

ANATOMICAL REVIEW ON TALAHRIDAYA MARMA

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Haridwar.**ABSTRACT**

Ayurveda is a traditional medical system. The Vedas (about 5000 B.C.) contain descriptions of ayurvedic medicine, making it the oldest recognized branch of medicine. One of the key topics of Ayurveda is "MARMA," which Acharya Charak discussed in "Trimarmeeya Siddhi Adhyaya" under the headings "Vasti, Shira, and Hridaya." Marma may have received top priority in our Samhitas since Vaidyas back in the day had to handle more emergencies during times of war. When affected, the Marma are the critical places that cause life to end. Thus, understanding Marma is crucial from a surgical standpoint. Not only in our writings but also in the Vedas, Upanishad, Itihaasa and Puranaas are the specifics of Marma included. Talhridaya Marma is a type of

Mansa Marma which is situated at the centre of Hastatala and Paadatala.^[1] They are four in number which is located one each in all four limbs. Additionally, it is a part of Kalaantara Pranahara Marma and Sakthagata Marma. Any damage to Talahridaya Marma causes Ruja (Extreme pain) and Marana (Gradual death) over period of time.^[2] In order to understand the notion of Talaharidaya Marma's significance in the human body and in Rachana sharir, cadaveric dissection is specifically discussed in this paper as an introduction in a systematic and well-organized manner.

KEYWORD: Talhridaya Marma, Anatomy, Cadaveric dissection.**INTRODUCTION**

Talahridaya Marma is a Mansa Marma which is situated at Hasta (hand) and Paada (foot). It can be assumed that the word Talahridaya's etymology is Hridaya. Acharya Sushruta states that there are four of them, one in each of the four limbs. Also saying the same was Acharya

Vagbhata. Talahridaya Marma is precisely situated in the center of the palm, on the line of the middle finger in both hands, and in the middle of the sole, on the line of the middle toe in both feet, on the lower limbs. Marma, according to Sushruta Acharya, is an amalgam of Mansa, Sira, Snayu, Asthi, and Sandhi, where Prana resides naturally.^[3] According to Dalhana, the Sushruta Samhita's author, Marma is the one which cause death.^[4] It is Chethana Sthana, according to Acharya Charaka, the agony felt after an injury will be particularly intense compared to other body parts.^[5] Marma is mentioned by Vagbhata in Astanga Hridaya as the site of the confluence of the Mansa, Sira, Snayu, Asthi, Sandhi, and Dhamani. He added that Marma should be areas that become sore, tender, and throb inexplicably after suffering an injury.^[6]

Talahridaya Marma falls under a number of classifications, including:

- 1- Sakhagata Marma
- 2- Mansa Marma
- 3- Kalantra pranahara Marma

Measurement

Talahridaya Marma takes up approximately the same dimension as the breadth of middle segment of one's own middle finger, or one-half of an Angula Pramana.^[7]

Injury result

Marmas are said to be “SHALYA VISHAYAARDHA” By Acharya Sushruta because persons die immediately if they are injured; even if some of them survive due to surgeon's efficiency, they definitely become victim of disability. Any damage to Talahridaya Marma results in Ruja and eventually, death, which happens gradually over time. If an upper limb is hurt, the upper part of the body may experience the majority of the symptoms. The symptoms are primarily felt in the lower parts of the body if the damage is to a lower limb.

Dissection of hand

The incision was given downward along the medial border of the upper arm till its junction of upper one third and lower two third. we made an incision in middle of deep fascia of the upper arm right down to the elbow joint. A horizontal incision was given along the distal palmar crease of front of the wrist and a vertical incision was given from the centre of above incision through the palm to the centre of the middle finger. Along the distal palmar crease, a second horizontal incision was made, this time with an oblique incision that began 3 cm

distally and extended to the tip of the thumb's distal phalanx. The reflection of the palm's skin flaps. Thus the skin of the palm gets divided into three areas. After reflection of skin, Superficial fascia was identified. Deep fascia was modified to form the flexor retinaculum at wrist, palmar aponeurosis in the palm, and fibrous flexor sheaths in the digits.



The Ulnar nerve and vessels, palmar cutaneous branch of the median and ulnar nerves and the tendon of Palmaris longus muscle were found to pass superficial to it. Palmaris Longus was found inserted into the distal half of flexor retinaculum and the apex of palmar aponeurosis. In the middle of the palm, there is a broad, triangular section of deep fascia called the palmar aponeurosis. Its four slips and base near the head of the metacarpals were recognized, as well as its apex at the flexor retinaculum. The superficial and deep arches of the radial artery are formed after the radial artery passes through the anatomical snuff box.

Dissection of sole of foot

The incision was given from heel through the root to the tip of the middle toe. The middle toe's tip was cut from the heel through the middle toe's root. Each side of the sole was reflected by skin and superficial fascia. The following structures, ranging from shallow to deep, were discovered when the sole of the foot was dissected. The medial process of the calcaneal tuberosity was revealed to be posteriorly linked to the exceptionally thick plantar aponeurosis.

Medial plantar nerve- Branch of tibial nerve, observed to give branches to abductor hallucis and flexor digitorum brevis, then it was running forwards between them.

Flexor digitorum brevis- It has been noted that the flexor digitorum muscles are present next to the plantar aponeurosis and plantar vessels. It originated from the medial tubercle, plantar aponeurosis, and medial and lateral intermuscular septa, three different areas. Between

the flexor digitorum brevis and the flexor accessorius, the lateral plantar nerve passed through, dividing into the flexor accessorius and the abductor digiti minimi.

Deep plantar arch- Contributed mainly by the lateral plantar artery.



RESULT

It can be inferred that the word's derivation refers to the "Hridaya" (center) of the Hastatala and Paadatala. Thus, Talahridaya Marma was derived. There are four Talahridaya Marma in all. The center of the palm in a straight line with the middle finger and the center of the sole in a straight line with the middle toe, respectively, are the locations of this Marma. It takes up one-half of an angular space.

Talahridaya Marma is included into Mansa Marma since the majority of the structures flowing through the area are muscles, despite the presence of numerous nerves, arteries, tendons, and ligaments. There are so many muscles found during dissection, may be because of this Talahridaya Marma is considered under Mansa Marma even though there are so many nerves, vessels, tendons, bones, joints and fascia are present in both hand and foot.

DISCUSSION

It can be inferred that the word's derivation refers to the "Hridaya" (center) of the Hastatala and Paadatala. Thus, Talahridaya Marma was derived. There are four Talahridaya Marma in all. The center of the palm in a straight line with the middle finger and the center of the sole in a straight line with the middle toe, respectively, are the locations of this Marma. It takes up one-half of an angular space. Talahridaya Marma is included into Mansa Marma since the majority of the structures flowing through the area are muscles, despite the presence of numerous nerves, arteries, tendons, and ligaments. After a certain period of time, the injury to

the region of Talahridaya Marma can also cause sepsis and other infections.

CONCLUSION

The region of Talahridaya Marma in the hand is the middle of the palm, running parallel to the middle finger, and contains the superficial palmar arch, tendons of the forearm muscles flexor and extensor, oblique head of the adductor pollicis, second and third lumbricals, second and third palmar intrinsics, and hand nerves protected by the palmar aponeurosis, superficial fascia, and a thick layer of skin. The region of Talahridaya Marma in the foot is where the flexor, extensor compartment of the sole, and oblique head of the adductor hallucis muscles and the foot nerves are located. These muscles and nerves are protected by the plantar aponeurosis, superficial fascia, and a thick layer of skin.

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