

# MARMACHIKITSA in JANU SANDHIGATA VATA – A Case Study

Vd. Pravin Mane<sup>1</sup>, Vd. Nita Kedar<sup>2</sup>, Vd. S. Y. Raut<sup>3</sup>

PG Scholar, Department of *Shalyatantra*, Government Ayurved College and Hospital, Nagpur, India

Professor &HOD, Department of *Shalyatantra*, Government Ayurved College and Hospital, Nagpur, India

Dean, Department of *Shalyatantra*, Government Ayurved College and Hospital, Nagpur, India

**Abstract:** *The principle aim of Ayurveda is to maintain and promote physical and mental health as well as ensure the prevention of diseases. Ayurveda represents a holistic and simple form of healing approach. Sandhigatavata is vata dominating disorder which creates inflammatory as well as degenerative changes in joints. The most affected joint is janu sandhi (knee joint). Marma therapy is one which gives instant relief from pain by balancing local vata and kapha dosha without any untoward effects. In the current study the main aim is to study the efficacy of marma chikitsain janusandhigatavata.*

**Keywords:** Janu sandhigatavata, Marma therapy, Osteoarthritis.

## 1. Introduction

Osteoarthritis of knee joint is one of the most common and disabling musculoskeletal disorder, which is extremely common in the elderly population<sup>[1-4]</sup>. The symptoms of this disease include joint pain, joint stiffness, instability and loss of function<sup>[3]</sup>.

*Sandhigatavata* is described under *vatavyadhi* in *samhitas*. The condition is more painful when mobile joints like *janusandhi* of the body are involved in *sandhigatavata*. The condition that closely resembles osteoarthritis of knee joint is *Janu sandhigatavata*<sup>[3-6]</sup>. *Sandhigatavata* is a type of *vatavyadhi* and a disease of *sandhi* with symptoms *Sandhi shool*, *sandhi shotha*, *Akunchana Prasaranapravrittisavedana*, *Sandhisphutana* and the later stage *Hanti-Sandhigata*. When *Vata* involves *Janu Sandhi* it is called *Janu Sandhigata Vata*<sup>[5-6]</sup>.

In the present era, the therapeutic interventions normally used for its treatment include the use of physiotherapy, weight control, different types of analgesics, intra articular steroid injection, knee replacement therapy etc<sup>[4]</sup>.

However, side effect free, long term management of this disease is still challenge<sup>[3-4]</sup>. Hence, there is a definite need to search for other safe and effective therapies for management of *Janu Sandhigata Vata*.

*Marmachikitsa* is the ayurvedic modality that can be useful in the management of joint disorders like *Janu Sandhigata Vata*<sup>[8-9]</sup>. *Janu Sandhi* is a type of *Vaikalyakaramarma* and hence any injury to this part may lead to disability<sup>[8]</sup>.

However, recent researches indicate that if any *marma* point is inflamed or painful, then stimulating its nearby *marma* points can help in alleviating this pain<sup>[9]</sup>.

A case study is presented here in which *marma* therapy was administered for the management of *Janu Sandhigata Vata*.

## 2. Case Report

A case of XYZ, 27 years old female patient presents with chief complaints of right knee joint pain while walking and climbing since 6 month. Pain aggravated on long standing and sitting. The knee pain had affected her daily routine work.

On examination reveals tenderness, swelling, and painful movements of right knee joint. On radiological examination of Right knee joint, there was a space reduction on medial aspect of knee joint. The patient was taking NSAIDS, but got temporary relief.

The patient went through routine haematological examination (HB, TLC, DLC, ESR, RBS) And Sr. calcium, Sr. uric acid, urine analysis was done to exclude any other pathology.

As per clinical examination and investigation patient was diagnosed as Right *Janu sandhigatavata*.

## 3. Methodology

The treatment involved administration of *Marma* therapy on right knee joint. Details of the administered treatment given as follows;

The *Marma* Therapy included stimulation of seven *Marma* points of the leg, i.e. *Kshipra*, *Kurcha*, *Gulpha*, *Indrabasti*, *Janu*, *Aani* and *Lohitaksha marma*.

The location of these *Marma* points and the method of *Marma* Therapy adopted in the present study have been described in detail in Mishra and Shrivastava (2020)<sup>[1]</sup>. The details related to the method of stimulation of *Marma* points, through pressure application, are as follows<sup>[8, 9]</sup>:

- 1) Pressure over *Marma* point was  $\frac{1}{4}$  *mattra* pressure i.e. exerted from wrist joint of physician.
- 2) The rhythm of applying and releasing pressure was kept similar to the rhythm of normal heart-beat. Pressure was

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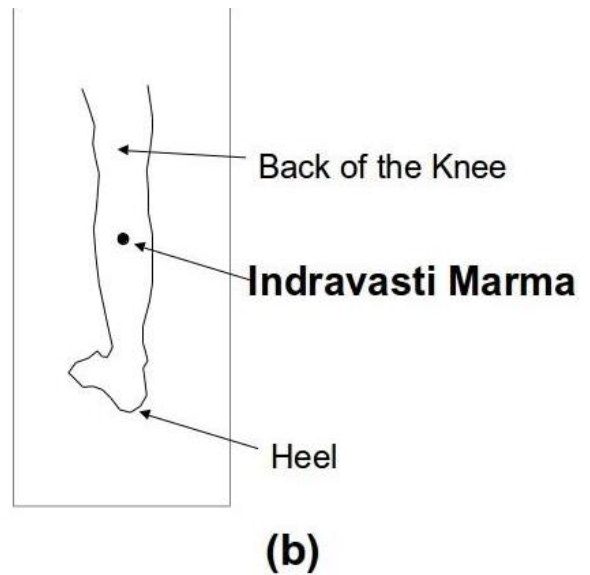
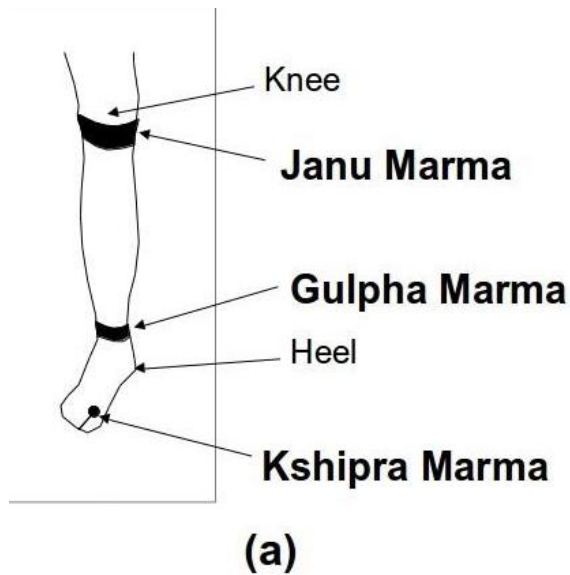
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applied at the Marma point for 0.8 second with the help of tips of fingers and thumb of the hand and then released, and this cycle was maintained. The rate of applying pressure, i.e. the number of times, was similar to the respiratory rate – 16 to 18 times per minute.

- 3) Each Marma point was pressed for 16 to 18 times. Thus, one session of Marma Therapy took about 15

minutes, and two such sessions were administered during the day.

- 4) The method of identifying the Marma points and applying pressure on them was taught to the patient also, so that he could do Marma Therapy on his own, at home, during the follow-up period of the study.



**4. Assessment Criteria and Grading**

**Aim:** To assess the effect of Marma Chikitsa and its therapeutic intervention.

Following parameters were analysed:

**Criteria for Assessment –**

- Sandhishool, (joint pain)
- Sandhigrah, (joint stiffness)
- Sandhishotha, (joint swelling)
- Aakunchan Prasaranjanya Vedana (Pain during flexion and extension)

**Subjective Parameters** included *Sandhi Shoola* (joint pain), *Sandhi Shotha* (jointswelling), *Sandhi Stabdhatta* (joint stiffness), and *Atopa / Sandhisphutana* (crepitus), which were analyzed through pre-defined assessment criteria and grading given in Mishra and Shrivastava (2020) [1] (grading was assigned to the criteria depending on their severity).

**Objective Parameters** included the following (their assessment criteria and grading are given in Mishra and Shrivastava (2020) [1]-grading was assigned to the criteria depending on their severity):

**WOMAC** (Western Ontario and McMaster Universities) Osteoarthritis Index (Modified-CRD Pune Version), suitable for Indian-Asian use, which primarily consists of WOMAC scale for pain, WOMAC scale for stiffness, and a modified WOMAC function scale, to suit Indian conditions and activities [10].

- **Range of Motion (ROM)** (by Goniometer)-Range of Motion (ROM) of the knee joint was measured by a

Goniometer to quantitatively assess the movement of the knee joint.

- **Walking Time**-Walking Time was assessed by asking the patient to walk 21 meter distance, and noting the time taken for the same; two such readings were recorded, and the average of the two was taken as the final value.

**Assessment criteria of subjective parameters;**

Sandhi Shoola	Grade
No pain	0
Mild pain	1
Moderate pain without difficulty in walking	2
Moderate pain with difficulty in walking	3
Severe pain with difficulty in walking	4

Sandhi Shotha	Grade
No swelling	0
Slightly obvious	1
Covers well over the bony prominence	2
Marked and much elevated	3
Severe and much elevated	4

Sandhi Atopa	Grade
No Crepitus	1
Occasional crepitus	2
Persistent and palpable crepitus	3
Persistent and audible crepitus	4

Sandhi Stabdhatta	Grade
No Stiffness	0
<5 minutes	1
5 to 10 minutes	2
10 to 15 minutes	3
>15 minutes	4

Assessment criteria of objective parameters;

WOMAC (for individual question)	Grade
None	0
Slight	1
Moderate	2
Very	3
Extreme	4

Range of motion	Grade
Normal flexion 130°	0
<130° and 110°	1
<110° and 90°	2
<90° and 70°	3
<70°	4

Walking time to cover 21m distance	Grade
Up to 20s	0
21 to 30s	1
31 to 40s	2
41 to 50s	3
>50s	4

X ray findings	Grade
No radiographic findings of OA	0
Minute osteophytes of doubtful clinical significance	1
Definite osteophytes with unimpaired joint space	2
Definite osteophytes with moderate joint space narrowing	3
Definite osteophytes with severe joint space narrowing and subchondral sclerosis	4

From the time the therapy was started, the abovementioned assessments were done on day 0 (i.e. before starting the therapy), immediately after the completion of 1 month of therapy, after 2 weeks of completion of therapy, and after 4 weeks of completion of therapy. At the time of completion, X-ray of the right knee joint was done once again.

5. Results and Discussion

Table 1: Showing results in subjective criteria

Symptoms	Days			
	7 <sup>th</sup> day	28 <sup>th</sup> day	35 <sup>th</sup> day	42 <sup>th</sup> day
Shoola	3	1	0	0
Shooha	3	1	0	0
Stabdhata	1	0	0	0
Atopa	0	0	0	0

Table 2: Showing results in Objective criteria

Scales	Days			
	7 <sup>th</sup> day	28 <sup>th</sup> day	35 <sup>th</sup> day	42 <sup>th</sup> day
ROM	1	0	0	0
WOMAC (Pain)	10	4	2	1
WOMAC (Stiffness)	3	1	0	0
WOMAC (Physical function)	40	20	10	05
Walking time	1	0	0	0

6. Radiological Finding



Before



After

The X-ray of the right knee joint, done at the time of completion of therapy, there is improvement in gap reduction as comparative to earlier.

7. Discussion

From the above table no 1 and 2; the values of all parameters like *Shoola*, *Shooha*, *Stabdhata*, ROM, Walking time etc. reduced with time and indicating the continuous relief experienced by the patient during the therapy, as well as during the follow-up period.

The *Marma* Therapy administered for the management of *Janu Sandhigata Vata* included stimulation of Seven *Marma*

points, i.e. *Kshipra, Kurcha, Gulpha, Indravasti, Janu, Aani and Lohitaksha* by applying pressure on these locations.

The mode of action of Marma Therapy may be understood through various ancient and modern concepts as follows

*Marmas* are connected to the *Nadis* (subtle nervous system) and *Chakras* (subtle energy centers) of the subtle body<sup>[13]</sup>. The *Chakras* can be considered to correspond to seven main *Marmas* or *Pranic* centers, which provide energy to all other *Marmas*<sup>[13, 15]</sup>. Through stimulation of *Marma* points, the flow of *Prana* through the *Chakras* can be stimulated, thus activating them, and resulting in the awakening of subtle dormant areas in the brain, that leads to the experiencing of higher realms of consciousness, which are normally inaccessible<sup>[14]</sup>; this, in turn, can lead to better control over the mind-body network including the autonomic nervous system and various organs, resulting in an overall healing effect<sup>[13]</sup>.

As *Marmas* are the seats of *Prana*, the vital life force that governs the physical and subtle processes of the body, therefore, through the stimulation of *Marmas*, the flow of *Prana* in different body parts can be modulated in such a way that it can be used to remove blockages, and decrease or enhance the physical and subtle energy currents within the body, resulting in the corresponding healing effect<sup>[13]</sup>.

Since *Prana* is connected to *Vata Dosha*, hence *Marma* Therapy can be especially useful in treating the *Vata* disorders<sup>[13]</sup>. Out of the five forms of *Vata Dosha*, *Vyana Vayu*, that is associated with the skin, as well as the movement and circulation of the *Prana*, can be most closely linked to the *Marmas*<sup>[13]</sup>.

## 8. Conclusion

The *Marma* Therapy showed encouraging results with regards to the management of symptoms associated with *Janu Sandhigata Vata* (Osteoarthritis of Knee), in short duration of time. Also, the present study illustrates the efficacy of the administered therapeutic intervention in the management of symptoms associated with *Janu Sandhigata Vata*. Significant improvement was observed in the subjective parameters (*Sandhi Shoola, Sandhi Shotha, Sandhi Stabdhatata, and Sandhi Atopa*) and objective parameters (WOMAC Index, ROM, Walking Time) analyzed during and after the completion of the study.

Thus, stimulation of the *Marmas* can balance the *Vyana Vayu* and *Vata Dosha*, resulting in the corresponding healing effect in diseases like *Janu Sandhigata Vata*.

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