

# **INTERNATIONAL AYURVEDIC MEDICAL JOURNAL**







**Research Article** ISSN: 2320 5091 **Impact Factor: 5.344** 

# A COMPARATIVE CLINICAL STUDY ON THE EFFICACY OF MARMA CHIKITSA AND STIMULATION OF MARMA POINTS USING TENS IN MANAGEMENT OF CERVICAL **SPONDYLOSIS**

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https://doi.org/10.46607/jami07p4052020

(Published online: July 2020)

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Article Received: 20/08/2020 - Peer Reviewed: 23/08/2020 - Accepted for Publication: 23/08/2020



#### **ABSTRACT**

**Background:** Cervical Spondylosis a degenerative disc disease, pain being the main first concern along with stiffness and decreased movements of neck. Marma chikitsa is done by employing electrical stimulation using TENS or adapting Varma chikitsa explained in Siddha system of medicine on Marma points explained by Acharya Sushruta.

**Objectives**: To compare the efficacy of *Marma* manipulation and electrical stimulation using TENS in the management of Cervical Spondylosis.

**Methods:** 40 Subjects diagnosed with Cervical Spondylosis was divided into 2 groups of 20 each. Group A was treated with TENS and Group B was treated with *Marma Chikitsa* for 7 days respectively.

**Results:** The outcome of treatment after 14 days was statistically significant based in criteria taken for study.

**Interpretation & Conclusion:** Group A showed better effect in reducing stiffness, pain, and improves angle of flexion, extension, side bending, tendon reflexes, power of hand muscle and rotation of neck. Whereas Group B was effective in improving the restricted movements, tenderness and mild improvement on power of hand muscles.

Keywords: Marma Chikitsa, TENS, Cervical Spondylosis

#### INTRODUCTION

Neck pain is a common musculoskeletal problem which affects a substantial proportion of people in there later lives. It has long been recognized that neck pain can result in symptoms and problems being referred into the upper limb.

Cervical Spondylosis is a degenerative condition that effects the cervical spine. Pain and stiffness are the primary symptoms. Often, there are referred symptoms in the upper limb. Radiation of pain occurs from shoulder to digits along the course of the nerve indicates nerve root compression <sup>1</sup>.

Ayurvedic literature explains that Vata Dosha is responsible for all sorts of movements of the body and its derangements leads to loss of the same. Vishwachi, Manyasthambha, Greevastambha and Avabahuka disorders comes Under Urdhwa jatrugatavikaras and 80 Nanatmaja Vikaras of Vata as separate entity<sup>2, 3</sup> with their signs and symptoms<sup>4</sup>, which are having certain similarities with cervical spondylosis, Ayurveda explains many vital points of anatomical and physiological significance. These points are called as 'Marma'<sup>5</sup> Prana circulates throughout the body and these Marma points acts as junctions where Prana is specially seated. Any injury affecting the Marma Sthana results in disturbance in the flow of Prana leading to the manifestation of the disease. Manipulating and stimulating Marmas in proper manner improves flow of Prana in the body. In Ayurveda they explained Marma points but there is lack of description about Marma Chikitsa. Siddha system<sup>6</sup> of medicine gives detailed description about Marma Chikitsa and manipulation methods over these points.

Electrical stimulation of acupuncture points in the management of pain and symptoms have been explained in *Acupuncture*<sup>7</sup> of Traditional Chinese system of medicines

So proper knowledge of *Marma* along with manipulation and electrical stimulation may show better results. No study has been carried out on this, the study is planned to evaluate and to compare the efficacy of *Marma* manipulation and electrical stimulation using

doi: 10.46607/iamj07p4052020

Transcutaneous Electrical Nerve Stimulation (TENS) on *Marma* points in the management of Cervical spondylosis.

#### **Objectives**

- To study the effect of manipulation of Marma points as in the management of Cervical Spondylosis.
- To study the effect of electrical stimulation on *Marma* points using TENS in the management of Cervical Spondylosis.
- To compare the efficacy of *Marma* manipulation and electrical stimulation using TENS in the management of Cervical Spondylosis.

#### **Materials and Methods**

#### Sources of data

#### **Clinical source:**

40 Patients attending the OPD and IPD of Muniyal Institute of Ayurveda medical science were selected for the study with their consent.

#### Method of collection of data

A detailed case Proforma was prepared which included the detailed history, physical signs and symptoms of Cervical spondylosis.

#### **Inclusion Criteria:**

Clinically diagnosed cases of Cervical spondylosis were taken for the study.

- Subjects of age group- 20 to 70 years (Irrespective of gender).
- Patients fit for Marma Chikitsa
- Patients presenting with the signs and symptoms of Cervical Spondylosis.

#### **Exclusion Criteria:**

- Patient contraindicated for Marma Chikitsa
- Patient with traumatic injury of Cervical Spine
- Patient with major systemic disorders neurodegenerative condition of spine like the malignancies etc. that may interfere with the course of treatment.

#### **Laboratory Investigations:**

- Complete blood test
- Plain X-ray of Cervical spine (AP and LAT)
- MRI (if necessary)

#### **Interventions:**

*Marma* Points located in neck and upper extremity involved in Cervical spondylosis was selected and Manipulation/TENS were given.

#### Group-A

Procedure - Stimulation using TENS

Time - 20 minutes

**Duration of treatment** - 7 days
Follow up - on 14<sup>th</sup> day

Group-B

Procedure - *Marma chikitsa*Time - 20 minutes **Duration of treatment** - 7 days

Follow up - on 14<sup>th</sup> day

#### Table 1

S.NO.	Marma	Varma <sup>8</sup>	Manipulation technique	Stimulation technique TENS <sup>9</sup>
1.	Krikataka	Porchaikalam	Using ½ <i>Maathirai</i> pressure, apply clockwise rotation 3 times and gently drag up to the tip of right shoulder similarly anticlockwise rotation 3 times and drag to the tip of the left shoulder.	
2.	Amsa	Mudichu	Using ¼ <i>Maathirai</i> pressure, press and release 3 times	
3.	Amsaphalaka	Kaichulukki	Using <sup>1</sup> / <sub>4</sub> <i>Maathirai</i> pressure, press and release 3 times	
4.	Brihati	Chhipi	Using <sup>1</sup> / <sub>4</sub> Maathirai pressure, apply upward and downward movement 3 times	
5.	Kakshadhara	Chavvu	Press and release <i>Kshipra</i> and <i>Lohitaksha marma</i> alternately for 3 times.	A continuous electrical wave of
6.	Kurpara	Koimottu	Press and release 3 times by using ½ <i>Maathira</i> i pressure.	intensity (amplitude), high frequency (10–200 pps) for 20
7.	Indrabasti	Teetha	Press and release 3 times by using ½ <i>Maathirai</i> pressure.	minutes.
8.	Manibandha	Manibandha	Press and release 3 times by using ½ <i>Maathirai</i> pressure.	
9.	Kshipra	Kawlikalam	Press and release 3 times by using pulp part of middle three fingers.	

*Maathirai* – pressure exerted by the pulp of the thumb.

doi: 10.46607/iamj07p4052020

During TENS Fig: 2, pulsed electrical currents are generated by a small battery-operated TENS device through which Currents from the TENS device was delivered through the skin by two self-adhering electrode pads.





Fig: 1 Fig: 2

# **Assessment Criteria Subjective**

- Visual analogue scale (for pain assessment)
- Stiffness

## **Objective**

- Tenderness
- Angle of neck movement.
- Neck Disability Index, NDI. 10

Measured by using Goniometer and based on degree obtained by using Goniometer, statistically values were analysed.

**Statistical analysis:** The scores of assessment criteria were analyzed statistically in the form of mean score B.T (Before Treatment), A.T. (after Treatment), Difference of mean (B.T. - A.T), S.D. (Standard Deviation), S.E (Standard Error). The *Wilcoxon* Signed-*Ranks Test* was carried out for within the groups and *Mann Whitney U* test for between the groups using GraphPad In-Stat and SigmaStat 4.0. The results were considered Significant or Insignificant depending upon P value.

#### **Observations and Results**

#### Table 2

Group A	BT Mean			DIFF	%	Wilcoxon rank test				
						SD	SEM	P	Significant	
Pain	5.85	AT	3.200	2.65	45.3	0.812	0.181	< 0.001	ES	
		AF	2.850	3.00	52.3	1.170	0.261	< 0.001	ES	
Stiffness	2.45	AT	1.500	0.95	38.8	0.510	0.114	< 0.001	ES	
		AF	1.200	1.25	51.0	0.638	0.143	< 0.001	ES	
Restricted Movements	1.95	AT	1.400	0.55	28.2	0.510	0.114	< 0.001	ES	
		AF	1.350	0.60	30.8	0.502	0.112	< 0.001	ES	
Flexion	31.5	AT	39.00	-7.50	23.8	2.565	0.573	< 0.001	ES	
		AF	38.50	-7.00	22.3	4.413	0.986	< 0.001	ES	
Extension	30.25	AT	37.25	-7.25	24.0	2.552	0.570	< 0.001	ES	
		AF	36.00	-5.75	19.0	4.375	0.978	< 0.001	ES	
Rotation	36.75	AT	44.00	-7.25	19.8	3.024	0.676	< 0.001	ES	
		AF	46.75	-10.0	27.3	3.627	0.811	< 0.001	ES	
Side Bending	29.00	AT	35.25	-6.25	21.5	3.582	0.801	< 0.001	ES	
		AF	36.00	-7.00	24.2	3.770	0.843	< 0.001	ES	
Tenderness	2.10	AT	1.350	0.75	35.7	0.444	0.099	< 0.001	ES	
		AF	0.900	1.20	57.1	0.410	0.091	< 0.001	ES	
Power of Hand muscles	3.90	AT	4.45	-0.55	14.1	0.510	0.114	< 0.001	ES	
		AF	4.55	-0.65	16.7	0.489	0.109	< 0.001	ES	
Tendon reflexes	2.85	AT	3.60	-0.75	26.4	0.550	0.123	< 0.001	ES	
		AF	3.85	-1.00	35.1	0.458	0.102	< 0.001	ES	
Neck Disability Index	12.4	AT	8.45	3.95	31.9	0.825	0.184	< 0.001	ES	
		AF	5.35	7.05	56.9	1.317	0.294	< 0.001	ES	

Table 3

Group B	BT Mean			DIFF	%	Wilcoxon rank test				
						SD	SEM	P	Significant	
Pain	6.6	AT	4.65	1.95	28.0	1.099	0.245	< 0.001	ES	
		AF	4.50	2.1	31.9	0.788	0.176	< 0.001	ES	
Stiffness	2.15	AT	1.55	0.60	28.0	0.502	0.112	< 0.001	ES	
		AF	1.50	0.65	30.2	0.489	0.109	< 0.001	ES	

Restricted Movements	1.85	AT	1.50	0.35	19	0.489	0.109	0.0156	S
Restricted Movements	1.83				/				
		AF	1.25	0.60	32.5	0.598	0.133	0.0020	ES
Flexion	31.0	AT	34.0	-3.00	9.7	2.513	0.562	< 0.001	ES
		AF	33.5	-2.50	8.2	3.441	0.769	0.0166	S
Extension	29.5	AT	33.5	-4.00	13.6	3.078	0.688	< 0.001	ES
		AF	34.0	-4.50	15.3	4.560	1.020	< 0.001	ES
Rotation	37.5	AT	41.25	-3.75	10.1	2.221	0.496	< 0.001	ES
		AF	42.25	-4.75	12.8	4.435	0.991	< 0.001	ES
Side Bending	30.5	AT	34.0	-3.50	11.5	3.285	0.734	< 0.001	ES
		AF	35.0	-4.50	12.9	3.940	0.881	< 0.001	ES
Tenderness	1.8	AT	1.40	0.40	22.2	0.502	0.112	0.0080	VS
		AF	1.05	0.75	41.6	0.444	0.099	< 0.001	ES
Power of Hand muscles	3.85	AT	4.30	-0.45	11.7	0.510	0.114	0.0040	VS
		AF	4.35	-0.50	13.0	0.513	0.114	0.0020	VS
Tendon reflexes	2.80	AT	3.25	-0.45	16.1	0.604	0.135	0.0140	S
		AF	3.60	-0.80	28.6	0.523	0.117	< 0.001	ES
Neck Disability Index	12.5	AT	9.65	2.85	22.8	0.670	0.150	< 0.001	ES
•		AF	7.40	5.10	40.8	1.021	0.228	< 0.001	ES

Table 4:

PARAMETER	ME	EAN	Mean	S	SD	S	E	P	Result
	Group	Group	diff	Group	Group	Group	Group	value	
	A	В		A	В	A	В		
Pain	3.200	4.65	-1.45	1.005	1.268	0.224	0.283	< 0.001	ES
	2.850	4.50	-1.65	0.745	0.827	0.166	0.185	< 0.001	ES
Stiffness	1.500	1.55	-0.05	0.760	0.604	0.170	0.135	0.805	NS
	1.200	1.50	-0.30	0.615	0.888	0.137	0.198	0.313	NS
Restricted Move-	1.400	1.50	-0.10	0.680	0.513	0.152	0.114	0.793	NS
ments	1.350	1.25	-0.10	0.933	0.786	0.208	0.175	0.733	NS
Flexion	39.00	34.0	5.00	4.168	4.757	0.931	1.064	0.002	VS
	38.50	33.5	5.00	5.643	3.663	1.262	0.819	0.006	S
Extension	37.50	33.5	4.00	4.443	3.663	0.993	0.819	0.0085	NS
	36.00	34.0	2.00	5.026	3.078	1.124	0.688	0.1295	NS
Rotation	44.00	41.25	2.75	4.757	5.350	1.064	1.196	0.152	NS
	46.75	42.25	4.50	5.447	5.955	1.218	1.332	0.123	NS
Side Bending	35.25	34.0	1.25	3.796	3.839	0.848	1.124	0.354	NS
	36.00	35.0	1.00	5.026	3.627	0.858	0.811	0.401	NS
Tenderness	1.350	1.40	-0.05	0.489	0.598	0.109	0.133	0.933	NS
	0.900	1.05	-0.15	0.552	0.604	0.123	0.135	0.498	NS
Power of Hand	4.450	4.30	0.15	0.510	0.470	0.114	0.105	0.414	NS
Muscles	4.550	4.35	0.20	0.510	0.489	0.114	0.109	0.276	NS
Tendon Reflexes	3.60	3.25	0.35	0.598	0.638	0.133	0.142	0.100	NS
	3.85	3.60	0.25	0.366	0.502	0.081	0.112	0.170	NS
Neck Disability In-	8.45	9.65	-1.20	1.669	2.033	0.373	0.454	0.0635	NS
dex	5.35	7.40	-2.05	1.461	2.257	0.326	0.504	0.0047	S

<sup>\*</sup>BT-Before treatment, \*AT-After treatment, \*AF-After follow up\* DIFF-Difference, \*SD-Standard deviation,

<sup>\*</sup>SEM-Standard error of mean, \*ES-Extremely significant, \*VS-Very significant, \*S-Significant, \*NS-Nothing significant.

#### DISCUSSION

### Comparison of Marma and Varma points

The anatomical location and functioning of the *marma* and *Varma* are almost similar. These are the vital points of the body where prana or the vital energy is situated. In Ayurveda *Sushruta* used *Marma* points to understand *Abhigata Lakshanas*, but in siddha system of medicine these points are used for diagnosis and therapeutic purpose similarly the study involves comparing it with TENS on these *Marma* points.

Group A (TENS) showed better effect in reducing stiffness, pain, and improves angle of flexion, extension, side bending, tendon reflexes, power of hand muscle, rotation of neck and NDI. whereas Group B (*Marma Chikitsa*) was effective in improving the restricted movements, tenderness and mild improvement on power of hand muscles.

Probable mode of action of *Marma chikitsa*: As in Cervical Spondylosis there is compression of the nerve fibres of the Cervical spine and all the treatment modalities are not so effective as they provide pain relief for some time. *Marma Chikitsa* which is the precise art of touching an individual in exactly the right place at a critical moment in time, for the purpose of healing and serve as point of access to the body's innate intelligence, opening the doorway to health and wellbeing can lead to release in that energy blockage and can lead to permanent cure.

The *Marma chikitsa* of stimulation or manipulation can be used as a part of a rejuvenation therapy or it could be used as preventive measure from unwanted conditions. Either way, *Marma chikitsa* is really useful to help improve or maintain a healthy balance.

#### Probable mode of action of tens:

**Neurologic effect:** The gate control theory of pain by which the electrical stimulation of the large nerve fibres (pressure & touch) results in impulses that travel faster (because they are myelinated) than do those along the smaller fibres, which transmits the pain.

The electrical stimuli, pressure and touch impulses from TENS arrive faster at the levels of the spinal cord stimulate pain causing nerve endings resulting in a suppression of pain signals. Further it elicits an almost immediate response after application of TENS therapy.

**Pharmacologic effect:** TENS causes an activation of endogenous analgesic systems involving endorphins, thereby increasing their plasma levels. And gives far more analgesic efficacy than oral analgesics.

**Physiologic effect**: Mild rhythmic muscle movements will cause an increase in blood and lymph circulation which leads to reduced interstitial edema and accumulation of noxious tissue metabolites, thereby improving the physiological state of muscle which in turn leads to significant reduction in muscle spasm, stiffness and mainly pain.

#### CONCLUSION

Marma and Varma are similar, technique of stimulation of Varma points explained in Siddha System of Medicine can be adopted over Marma points of Ayurveda system of medicine. Marma therapy and TENS over Ayurveda Marma points can be effectively implemented for the management of pain, stiffness and tenderness.

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## Source of Support: Nil Conflict of Interest: None Declared

doi: 10.46607/iamj07p4052020

How to cite this URL: Rajkiran & D. Gururaja: A Comparative Clinical Study On The Efficacy Of Marma Chikitsa And Stimulation Of Marma Points Using Tens In Management Of Cervical Spondylosis. International Ayurvedic Medical Journal {online} 2020 {cited July, 2020} Available from: <a href="http://www.iamj.in/posts/images/upload/2408\_2414.pdf">http://www.iamj.in/posts/images/upload/2408\_2414.pdf</a>