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An Eagle Eye View On Sandhi Marma Shareera With Special Reference To Kurpara Marma

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Abstract: Marma Shareera is the specialized branch of Ayurveda which is a unique contribution of ayurveda to the medical/ traditional science. Marma are the specific anatomical points where if injury occurs there will be deformity or death of the person. It is also a branch which deals with the sites over the body which are to be preserved during surgery, thereby it denotes the surgical incision sites and agnikarma, not to be touched. Our classics explain as "the knowledge of the position of Marma and Marmabhighata (injuries to vital points) symptoms is essential before performing any surgical treatment". As of references Marmas are the sites where "Parana" Resides. The Marma are classified as mamsa, sira, snayu, asthi, sandhi marmas, among these we are concentrating on the Sandhi marmas with special importance with the Kurpara Marma. Sandhi plays a major role in the locomotion. Acharyas define it as "Asthi sanyoga sthanam" (place where bones meet). Kurpara marma is a type of sandhi marma and also vaikalyakara marma which is denoted at the site of elbow joint, its Pramana is 3 anguli. Present day we encounter with most of the RTAs, sports injuries, injuries during household work where we see there will be trauma to the kurpara marma which cause vaikalya (deformity) and causes pain in the patient or the player.

Key Words - Marma, Sandhi Marma, Kuprapa Marma, Vaikalyakara Marma, Sandhi.

I. Introduction

Ayurveda is the science which is older but still proves and solves every problem in a specified and scientific manner. It gives both the holistic as well as scientific approach to every situation. Here Marma Vigyana is specialized and unique contribution of Ayurveda to the world. Earlier the marma Vigyana was observed as a war science where Acharyas have told the technique to kill or to protect once life in a war field. But it mostly deals with the protection of the vital sites as well as it gives precautionary sites to be protected during any kind of Sastrakarmas, Ksharakarma and agnikarma,like procedures to the Vaidya (physician) . from some of the references of traditional medicines the treatment of the disorders can be done through marma Chikitsa through acupressure and acupuncture.

Marma sthana are the vital spots of the body where Prana resides. If any injury happens to these spots, it may leads to death. The knowledge of Marma sthana was used in war field to destroy the enemy. So that it was known as the War science and we can find many more references of Marma Vignyana in Vedas, Upanishads, Puranas and Samhitas.

All the Acharyas have accepted 107 Marma sthanas, Acharya Charaka and Kashyapa have given prime importance to the three marmas and said as Mahamarmas, that are Shira, Hridaya and Basti.

Acharya Sushruta given much importance to Marma Sthana, he explained detailed description of each and individual marma in a complete dedicated chapter called *Prathyeka marma nirdesha shareera*. Here Acharya explains the marma types, numbers, locations, symptoms and complications in detail [Shareera sthana 6th chapter.]¹

Acharya Sharangadhara termed Marma as the Jeevadhara that is Jeevatma resides in it.²

Marma Definition

Marma (Vital spots) is comprised of Mamsa, Sira, Snayu, Asthi, Sandhi along with Prana, and that's why injury to these leads to respective Consequences.

That which leads to death or which gives misery to individual similar to death when injured is called Marma.³

Marma are that part of the body which exhibits a peculiar sensation or unusual throbbing and causing pain on pressure. 4 Marma are so called because they cause death when they are injured and they are meeting place of Mamsa, Asthi, Snayu, Dhamani, Sira, Sandhi and life entirely resides in them.⁵

PRANA:

Agni, Soma, Vayu, Satwa, Rajah, Tamah, Bhuthatma and Panchendriyas are called as Pranas⁶

In persons generally Soma(Kapha), Maruta(Vaayu), Tejas (Pitta), and Rajas, Satva, and Tamas along with bhutatma all of these resides in the fatal spots (Marmas), that is why they do not survive if injury takes place on Marma. 40 These are said to be Prana according to Sushruta.

SANDHI MARMA

Sandhi is the place where there is union of any anga. There will be predominance of kapha in the sandhis.

Acharya sushruta opines that Sandhi is the union of any structure. (mamsa, sira, asthi, snayu, dhamani), but in the context of sandhi shareera we consider it as the union of asthi. Acharya Charaka opines that the union of asthi as Sandhi.

Total number of sandhi have been told as 210, where it is classified in to Chala/ Chestavanta (Movable) and Achala/Sthira(Immovable) sandhi. One more classification which include 8 divisions that are:

Sl. No.	Name of the sandhi	Modern correlation	Examples
	Kora Sandhi	Hinge joint	Anguli, Manibandha, Kurpara
	Ulukhala Sandhi	Ball and socket	Kaksha, Vankshana,dashana
	Samudga Sandhi	Amphiarthrotic	Amsapeeta, guda ,bhaga , nitamba
	Pratara Sandhi	Arthrodiasis	Greeva, prusta vamsha
	Tunnasevani Sandhi	Sutural joints	Siras and katikapala
	Vayasathunda	Temperomandibular joints	Hanu
	Mandala Sandhi	Ring like joint	Netra , hrudaya , kanta
	Shankhavarta Sandhi	Conchshell	Shrotra , sringataka

There is no difference of opinion between Sushruta and Vagbhata about the number of sandhi marma. Both have mentioned 20 and they are Janu, Kurpara, Seemanta, Adhipati, Gulpha, Manibandha, Kukundara, Avartha, Krukatika ⁷.

If the sandhi marma gets injured the person feels as though the injury site is covered with thorns. There will be shortening of the limb after healing. It may also lead to marked decrease in mobility and strength. It may also cause emaciation, lameness and swelling in the joints⁸.

Among 20 Marmas the Kurpara marmas are 2 in number which are present in the Urdhva shakha (upper limb) and it resembles the Janu marma in the Adho Shakha (Lower limb). The viddha lakshana of the sandhi marma are Khanjata, which cause the deformity of the joints.

Among the 20 Sandhi marma the Janu(2), Kurpara(2), Kukundara(2), Avartha(2), Krukatika(2) are considered as the Vaikalyakara Marma.

SL.NO	According To Sushruta	No. Of Marma	According To Vagbhata	No. Of Marma
1	Janu	2	Janu	2
2	Kurpara	2	Kurpara	2
3	Seemanta	5	Seemanta	5
4	Adhipati	1	Adhipati	1
5	Gulpha	2	Gulpha	2
6	Manibandha	2	Manibandha	2
7	Kukundara	2	Kukundara	2
8	Avartha	2	Avartha	2
9	Krukatika	2	Krukatika	2
	Total	20	Total	20

KURPARA MARMA SHAREERA AND VIDDHA LAKSHANA

- ➤ The word Kurpara means Elbow.⁹
- The word Kurpara means Kaphoni which means Elbow.
- Kurpara is the junction between Prapani and Prabahu.
- ➤ Kurpara means Kaphoni which is also called Kuhuni. 10
- > There are two Kurpara Sandhi Marma's are present and their pramana is 2 angula, which are Vaikalyakara in nature.
- kurpara marma is one among the marma present in bahu.11
- The Kurpara, janu, simanta...... are sandhi marma. It is one among the vaikalyakara marma.
- ➤ Kurpara and Janu marma pramana is 3 Angula12
- ➤ Kurpara Marma resembles the Janu Marma on injury it will leads to Kunitva.13

KUNIHI

- > The word Kunihi means Kubjitakaraha.
- The word Kunihi means Sankuchita Bahu Madhya.
- ➤ The word Kunitvam means Bahu Pani Anguli Kubjata.
- ➤ Kunihi means Vikruta Karaha.¹⁴

REGIONAL ANATOMY – ELBOW JOINT

Structures which passes through the elbow joint: 15

In front:

Brachialis, tendon of biceps, median nerve, medial cutaneous nerve of forearm, lateral cutaneous nerve of forearm, and brachial artery, median cubital vein, receives tributary of median antebrachial vein.

Behind:

Triceps and anconeus, posterior cutaneous of forearm, medial & lateral cutaneous nerve of forearm.

Medially:

Common origin of superficial flexor muscles of forearm, flexor carpi ulnaris and ulnar nerve, basilic vein.

Laterally:

Common origin of superficial extensor muscles of forearm, supinator, extensor carpi radialis brevis, radial nerve and its superficial and deep branches, cephalic vein.

Discussion:

MARMA:

The definition of the Marma specify that, the union of the Mamsa, Sira, Snayu, Asthi and Sandhi where the prana resides.

LOCATION:

As per the available reference from Samhita, the exact location of KurparaSandhi Marma is mentioned as junction between Hasta and Bahu. So the junction of the hasta and bahu is to be considered as elbow joint.

On the basis of tender points near the elbow joint, we can locate maximum points:

- 1) "When we give pressure over the lateral aspect of the elbow on flexor aspect just one angula below the elbow crease that is the first tender point"
- 2) "Second point on the medial aspect of the elbow on flexor aspect just one angula below the elbow crease"

So, on the basis of this we come to the conclusion of the description of Pramana of KurparaMarma as the 3 angula on the anterior aspect at elbow, because of the intensity of pain is severe in the anterior point and the description given by acharya that the area near the Marma Sthana will also have the symptoms but with less intensity.

STRUCTURES OBSERVED ON THESE POINTS

The lateral spot:

Structures	Components of Marma	
The biceps brachii tendon	Mamsa	
Som part of Brachioradialis	Mamsa	
Radial artery	Sira	
Radial nerve	Sira	
Cephalic vein	Sira	
Radial collateral ligament	Snayu	
Annular ligament	Snayu	
Radial head	Asthi	
Capitulum	Asthi	
Elbow joint	Sandhi	

The medial spot:

Structures	Components of Marma
Bicipital aponeurosis	Mamsa
Brachialis	Mamsa
Pronator teres	Mamsa
Median nerve	Sira
Basilic vein	Sira
Medial cutaneous nerve	Sira
Ulnar collateral ligament	Snayu
Trochlear notch	Asthi
Elbow joint	Sandhi

The two appropriate spots are identified, by observing the structures at the specified spots we can say that the injury to these spots can cause the Kunitva or the Khanjata. That is if any trauma to these underlying structures occurs, there will be reduction of the length of the upper limbwhere arm and forearm angle is reduced.

We can also specify that by any kind of disorder like Fracture, Ligament tear, Muscle injury, Compression over the nerves or the vessels lead to reduced range of movements and emaciation/ reduction of strength of the forearm and hand.

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