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Conceptual Study of *Marma* and Pain Management in *Avabahuka* by *Marma Chikitsa*

Dr. Hemendra Kumar Verma[1], Dr. Shyoram Sharma[2], Prof. Mahendra Sharma[3]
[1]PG Scholar (Second Year), [2] Associate Profrssor, [3]Professor & H.O.D., P.G. Department of Rachana Sharir, PGIA, Jodhpur, Rajasthan (India)

Abstract: ***Ayurveda, which focuses on the prevention and treatment of illnesses, offers a variety of strategies for leading healthy lives. The notions of the anatomical and physiological aspects of the body were offered by Ayurveda. One of the topics of Ayurveda is Marma, which is regarded as one of the locations in the body where Prana exists. According to anatomical placements and other structures around them, 107 Marma points were listed in various Ayurvedic scriptures. Marmas points in the body are mostly made of groupings of muscles, ligaments, arteries, tendons, and bones, among other things. Since Marma points are connected to Tridosha, Bhutatma, and Triguna, any trauma or damage to the Marma might result in excruciating manifestations that occasionally have the potential to be fatal. The pioneer of Indian surgery, Acharya Sushruta, was the first to recognize the value of the Marmas in terms of anatomical knowledge and surgical procedures for everyday practice and dangers in life. Currently, Marma Chikitsa is quite well-liked for its all-natural, non-invasive method of therapy. Marma treatment is the manipulation of subtle energy (prana) in the body with the goal of promoting the healing process. This involves stimulating the body's meridian points to clear blockages, promoting both physical and psychological strength and relaxation. Avabahuka is a disorder that affects the shoulder joint and is quite similar to frozen shoulder. The major role of Avabahuka, a vata vyadhi and Amsa sandhi, is in sickness. Amsa Marma and Kakshadhara Marma are chosen for the Marma Chikitsa for this reason.***
Keywords: Marma, Prana, Pain, Avabahuka

I. INTRODUCTION

Marma are the body's critical points. These are the numbers 107. The patriarch of Indian surgery, *Acharya Sushruta*, recognised the anatomical and surgical relevance of the *Marma*sin day-to-day practise and risks of life. These are m*Amsa*, sira, snayu, asthi, and sandhi combined.[1]

These are the seats of the Pranas, according to *Acharya Sushruta*. Any harm to these results in death or incapacity.[2] As a result, understanding *Marma* is critical in treatment. *Marma* stimulation stimulates the pranas, resulting in a healthy body and mind since these are the locations where pranas exist. *Marma Chikitsa* is currently quite popular due to its natural and non-invasive therapeutic method.

The objective of *Marma* treatment is to manipulate the body's subtle energy (prana) in order to aid in the healing process. This involves stimulating *Marma* points on the body, which clears obstructions from the *Marma* points and provides physical and psychological strength and calm.

The frozen shoulder can also be treated with *Marma* treatment. Between 2 and 5 percent of the general population are thought to have frozen shoulder at some point in their lifetime.[3] It could also be connected to *Avabahuka*. *Avabahuka* under Vatavyadhi has been detailed by Acharya Sushruta. In the following stage, avabhahuka, discomfort and limited shoulder motions are manifested in *Amsa*shosha, the precursor stage caused by vata vitiation.Vatagets became stuck at the base of the shoulders, restricting a number of channels and causing the arm to become immobile.[4]

II. AIMS AND OBJECTIVES

To evaluating the effectiveness of *Marma* treatment in *Avabahuka*

III. MATERIALS AND METHODS

It was an analysis of concepts. The information was gathered from works of traditional Ayurvedic literature, contemporary writings, and earlier study papers.

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IV. MARMA

Marma derives from "*Mru*," a Sanskrit word that meaning "to kill." [5] *Soma, Maruta, Teja, Sattwa, Rajas, Tamas,* and *Buddha* live in these areas.[6] Any damage to these areas might result in death or deformity. So, the surgeon should be familiar with the *Marma*sthana. There are 107 *Marma* points, which are divided into groups based on how they affect a person's vitality. One of the distinctive and significant subjects covered in *Ayurveda* is *Marma*. It has a significant impact on surgery. To make them easier to grasp, *Acharya Sushruta* divided these *Marma*s into *Shadanga* distribution categories. These include the *Prusthagata Marma*s, Bahu *Marma*s, *Urdhwajatrugata Marma*s,[7] *Udara-Uraso Marma*s, and *Sakthigata Marma*s. *Marma* are further divided into the following categories: *Mamsa*, *Sira*, *Snayu*, *Asthi*, and *Sandhi Marma*.[8] They are classified as *Sadyapranahara, Kaalantara_Pranahara, Vaikalyakara, Vishalyaghna,* and *Rujakara Marma*s based on the prognosis.[9]

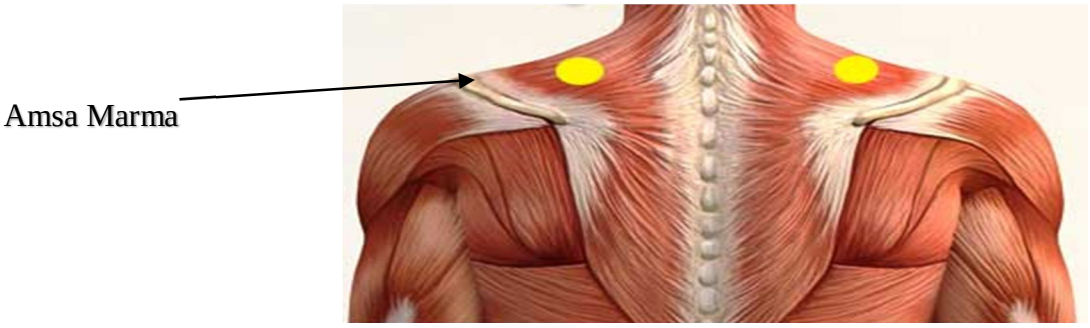
V. CLASSIFICATION OF *MARMA*

Marmas are classified on following bases-

1)	On the basis of *Rachana*	
a)	*Mamsa Marma* -	11
b)	*Sira Marma*-	41
c)	*Snayu Marma*-	27
d)	*Asthi Marma*-	8
e)	*Sandhi Marma*-	20
2)	On the basis of *Shadang-Sharir*	
a)	Exitremities-	4
b)	Thorax-	9
c)	Abdomen-	3
d)	Supraclavicular Region -	37
3)	On the basis of *Parinam*	
a)	*Sadhyapranhara Marma*-	19
b)	*Kalantarpranhara Marma*-	33
c)	*Vaikalyakar Marma*-	44
d)	*Vaishalyaghana Marma*-	3
e)	*Rujakar Marma*-	8

VI. AMSA MARMA

According to Acharya Sushruta, *Amsa Marma*i, which connects *Amsa*pitha and Skandha, is located between the Bahumurdha (arm's point) and *Greeva* (neck).[10] There are two of them. It is positioned on each side between the *Greeva* (neck) and the baahu-shira, which connect the *Amsa*pitha and Skandha, according to Acharya Vagbhatt. Injury to this *Marma* causes the limb to become stiff and lose its ability to move.[11] It consists of all the soft tissues, such as muscles, ligaments, tendons, etc., that contribute to the development of the shoulder joint. An injury to these components may result in the muscles and ligaments rupturing, dislocating the joint, and impairing shoulder joint function. Acharya Vagbhatt claims that *Amsa Marma* injuries result in the loss of upper limb function.[12]



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Amsa Marma
(Type Of Snayu Marma & Vaikalyakara Marma[13]

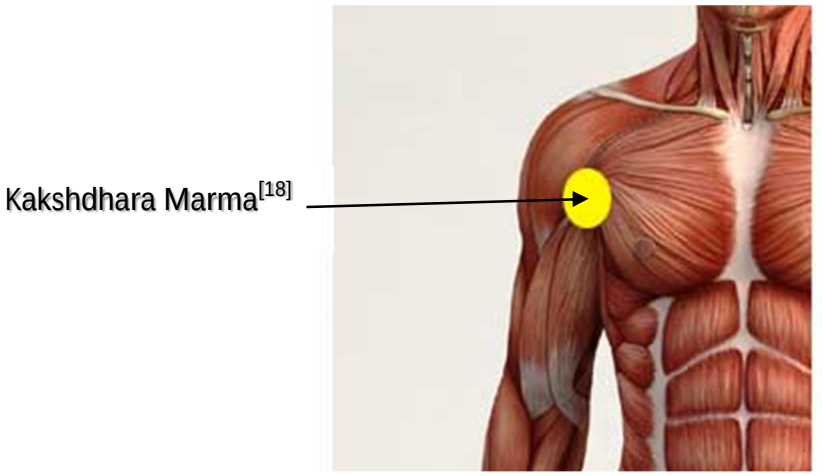
Basis of Classification	Types
Structural *(Rachananusara*)	*Snayu Marma*
Regional (*Shadanganusara*)	*Pristhagata Marma*
Prognosic*(Parinamanusara*)	*Vaikalyakara Marma*
Numerical (*Sankhyanusara*)	2
Acc. To measurement (*Parimanusara*)	½*Angula*

The Anatomical structure located at the site of *Amsa Marma*[14,15]
Biceps brachii, Trapezius, Pectoralis minor, Coracobrachialis
Coracoclavicular, Acromioclavicular, Coracoacromial, Coracohumeral, Transverse ligaments
Subscapular Artery & Subscapular vein
Scapula Bone, clavicle Bone, Head of Heumrus
Phrenic nerve, 3rd and 4thCervical nerves

VII. KAKSHDHARA MARMA

Kakshara Marma is located in between the *vaksha*and *kaksha*. Any injury to it induces the same symptons as seen in *vitapa- Marma* Injury. [16,17]

Basis of Classification	Types
Structural *(Rachananusara*)	*Snayu Marma*
Regional (*Shadanganusara*)	*Bahu Marma*
Prognosic*(Parinamanusara*)	*Vaikalyakara Marma*
Numerical (*Sankhyanusara*)	2
Acc. To measurement (*Parimanusara*)	*1 Angula*



The Anatomical Structure located at the site of *Kakshdhara Marma*[19]
Pectoralis Minor & Pectoralis Major, Intercostal Muscles
Axillary Artery & Axillary Vein
Brachial plexus

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A. Avabahuka

Kakshara *Marma* Sushruta defines *Avabahuka* as occurring when vitiated vatadosha enters the veins of the *Amsa Sandhi* (shoulder joint), restricting mobility of the shoulder joint and causing arm muscular atrophy.[20] Joints have some role in every bodily movement. The shoulder joint has the widest range of motion, and when it is injured, everyday activities are limited and the agony is intolerable. Therefore, it is crucial to cure it. Ayurveda describes several methods for treating it.

The term "*Avabahuka*" in the current text is equivalent to "frozen shoulder" or "adhesive capsulitis."

VIII. PAIN

An uncomfortable sensation is pain. Pain is described by the Ayurvedic terms *Vedana, Dukha, Pida, Sula, Ruk, Ruja, Bheda, Sadana,* and *Avasada.* The *Susruta Samhita* claims that *Vata* is the primary cause of pain.[21]

A. Pain Management and Marma Chikitsa

There is no specific, universal medication prescribed in Ayurveda for any type of pain. The causal factor or *Doshika* preponderance that caused the pain determines how it should be managed. There are a number of analgesics and anti-inflammatory drugs used in conventional (allopathic) pain management, but there is still no one medicine that can treat all types of pain. Every person has a unique method of reacting to pain.

So, the goal of *Marma* treatment is to provide immediate pain relief. The goals of pain management are to reduce suffering, reduce unease, and enhance quality of life. In terms of *Marma Chikitsa,* the Ayurvedic technique is the only one that can satisfy this. [22]

Due to the atrophy of the joint and compression of the numerous channels, this is where in *Avabahuka*vayu which is placed at *Amsa*. As a result, the therapies *Amsa Marma* and *Kakshadhara Marma* aid in the management of pain in *Avabahuka.*

B. Technique of Marma Chikitsa[23]-

A simple and effective method of recovering vital vitality is *Marma* treatment.

1) *Posture*-Posture is crucial for good self-*Marma* treatment practise. For practitioners, a seated position is most practical. Keep your neck and spine in a straight line whether standing or sitting, without becoming rigid or leaning in any one way.

It comprises of the following steps-

a) Complete physical relaxation
b) Practice deep breathing
c) Whole-body perception
d) The perception of psychic centres
e) Understanding of *Marma* points
f) Gently press the *Marma* points with your thumb and fingertips.

The actual treatment is applying pressure to the *Marma* points with the thumb or fingers.

2) *Pressure*- depend upon the nature of *Marma*
3) *Stimulation Time*- 0.8 sec/stimuli
4) *Repetition*- 15 to 18 times in single sitting.

The patient was seated with its spine straight, and the doctor was standing behind it.

Amsa Marma is located between the *Bahumurdha* (arm's tip) and *Greeva* (neck), therefore pressure should be applied there in accordance with the technique described above.

Between the V*aksha* and the *Kaksha* is where the *Kakshadhara Marma* is located; pressure should be applied here using the technique described above.

a) *Inclusion Criteria*

Patient diagnosed as Frozen shoulder
Individuals of both sexes
Age group- 20-60 years

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b) Exclusion Criteria

As a complication of systemic illnesses, frozen shoulder was reported.
Patients having a history of an upper limb fracture or other abnormality
Patient with additional spinal conditions
Pregnant ladies and nursing mothers

IX. DISCUSSION

A key component of ayurvedic medicine is called *Marma Chikitsa,* in which pressure or stimulation is applied to certain *Marma* points to encourage the flow of Prana (life force energy). Multiple illnesses are treated with *Marma Chikitsa*. It is also beneficial for easing joint, bone, muscular, and nerve discomfort. The Vata's area of expertise is the regulation of all types of bodily feelings. However, when Vata becomes vitiated, all of these activities get disrupted, and vitiated Vata's excessive activity can result in discomfort. For its analgesic action, *Marma*s should be activated in any form of pain. Working on the neuroendocrine system is *Marma Chikitsa*. Actually, the intended effect is caused by sending a nerve impulse to the brain as a result of pressure or stimulation. It is recommended to apply pressure or stimulation to the *Amsa Marma* and *Kakshdhara Marma* sites.This treatment aids in reducing shoulder joint discomfort, enhancing range of motion, and relaxing the body.

The interpretation of the study's findings suggests that *Marma Chikitsa,* particularly through the application of *Amsa Marma* and *Kakshadhara Marma,* is an effective and safe alternative and complementary therapy for pain management in *Avabahuka.* The study's results are consistent with previous research on *Marma Chikitsa* and pain management, emphasizing the importance of a holistic approach to pain management.

X. CONCLUSION

In conclusion, the present study provides valuable insights into the mode of action of *Amsa Marma* and *Kakshadhara Marma* in pain management for *Avabahuka* through *Marma Chikitsa.* The study has established the importance of a holistic approach to pain management, which takes into account the physical, emotional, and spiritual aspects of the individual.

The effectiveness of *Marma Chikitsa* has been demonstrated in the study, particularly through the application of *Amsa Marma* and *Kakshadhara Marma.* By stimulating these *Marma* points, *Marma Chikitsa* restores the flow of vital energy and promotes healing at the cellular level, leading to significant pain relief.

The findings of this study have significant implications for the use of *Marma Chikitsa* as a safe and effective alternative and complementary therapy for pain management in *Avabahuka.* However, further research is needed to establish the scientific validity of *Marma Chikitsa* and to explore its full potential in pain management.

Overall, the present study emphasizes the potential of *Marma Chikitsa* in pain management, particularly through the application of *Amsa Marma* and *Kakshadhara Marma*. The study adds to the existing body of knowledge on *Marma Chikitsa* and highlights its importance in the management of *Avabahuka.*

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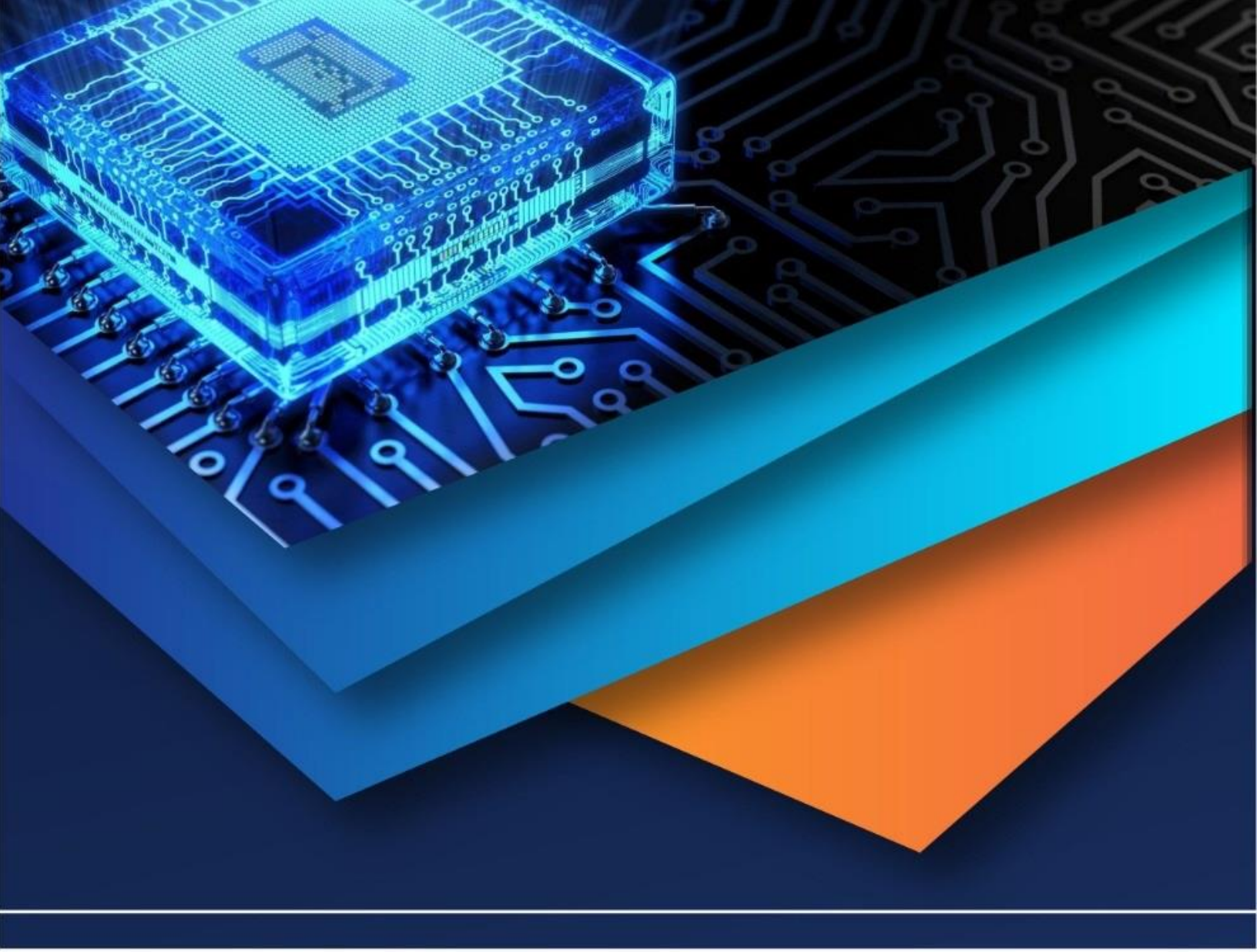
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