



STUDY OF LOHITAKSH MARMA WITH ITS MODERN CORRELATION

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ABSTRACT The word *Marma* and its application exist from the *Vedic* period in India⁹. *Marma* is important concept of *Ayurved*, there are total 107 *Marma* present in body. Injury to this part results either death or some kind of deformity. The detail description regarding this *Marma* has been found in Ancient text as *Sushrut Samhita*, *Charak Samhita* and *Astang Samhita*. According to *Maharshi Sushruta Lohitaksh Marma* is present in both the limb. at the lower limb it presents in *Urumoola* (root of thigh) situated above *Urvi Marma* and below the *vankshana sandhi*^{1,3}. And in upper limb it is present in *Baahumoola*. It is *Vaikalyaka Marma* in *Parinaam* and *Sira Marma* in nature. An injury to this *Marma* leads to *Lohita Kshaya*, *Marana*, and *Pakshaghata*¹. Therefore this study has been carried out to analyse *Lohitaksh Marma* structurally and its traumatic effect.

KEYWORDS : *Lohitaksh Marma*, Femoral Triangle, Femoral vessels, Axillary vessels.

INTRODUCTION-

Marmas are certain vital point spread all over the surface of the human body. These are the places where the *Prana* is situated. *Marma* the word comes from Sanskrit origin word '*Mri*' meaning death and the Sanskrit phrase '*Maryante Iti Marmani*' also means death. Damage to few kind of *marma* may not kill a person, but if causes intense pain simulating death, or make the man disabled and the part hurt may not work properly. *maharshi Charak* is the first person documented *marma* and mentioned *Marma* in *Samhita*. *Charak* and *Sushrut* have contributed their original concept. Where *Vagbhata* has produced his revised version of *Charaka* and *Sushruta*.

Marma is the seat of *Praan*. According to *maharshi Sushruta Marma* are constituted by confluence of *Mamsa*, *Sira*, *Snayu*, *Aasthi* and *Sandhi*. There are 107 *marma* present in body these are of five type structurally i.e. (1) *mamsa marma*- *marma* situated in the flesh or muscle. (2) *sira marma*- (in vessels) (3) *Snayu Marma*- located in ligament and muscle. (4) *Asthi Marma*- in bone and (5) *Sandhi Marma*- located in joints. Particular name of it is given because that particular structure, is present in more quantity or is more than other structure. The number of each kind present in the various areas. *Mamsa marma* are 11. *Sira marma* are 41. *Snayu marma* are 27. *Asthi marma* are 8. *Sandhi marma* are 20. *Acharya sushrut* and *vagbhata* have mentioned various type of *marma* depending upon their position, constitution, number, dimension, and prognosis of injury to it. the *marma* are classified into five group according to their prognosis after damage they are (1) *Sadya Pranahara*- fatal immediately or within a week after injury. (2) *Kalantara Pranahara*- fatal after some time. (3) *vishalyaghana Marma*- fatal if the foreign body is extracted immediately and can live if the foreign body falls out itself after sometime. (4) *Vaikalyakara*- disabling the person. (5) *Rujakara Marma*- individual gets intense pain after injury. Depending upon *Lohitaksh Marma* is present in both the limb at *Urumoola*. It is *Vaikalyakar Marma* in *Parinaam*. And *Sira Marma* in nature and injury to this *Marma* leads to *Lohita Kshaya*, *Marana* And *Pakshaghata*.

AIM AND OBJECTIVES

- To Identify the structure present in the *Lohitaksha Marma*.
- To Study the Traumatological effect of *Lohitaksha Marma* resulted *Marana* (death) due to blood loss, and (paralysis) *Pakshaghata*

MATERIAL AND METHODS

- Text of *Ayurveda*, Different *Samhitas*, Journals which one is related to the subject is reviewed and correlated, modern Anatomical study was carried out with help of modern literature. Dissection was carried out in dissection hall, at first marking are done on cadaver regarding the position of *Lohitaksh Marma* in lower limb and upper limb. As per the Guidance given in *Cunningham Manual of Practical Anatomy*. And *Textbook of B. D. Chaurasia*.

DISCUSSION

Lohitaksh Marma is classified into various categories.

- Vaikalyakara Marma*.
- Shakha Gata Marma*.
- Pramana- 1/2 Angula Pramaan*.

Situated at the *Urumoola* (root of thigh) above the *Urvi Marma* and below the hip joint. Dr. Ghanekar has mentioned femoral triangle in reference to this *Marma*. Femoral triangle is bounded laterally by the medial border of *Sartorius*; and medially by the medial border of the adductor longus. Its base is formed by the inguinal ligament. The apex, which is directed downward. Is formed by the point where the medial and lateral boundaries meet. The apex is continuous, below with the adductor canal. The roof of the femoral triangle is formed by: (1) the skin. (2) the superficial fascia containing the superficial inguinal lymph node, the femoral branch of the genitofemoral nerve, branches of the ilioinguinal nerve, superficial branch of the femoral artery with accompanying vein, and the upper part of the great saphenous vein. (3) the deep fascia, with the saphenous opening and the cribriform fascia. The floor of the triangle is formed medially by the adductor longus and pectineus, and laterally by the iliacus and psoas major.

CONTENT OF THE FEMORAL TRIANGLE

Femoral vessels- Transverse the Triangle from base to apex. The vein is medial to artery at the base but behind it at the apex.

Femoral nerve- It lies lateral to artery.

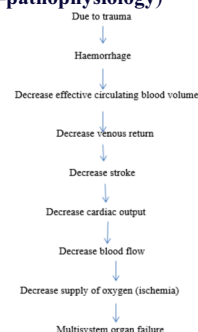
Injury to this leads to- *Lohitakshaya*, *Pakshaghata*, *Marana*.

1) *Lohitakshaya*- due to injury to major vessel present in femoral triangle. Which is femoral artery, femoral vein.

2) *Pakshaghata*- injury to femoral artery and vein leads to severe haemorrhage, decrease blood supply causes atrophy of lower limb muscle. Atrophy causes paralysis in affected limb and known as *Ekgangavata*.

3) *Marana*- if haemorrhage is too severe and not managed in proper time causes severe fluid loss in body leads to hypovolemic shock and finally death.

(Hypovolemic shock-pathophysiology)



In the upper limb the exact position of *Lohitaksh Marma* is present at the *Baahmoola* above the *Ani Marma* and below the shoulder joint. In the region of center of the Armpit or axillary fossa through which axillary artery passes. Anatomical structure passes through this *Marma* are axillary artery, axillary vein, median vein, Ulnar vein, Radial artery. Trauma to axillary artery causes severe haemorrhage. And *Pakshaghata* may be due to ischemia, where there is a chances of paralysis of that particular limb, due to haemorrhage.

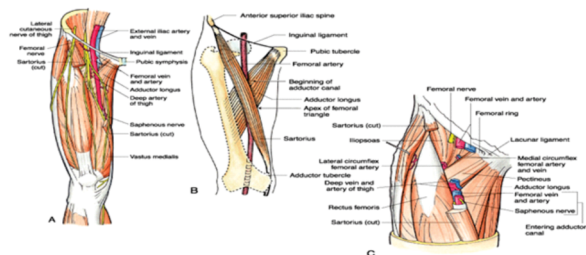


FIGURE 6.11 Relations of the femoral triangle. Anterior view. A. Dissection of the femoral triangle containing muscles, the femoral nerve, and vessels. B. Adductor (Subarticular) canal. C. Deep dissection showing the floor of the femoral triangle.

CONCLUSION

On the basis of above discussion, the structure involve in *Lohitaksh Marma* which leads to the *Lohita kshaya*, *Pakshaghata*, *marana* is identified as,

- In upper limb- Axillary vessels.
- In lower limb - Femoral vessels.

Because injury to these vessel cause Severe haemorrhage. Decrease blood supply cause atrophy of muscle. Atrophy cause paralysis in affected limb and known as *Ekangvata*. If haemorrhage is too severe and not manage in proper time causes severe fluid loss in body leads to hypovolemic shock and finally Death.

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