



Concept of urdhvashakhaghat kshipra marma and its applied aspect

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Abstract: Ayurveda is one of the most reliable and complete ancient medical science which have proved for more than 5000 years. Even though the modern science is changing from time -to- time ayurveda has maintained its special place till death. Firm unions of Mamsa, Sira, Snayu, Asthi, Sandhi and Dhamani are called as marma; which naturally and specifically form the seats of life (Vital parts). Detail knowledge of marma is important from surgical point view; surgical procedures like Agnikarma, Ksharkarma and Shastrakarma are used as part of surgery. While conducting these surgical procedures, the knowledge of marma sthana is required. With proper knowledge of marma sthana we may perform the procedures without any complications. Kshipra marma is one of shakhagat marma, located on both the upper and lower extremities. It is a snayu marma based on the dominating structural element. It is a kalantarapranhara marma when categorising on the basis of traumatic effect. Trauma to kshipra marma leads to marana due to akshepaka. The knowledge of marma is one such concept used all over the world for prevention and cure of diseases since centuries. It holds its own prime importance in shalyatantra. This paper gives knowledge about anatomical location, structural entity and applied aspect of urdhvashakhaghat kshipra Marma.

Keywords : marma, kshipra marma, urdhvashakhaghat

Introduction: Marmas are important anatomical landmarks having surgical importance. Marma Sharir half of Shalya Tantra (Knowledge of Marma is said to be half of all the knowledge of Surgical Science)¹. Even these persons who escape death from injury to the Marmas definitely suffer from one or the other kind of deformity. Thus it is clear that the injury to a marma is bound to leave a bad impact either in the form of death, functional failure, damage to tissue or organ or deformity or severe pain. This is a part of Ayurveda Sharir Shastra. Such a description is not seen in any of the Medical

System. Acharya mentioned the total numbers of Marmas are 107. Acharya Sushruta classified marma depending upon structures as Mamsa marma, Sira marma, Snayu marma, Asthi marma and Sandhi marma. Acharya Vagbhata added one or more classification as Dhamani marma respectively. Acharya Sushruta has classified these Marmas according to the Shadanga distribution for the purpose of easy understanding their locations, like Sakthi Gata (limbs), Vaksha (thoracic), Udar (abdominal), Prishthagata (back) and Urdhavajatrugata (above the clavicular level). Depending upon traumatic effects and prognosis various types of Marma mentioned in Ayurveda as" Sadhyapranahar (Sudden death), Kalantarpranhar (Death within short period), Vaikalyakar (Deformity due to trauma), Vishalyaghna (Person lives until removal of foreign body), Rujakar (continuous pain due to trauma). Sadhyapranhar Marma are 19, Kalantar Pranhar Marma are 33, Vishalyaghna Marma are 3, Vaikalyakar Marma are 44 and Rujakar Marma are 8 in number.

MARMA-

Definition-: According to sushrut Marma (fatal spots) are confluence of muscles, vein, ligaments, bones and joints; in these place Prana (life) resides specially by nature; hence when fatal spots are injured, they produce their respective effects.

KSHIPRA MARMA-

Meaning- Quick action, spontaneously result giving point.

Number- Kshipra Marmas are 4 in number, 2 in the hands (1 in each hand) and 2 in the foot (1 in each foot)²

1 each in the right and left hand = 2

1 each in the right and left foot = 2

Location- Site of Kshipra Marma is given in Sushruta samhita as-

“Tatra paadsyaangusthaamanguliyormadhye Kshipram Marma”³

Kshipra marma Situated in between the root of the great toe and finger, it better felt when the finger is expanded having the size of Approx.01cm.Kshipra marma is located both in upper and lower limbs.

Exact location of Kshipra Marma in the limbs⁴

Upper Limb	Lower limb
Kshipra Marma is located exactly between the thumb and the fingers, i.e. in between the thumb and index finger on both hands.	Kshipra Marma is located exactly between the big toe and fingers, i.e. in between the big toe and first toe of both the feet.

CLASSIFICATION OF KSHIPRA MARMA- 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-Shakhagat

EFFECT OF INJURY-

Injury to the Kshipra Marma leads to Aakshepana (convulsions) leading to marana (death) ⁵.

AIM: To study about urdhvashakhaghat kshipra Marma regarding its location, structural entity and applied aspect.

MATERIALS & METHODS: The Literary material related to Kshipra marma has been collected from different parts of all Ayurvedic samhita, research papers, journals, previous dissertations and authentic internet sources. The structural anatomical composition of Kshipra marma was thoroughly reviewed, co-related and analyzed with the knowledge of modern and contemporary science.

DISCUSSION: From the 27 Snayu Marma, Kshipra is one among them, their anatomical structures were analysed through conceptual, cadaveric study. The shape and position, as per mentioned by Acharayas in our classical texts; we relate them with the structures found on the site of Marma through cadaveric study, to evaluate the symptoms of the Marma after the trauma, it is more important to understand the structural anatomy related to Marma.

The site of urdhvashakhaghat Kshipra marma is given in Sushruta samhita as– it is situated between thumb and index finger⁶. It is of half Angula Pramana and kalantar pranahar marma. The nature of Kalantar Pranahara marma is saumyagneya, i.e. having qualities of both fire and water, therefore, although due to fire like nature, an injury to these marma kills the affected person quickly, but because of the cold and stable nature of soma (water), the occurrence of death is delayed. Though kshipra marma is kalantara sometimes it can result in immediate death⁷.

According to modern the structures situated in kshipra marma 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 branches⁸.

It is a snayu marma because our hands have 20 internal muscles and Sushruta probably categorized most of them as snayu due to their small size which led Kshipra to be classified as snayu marma. Akshepaka and maran are the result of abhighata in Kshipramarma. Acharya Sushruta and Vagbhata mention Akshepaka as one of the Vatavyadhis. As a result of Kshipramarma's injury, there will be considerable loss of blood, causing Vataprakopa. Then, as the vayu enters dhamani, violent convulsions and convulsions occur.

Acharya Dalhana translated this dhamani as nadi, suggesting that Vyadhi may have involved the nervous system. Convulsions and convulsions caused by significant blood loss are very similar to the symptom of tetanus (locked jaw). Akshepaka is extremely similar to the "Opisthotonos" sign described in tetanus. According to this concept, tetanus is transmitted through Clostridium tetani. An individual injured in Kalantarapranharamarma dies between 15 and 30 days, impressively matching the incubation period of Clostridium tetani, which is said to be between 4 and 14 days.

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.

Conclusion:

After going through the above discussion we can highlight the following things:

1. It is a snayu marma because our hands have 20 internal muscles and Sushruta probably categorized most of them as snayu due to their small size which led Kshipra to be classified as snayu marma
2. Excessive blood loss happens if there an injury occurs to the first dorsal metacarpal artery and median plantar artery. There is a lack of oxygen due to excessive blood loss. To compensate for which the patient moves the body with restlessness and breathes rapidly with great force and dies from convulsions at last.
3. To evaluate the effects of Kshipra Marma therapy in various conditions, large-scale randomised active controlled trials are required

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