

REVIEW ARTICLE

Ayurveda View of *Marma Sharira* – A Conceptual Study

Ashvini Trivedi*, Yashpal Chaudhary

Assistant Professor, Department of Sharir Rachna, Government Ayurveda College, Jaipur, Rajasthan, India.

ARTICLE INFO

Article history:

Received on: 19-08-2025

Accepted on: 21-09-2025

Available online: 30-09-2025

Key words:

Marma Chikitsa,

Marma,

Neurovascular junction,

Trauma

ABSTRACT

Marma, an Ayurvedic concept, offers a distinctive and comprehensive view of human anatomy. *Marma* is regarded as the seats of Prana (life force) and is defined as the critical areas where *Mamsa* (muscle), *Sira* (blood vessels), *Snayu* (ligaments/tendons), *Asthi* (bones), and *Sandhi* (joints) connect. One hundred and seven *Marmas* are described in ancient books, especially the *Sushruta Samhita*, and are categorized according to their dimensions, structure, and the therapeutic impact of their injuries. These critical areas were crucial for prognosis, martial arts, warfare, and trauma assessment in addition to surgery. Damage to *Marmas* may result in deformity, discomfort, incapacity, or even death. Researchers have connected *Marmas* to contemporary musculoskeletal and neurovascular structures in recent decades, connecting Ayurveda with contemporary medical sciences. In addition, *Marma Chikitsa*'s therapeutic use is becoming more and more relevant in integrative medicine, especially in the areas of pain relief, rehabilitation, and overall wellness. This review examines *Marma Sharira*'s Ayurvedic roots, anatomical relationships, therapeutic value, and incorporation into contemporary anatomy and medicine.

1. INTRODUCTION

Marma is one of the most crucial subjects in the huge ocean of Ayurvedic knowledge. According to *Susruta Samhita Sharira Sthana* 6/16, a *marma* point is an anatomical location where muscles, veins, ligaments, bones, and joints converge.^[1] According to *Acharya Sushruta*, there are 107 *Marmas* in the human body (*Sushruta Samhita Sharira Sthana* 6/3). These are very important vital places, that are the “seats of life” (Prana - the vital life force).^[2] Any injury to these parts may lead to severe pain, disability, loss of function, loss of sensation, or death. It is referred to as “*Shalya Vishayardha*” (half of the complete science of surgery) due to its significant function in surgery. *Marma sthan*, a highly important point, should not be damaged and should remain intact even during surgery, according to *Acharya Sushruta*.^[3] Recent studies, however, suggest that stimulating the *Marma* points that are close to an irritated or painful *Marma* point can help reduce the pain. The therapeutic effects of *Marma* Therapy in treating a variety of physical and mental illnesses have been documented in several research and books.^[4,5] Looking at the importance of the *Marma* Science with regards to surgeries, as well as their recent use and future possibilities as an effective therapeutic procedure, the present study has been undertaken for

an in-depth study of the Science of *Marma*. The definition and a thorough explanation of *Marmas*' characteristics, as mentioned in the classical texts – most of which were composed during *Samhita Kala* – are provided in this article. A thorough explanation of *marmaghata* or *viddha lakshanas*, or the impact of trauma on *Marmas*, is provided along with details about the number of *Marmas*, their location, the structures involved, their correlation with *Panchamahabhutas*, and their classification. In addition, discussed is the anatomical link with contemporary science.

2. DEFINITION OF *MARMA*

Sushruta defines *Marma* as:

“*Mamsa-sira-snayu-asthi-sandhi samnipatah sthanancha yatra pranah sannihita bhavanti*” (*Su. Sha.* 6/27)

Marma (fatal spots) are confluence of muscles, veins, ligaments, bones, and joints. These are the places where the *Prana* (vital life force) resides naturally.^[1]

- Translation: *Marmas* are those anatomical sites where muscles, vessels, ligaments, bones, and joints come together, and where *Prana* (vital life force) is especially located.
- This definition emphasizes that *Marmas* are not only structural junctions but also centers of physiological and energetic significance.

Corresponding Author:

Ashvini Trivedi,

Assistant Professor, Department of Sharir Rachna, Government Ayurveda College, Jaipur, Rajasthan, India.

Email: draktrivedi31@gmail.com

3. HISTORICAL BACKGROUND

- Vedic Period: References to vulnerable points appear in the *Rigveda* and *Atharvaveda*, particularly in relation to weapons and warfare.
- Charaka Samhita: Mentions *Marmas* in the context of trauma and prognosis, but does not elaborate classifications.
- Sushruta Samhita: Provides the most comprehensive description of *Marmas*, detailing 107 points, their location, classification, dimensions, and clinical implications.
- Later Texts: Vagbhata and others reiterated Sushruta's classifications, confirming their importance in clinical practice.

3.1. Classification of *Marmas*

Marmas have been categorized in the ancient texts according to a variety of factors, including their size, shape, location in various bodily parts, and the impact of trauma. The many *Marma* classifications are demonstrated in this section the details are given in Tables 1-3.

3.2. *Marmaghata* (Injury to the *Marma* Points)

Damage to the *Marma* points, or *Marmaghata*, as previously mentioned, can result in excruciating pain, loss of feeling, loss of function, incapacity, and even death. Since any damage to these deadly spots results in instant death, and if someone lives due to the doctor's skill, deformities are nearly a given. For this reason, a large amount of *Shalya Tantra* (the science of surgery) is devoted to understanding the fatal spots (*marmas*).^[6]

3.3. Modern Anatomical Correlation

Modern anatomy identifies *Marmas* as neurovascular and musculoskeletal junctions where trauma leads to systemic consequences:

- *Hridaya Marma* → Heart, coronary arteries.
- *Manya Marma* → Carotid arteries, jugular veins, vagus nerve.
- *Shankha Marma* → Temporal bone, middle meningeal artery.
- *Nabhi Marma* → Umbilical region, portal venous circulation.
- *Indrabasti Marma* → Posterior tibial neurovascular bundle.
- *Talahridaya Marma* → Median nerve and arterial supply in palm/sole.

These correlations validate that *Marmas* are anatomically precise points of vulnerability.

3.4. Clinical Significance

3.4.1. Surgical importance

- Sushruta advised extreme caution to avoid *Marma* injury during incisions.
- Pre-surgical mapping of vital areas helps prevent iatrogenic damage.

3.4.2. Trauma and forensic medicine

- *Marmas* explain the severity of certain injuries (e.g., stab wounds in chest or abdomen).
- Useful in medico-legal cases for understanding cause of death.

3.4.3. Therapeutic applications - *marma chikitsa*

- Gentle pressure, massage, or stimulation of *Marmas* restores *Prana* flow
- Used in musculoskeletal disorders, paralysis, and pain management
- Similarities with acupuncture/acupressure suggest scientific basis.

3.4.4. Military and martial arts

- Ancient warriors were trained in *Marma Vidya* to disable enemies
- Martial arts like *Kalaripayattu* still preserve *Marma* techniques.

3.4.5. Holistic healing

- *Marma* massage improves circulation, immunity, and relaxation
- Integration with Yoga and Pranayama enhances therapeutic benefits.

3.5. *Chikitsa* of *Marmabhighata*

The *chikitsa* (treatment) of *Marmabhighata* is done in the following ways (Charaka *Chikitsa* 26) (51), (Sushruta *Chikitsa* 1, 2) (1):

- *Lakshanika chikitsa* (symptomatic treatment) according to *marma viddha lakshanas*
- *Vata vyadhi chikitsa*
- *Shashti upakrama*, for *vrnopachara*.

4. DISCUSSION

The Ayurvedic concept of *Marma* is a remarkable synthesis of anatomy, physiology, pathology, and medicine. Unlike modern anatomy, which primarily focuses on anatomical description, *Marma Sharira* encompasses the structural, functional, and energetic components of the human body. As a result, *Marma* knowledge is helpful not only for understanding the physical structure but also for predicting the clinical repercussions of trauma, planning surgical operations, and employing therapeutic strategies.

4.1. Integration of Anatomy and Physiology

Although Sushruta goes on to stress that *Prana* resides at these locations, *Marmas* are described as the points where *Mamsa*, *Sira*, *Snayu*, *Asthi*, and *Sandhi* converge. This demonstrates that *Marmas* are centers of vitality that are both structural and functional. *Marmas* are now thought of as neurovascular hubs where several tissues converge, and damage to them alters both the local anatomy and the systemic physiology.^[7,8]

For example:

- Injury to *Hridaya Marma* disrupts cardiac function, leading to circulatory collapse
- Injury to *Manya Marma* affects carotid arteries and vagus nerves, leading to sudden death or neurological dysfunction
- Injury to *Indrabasti Marma* causes severe pain due to tibial nerve compression.

4.2. Prognostic and Clinical Relevance^[9]

For its time, Sushruta's categorization of *Marmas* according to the impact of injury is extremely sophisticated. A complex grasp of trauma prognosis is indicated by the classification into *Sadyapranahara*, *Kalantarapranahara*, *Vishalyaghna*, *Vaikalyakara*, and *Rujakara*.

For example:

- *Sadyapranahara* injuries (like *Hridaya*) lead to instant death, correlating with modern knowledge of fatal organ trauma.
- *Kalantarapranahara* injuries (like *Nabhi*) cause delayed death, similar to conditions such as peritonitis or slow internal bleeding.
- *Vishalyaghna* injuries (like *Guda*) anticipate the modern principle of "tamponade effect," where removal of an impaled object leads to uncontrolled bleeding.
- *Vaikalyakara* *Marmas* correspond to peripheral nerve injuries that cause permanent deformity or disability.

- *Rujakara* Marma represent sites rich in nerve supply where trauma produces unbearable pain but not mortality.

4.3. Surgical and Anatomical Precision

When practicing surgery, Sushruta, the father of Indian surgery, emphasized the need of avoiding Marma. This illustrates the surgical anatomy of early Ayurveda. Modern surgeons use similar precautions to avoid important anatomical regions like the carotid arteries, femoral vessels, and brachial plexus. Consequently, Marma Sharira describes the same anatomical problem using Ayurvedic terminology.

4.4. Therapeutic Potential (Marma Chikitsa)

Although Marma were first researched for their surgical and trauma-related applications, their therapeutic potential (Marma Chikitsa) is becoming more widely acknowledged. Applying light pressure, massage, or stimulation to particular Marma can:

- Relieve musculoskeletal pain (*Indrabasti, Kshipra*)
- Improve cardiac and respiratory function (*Hridaya, Apastambha*)
- Promote relaxation and stress reduction (*Talahridaya, Shankha*)
- Support rehabilitation in neurological disorders (paralysis, sciatica).

4.5. Relevance in Modern Lifestyle and Preventive Care

Marma stimulation can be used to treat contemporary lifestyle illnesses such musculoskeletal discomfort, stress, sleeplessness, and hypertension. For instance:

- *Talahridaya Marma* massage is used for stress and anxiety.
- *Shankha Marma* stimulation relieves migraine headaches.
- *Indrabasti Marma* activation eases calf muscle cramps.

Thus, Marma are not only trauma-sensitive points but also healing centers when approached therapeutically.

Marma essentially work as a site of convergence for trauma science, anatomy, physiology, and holistic therapy, demonstrating the ageless knowledge of Ayurveda and its relevance to contemporary practice.

5. CONCLUSION

Marma Sharira offers a multifaceted view of human anatomy. *Marma* are essential locations with important structural, functional, and energetic properties. The scientific validity of ancient Ayurvedic descriptions is demonstrated by their correlation with contemporary neurovascular and musculoskeletal structures. Clinically, they are useful in integrative therapies, forensic medicine, surgery, trauma care, and martial arts. There are encouraging prospects for holistic healing with the resurgence of *Marma Chikitsa*. As a result, studying *Marma* connects modern anatomy and medicine with traditional Ayurveda.

6. ACKNOWLEDGMENTS

Nil.

7. AUTHORS' CONTRIBUTIONS

All authors have contributed equally to conception, design, data collection, analysis, drafting, and final approval of the manuscript.

8. FUNDING

Nil.

9. ETHICAL APPROVALS

This study does not require ethical clearance as it is a review article.

10. CONFLICTS OF INTEREST

Nil.

11. DATA AVAILABILITY

This is an original manuscript, and all data are available for only review purposes from the principal investigators.

12. PUBLISHERS NOTE

This journal remains neutral with regard to jurisdictional claims in published institutional affiliation.

REFERENCES

1. Murthy KRS. *Susruta samhita*. Vols. 1, 2 and 3. Varanasi, Uttar Pradesh, India: Chaukhamba Orientalia; 2008.
2. Gupta KA. *Ashtanga hrdayam of vagbhata - vidyotini hindi commentary*. Varanasi, Uttar Pradesh, India: Chaukhamba Sanskrit Sansthan; 2005.
3. Joshi SK. *Marma science and principles of marma therapy*. 1st ed. Haridwar, Uttarakhand, India: Vani Publications; 2010.
4. Joshi SK. *Marma chikitsa vigyan (Hindi)*. Haridwar, Uttarakhand, India: Mrityunjay Mission; 2012.
5. Mishra A, Shrivastava V. Exploring the science of marma - an ancient healing technique - part 1: Its mention in ancient Indian scriptures. *Dev Sanskriti Interdiscip Int J*. 2020;17:43-51. doi: 10.31219/osf.io/e6mhy
6. Sharma PS, Sharma GP. Clinical significance of marma (vital points in body) - A review. *Int Res J Ayurveda Yoga*. 2022;5:144-146.
7. Frawley D, Ranade S, Lele A. *Ayurveda and marma therapy: Energy points in yogic healing. Part Two. Ch. 11. Fourth Printing*. USA: Lotus Press Publications; 2009.p. 162-163.
8. Kumar JS. *Marma chikitsa vigyanam*. 3rd ed. New Delhi: Vani Publications; 2015.
9. Joshi SK. *Marma science and principles of marma therapy*. 1st ed. Delhi: Vani Publications; 2010. p. 46.

How to cite this article:

Trivedi A, Chaudhary Y. Ayurveda View of *Marma Sharira* – A Conceptual Study. *IRJAY*. [online] 2025;8(9):43-46.

Available from: <https://irjay.com>

DOI link- <https://doi.org/10.48165/IRJAY.2025.80907>

Table 1: Marmas in different regions of the body. (The numeric digits next to the Marmas state their respective numbers in the body)

Urdhva Shakhagata (Upper limbs) (11×2)	Adho Shakhagata (Lower limbs) (11×2)	Udaragata (Abdomen) and Urogata (Thorax) (12)		Prishthagata (Back) (7×2)	Urdhwajatrugata Supraclavicular region) (37)	
		Abdomen (3)	Thorax (9)		Neck (14)	Head (23)
Talahridaya-2	Talahridaya-2	Guda-1	Hridaya-1	Amsa-2	Nila-2	Vidhura-2
Kshipra-2	Kshipra-2	Vasti-1	Stanamula-2	Amsaphalaka-2	Manya-2	Phana-2
Kurcha-2	Kurcha-2	Nabhi-1	Stanarohita-2	Vrihati-2	Matrika-8	Apanga-2
Kurchashira-2	Kurchashira-2		Apalapa-2	Parshvasandhi-2	Krikatika-2	Avarta-2
Manibandha-2	Gulpha-2		Apastambha-2	Nitamba-2		Utkshepa-2
Indravasti-2	Indravasti-2			Kukundara-2		Shankha-2
Kurpara-2	Janu-2			Katikataruna-2		Sthapani-1
Ani-2	Ani-2					Shringataka-4
Urvi-2	Urvi-2					Simanta-5
Lohitaksha-2	Lohitaksha-2					Adhipati-1
Kakshadhara-2	Vitapa-2					

Table 2: Names of Marmas included under different anatomical classes. (The numeric digits next to the Marmas state their respective numbers in the body)

*Mamsa Marma (11)	*Sira Marma (41)	*Snayu Marma (27)	*Asthi Marma (8)	*Sandhi Marma (20)	*Dhamani Marma (9)
Talahridaya (4)	Urvi (4)	Nabhi (1)	Kurcha (4)	Katikataruna (2)	Janu (2)
Indravasti (4)	Lohitaksha (4)	Nila (2)	Kurchashira (4)	Nitamba (2)	Kurpara (2)
Stanarohita (2)	Vrihati (2)	Manya (2)	Kshipra (4)	Ansaphalaka (2)	Gulpha (2)
Guda (1)	Parshvasandhi (2)	Matrika (8)	Ani (4)	Shankha (2)	Manibandha (2)
	Hridaya (1)	Shringataka (4)	Kakshadhara (2)		Kukundara (2)
	Stanamula (2)	Apanga (2)	Vitapa (2)		Krikatika (2)
	Apalapa (2)	Phana (2)	Ansa (2)		Simanta (5)
	Apastambha (2)	Sthapni (1)	Basti (1)		Adhipati (1)
			Utkshepa (2)		Avarta (2)
			Vidhura (2)		

*According to Acharya Sushruta (Sushruta Samhita, Sharira Sthana, Chapter 6) #According to Acharya Vagbhata (Ashtanga Hridaya, Sharira Sthana, Chapter 4)

Table 3: Classification according to the Size of Marmas (Sushruta Sharira, 6/28–30). (The numeric digits next to the Marmas state their respective numbers in the body)

Eka anguli pramana (1 finger size) (12)	Dwi anguli pramana (2 finger size) (6)	Tri anguli pramana (3 finger size) (4)	Eka hatheli/mushti pramana (1 palm/fist size) (29)	Ardha-anguli pramana (Half finger size) (56)	
Urvi (4)	Gulpha (2)	Janu (2)	Kurcha (4)	Kshipra (4)	Vrihati (2)
Kurchashira (4)	Manibandha (2)	Kurpara (2)	Guda (1)	Talahridaya (4)	Ansa (2)
Vitapa (2)	Stanamula (2)		Vasti (1)	Indrabasti (4)	Ansaphalaka (2)
Kakshadhara (2)			Nabhi (1)	Ani (4)	Krikatika (2)
			Hridaya (1)	Lohitaksha (4)	Vidhura (2)
			Nila (2)	Apalapa (2)	Phana (2)
			Manya (2)	Apastambha (2)	Apanga (2)
			Matrika (8)	Stanarohita (2)	Avarta (2)
			Simanta (5)	Katikataruna (2)	Utkshepa (2)
			Shringataka (4)	Kukundara (2)	Shankha (2)
				Nitamba (2)	Sthapani (1)
				Parshvasandhi (2)	Adhipati (1)