like disease Vatashonita (Gout), Padadaha (Burning of Soles), Vatakantaka (Sprain of the Ankle) Padaharsh (tingling in the Soles), Chippa (Whitlow), Visarpa (Erysipelas), Vicharchika (one type of Skin Disease) etc. [11] Diseases are cured by the Siravedha just 02 angula (4cm) above the KshipraMarma by using VrihimukhaShastra.

Now-a-days more disease is treated by acupressure on compress of marma points. Pressure area of kshipra is 1st and 2nd metacarpal bone of hands. This are will occupy large web space in hand therefore press this and relief the disease like sickness of shoulder region, anterior triangle of neck, thyroid, dysphonia, dysphagia. Even in patients of excessive eroticism, activate kshipramarma of the feet this will absolutely lessens the libido. If excessive stimulation then damages the kshipramarma so press it according to the need. [12]

Classification of kshipramarma

Kshipramarma Situated in between the root of the thumb and index finger, it better felt when the finger is expanded having the size of Approx.01cm. This Marma is classified

- 1) According to Rachana SnayuMarma
- 2) According to Parinama KalantaraPranaharaMarma
- 3) According to Pramana ½ Anguli
- 4) According to Panchamahabhota Agni and Soumya
- 5) According to Shadanga-Shakhagata

As this marma comes under the classification of KalantaraPranaharaMarmabecause the predominance of Agni and JalaMahabhuta is present in this case where the

Agni acts faster and Jala acts slowly as a result the person may die within a month of Injury. This marma may leads to Akshepaka (Convulsions) and ultimately leads to death after some time.

Anatomical Structures Involved

According to modern the structures situated in kshipramarma are.

In Upper Limb – Radialisindicis artery, Princepspollicis artery (interval between the 1st dorsal interosseous & adductor muscle), Deep branch of radial artery that proceeds to form deep palmar arch, recurrent branch of median nerve which supplies the thenar muscles. Three proper palmer digital nerves of the lateral branch of the median nerve which supply the skin of both sides of the thumb & radial side of index finger, First lumbrical, 1st palmar interossei, Transverse and oblique head of adductor pollicise, Radial bursa, Superficial terminal branch of radial nerve & its dorsal digital branches. [13]

In lower limb – It is situated in between big toe (thumb) and second toe or index finger, on the dorsum of the foot. Following structures are considered, Deep peroneal nerve branch to great toe, combined tendon of abductor halluces and flexor halluces brevis muscles, bifurcation of first common digital nerve, DorsalPedis Artery, lumbricalis muscles, posterior tibial nerve, deep peroneal nerve branches to big toe, plantar arch and medial plantar artery, bifurcation of first dorsal metatarsal artery and meta tarso- phalangeal joint. [14]

DISCUSSION

Marmas are the vital points of our body and made from composition of Mamsa, sira, snayu, asthi, and sandhi. Based on the criteria, the Marmas are placed in different groups and given some special names. Based on prognosis of injury at the site of Marma, they are classified under five categories such as Sadyopranahara, Kalantarapranahara, Vishalyaghna, Vaikalyakara and Rujakara. Kshipramarma is the variety of snayumarma and according to Acharya Susruta location of kshipramarma is situated between thumb and index finger (i.e. angusta and anguli Madhya). It is a snayumarma, because, there are 20 intrinsic muscles in our hand and Sushruta might have classified most of them as Snayu, due to their small in size which led to the classification of Kshipra as a Snayumarma. Since thumb is the master finger, the first web space was given more importance compared to others.

Acharya Sushruta has also mentioned it is kalantarapranhara in nature. It is also mentioned that sometimes the marma can be sadyopranahara. In the Kshipramarma abhighata causes Akshepaka and maran. Akshepaka, is one of the Vatavyadhi mentioned by Acharya Sushruta and Vaghbhata. In the injury of Kshipramarma there will be severe blood loss which will lead to the Vataprakopa. Then the vayu entering into dhamani will cause severe spasm and convulsions.

Acharya Dalhana has interpreted that dhamani as nadi which possibly indicates the involvement of nervous system in Vyadhi. The convulsions and spasm caused by due to severe blood loss, is closely similar with the sign found in disease tetanus (lock jaw). The sign of 'Opisthotonos' mentioned in tetanus is strikingly similar to the akshepaka.

According to modern tetanus is caused by Clostridium tetani. The incubation period of Clostridium tetani is mentioned to be in between 4 to 14 days which strikingly matches with the fact that the person injured, in the Kalantarapranharamarma will die within 15-30 days.

If severe injury occurs to the dorsal metacarpal artery or palmar arch may leads to the excess blood loss or cyanosis. Injury of this marma, the death takes place sadya (sudden) or within 7 days.

CONCLUSION

After going through the above discussion we can highlight the following things, the hand and leg are the two main body parts that makes man an efficient being on earth. During Samhita kala, when human life was not mechanized and man had to do all his daily chores like cutting grass, wood etc. with his hand & feet. During this type of work thumb has important role. Therefore to safe our hand and Thumb is the more important.

Therefore to know about the kshipramarma and it is importance while treating a Patient. Also we can conclude that the exact location of KshipraMarma is,

- 1) Kshipramarma location found in between the Angushtha (thumb) and Anguli (index finger), as per Sushrutasamhita.
- 2) Space in between root of the thumb and the index finger can be co-related with KshipraMarma.
- 3) Based on the structural classification, it is of Snayumarma and ½ Angula in dimension.
- 4) Abhighata of Kshipramarma results in Marana due to Akshepaka.

REFERENCES

- 1. Shusrutsamhita Sharirsthana Sanskrit text with Ayurvedrahasyadeepikahindi commentary, by B.G.Ghanekar, meharchand publication, 2007; 190.
- 2. Shusrutsamhita Sharirsthana Sanskrit text with Ayurvedrahasyadeepikahindi commentary, by B.G.Ghanekar, meharchand publication, 2007; 183.
- 3. K. R. Srikantha Murthy, AshtangHridyam (Sharirasthana), Chapter 4, Citation no. 38, Reprint, Chowkhamba Press, 2003; 427.
- 4. RadakantDevVarada Prasad, editor, Shabdakalpadruma, Volume 2, Reprint 1987, Naga Publishers, Page no. 234.
- 5. Monier Williams Sanskrit English Dictionary, Reprint, Motila; lBawarisdass, 2005; 1294.

www.wjpmr.com Vol 7, Issue 4, 2021. ISO 9001:2015 Certified Journal 122

- 6. SusrutaYadavjiTrikamji Acharya, SusrutaSanhita with NibandhaSangraha of Dalhanacharya, Reprint, 8th edition, Chaukhambha Orientalia, 2008; 372.
- 7. Harisadasivasastri Paradakara Bhisagacarya, AshtangaHrudayam with Sarvangasundara of Arunadatta & Ayurvedarasayana of Hemadri, Reprint, Chaukhambha Orientalia, 2005; 532.
- 8. SushrutaSamhita of Sushruta with English text by. K.R.Srikanthamurty, Vol.I, 3rd edition, Choukhambha Orientalia, 2007.
- SushrutaSamhita of Sushruta Dalhanatika Nibhandha Sanghraha Commentary, by Vaidya YadavjiTrikamji Acharya, choukhambha Subharati Prakashana, Varanasi.
- ShusrutsamhitaSharirsthana, Sanskrit text with Ayurvedrahasyadeepikahindi commentary, by B.G.Ghanekar, meharchand publication, 2007; 190.
- 11. SushrutSamhitaSharirsthana, Sanskrit text with Ayurvedrahasyadeepikahindi commentary, by B.G.Ghanekar, meharchand publication, 2007; 190.
- 12. www.remote control of kshipramarma, by dr. Sunil kumarjoshi (MS).
- 13. Grays Anatomy, by StandaringSusan, 39th Edition, Barry Berkowitz (Chief Editor), London, UK, Elsevier Churchill Livingstone, British Library, 2005; 881-883.
- 14. B. D. Chaurasia, Human Anatomy, Vol. 2, eighth edition, CBC Publication, Delhi.

www.wjpmr.com Vol 7, Issue 4, 2021. ISO 9001:2015 Certified Journal 123