



A REVIEW ON RUJAKAR MARMA W.S.R. OF GULPHA MARMA.

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ABSTRACT :-

Ayurveda is a life science and has holistic approach to the health science. 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 very important topic of Rachana sharir which is described in Ayurvedic texts. Acharya Sushruta says while highlighting the importance of Marmaghata, the person whose head, scalp, trunk are severely injured and, arms, feet and hands are completely amputated or else, the other parts of the body are studded with injuries are likely to survive if the Marma are saved. Acharya Sushruta has described Marma as precautionary measures during surgical procedures. According to him these are liable to death or deformity causing complications if get disturbed. Hence the surgical practitioners should know about these vital points. Acharya Sushruta has explained very well, there are 107 Marma in a human body and according to regional classification he described 44 Shakhagata Marma as - 22 Urdhva Shakhagata and 22 Adho-shakhagata. Here our attempt is to clarify the concept of Rujakara Marma with special reference of ankle joint as Gulpha Marma, and establish similarities between ankle injuries and signs of Rujakar Marma.

KEY WORDS:-

Ayurveda, Marma, Rujakara marma, Ankle Joint.

INTRODUCTION :-

Marma is very unique and important topic of Ayurvedic sharir. These Marma are composed by the combination of five elements which are Mamsa, Sira, Snayu, Asthi and Sandhi. Any injury to these points may lead to severe pain, disability, loss of function, loss of sensation and death may also occur. References of Marma are found in various ayurvedic literatures. First of all, it is described in the Rigveda where warriors in the war zone have been instructed to protect their Marma. Marma are not just superficial landmarks on the surface of the body but these are very important anatomical structures which are deeply seated. There are 107 Marma in a human body as described by acharya Charak, acharya Sushruta and others.

Acharya Sushruta has described Marma sharir in detail in the sixth chapter of Sharirsthana which is "PratyekMarma Nirdeshshariradhyay". All the 107 Marma are located at different places in all over the body. These 107 Marma are divided on the basis of the outcome of the trauma inflicted upon these points. These are Sadhyapranhara, Kalantarapranhara, Vishalyaghna, Vaikalyakar and Rujakar Marma. An injury to the Sadya Pranahara Marma causes death within 7 days, an injury to the Kalantara

Pranahara Marma causes death within 2 weeks to 1 month. If there is an injury to the Vishalyaghna Marma, it does not cause death until the foreign body /weapon is inside the Marma. If the foreign body /weapon is removed violently, then the removal causes death of the patient. If the weapon remains in the Marma location till it falls at its own after Paka of the wound, then the patient survives. Vaikalyakar Marma are those points that cause deformity when injured. An injury to the Rujakar Marma causes very severe pain, causes swelling, stiffness restricts movements of the joints.

RUJAKARA MARMA :-

Rujakara Marma having properties of vavyu and Agni and both of these two mahabhuta causes pain. These points where any injury causes pain and this is due to minimum tissue damage. It is one among the prognostic classification and eight in numbers as Manibandha Marma - 02, Gulpha Marma - 02, and Kurchashira Marma - 04;(both in upper and lower extremities).

GULFA MARMA :-

Gulpha Marma is a sandhi Marma which is described as Rujakara Marma, and it is located just under the ankle joint. Susruth acharya says Gulpha Marma at the junction of the jangha and pada, in both of the lower extremities. In Astangasamgraha, Gulpha Marma is the joint between Pada and Jangha. In Astangahridaya, the ankle joint is the joint between the Jangha and Charana. The meaning of word Jangha is leg, between knee and the ankle. Regionally Gulpha Marma is a Shaka Marma, which dimensionally is a Dwyangulapramana and it is two in number. Based upon anatomical classification, it is included in Sandhi Marma. Prognostically, Gulpha Marma is grouped under Rujakara Marma in which Agni & Vayu Mahabhuta is predominant. Any injury at this site feels as it full of thorns, even after healing there is shortening of the limb, lameness, decrease in strength, restriction of movements, and atrophy of muscles and swelling of the joint.

COMPONANTS OF ANKLE JOINT (GULPHA SANDHI) :-

- Transverse Tarsal Joint,
- Talocalcaneonavicular Joint,
- Subtalar Joint,
- Talonavicular Ligament,
- Bifurcate Ligament,
- Plantar Calcaneonavicular Ligament,
- Calcaneocuboid Joint,
- Plantar Calcaneocuboid Ligament,
- Long Plantar Ligament,

COMMON CASES OF THE ANKLE JOINT :-

Most of the cases shows history of a twisting injury to the ankle followed by pain and swelling. Often the patient is able to describe exactly the way the ankle got twisted. On examination, the ankle is found to be swollen. Swelling and tenderness may be localised to the area of injury (ligament). If there is a fracture, crepitus may be noticed. The ankle may be lying deformed (abducted or adducted), with or without rotation).

Sometimes, the nature of injury is such that perfect functions cannot be restored. The following complications may occur:

1. Stiffness of the ankle,
2. Osteoarthritis.

SPRAINED ANKLE : It is the term used for ligament injuries of the ankle. Commonly, it is an inversion injury, and the lateral collateral ligament is sprained.

Diagnosis: The patient gives history of a twisting injury to the ankle followed by pain and swelling over the injured ligament. Weight bearing gives rise to excruciating pain. In cases with complete tears, patient gives a history of feeling of 'something tearing' at the time of the injury. There may be swelling and tenderness localised to the site of the torn ligament. If a torn ligament is subjected to stress by the following manoeuvres, the patient experiences severe pain.

DISCUSSION:-

Marma shastra was recapitulated for the benefit of patients who undergo Shalya chikitsa. The surgeons are advised not to make a mess of any Marma or rather, protect even the neighborhood Marma points from sharp or blunt instruments and also the kshara or Agni for the successful accomplishment of surgery. If these Marma points are disturbed by any of the instruments, the patient probably dies or may be deformed even if he survives. The symptoms if aghat over GulphaMarma are Ruja, Stabdhapadata and Khanjata, Vatakantaka, Ankle sprain, Fracture, Soccer injuries, Ankle impingement, Flexor, Footballers ankle, Sinus tarsi syndrome & Tarsal tunnel syndrome. Anatomically the ankle joint is very complex and any injury or trauma over this joint may cause severe pain i.e. - Sprain. Joint Stiffness, Fracture and other injuries causes very severe pain which indicate that ankle joint is or can be correlate with Rujakara Marma.

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