

Marma Therapy in Ayurveda: A Comprehensive Literature Review

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Abstract

Marma Chikitsa is one of the most important fundamental principles in Ayurveda, particularly in the prevention and management of trauma, pain, and functional disorders. In modern medicine, vital points and neurovascular structures are described in detail; however, the earliest and most systematic evidence regarding these vital anatomical sites is found in the ancient Indian system of medicine, Ayurveda, in the form of Marma and their therapeutic as well as prognostic significance. Most of the Acharyas have mentioned Marma in their respective Samhitas, but Acharya Sushruta has described Marma in a comprehensive and practical manner in Sushruta Samhita. He elaborated their anatomical location, classification, clinical features after injury (Marma Vedha Lakshana), and their importance in surgical safety. Over time, this knowledge evolved into Marma Chikitsa, which is now widely applied in various musculoskeletal, neurological, and chronic pain disorders, especially where modern therapeutic approaches show limitations. Hence, in this review article, Marma Chikitsa in Ayurveda is highlighted and systematically compiled from different Samhitas to provide a consolidated and clinically useful perspective.

Introduction

Ayurveda, the ancient Indian system of medicine, emphasizes maintenance of health and treatment of disease through a holistic understanding of body, mind, and life force. Among its distinctive anatomical concepts, Marma holds a position of exceptional importance. Marma are vital points where Mamsa (muscle), Sira (vessels), Snayu (ligaments and nerves), Asthi (bone), and Sandhi (joints) meet, and where Prana resides in concentrated form.

Marma therapy traces its roots to the *Vedic period*, particularly linked with *Dhanurveda*, the Upaveda (subsidiary Veda) of the *Yajurveda*, which dealt with warfare and martial arts. Knowledge of vital points (Marma) was essential in battle, as injury to these points could cause severe pain, deformity, or death. Thus, early understanding of Marma developed from both **war strategies and injury management**.

The classical concept of Marma has been elaborately described in the **Sushruta Samhita**, which provides a detailed account of 107 Marma points in the human body. These vital points are systematically classified on the basis of structural predominance into Mamsa (muscle), Sira (vessels), Snayu (ligaments), Asthi (bone), and Sandhi (joints), and also according to the prognosis following injury, such as Sadyapranahara (immediate fatal), Kalantarapranahara (delayed fatal), Vishalyaghna, Vaikalyakara, and Rujakara. Sushruta emphasized the importance of Marma knowledge in Shalya Tantra (surgery) to prevent fatal complications, deformity, and severe

pain during surgical procedures. In contrast, the **Charaka Samhita** discussed Marma primarily in relation to Prana, the vital life force responsible for sustaining life and physiological functions, with greater emphasis on its physiological and therapeutic significance rather than surgical trauma, highlighting its role in maintaining homeostasis and its relevance in therapeutic interventions.

During the medieval period, Marma knowledge flourished particularly in South India (Kerala). Integrated with **Kalaripayattu** (martial art system). Use of oil massage, pressure techniques, and herbal preparations to heal injured warriors.

In recent decades, Marma therapy has re-emerged as an important holistic healing modality in Ayurveda. It is commonly used in the management of musculoskeletal disorders, neurological conditions, stress, and pain. The therapy has also been incorporated into Panchakarma and various wellness practices to promote relaxation and overall health. Moreover, modern research is exploring the correlation of Marma points with neurovascular bundles and trigger points, which may help provide a scientific basis for its therapeutic effectiveness.

Despite growing interest, literature remains scattered, Therefore, the present literature review aims to explore the concept of Marma in Ayurveda and critically analyze its therapeutic applications based on classical and modern evidence.

Materials and Methods

This review is based on a qualitative analysis of classical Ayurvedic texts including Sushruta Samhita, Charaka Samhita, Ashtanga Hridaya, and their commentaries, especially Dalhana. Relevant descriptions related to definition, classification, clinical features of injury, and therapeutic utility of Marma were compiled and systematically organized. Secondary sources and contemporary interpretations of Marma Chikitsa were also reviewed to understand present-day applications.

Concept of Marma in Ayurveda

A. Definitions of Marma

1. According to Acharya Sushruta

मर्माणि मांससिरास्नायवस्थिसन्धिसन्निपाताः; तेषु स्वभावत एव विशेषेण प्राणास्तिष्ठन्ति; तस्मान्मर्मस्वभिहतास्तास्तान्
भावानापद्यन्ते॥

(Su.Sha.6/16)

Marma points are the junction of five anatomical structures i.e. *Mamsa* (muscle), *Sira* (vessels), *Snayu* (ligament and nerve), *Asthi* (bone), and *Sandhi* (joints). Stimulation of *Marma* points optimises *Prana Vayu* and maintains equilibrium of *Doshas* [1]

2. According to Acharya Charaka

हृदयमून्विस्तो च नृणां प्राणाः प्रतिष्ठिताः ।

तस्मात्तेषां सदा यत्नं कुर्वीत पारिपालने ॥ (च०सि०१/१)

Charakacharya describes *Marma* as seat of *Chetana* and intensity of pain will be more compared to other parts of body if trauma or disease occurs.

Charaka describes *Marma* as the centers of *Chaithanya*.

So *Peeda* in *Marmasthana* (functional abnormality) of these centers will be more severe when compared to other parts [2]

3. According to Acharya Vagbhata

विषमं स्पन्दनं यत्र पीडिते रुक् च मर्म तत्। अ.ह.शा.4/37

मांसास्थिस्नायुधमनीसिरासन्धिसमागमः।
स्यान्मर्मेति च तेनात्र सुतरां जीवितं स्थितम्॥ अ.ह.शा.4/38

Vagbhata says that, these are the points which are painful on application of pressure and abnormal pulsation.

Marmas are the areas where Dhamani come together along with other structures - Mamsa, Sira, Snayu, Asthi and Sandhi.[3]

4. According to Acharya Dalhana

Acharya Dalhana has defined the Marma, as the points on our body surface, where any form of trauma or injury, results in sudden death.

5. According to Acharya Bhavprakash

सन्निपातः शिरास्नायुसन्धिमांसास्थिसम्भवः ।

मर्माणि तेषु तिष्ठन्ति प्राणाः खलु विशेषतः ॥ २२३ ॥ भा.प्र.पू.खं.3[15]

Marma is formed by the union of Sira (vessels), Snayu (ligaments), Sandhi (joints), Mamsa (muscle), and Asthi (bone). At these sites, Prana (vital life force) especially resides.

6. According to Acharya Kashyap

मूर्धाऽथ हृदयं बस्ति कण्ठ ओजः शुक्रशोणितम् ।

शंखौ गुदं तथा त्रिणि महामर्माणि चादितः ॥ (का.सं., शरीरविचयशारीर)

Head (Mūrdhā), heart (Hṛdaya), urinary bladder (Basti), throat (Kaṇṭha), Ojas, Shukra, Shonita, both temples (Śaṅkha), and Guda are described as vital structures, among which certain are considered Mahāmarma (great vital points) due to their life-sustaining importance.

B. Importance of Marma

मर्माणि शल्यविषयार्थमुदाहरन्ति (Su.Sha. 6/35)

Acharya Sushruta has mentioned the detail description about Marma in the sixth chapter of Shareer Sthan. Marma is considered as an important part in the Shalya Tantra (Surgery) and cover the half subject of Shalya Tantra (Surgery).[7]

.....प्राणा :येषु प्रतिष्ठिताः।

शङ्खौ मर्मत्रयं [CHA.SU.29/3]

Acharya Charaka emphasized the vital nature of Marma by stating that Prana resides in these specific anatomical sites. He identified Shira, Hridaya, and Basti as Trimarma, the three most vital Marma essential for the sustenance of life (Cha. Su. 29/3).[6]

Marma are regarded as vital anatomical and physiological sites in Ayurveda, where Prana, the vital life force, is predominantly located, and they play an essential role in maintaining life, consciousness, and systemic balance. The importance of Marma is extensively emphasized in the **Sushruta Samhita**, where detailed knowledge of these points is considered indispensable in surgical practice to prevent fatal complications, excessive hemorrhage, nerve damage, deformity, and disability.

Marma also holds significant prognostic value in traumatic conditions, as injury to these vital structures may lead to outcomes ranging from severe pain and functional impairment to delayed complications or immediate death, depending on the site and severity of trauma. In addition, Marma has important therapeutic and preventive applications in Ayurveda, particularly through Marma Chikitsa, which aims to restore the balance of Doshas, improve circulation, relieve pain, and promote tissue healing. Furthermore, these points have diagnostic relevance, as tenderness or dysfunction at Marma sites may indicate underlying pathology. In contemporary practice, Marma therapy is increasingly integrated into Panchakarma, yoga, and wellness approaches, contributing to stress management, mental well-being, and overall health promotion.

Types and Number and Classification of Marma

According to classical Ayurvedic texts, a total of 107 Marma have been described and classified on the basis of structural predominance and prognostic outcome of injury. [4]

C. Classification of Marma

1. Classification Based on Structural Predominance [8]

Structural Basis	Sushruta (Su.)	Ashtanga Hridaya (A.H.)
Mamsa (Muscle)	11	10
Sira (Vessels / Nerves)	41	37
Snayu (Ligaments / Tendons)	27	23
Asthi (Bone)	08	08
Sandhi (Joint)	20	20
Dhamani (Artery)	–	09
Total	107	107

2. Classification Based on Prognostic Effect of Injury [10]

Prognostic Type	Sushruta (Su.) [4]	Ashtanga Hridaya (A.H.)
Sadyah Pranahara (Immediately fatal)	19	19
Kalantara Pranahara (Fatal after some time)	33	33
Vishalyaghna (Fatal after removal of foreign body)	03	03
Vaikalyakara (Causing deformity)	44	44
Rujakara (Causing severe pain)	08	08
Total	107	107

3. Classification of Marma According to Body Region (Rachana Sharir) [9]

Body Region	Number of Marma
Urdhva Jatru (Above clavicle – Head & Neck)	37
Madhya Kaya (Trunk)	26
(Purva Prishtha – Anterior: 12, Paschima Prishtha – Posterior: 14)	
Shakha (Limbs)	44
(11 Marma in each limb)	
Total	107

4. Classification of Marma According to Angula Pramana [11]

(Measurement Based on Finger Breadth)

Comparative Description According to Sushruta Samhita and Ashtanga Hridaya

Angula Pramana	Marma According to Sushruta Samhita	Marma According to Ashtanga Hridaya
1 Angula	Urdhva (upper), Shira (Kuchikashira), Vrikka, Kukshira, Stanamula	Vrikka, Kukshira, Urdhva, Kuchikashira – 12 Marma
2 Angula	Manibandha, Gulpha	Manibandha, Gulpha, Stanamula – 06 Marma

Angula Pramana	Marma According to Sushruta Samhita	Marma According to Ashtanga Hridaya
3 Angula	Janu, Kurpara	Janu, Kurpara – 04 Marma
4 Angula (Swapanimita Kunchita)	Hridaya, Basti, Kukshi, Guda, Nabhi, Mushka, (4 Shrungataka + 5 Seemanta), Gala (2 Neela, 2 Manya, 8 Matrika)	Apanga (Netra), Basti, Nabhi, Neela, Seemanta, Matrika, Kukshi, Shrungataka, Manya, Hridaya – 29 Marma
½ Angula	Remaining Marma	Remaining 56 Marma

D.Clinical Features Due to Injury of Marma[13]

Types of Marma and Vedha Lakṣaṇa (Ashtanga Hridaya, Sharira Sthana 4/47–51)

Type of Marma	Vedha Lakṣaṇa (Clinical Features after Injury)
Māṃsa Marma	Excessive bleeding (Ati-rakta srava), swelling (Shotha), severe pain (Tīvra śūla), pallor (Pāṇḍutā), weakness (Daurbalya), tissue depletion (Kṣaya), and possible loss of life (Prāṇa-hāni).
Asthi Marma	Bone fracture or cracking (Asthi-bheda, Asthi-sphuṭana), severe pain (Tīvra śūla), intolerance to touch (Sparśa-asahatva), and loss of function (Kriyā-hāni).
Snāyu Marma	Stiffness (Stambha), contraction (Ākuñchana), deformity or rigidity (Saṅkocha), restriction of movement (Gati-rodha), severe pain (Tīvra śūla), and loss of strength (Bala-hāni).
Dhamanī Marma	Profuse bleeding (Ugrā rakta-dhārā), warm and frothy blood discharge (Uṣṇa, phenila rakta srava), fainting (Mūrhhā), shock (Śoka), and death (Prāṇa-nāśa).
Śirā Marma	Hemorrhage (Rakta srava), thirst (Tṛṣṇā), dizziness (Bhrama), dyspnea (Śvāsa), delirium (Pralāpa), tremors (Kampana), unconsciousness (Mūrhhā), and death (Marāṇa).
Sandhi Marma	Joint swelling (Sandhi-śoṭha), joint pain (Sandhi-śūla), restricted movement (Gati-vaikalya), stiffness (Stabdhatā), deformity (Vikṛti), and lameness (Khañjatā).

The clinical features following injury to different types of Marma have been systematically described in the **Sushruta Samhita**.

Injury to **Sadyapraṇahara Marma** results in loss of sensory perception (*Indriya-jñāna nāśa*), derangement of mental and intellectual functions (*Mana-buddhi vikṛti*), severe suffering (*Atyantā duḥkha utpatti*), and rapid death (*Śīghra marāṇa*).

Trauma to **Kālāntara Praṇahara Marma** leads to intense pain related to tissue involvement (*Dhātu-sambandhī tīvrā vedanā*), gradual depletion of body tissues (*Krameṇa dhātu-kṣaya*), and delayed death (*Kālāntareṇa marāṇa*).

In **Viśalyaghna Marma**, life persists as long as the foreign body remains within the body (*Yāvat śalya antar vartate tāvat jīvana*), but removal of the foreign body results in immediate death (*Śalya nirharaṇāt turanta maraṇa*).

Injury to **Rujākara Marma** produces severe pain (*Ati-tīvrā rujā utpatti*),

whereas trauma to **Vaikalyakara Marma** leads to deformity or disability of the affected part (*Aṅga-vaikalyatā*), stiffness (*Stabdhatā*), loss of strength (*Bala-hāni*), functional impairment (*Karma-hāni*), coldness (*Śaitya*), and incapacity (*Aśaktatā*). These classifications highlight the prognostic and clinical significance of Marma in trauma, surgical practice, and patient management.

MARMA CHIKITSA

Direct reference off application of concepts of Marmatherapy in Sushrutsamhita

स्नेहोपनाहाग्निकर्मबन्धनोन्मर्दनानिच।

स्नायुसन्ध्यस्थिसंप्राप्तेकुर्याद्वायावतन्द्रितः।।Sushrutasamhita Chikisthasthana 5/23

Sushruta mentioned various Marma therapy like Oleation, Upanaha, Agnikarma, Bandhana(Bandaging) and Mardana (Massage) For the Vata Disorders related to the Snayu (tendons), Sandhi (joint), Asthi (Bone) .¹

Marma Chikitsa [14]

The word "marma" means a vital point or a junction where different tissues anatomically meet, such as muscles, bones, nerves, blood vessels, etc.

According to Ayurveda, there are 107 such important points in the human body, and each one is connected to stimulate a specific organ or system or specific physiological process.

With knowledge of Marma Experts, manipulating these specific points with specific techniques, one can utilize these in the body for management of specific diseases.

Physiological Significance OF Marma Chikitsa [16]

A. Regulation of Neurovascular Flow

Marmas play a critical role in maintaining the flow of blood, lymph, and nerve signals. Their manipulation can influence vasodilation, improve circulation, and support tissue oxygenation

B. Impact on Autonomic Nervous System

Marmas regulate autonomic functions such as heart rate, respiratory rhythm, and stress responses .Example:Stimulation of Hridaya Marmamay activate parasympathetic pathways, reducing stress and stabilizing cardiac function.

C.Role in Pain Modulation and Inflammation Control

Manipulation of Marmas can modulate pain through endogenous mechanisms such as the release of endorphins and activation of inhibitory neural circuits

Example: Pressure on *Talahridaya* Marma (center of the palm) can alleviate pain and reduce inflammation in distant regions

Benefits of Marma Chikitsa

Marma Chikitsa has many benefits for physical, mental, and emotional health. Some of the benefits are:

- Relieves pain, stiffness, inflammation, and spasms in various parts of the body.
- Improves blood circulation, oxygenation, and detoxification.
- Boosts immunity, digestion, metabolism, and hormonal balance.
- Reduces stress, anxiety, depression, fears, and phobias.
- Enhances memory, concentration, creativity, and intuition.
- Promotes relaxation, sleep quality, and well-being.

Indications of Marma Chikitsa

Marma Chikitsa can be used for various conditions that affect the body, Some of the indications are:

- Migraine
- Tremors
- Nervous system disorders
- Cervical and lumbar spondylitis
- Frozen shoulder
- Digestion problems
- Scoliosis
- cervical spondylosis
- muscular dystrophy,
- prolapse inter vertebral disc,

Side effects or precautions of Marma Chikitsa

Marma Chikitsa is generally safe and effective when performed by a trained practitioner. However, if it's performed without knowledge on Marma points and techniques, possible side effects or precautions are:

- May cause temporary soreness, bruising, or bleeding at the site of pressure or massage.

Discussion

The classical concept of Marma demonstrates an advanced understanding of anatomy, neurovascular integration, and trauma prognosis. Descriptions of pain, hemorrhage, paralysis, and death following Marma injury correlate well with modern anatomical and physiological principles. The transition of Marma knowledge from surgical caution to therapeutic intervention reflects Ayurveda's dynamic clinical evolution. Marma Chikitsa, when practiced with precision, offers a non-invasive, cost-effective approach

for pain management, rehabilitation, and stress-related disorders. However, improper manipulation may cause adverse effects, emphasizing the need for proper training and standardization.

Conclusion

Marma represents vital anatomical and physiological centers essential for life, health, and disease management in Ayurveda. Classical texts provide detailed descriptions of their structure, classification, and clinical significance. Marma Chikitsa has emerged as an effective therapeutic modality with wide clinical applications. Systematic understanding and scientific validation of Marma can bridge classical wisdom with modern integrative medicine, promoting safe and effective clinical practice.

Reference

- 1.Sushruta Samhita translated by Dr.Ambika datta Sastri, Publied by Chaukhamba Sanskrit Samsthan, Varanasi, Part-I, Shareersthana 6/16, P.No – 69
- 2.Charaka Dridabala, Charaka samhita Siddhisthan, Chapter 9/3 edited by.PLKashinath Shastri and Gorakhnath Chaturvedi, reprinted published by Chaukhamba Sanskrit Pratisthana Varanasi 2006 VOI 1.Page 1051.
- 3.Shri Vagbhata, Astang Hridaya,, Shareersthana, Chapter 4/37 edited by Kaviraja Atrideva Gupta 2011 Vidyotini hindi commentary reprinted published by Chaukhamba Prakashan, Page 268.
4. Sushruta Samhita translated by Dr.Ambika datta Sastri, Publied by Chaukhamba Sanskrit Samsthan, Varanasi, Part-I, Shareer sthan – 6. P.No – 67 -69
- 5.Kaviraja Ambikadatta Shastri,Sushruta samhita,Vol 1,Caukhamba Sanskrit Sansthan Varanasi- reprint edition 2012,Chap-6/4 Page no 67
- 6.Ayurved deepika commentary on Charak Samhita by Chakrapanidatta, siddhi sthan- 9/3, P.No.-1050-1054
7. Sushruta Samhita translated by Dr.Ambika datta Sastri, Publied by Chaukhamba Sanskrit Samsthan, Varanasi, Part-I, Shareersthana, Su sha 6/35
- 8.Ambikadatta Shastri,Sushruta samhita,Vol 1,Caukhamba Sanskrit Sansthan Varanasi- reprint edition 2012,Chap-6/4 Page no 67
- 9.Ambikadatta Shastri,Sushruta samhita,Vol 1,Caukhamba Sanskrit Sansthan Varanasi- reprint edition 2012,Chap-6/5 Page no 67
- 10.Ambikadatta Shastri,Sushruta samhita,Vol 1,Caukhamba Sanskrit Sansthan Varanasi- reprint edition 2012,Chap-6/8 Page no 68,69
- 11.Ambikadatta Shastri,Sushruta samhita,Vol 1,Caukhamba Sanskrit Sansthan Varanasi- reprint edition 2012,Chap-6/29,30,31 Page no 76,77
- 12.Ambikadatta Shastri,Sushruta samhita,Vol 1,Caukhamba Sanskrit Sansthan Varanasi- reprint edition 2012,Chap-6/35 Page no 77

13. Shri Vagbhata, Astang Hridaya, Shareersthana, Chapter 4/37 edited by Kaviraja Atrideva Gupta 2011 Vidyotini Hindi commentary reprinted published by Chaukambha Prakashan

14. <https://drpalikuttysayurveda.com/health-reads/marma-chikitsa-a-guide-to-ayurvedic-vital-point-therapy>

15. bhava-prakasha-purva-khanda-by-brahma-shankara-mishra-kashi-1935-chowkhamba/page/50/mode/2up

16. <https://africanjournalofbiomedicalresearch.com/index.php/AJBRAfr>. J. Biomed. Res. Vol. 27(3s) (November 2024); 6650-6655 Research Article

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