

**EFFICACY OF MARMA CHIKITSA AND SARPAGANDHA CHURNA IN THE  
MANAGEMENT OF ESSENTIAL HYPERTENSION: A CASE STUDY****Dr. Vandna Raje Singh<sup>1\*</sup>, Dr. Rita Marwaha<sup>2</sup>, Dr. Pankaj Gupta<sup>3</sup>, Dr. Swatantra Kumar Chourasiya<sup>4</sup> and  
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**ABSTRACT**

Nowadays, lifestyle, stress, and food choices have made hypertension a worldwide health concern impacting people all over the world. It is a potentially fatal non-communicable illness that contributes to coronary vascular disorders such as stroke and myocardial infarction. This disease affects roughly 18% of people in rural areas and 40% of people living in cities worldwide. Many anti-hypertensive medications are currently available to control hypertension; however, because of their long-term or lifetime nature and potential side effects, a safe and financially sound management strategy is needed. In Ayurveda, systemic hypertension can be understood as the participation of vitiated Doshas, where Vata and Pitta are the dominant Tridoshas, which prevent the movement of these Doshas in the respective Srotas. The concept of Avarana gives a better understanding of hypertension, which should be considered for better results in Ayurvedic treatment of diseases. Therefore, an attempt will be made here to understand hypertension from Ayurvedic concepts and to discuss the management of this condition from an Ayurvedic perspective. Marma science emphasizes crucial points on the body surface known as Marmas. The occurrence of an injury at these vital points can potentially lead to disability, dysfunction, or even the termination of life. Considered as specialized pranic switches within the body, stimulating Marma points can lead to the balanced flow of Prana (life force) in different body parts, thereby yielding the desired therapeutic benefits.

**KEYWORDS:** Hypertension, Ayurveda, Doshas, Vata, Pitta, Tridosha, Srotas, Avarana, Marma.**INTRODUCTION**

Hypertension is a health issue distressing the mankind throughout the globe. It is a condition in which the blood pressure is chronically elevated i.e. 140/90 mm Hg or higher. Elevated level of blood pressure correlate directly with the risk of developing cardio vascular disorders (CVD) and stroke leading to mortality. According to the report, only 54% of adults with hypertension are diagnosed, 42% receive treatment, and a mere 21% have their hypertension controlled.<sup>[1]</sup>

In Ayurvedic classics, Hypertension term is not mentioned, but on the basis of its symptomatology is found in the chapters of Vata vyadhi, Prameha, Hrdayaroga. It's correlated with Vyanabala vaishmya i.e. vikriti (abnormality) of vyan vayu (a subtype of vata, that is situated in cardiac region). In the pathogenesis of hypertension, vyanvayu along with prana and apana vayu get affected.<sup>[2]</sup>

According to Acharya Charaka, in case of unknown disease, the physician should try to understand the nature

of the disease through Dosha, the site of manifestation, etiological factors and then should initiate the treatment.<sup>[3]</sup> Hence it becomes necessary to study multiple factors like Dosha Vriddhi, Dhatu Dushti, involved Srotas and their role in causation of hypertension for proper understanding of disease and its Samprapti to plan its Samprapti Vighatanameva Chikitsa and prevention.

There are totally 107 marmas in the body under four categories. Marma is the meeting point of Mamsa, Asthi, Sira, Snayu, Dhamani and Sandhi and where the Prana is concentrated.<sup>[4]</sup> They can also be thought of as the intersection of eternity and relativity, or the meeting point of satva, rajas, and tamas, or vata, pitta, and kapha. Talhridaya Marma and Ani Marma, with their cardiovascular effects, help prevent essential hypertension, while Sarpagandha, an Ayurvedic plant drug, is widely recognized as antihypertensive.<sup>[5]</sup>

### Classification of BP in adults as per JNC VII criteria<sup>[6]</sup>

BP Classification	SBP mmHg	DBP mmHg
Normal	<120	and <80
Pre hypertension	120-139	Or 80-89
Stage 1 hypertension	140-159	or 90-99
Stage 2 hypertension	>160	Or >100

### CASE STUDY

A 55-year-old female patient who was normal before two months developed symptoms like headache, Fatigue, Giddiness, Disturbed sleep and heaviness in the chest area. Two months before, she was suffering these symptoms; she went to the general physician clinic who had diagnosed essential hypertension, and she was prescribed antihypertensive medicines but did not get relief. After that, she came to the OPD of Pt. Khushulal Sharma Govt. (Auto) Ayurveda Institute for treatment. The registration no. was 35610, dated May 24, 2024. The patient was complaining of headache, fatigue, Giddiness, Disturbed sleep and heaviness in the chest. After taking

the detailed history, the consent was taken from the patient.

### General Examination

B.P. - 160/100 mmHg  
Pulse - 110/min  
Respiratory rate - 26/min  
Temperature - 98.6 ° f  
Weight - 76 kg

### Systemic Examination

Rest of the systemic examination did not reveal any significant abnormality.

### Intervention

The treatment was carried out with the Marma Chikitsa and Sarpagandha Churna for 21 days with follow up every 07 days. During this period, intake of routine food and avoid excess salt intake, spicy food was strictly follow up.

### Assesment Criteria

Sr. No.	Subjective Criteria	Grade 0	Grade 1	Grade 2	Grade 3	Grade 4
1	Shiroruk (Headache)	Nil	Rarely headache relieves without medication	Headache relieves by rest; doesn't disturb daily activities	Severe headache disturbs daily activities requires medication	Continuous/ severe headache disturbs sleep and daily activities and also not managed by the medication
2	Klama (Fatigue)	Nil	Rarely feeling of tiredness without any exertion	Rarely feeling of tiredness without any exertion with inability in concentration	Frequently feeling of tiredness without any exertion with inability in concentration	Continuous feeling of tiredness without any exertion with inability in concentration
3	Bhrama (Giddiness)	Nil	Rarely Bhrama for some movement during change of posture	Often for some movement during change of posture	Often for each movement even in lying condition also	Patient unable to hold himself without any support
4	Anidra (Disturbed sleep/ Insomnia)	Sound sleep	Disturbed sleep, wakes-up 1-2 times a night (Khandita Nidra)	Difficult onset sleep remains disturbed in night (Alpa Nidra)	Very less sleep, in small intervals and makes patient irritable (Atialpa Nidra)	Unable to sleep without medicine (Anidra)

### Treatment plan Marma Chikitsa

S. NO.	Marma	Stimulation time	Sitting	Total time
1	TALHRIDAYA	0.8 Sec	Twice a day	21 days
2	ANI	0.8 Sec	Twice a day	21 days

### Drug And Posology

Drug	Dose	Total time
Sarpagandha Churna	2 gm BD	21 days

**RESULTS****Subjective criteria Assessment : Before and After Treatment**

Symptoms	BT	AT	Percentage (%) Relief
Shiroruk (Headache)	3	1	66.6%
Klama (Fatigue)	4	2	50%
Bhrama (Giddiness)	3	1	66.6%
Anidra (disturbed Sleep/ insomnia)	2	1	50%

**Objective criteria Assessment: Before and After Treatment**

Blood Pressure	BT	AT (7th day)	AT (14th day)	AT (21st day)
SBP/DBP	160/100 mmHg	150/90 mmHg	140/80 mmHg	130/80 mmHg

**OBSERVATIONS**

After taking a follow-up of the patient seven days later, the blood pressure was measured at 120/80 mmHg, and the pulse rate also came to 82 per minute. The symptoms, i.e., headache, fatigue, giddiness, disturbed sleep and heaviness in the chest area, had disappeared. The patient had followed the diet and restrictions as advised. After this, the patient was advised to continue with Marma Chikitsa and medicine for the next 7 days.

**DISCUSSION**

*Marma Sharir* is a unique concept of paramount significance in Ayurved Rachana Sharir. The evidence-based literature on *Marma Chikitsa* is very sparse. Talahridaya marma and Ani marma are present in bilateral upper and lower limbs. The classical texts of Ayurveda instruct to prevent the marma or vital points from being injured. But, in the current era, these marma are physically stimulated in controlled ways to treat diseases. Talahridaya marma and Ani marma have the cardiovascular effect in essential hypertension, and Sarpagandha has the main constituent, has antiadrenergic and antidepressant properties, and is a well-proven antihypertensive. In this case, Marma Chikitsa and Sarpagandha Churna (*Rauwolfia serpentina*) are both given to the patient for 21 days. So from the above discussion, we can say that the marma chikitsa along with sarpagandha churna are very effective in essential hypertension.

**CONCLUSION**

On the basis of our clinical observation, it is concluded that marma Chikitsa is a non-pharmacological therapy, and sarpagandha churna is also antihypertensive, which is safe and effective without producing adverse effects in the management of essential hypertension.

**REFERENCES**

1. World Health Organization. Global report on hypertension: the race against a silent killer. Geneva, Switzerland: World Health Organization, 2023; 1–27.
2. Vaidya Ganga sahai pandey edited, Charaka samhita, Chikitsa Sthana, chapter 15, sloka 36-37; Chowkambha sanskrit series, Varanasi, 1970.

3. Charaka Samhita, Yadavaji Trikamji, Reprint edition, Chaukhamba Sansrit Sansthan, Varanasi, 2009, Sutrasthana, 18/46: pg 108.
4. Nibandhasangraha, Dalhana commentary, Susrutha Samhita, Shareerasthana Marmashareera (6<sup>th</sup> chapter); Reprint 2014, Varanasi: Chaukhamba Krishnadas Academy, Page no 369.
5. Vakil R J. *Rauwolfia serpentina* in the treatment of high blood pressure: a review of the literature. *Circulation*, 1955; 12(2): 220–229.
6. Golwalla medicine, Aspi F Golwalla, Sharukh A Golwalla, edited by Milind Y Nadkar, Jaypee Brothers medical publishers (P) Ltd, New Delhi, 25<sup>th</sup> Edition, 2017; Chapter, P.No.-299.