“A review of Adhoshakhagat Kshipra Marma and its clinical significance.”
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Abstract: There are 107 vital points spread over the body called as MARMA. All the marmas are seat of prana. Owing to this close association of chetana, injury to marma will produce severe sufferings. KSHIPRA marma is one of the Shakhagat marma situated on both upper and lower extremities and are four in number. It is situated between the great toe and the second toe of the foot with a dimension of half Angula. Based on predominant structural entity it is a Snayu marma. While classifying on the basis of traumatic effect it is a Kalantara pranahara marma. Trauma to this marma causes death due to convulsions. Understanding marma is very important in clinical practice of Ayurveda. Even the prognosis of disease depends upon the extent of involvement of marma points. This review will give a complete summary of KSHIPRA marma regarding its location, structural entity and clinical application.

KEY WORDS: Marma, Kshipra, Snayu, Kalantara pranahara

INTRODUCTION:
Marma has been described by Acharya Sushrut from the point of view related to injury whereas Acharya Charak has described only three marma which deal with the diseases related to them. Marma were described in ancient times when there was no emergency treatment available. There are certain areas which are explained only in Ayurveda. Marma sharir is one of such chapters. Acharya Sushruta has given the importance of knowledge of marma without which a surgeon cannot perform a skillful surgery.1 (su.sha.6 /44) Marma are the vital points where there is an inseparable union of mamsa, sira, snayu, asthi and sandhi. Here the prana (element of life) resides naturally.2 (su.sha.6 /22) Hence these vital points should be protected from the injuries. Ayurveda has explained 107 marma and are classified on the basis of structure, location, post traumatic effect and dimensions.3 (su.sha.6 /3-8) Kshipra marma are kalantar pranahara marma, four in number and located in both upper and lower extremities. Depending upon structural entity these are snayu marma. Injury to this marma causes death due to convulsions.4 (su.sha.6 /24) This topic is selected to study the location and relevant structures present at the site of Kshipra marma and related clinical significance in detail.

MATERIALS AND METHODS:
1. Literature regarding marmas from sushrut samhita, charak samhita.
2. Modern literature from B.D.C Human Anatomy, Gray’s Anatomy.
3. Review articles, journals etc.

**REVIEW OF LITERATURE:**
*Marma vigyan* is a unique feature of *Ayurveda*. Acharya Sushruta has given a detailed description of marmas which gives a gross access to locate the marma with dimensions and underlying structure.

- According to *Rachana* (Anatomy) –
  1. Mamsa
  2. Sira
  3. Snayu
  4. Asthi
  5. Sandhi

- According to the post traumatic effects:
  1. *Sadyo pranhara marma* – Causing immediate death
  2. *Kalanatara pranhara* – Causes death after some time
  3. *Vaikalyakara marma* – Gives rise to deformity
  4. *Rujakar marma* – Causes extreme pain
  5. *Vishalyaghna marma* – Causes death if the foreign body is removed, but if it stays inside person can live

*Acharya Charak* has described these marmas as a physician. Hence there is a description of diseases and not symptoms caused by injury.\(^5\)

- *Tri Marma* –
  1. *Hriday* (Heart)
  2. *Basti* (Urinary bladder)
  3. *Shira* (Head)

*Kshipra* takes it from the root word ‘kship’ and it has synonyms ‘Sheeghra’ and ‘Twarit’ which meant as to throw, cast, send, dispatch.\(^6\) The *Kshipra marma* is situated in *Adhoshakha*. It is explained as *Snayu marma* according to structure and *Kalantar pranhar marma* according to prognosis of injury. It is total four in number present in both the extremities. It is located in between *Angushtha* (1\(^{st}\) metatarsal bone) and *Anguli* (2\(^{nd}\) metacarpal bone). Injury to *Kshipra marma* leads to *Maranam* (Death) due to *Akshepaka* (convulsions).

### Table 1: Description of *kshipra marma*

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Name</th>
<th>Adhoshakhatag Kshipra marma</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Number</td>
<td>2</td>
</tr>
<tr>
<td>2.</td>
<td>Type – According to</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Structure</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Prognosis of injury</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dimension</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Snayu marma</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Kakantara pranhar marma</td>
<td></td>
</tr>
<tr>
<td></td>
<td>½ Anguli</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Site</td>
<td>In between the 1(^{st}) and 2(^{nd}) metatarsal bone</td>
</tr>
<tr>
<td>4.</td>
<td>Anatomical structures involved</td>
<td>Extensor digitorum tendon, Medial plantar nerve, Flexor hallucis longus and brevis, Adductor hallucis, plantar aponeurosis, 1(^{st}) plantar lumbrical, Deep plantar arch, Deep peroneal nerve, Branch of dorsalis pedis artery.(^7)</td>
</tr>
<tr>
<td>5.</td>
<td>Signs if injured</td>
<td>Injury may cause impairment of the function of adduction and flexion of great toe. Injury to the artery may cause severe bleeding, plantar <em>apponeurosis haematoma</em> and septic toxemia.(^8)</td>
</tr>
</tbody>
</table>
According to the location as described by Acharya Sushruta, *Kshipra marma* can be located in first inter metatarsal space. In this space two important anatomical structures are seen, first is Dorsal Metatarsal artery and a branch of Deep Peroneal nerve which runs towards the big toe. In case of injury to this *marma* the death takes place due to convulsions. The convulsions are produced in the conditions like bleeding or in tetanus bacilli infection. The immediate death generally happens in severe bleeding but in case of tetanus it takes place within few days. First metatarsal artery which is a branch of dorsalis pedis artery can be taken as an anatomical structure which represents *Kshipra marma*.\[^9\]

**CLINICAL SIGNIFICANCE OF KSHIPRA MARMA:**

Siravedha is considered as half of the therapeutic measures in *shalya tantra*, as Basti in *Kayachikitsa*.\[^10\] Acharya Sushruta has given the diseases, which are not relieved quickly by Snehana, lepanadi measures, in such condition Siravedha is an emergency management to achieve the better results.\[^11\] Siravedha is one of the method of Raktamokshan. Sushrutacharya has given the detailed description of *siravedha* in chapter eight of *sharir sthan* including appropriate time, method, indications and contra-indications of *Siravedha*. *Siravedha* is used to treat diseases of skin, tumors, swelling, diseases caused due to vitiated blood.\[^12\]

In diseases such as *Padadaha* (burning of soles), *Padaharsha* (tingling in the soles), *Chippa* (whitlow), *Visarpa* (erysipelas), *Vataisonit* (gout), *Vatakantaka* (sprain of the ankle), *Vicharchika* (a skin disease) and *Padadari* (fissures of sole) *Siravedha* is done two angula (4cm) above the *Kshipra marma* using Vrihimukha *Shastra*.\[^13\] Usually *Marma sthanas* are contraindicated for *siravedha*. Regarding is concerned gives meaning of quick due to its immediate effect.

*Siravedha* causes breakdown of *avarodh* (obstruction) which helps in normal function of *Vata*. According to *ayurveda* pain is supposed to be due to vitiation of *Vata Dosha*. *Siravedha* relieves obstruction, causes *Vatanuloman* and hence providing relief in symptoms like pain and stiffness. *Siravedha* also leads to detoxification of blood thus helpful in skin disorders. *Siravedha* is also used to treat certain systemic disorders along with internal medicines.

**DISCUSSION:**

The word *Kshipra* literally means “fast” that is the *marma* which has fastest action or the *marma* which provides the fastest relief is called as *Kshipra marma*. It is a *Kalantara pranhara marma* which result in gradual loss of life, after lapse of some time. Injury to *Kshipra marma* causes death due to convulsions. *Siravedha* is a significant therapeutic tool. *Siravedha* is considered as half of the therapeutic measure in *Shalyatantra*. Half of the health hazards can be managed by *Siravedha* as *Rakta* is being chief causative factor in the manifestation of diseases. The concept of *Shodhana* therapy in *Ayurveda* in concerned, always *Doshas* should be removed from nearest routes. *Siravedha* is also one of the *Shodhana* therapies, so it is recommended to remove the vitiated blood from nearest route of *roga adhisthana*. Sites of the *Siravedha* dealt by Acharya Susruta is only with the aim of that *dushit Rakta* should be expelled out from *samepapatha marga*. Hence he might have been told particular sites for *Siravedha* in particular diseased condition. Bloodletting
from particular site is effective in resolving the pathology of diseased condition and beneficial in neutralizing physiological mechanisms by various changes in the body. According to modern science Siravedha acts by stimulation of large sensory fibers of peripheral tactile receptors, decreases pain intensity of local or other body parts, causing local lateral inhibition. Siravedha clears the obstruction in the blood vessels, regulation of circulation, reduces the load of pathogens circulating in blood and lets out Vata. Siravedha is capable of providing relief in many chronic lifestyle disorders. Thus, Marmas are important anatomical landmarks. The knowledge of marmas gives us an idea and comprehensive knowledge of vital areas of body. The surgical interventions needed great consideration of anatomical perspective, any misconception regarding anatomical framework may lead to failure of medical procedure. Present article mention anatomical perspective of Kshipra marma with its clinical significance to explore medical consideration of Marmas.

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