



iJRASET

International Journal For Research in
Applied Science and Engineering Technology



INTERNATIONAL JOURNAL FOR RESEARCH

IN APPLIED SCIENCE & ENGINEERING TECHNOLOGY

Volume: 13 **Issue:** XI **Month of publication:** November 2025

DOI: <https://doi.org/10.22214/ijraset.2025.75312>

www.ijraset.com

Call: ☎ 08813907089

E-mail ID: ijraset@gmail.com

Dhamani-Marma

Dr. Piyushlata Maheshwari

(MD, PhD), Professor & Head, Department of Rachana Sharir, Poornayu Ayurveda Chikitsalaya evam Anusandhan Vidyapeeth,
Jabalpur MP

Abstract: *Marma Vigyan is one of the specialties of Ayurveda. The development of standards of treatment for the acutely injured has been closely related to several significant medical discoveries. Organized care of the acutely injured, though comparatively recent innovations has significantly improved survival rates. It aligns closely with concept of marma, which emphasizes the critical importance of vital points in the body. The anatomy of Shushrut is near to present anatomy. In Sharirsthana, acharya Shushrut have asserted all the anatomical structures precisely with their functions. The “Marmasharir” is the basic fundamental theory of Ayurveda, well described in Sharir sthana six. Acharya Vagbhatt has described Marma in Ashtang Hridaya sharir sthan four “Marma vibhag sharir”. Marma are the significant anatomical points of the body where any cut, concussion, blow or injury can lead to death or deformity.*

Keywords: *Marma, Dhamani, Trauma, sharir, Sushrut, Vagbhatta*

I. INTRODUCTION

Marma is a precious contribution of our ancient sages to Ayurveda. Marma Vigyan is one of the specialties of Ayurveda. Exquisite delineation of marma is found in Shushruta samhita and Ashtang Hridaya. They are the significant anatomical points of the body where any cut, concussion, blow or injury can lead to death or deformity. The term “**Marma**” is derived from the word “**Mramanin**” which means the place of life and junction. “**Maryanti iti mramani**” is the definition of marma given by acharya Dalhana i.e. the regions or points of the body where any type of injury can cause death. Elucidating it acharya Vagbhatta says “**Api cha marankaritvanmarma**”. Having the same meaning, that the sites of the body, where any trauma can lead to death are “marma”. They are christened as vital parts by Ghanekarji while Deshpandeji called them the vital weak spots.

II. DISCUSSION

All the erudites of Ayurveda computed 107 marmas in the body. They are divided in five classes by acharya Shushrut namely:

- 1) Mansa marma
- 2) Shira marma
- 3) Snayu marma
- 4) Asthi marma
- 5) Sandhi marma

He further alleged that none other than above written marmas are there in our body.

Acharya Shushrut has confirmed their numbers as follows

- a) Mansa marma- 11
- b) Shira marma- 41
- c) Snayu marma- 27
- d) Asthi marma- 08
- e) Sandhi marma- 20

Acharya Vagbhatt has described Marma in Ashtanga Hridaya sharir sthan four **Marma Vibhag Sharir**. In Ashtang Hridaya sharir sthana 4/37, it is interpreted that the places where unusual pulsation of sira and dhamani is found and exceptional pain occurs on pressing the muscles and bone are marma sthana. Marma are the sites of confluence of muscles, bones, ligaments, arteries, veins and joints. Therefore, vitality specially lies in these regions. Acharya Vagbhatt also accepted marmas as 107 in number, but he had divided them in six parts namely:

- a. Mansa marma- 10
- b. Asthi marma- 8

- c. Snayu marma- 23
- d. Dhamani marma- 9
- e. Sira marma- 37
- f. Sandhi marma-20

Nobody except Vagbhatt has described **Dhamani Marma**. He alleged that injury to these marma leads to severe haemorrhage and in turn unconsciousness, then death. When **Dhamani marma** are injured the blood which is frothy and warm flows out with a sound, and the person becomes unconscious. They are enumerated as

- Guda-1
- Apsthamba-2
- Vidhur-2
- Shrangatak- 4

Guda is Mamsa marma; Vidhura are Snayu marma; Shragataka is Sira marma, together with Apastambha. Charaka has given the basic definition of Dhamani as anything that pulsates. Sushruta has mentioned twenty four Dhamanis that originate from Nabhi. Ten of them are Urdhwagami, ten are Adhogami, and four are Tiryakgami. However, while mentioning Marmas, he has not mentioned Dhamani Marma. Vagbhata, was the first to classify Dhamani Marma.

Guda marma: The *Guda marma* is the organ of excretion, continuous before with large intestine. It is counted in the marmas of Madhya Sharir i.e. of Udar Marma. It is computed as *Mansa marma* by Shushrutacharya. It is characterized as *Sadhyahpranharmarma*. The injury on this marma leads to immediate death of the person due to hypovolaemic shock resulting from trauma due to hemorrhage. It can be correlated to the region in anal canal, where anastomosis of branches of superior and inferior rectal artery occurs. It is a vital organ of body and can be counted in dhamani marma.

Apsthamba marma : They are two in number, situated in thorax region between collar bone and nipple. They are enumerated in *Kalantar pranahar marma*. Acharya Sushrut called them as *Shiramarma*. Apsthambha are vatavahanadis departing to both lungs, taking vayu to both of them. Trauma to them can cause, leaking of vayu in koshtha leading to cough and asthma and finally to death. But according to acharya Vagbhatt, injury to Apsthamba causes bleeding in lung koshtha and that's the reason why patient dies. *Apastambha marma abhighaat* leads to death from accumulation of blood inside the chest, cough, and dyspnea. Bronchi, vagus nerve, common carotid, subclavian artery and vein, all of them lie in the location of Apsthamba marma. And injury to any of these produces serious complications and death. Hemothorax and Pneumothorax in pleural cavity caused by a penetrating chest wound or rupture of the lung can cause death here..

Vidhur marma: They are two in number, located in the groove behind the ears. They are asserted as *Snayu marma* by Sushrutacharya, and computed as *Vaikalyakar marma*. Trauma to them causes deafness. By discussing the modern anatomy, this marma can be correlated to posterior Auricular artery but injury to artery can't cause deafness. Trauma is coming from outer side and the important neural structures dealing with function of hearing are located at deeper level, therefore trauma involving some blood vessel which is a branch of posterior auricular artery can only cause deafness. The presence of Stylomastoid artery a branch of posterior auricular artery in this position confirms that the view of *acharya Vagbhatt* regarding *dhamani marma* and has no controversy. Nerve structure at the level of the site of *vidhur marma* existing in the form of facial nerve is having a very little significance and the deafness is very rare with this. Therefore the value of Stylomastoid artery become significant and it is responsible for developing complication of deafness due to trauma.

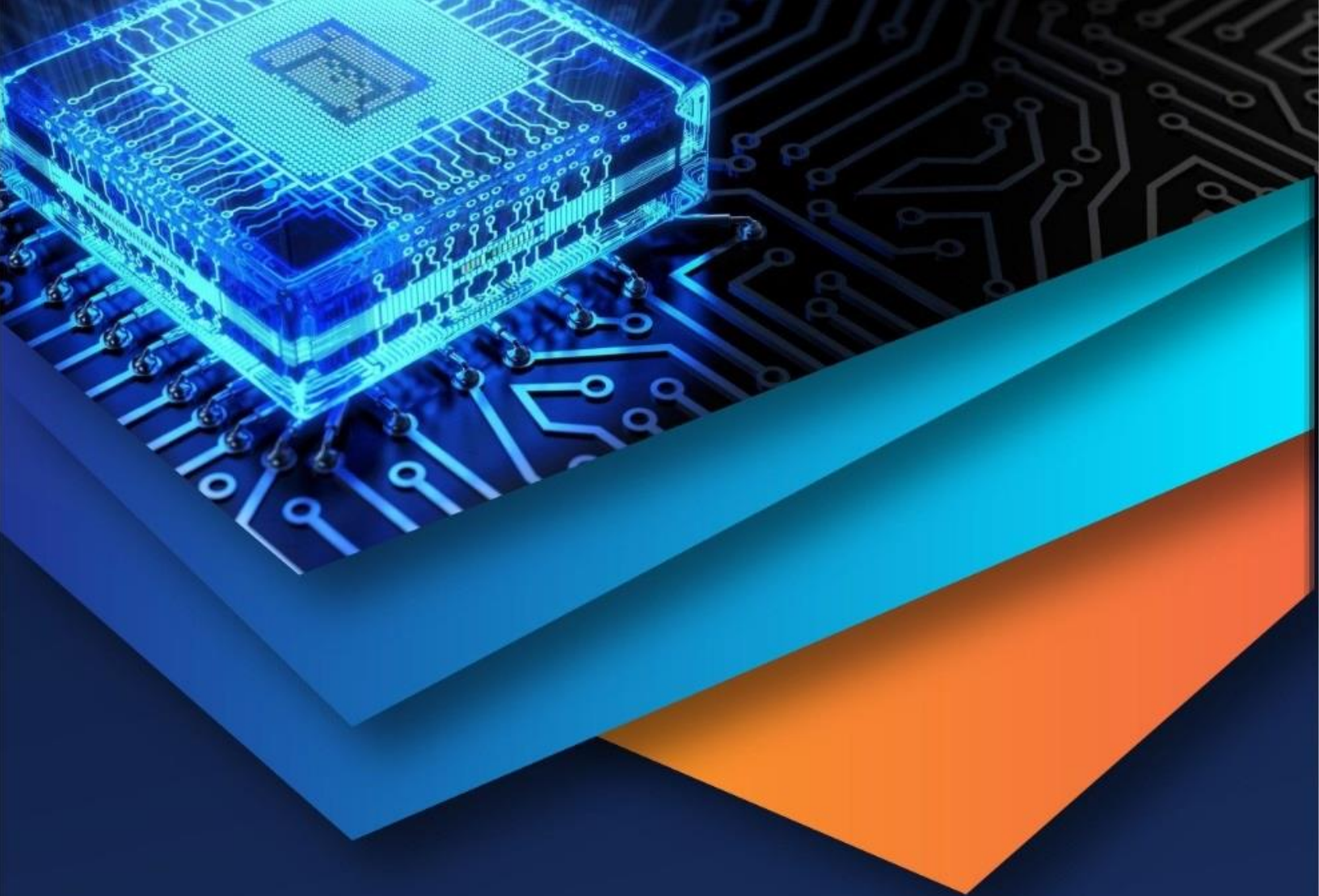
Shrangatak marma: They are four in number and enumerated in *Sadhyapranharmarma*. Acharya Shushruta included them in *Sira marma*. He further says that *Shrangatak* are coupling of nasal, vocal, labyrinthine, glossal and optic arterial conjunctures. The symptoms of this marma injury relates to the features seen in external or internal injury of cavernous sinus inviting many life threatening conditions such as intracranial hemorrhage, thrombosis, internal carotid artery fistula, and strokes. *Shringatak marma* is situated within the confluence of *sira* nourishing the *Ghrana* (nose), *Shrota* (ear), *Akshi* (eye), and *Jiwha* (tongue). The location of this *marma* is difficult to understand as the exact landmark is not mentioned like other *marma*. Any injury to this part causes death. Acharya Vagbhatt had said that they are the union of openings of srotas of eyes, nose, ears and tongue in the palate. Colloquying the modern aspect, they can be correlated with cavernous sinuses and intercavernous sinuses. They are union of veins like sigmoid sinus, ophthalmic veins. Nerves like trochlear, trigeminal, facial and vestibulocochlear lie near it. So it is a vital point and any injury to it can cause immediate death due to severe hemorrhage. But in my view, its venous part and so should be termed as **Sira marma**.

III. CONCLUSION

Concluding it, I must say that these are indeed vital anatomical points. Acharya Shushrut is more precise and imminent to modern aspect, as he was a surgeon and had complete practical knowledge. Newer techniques of investigations and management have changed the scenario of acutely injured patients but the anatomical importance of the structure and tissues like marma still holds the importance. That is, *Dhamani marma* by Acharya Vagbhatta is having its own importance in structural and functional aspect of human body. **Dhamani** is very significant structure which supplies nutrients, hormones, and *Prana* (oxygen) factor to the whole body. Trauma to a **dhamani** causes severe loss of blood leading to a state of anoxia, tissue necrosis, condition of shock and ultimately death. This is the fact that signifies and accepts the value of a **Dhamani**. So, it can be concluded that in Guda marma, beneath structures are arterial plexus. In Vidhura marma the structure beneath is Stylomastoid artery. In Shringatak marma the structure beneath is cavernous sinuses which are venous plexuses. In Apstambha the structure beneath is bronchial artery and brochus. In fact, marmas are having the anatomical configuration in mamsa, Sira, Snayu, Asthi and Sandhi terminology. Dhamani can be differentiated in another type of structure. Acharya Shushrut is very precise to anatomy but Dhamani marma is having its own importance.

REFERENCES

- [1] Shushrut sharir sthana 6, with Nibandhsangraha commentary of Shri Dalhanacharya by Narayan Ramacharya Kavyatirtha, Chaukhamba Orientalia Varanasi, 7th edition 2002
- [2] Ashtang Hrdayam, Proff. K R Shrikant Murty, Vol II, Chaukhamba Orientalia Varanasi, 5th edition, 2004
- [3] Anatomical Consideration of Dhamani Marma with Special Reference to Vidhur Marma in Ayurveda by Akanksha Bhatt, Associate Professor, Department of Rachna Sharir, Doon Institute of Medical Science, Dehradun, Uttarakhand, India. International Research Journal of Ayurveda & Yoga Vol. 7(3), pp. 33-36, March, 2024



10.22214/IJRASET



45.98



IMPACT FACTOR:
7.129



IMPACT FACTOR:
7.429



INTERNATIONAL JOURNAL FOR RESEARCH

IN APPLIED SCIENCE & ENGINEERING TECHNOLOGY

Call : 08813907089  (24*7 Support on Whatsapp)