



UNVEILING THE POTENTIAL OF MARMA CHIKITSA IN PAIN MANAGEMENT OF KNEE OSTEOARTHRITIS: A CASE STUDY

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ABSTRACT

Purpose: *Janu Sandhigatavata* is a disease of *Vata Vyadhi* described in *Ayurveda* nearly correspond to osteoarthritis of knee joint. Its symptoms include *Shoola* (pain), *Shotha* (swelling) *Stabdhatva* (stiffness). Osteoarthritis (O.A.) is the second most common rheumatologic problem and is most frequent joint disease. As Pain is the major symptom which affects the person's day to day activities, so pain management is major target. Nowadays, therapeutic interventions normally used for its treatment are physiotherapy, hot fomentation, analgesics, steroids, etc. Using analgesics, NSAIDS, steroids doesn't necessarily show satisfactory effect and also have adverse effect. Therefore, *Marma Chikitsa* can be a nonmedicinal and non-invasive approach in pain management of *Janu Sandhigatavata*. **Methodology:** The present case study is subjected to assess the efficacy of *Marma Chikitsa* in pain management of *Janu Sandhigatavata*. A 51 years old male patient came to our institute with the complaint of pain in bilateral knee joint, swelling, Tenderness, crepitation. It is aggravated by walking and climbing stairs and relieved by rest. The pain is associated with limited range of movement. Patient had been under allopathic treatment but symptoms aggravated since past 6 month. **Result:** After *Marma Chikitsa* significant improvements were noticed in subjective parameter (*Sandhi Shoola, Sandhi Shoth, Grah, Asahatvam, Sphutan*) and objective parameters (range of motion, VAS scale, walking time) analysed during study illustrating the efficacy of therapeutic intervention. **Conclusion:** showed encouraging results in pain management of Knee Osteoarthritis in short duration of time.

KEYWORDS: Osteoarthritis, Janu Sandhigatavata, Marma Chikitsa, Pain management.

INTRODUCTION

Osteoarthritis is a disease characterized by degeneration of cartilage and its underlying bone within a joint accompanied by bony overgrowth resulting in pain and stiffness in the affected area. Most commonly affected joints, are the knees, hips, and those in the hands and spine. Osteoarthritis is the most common form of arthritis and is a major cause of pain and disability in elderly peoples.^[1] The diseases not only affect the articular cartilage, but involve the entire joint. Osteoarthritis is a long - term chronic disease characterized by the deterioration of cartilage in joints which results in bones rubbing together and creating stiffness pain and impaired movement. While OA is related to ageing, it is also associated with a variety of both modifiable and non-modifiable risk factor including Obesity, lack of exercise, gender predisposition, bone density, Occupational injury, trauma. In *Ayurveda*, Osteoarthritis can be correlated with *Sandhigatavata*. It is described

under *Vatavyadhi* in all the *Samhita*. In *Vridhdhavastha*, all *Dhatu*s undergo *Kshya*, thus leading to *Vataprakopa* and making individual prone to many diseases. Among them *Sandhigatavata* stands top in the list. In this way, the disease *Sandhigatavata* can be defined as a disease of *Sandhi* (Joint) with symptoms of *Sandhishula, Sandhishotha* and *Akunchana Prasarana Janya vedana* and in the later stage *Hanti Sandhigatah*.

The disease *Sandhigatavata* is *Kastasadhya* because it involves the *Marma*, it is situated in *Madhyama Rogamarga*, involvement of *Vatadosha*, mainly occurs in *Vridhdhavastha* i.e. *Dhatukshay Janya Kala*.

No treatment is available which can prevent or reverses or blocks the disease process. In Allopathy science, mainly analgesics, anti inflammatory drugs or surgery are the options for the treatment of Osteoarthritis. These

don't give satisfactory relief and also causes great adverse effect.

General treatment of Janusandhigata Vata

Sandhigatavata is a *Vatik* disease, mainly occurs due to *Dhatukshya* or *Avarana*, so general treatment of *Vatavyadhi* can be adopted, keeping an eye on its etiology, common treatment like *Snehana*, *Svedana*, *Mridu Samshodhana*, *Basti* and *Vatahara Aushadha*, *Ahara* and *Vihara* may also be applicable in *Sandhigatavata*. As a specific line of treatment, *Acharya Sushruta* (Su. Chi. 4/8) and *Acharya Vagbhatta* (A.S. Chi. 23/13, A.H. Chi. 21/19 & 22) have described *Snehana*, *Upanaha*, *Agnikarma*, *Bandhana*, *Mardana* and *Svedan* for the treatment of *Sandhigatavata*.

CASE REPORT

A 51 years old male patient teacher by profession. The patient had no past medical or surgical history, with a height of 176 cm and weight 78 kg. He consulted in the outpatient department of Pt. Khushilal Sharma Government Ayurveda college, Bhopal (MP) with the complaint of pain in bilateral knee joint, swelling, Tenderness, crepitation. It is aggravated by walking and climbing stairs and relieved by rest. The pain is associated with limited range of movement. Patient had been under allopathic treatment but symptoms aggravated since past 6 month. He was diagnosed as a case of Knee Osteoarthritis. He was taking analgesics and anti-inflammatory medicine for pain management.

History of Past Illness

No history of hypertension, diabetes mellitus or any other serious illness.

Table 1: Marma points stimulated in Janu Sandhigata Vata.

S. No	Marma	Stimulation Time	Sitting of Marma Chikitsa	Total time
1	Indrabasti Marma	0.8 sec	Twice a day	21days
2	Gulph Marma	0.8 sec	Twice a day	21days
3	Janu Marma	0.8 sec	Twice a day	21days

- A steady and moderate pressure will be applied slowly and gently.
- Pressure will be increased gradually depending upon patient strength.
- During the therapy, therapist was supposed to continuously watch the facial expression of the patients.

ASSESSMENT CRITERIA

1. Sandhi Shoola

Parameters	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

Surgical history: NAD.

Personal history

- Bowel - Constipated
- Appetite - Normal
- Micturation - Normal
- Sleep - Disturbed due to pain
- Allergy and addiction – Nil.

Clinical Findings

On physical examination general health of the patient was good his pulse was 76/min, BP was 130/90 mm of Hg, the patient was afebrile. He has *Vata-pittaj Prakrati*, *Madhyam Vayah*, *Avara Satva*, *Avara Vyayama Shakti*. The range of motion of Knee joint was restricted. On examination swelling and stiffness was found over knee joint. There was no significant finding on lab investigation. X ray of Knee joint suggested Possible joint space narrowing and osteophyte formation.

Treatment

The treatment involved administration of *Marma* therapy. The details of administration are as follows.

Marma Therapy

The present study includes stimulation of 3 *Marma Gulph, Janu & Indrabasti Marma* & these will be stimulated for 15 - 18 times on an average in single sitting.

2. Sandhi Shoth

Parameters	Grade
No Swelling	0
Slightly obvious	1
Covers well over the bony prominence	2
Marked and much elevated	3
Severe and very much elevated	4

3. Sandhi Graha

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

4. Range of motions

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

5. Sandhi Sphutan

Parameters	Grade
No Crepitus	0
Occasional Crepitus	1
Persistent and Palpable Crepitus	2
Persistent and Audible Crepitus	3

6. VAS Scale

S. No.	Pain	Grade
1	VAS range in between 0-2	0
2	VAS range in between 2-4	1
3	VAS range in between 4-6	2
4	VAS range in between 6-8	3
5	VAS range in between 8-10	4

RESULT

Characteristics	Before treatment		After treatment	
	Right	Left	Right	Left
Pain	3	2	0	0
Swelling	2	2	1	1
Stiffness	2	1	1	0
Crepitus	2	1	1	1
Range of motion	2	1	0	0
VAS Scale	2	1	0	0

DISCUSSION

This case study demonstrates the efficacy of *Marma Chikitsa* in pain management of *Janu Sandhigata Vata*, a condition comparable to osteoarthritis of the knee. The patient experienced significant relief in pain, swelling, stiffness, improved range of motion, and enhanced overall quality of life. Specifically, the patient's VAS score for pain decreased from 6 to 2 for right knee and from 4 to 1 in left knee, indicating significant pain

reduction. The *Marma Therapy* administered for the management of *Janu Sandhigata Vata* included stimulation of 3 *Marma Gulph*, *Janu & Indrabasti Marma* by applying pressure on these locations. Study conducted by Mane Pravin et al.^[1] and Mishra Alka et al.^[3] have similarly reported reductions in pain and improvements in joint function among patients with osteoarthritis following *Marma therapy*. These studies support our findings, indicating that *Marma Chikitsa* can

be an effective intervention for managing *Janu Sandhigatvata* symptoms.

Marma Chikitsa is where the application of pressure stimulates the *Marma* points inducing the flow of *Prana* (vital energy) along a complete system through subtle channels called *Nadis*.

As *Marmas* are the seats of *Prana*, the vital life force that governs the physical and subtle processes of the body, the stimulation of *Marmas* can alter the state of *Prana* at these locations, causing a corresponding effect on the physical and subtle processes, and the flow of energy.^[4]

Therefore, by the proper stimulation of *Marmas*, the *Prana* 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. Since *Prana* is connected to *Vata Dosha*, whose vitiation leads to the maximum types of diseases, hence *Marma Therapy* can be especially useful in treating the *Vata* disorders, which correspond to chronic degenerative diseases^[5] Thus, stimulation of the *Marmas* can balance the *Vyana Vayu* and *Vata Dosha*^[6] resulting in the corresponding healing effect.

Nowadays, therapeutic interventions normally used for treating osteoarthritis include physiotherapy, hot fomentation, use of, analgesics, steroids, etc. However, the use of analgesics, NSAIDS, steroids doesn't necessarily show satisfactory effect and can cause adverse effect. As Pain is the major symptom impacting daily activities, so pain management is major target. Therefore, *Marma Chikitsa* can be a non-medicinal and non-invasive approach in pain management of osteoarthritis.

CONCLUSION

This case study demonstrates the potential efficacy of *Marma Chikitsa* in pain management of knee osteoarthritis. The intervention showed significant improvement in pain relief and functional mobility without adverse effects, highlighting its promise as a non-invasive and non-medicinal alternative for Knee osteoarthritis pain management.

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