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Conceptual Study of *Sadyapranahara Guda Marma* and Its Relevance in Proctology

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ABSTRACT

Marma Sharira is considered as half knowledge of surgery and one should give importance to this ancient traumatological anatomy, presented by the great *Acharya Sushruta*. *The Marmas* are said to be vital part of our body and any injury or trauma to these vital points leads to abrupt death, severe pain or enduring disability according to site and type of injury. *Guda Marma* is one of the most crucial *Marma* and is also considered as one of among the *Dashapranayatas* (abodes of life, a place where vital life energy resides) in Ayurvedic texts.

Guda Marma is a base of proctology, described as *Mulasthan* of *Purishvaha Strotasa* and *Muladhar Chakra*, which abides pelvic plexus. Any injury to this *Marma* may prove to be malicious hence, it is called as *Sadyapranahara*. Similarly; during surgery if Ano rectal region gets traumatized, it may lead to peritonitis, internal haemorrhage, septicaemia, toxaemia, shock or even death. It defines its impulsive disposition and importance while performing delicate procedures in proctological diseases. It is essential for the proctologist to consider the *Sadyapranaharatva* of *Guda Marma*, explained in Ayurveda and to follow some safeguards mentioned in *Samhitas* to protect the *Marma* from any type of anguish. Methodology includes literature study of both ancient *Samhitas* and Modern texts to evaluate *Sadyapranaharatva* of *Guda Marma*, and its surgical importance.

KEYWORDS

Guda Marma, Sadyapranahara, Proctology



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INTRODUCTION

Sharirsthana is distinctive of *Sushruta Samhita* and *Marma* is the soul of *Sharirsthana*. As it has been said that *Marma Sharir* is the *Shalyavishayardha*¹ i.e., half knowledge of surgery, one should give importance to this ancient traumatological anatomy, presented by the great *Acharya Sushruta*.

Acharya Sushruta has defined *Marma*² as anatomical site where *Mamsa*, *Sira*, *Snayu*, *Asthi* and *Sandhi* meet together and *Prana* specially lives at these places. So *Marma* are also called as *Jeevasthanas* or *Pranayatan*³. He has referred 107 vital points as *Marmas*. The *Marmas* are said to be vital part of our body and any injury or trauma to these vital points leads to instant death, severe pain or enduring disability according to site and type of injury.

Acharya Sushruta classified *Marmas* into categories like regional *Marma*, structural dominance wise *Marma* and the most important classification is *Marma* according to effects of injury e.g. *Sadyopranhara*, *Kalantara Pranhara*, *Vishalyaghana*, *Vaikalyakar* and *Rujakara Marmas*⁴. Out of these, *Sadyopranhara Marmas* are said to be very important and injury to these structure cause sudden death. Among the nineteen *Sadyapranahara Marmas*, *Guda Marma*⁵ is

one of the most crucial *Marma* of abdominal locale to which a proctologist regularly deals with. It is the part which is attached to large intestine and serves as the passage for stool and flatus. It is conjointly made up of several structures and any harm to this *Marma* may prove to be pernicious or promptly fateful.

Guda Marma is the base of proctology as it is described as the *Mulastana* of *Purishvaha Strotasa*⁶ to which proctologists, doctor specializing in disease of rectum and anus come in contact with. As per *Marma Ghata Lakshanas*⁷ explained by *Acharyas*, any injury or trauma to this structure is immensely igneous in nature likewise in routine practice also while dealing with surgery if Ano rectal region get traumatized it may lead to peritonitis, internal haemorrhage, septicaemia, toxemia, shock or even death³²⁻³³. It defines its impulsive disposition and its importance while performing delicate procedures in proctological diseases.

Methodology of this study includes literature review of both ancient *Samhitas* and modern texts and aim is to emphasize why Ayurveda has given prime importance to anatomical consideration of *Guda Marma* and its *Sadyapranaharatva* and also to put forth its relevance in Proctology.



AIMS:

1. To collect the references from different Ayurvedic texts regarding the concept of *Guda Marma*.
2. To study the *Sadyapranahartva* of *Guda Marma* with respect to Modern literature.
3. To put forth the relevance of *Sadyapranahartva* of *Guda Marma* in Proctological Diseases.

METHODOLOGY

- 1) This study is conceptual; all available references of *Marmas* and *Guda* have been collected from Ayurveda treatises and modern science.
- 2) Websites also have been searched for the same.
- 3) The information collected from literature was correlated with the consequences occurs while dealing with proctological disorders.
- 4)

LITERATURE REVIEW

❖ *Marmani*
mamsasirasnavyasthisandhisannipatah,
teshu swabhavat eva visheshena
pranaastishthanti
tasmanmarmaswabhihatastanstan
*bhavanapdyante*⁸

Marma are confluence of muscles, veins, ligaments, bones and joints, in these places *Prana* (life) resides specially by nature; hence when fatal spots are injured they produce their respective effects.

IMPERATIVE GUDA MARMA

Guda marma is made up of two words *Guda* + *Marma*. The word *Guda* means “*Mala-dwara*” the one which eliminates the waste material of the digestive tract basically the anal canal while *Marmas* are the vital points present in our body which invigorate self-healing, any harm to these points may leads to severe aching, malady or even death also. In Ayurveda *Marmas* are also expounded as the junction points of *Vatta*, *Pitta* and *Kapha* but anatomically they are the deep seated sites of muscles, blood vessels, ligaments, bones and joints.

❖ *Tatra vatvarchonirsanam*
sthulantrapratibadham gudam naam
*marma, tatra sadyomaraman*⁹

The *Marma* which help in the expulsion of the vitiated *Vata dosha* and excreta along with affixation of large intestines is called as the *Guda Marma*. *Guda marma* is one of the most crucial *Marma* among *Marma*'s of abdominal locale. It is made up of muscles with its approx mensuration of about



persons own fist and immensely igneous in nature. Any harm to this *Marma* may prove to be pernicious or promptly fateful.

FRAMEWORK OF GUDA MARMA

The points to be understood regarding *Guda Marma* were-

1. According to regional classification it is *Udargata Marma*¹⁰.
2. If we see structural classification according to *Acharya Sushruta* it comes under *Mamsa Marma*¹¹ i.e., he declaims that muscles play salient role in the emergence of *Guda marma* but *Acharya Vagbhata* propound it as a *Dhamni Marma*¹² i.e., vessels are the key elements for its eventuality.
3. *Guda Marma* is *Sadyapranahara Marma* as *Agni Mahabhuta*¹³ is dominant here, if injury occurs sudden death is expected according to *Viddha Lakshana*.
4. It is one in number.
5. Its approx mensuration is about persons own fist.
6. According to *Marma Viddha Lakshana*, if injury occurs to *Guda* it leads into death or critical illness¹⁴.
7. Embryologically *Guda* is derived from *Matruja Bhava*¹⁵ (maternal element). It is considered one among

Dashapranayatanas by *Charaka, Vagbhata, Bhela, Kashyapa*.

8. It is one among 15 *Koshtangas*¹⁶.
9. *Guda* is one among nine *Bahirmukh Srotasa*¹⁷.
10. *Purishavaha Srotasa* have their root in *Guda*.¹⁸
11. *Guda* is the seat of *Apanavayu*.

ANATOMICAL ASPECT

- *Acharya Charaka* divides *guda* into two parts :

a) *Uttar guda* b) *Adhara guda*

The part of gastrointestinal tract which holds the fecal matter before its ejection is acknowledged as the *Uttar Guda* and the one which assists in defecation is avowed as the *Adhara Guda*, as per modern science both these parts resembles as rectum and anus respectively.¹⁹

The father of surgery *Acharya Sushruta* recommended *Adhara Guda* as paramount *Guda*. According to him the part of gastrointestinal tract that is approximately 4½ angul in length and append with large intestine is known as the *Guda*. It (rectal part) comprises of 3 *Guda Vali* obliquely transverse folds (Houston's valves) at the distance of ½ angul each named as *Pravahini* (Middle Houston's valve), *Visarjani* (Inferior Houston's valve) and *Samvarni* (Dentate line) during contraction



these folds overlap each other and transmogrify into 4 angul²⁰.

These transverse folds are just like convolutions of shell arranged on each other and their colour is quite similar to the elephant's palatine. The terminal end of the anal canal i.e., anus is about at 1½ yava (barley) from lower hairline.²¹ The *Guda* is supported by sixty *Snayus* in pelvic region.

- Five bones from the *Shroni* (pelvic cavity), of these four are found about the *Guda* (anus), *Bhaga* (pubis) and the *Nitamba* (hips) and the fifth one is *Trika* (Sacrum)²².

- *Samudga*²³ (Synovial) type of *sandhi* is situated in *Guda* (Anus), *Bhaga* (Pubis) and *Nitamba* (Hips).

- *Gudastha Vivara*- Bladder, Prostate, Scrotum, and Anus are inter-related, found in pelvic cavity.

- From *Tantra Shareera* point of view, it can be stated that *Muladhara Chakara* where *Kundalini* force resides is situated between genitalia and anus, which is correlated with pelvic plexus of Autonomic nervous system. Whole of the *Kundalini* power in annular form hibernates within the *Mooladhara Chakra* that is situated 2 angul above the termination of anus.

PHYSIOLOGICAL ASPECTS:

- *Guda* is one of the Five *Karmendriya*²⁴ and its function is to excrete flatus and faeces.

- *Acharya Charaka* has described that, *Guda* is subdivided into *Uttara Guda* and *Adhara Guda*. *Chakrapani* has commented as the part which holds *pureesha* is *Uttara Guda* and that which evacuates is *Adhara Guda*²⁵.

- Also, the action of *Guda Valis*²⁶-*Pravahani* propels, *Visarjani* eliminates the faeces and flatus and the *Samvarani* is that which closes (sphincter).

- *Guda* is related to *Purishadhara Kala* (5th *Kala*) where *saara kitta vibhajana* takes place.

IMPORTANCE OF FATAL SPOTS (MARMA):

❖ *Chaturvidha yaastu siraah sharire.....marmani yatnen parikshya karshet*²⁷

The four kinds of *Siras* present in the body are found situated generally in the *Marma* (fatal spots), these sustain the body by nourishing the *Snayu*, *Asthi*, *Mamsa* and *Sandhis*. So, when the fatal spots are injured, *Vata* getting aggravated covers the *Siras* (causes abnormalities) and produces severe pain in the body; thus affected by severe pain, the person suffers greatly and loses consciousness also. Hence physician who



desire to pull out the foreign body should carefully examine the fatal spot, understands its nature first and only after that he should pull out (the foreign body).

RELEVANCE OF GUDA MARMA IN PROCTOLOGY

Effect of Trauma (*Viddha*) On *Sadyapranhara Marma*:

❖ *Indriyartheshavsampraptimanobud dhiviparyayah*³⁶

*Vivdhastivra bhavantyashuhare hate*²⁸

1. *Rujascha vividha tiwra* – Severe pain.
2. *Indriyartheshwasampraptir mano- buddhi viparyaya* – shock or death

Dhamni Marma Viddha Lakshan:

❖ *Raktam sashabdafenoshma dhamanisthe vichetasah*²⁹

- 1) *Raktam Sashabda fenoshnam* – Haemorrhage
- 2) *Vichetasa* – Shock or Death

Some safeguards are mentioned in Samhitas to protect the *Marma* from any type of anguish. The *shloka* below explicates this point as follows:

❖ *Param cha yatanmaasthaya gude ksharagni shastranyavcharyet*

*Tadvi bhramadhi shandya shofa daah madmurchatopanahatisara pravahanani bhavanti maranam va*³⁰

In rectum *Kshar Karma* (use of alkalies), *Agni karma* (cauterizing), *Shstravcharn* (use

of sharp instruments) should be done very attentively otherwise our ignorance may expedite into:

1. *Shandya* – impotency
2. *Shoph* – swelling
3. *Daha*- burning sensation
4. *Murcha*- unconsciousness
5. *Aatop*- borborygmus
6. *Aanah*- flatulence
7. *Atisaar*- diarrhoea or incontinence
8. *Pravahan*-dysentery
9. *Maran*- death of a person.

❖ *Mutravaha shukravaha mushka stroto mutrapraseka sevani yoni gudavastinshto pariharet*³¹

Agni karma is also prohibited for urinary channels, course for conveying semen, genital organs, urethra, vagina or uterus, anus, union parts of the body like scrotal raphe are considered as the 8 imperative points that should be protected from surgical procedures.

- Similarly in routine practice also surgeons experienced various complications from ano-rectal surgeries like- Bleeding, infection, stenosis and incontinence.³²
- Vigorous Manipulation or Per rectal digital examination in severely neutropenic patients and patients with prostatic abscesses or prostatitis or acute fissure may cause vasovagal syncope.³³



- To rule out the fistulous tract probing is done, during this procedure due to painful stimuli the patient may land up into vasovagal shock or death also.
- Traumatic disruption of the anal sphincters may result from wide variety of iatrogenic and accidental mechanisms and often associated with life-threatening concomitant injuries, diversion of the fecal stream in case of rectal lacerations.
- During *Kshar karma Chikitsa* on *Arsha* (Haemorrhoids) *atidagdha lakshan* mentioned in *Samhita* includes *Gudavdarana* (tear), *Daha* (pain), *Murcha* (Syncope), *Shonitatipravrutti* (haemorrhage) and *Maran* (Death)³⁴.
- In Radiation therapy for anal cancer, some long term side effects may occur as damage to anal tissue or anal sphincter lead to problem having bowel movements, damage to blood vessels that nourish the lining of the rectum lead to chronic radiation proctitis. This can cause rectal bleeding and pain.³⁵
- Incontinence to flatus and fecal soiling are distressing complications of Sphincterotomy which is done in patients of chronic fissure in ano, persistent minor fecal incontinence has been reported in 1.2% to 3.5% of patients.³⁶

DISCUSSION:

- *Sira* (vessels like arteries and veins), *Snayu* (ligaments), *Mamsa* (muscles), *Asthi* (bones), and *Sandhi* (joints) are placed conjointly at one place in *Guda Marma* hence any harm to this *Marma* may prove to be pernicious or promptly fateful. In routine practice also surgeons experienced various complications from ano-rectal surgeries like- Bleeding, infection, urinary retention, pelvic sepsis as acute complications whereas stenosis, fecal incontinence, chronic pelvic pain as long term complications, which may result in dramatic morbidity and even mortality.
- *Guda* is derived from *Matruja Bhava* (maternal element) and *Matruja Avayavas* are *Jaliya* (more predominant of water factor) hence highly vascular and any trauma or injury may cause severe haemorrhage.
- Three *Valis* described by *Acharya Sushruta* are both functional and structural entities of *Guda*. These can be correlated with Houston's valve, column of Morgagni and Anal sphincters. According to *Sushruta Arsha* disease originates from these *Valis*. Autonomic pelvic nervous plexus are also related to this. Hence, trauma to this result into severe pain which may lead to Vasovagal Shock or Sphincter trauma may



result into impaired bowel movements or incontinence.

- In practical approach we observed, if ano-rectal region get traumatised may lead to peritonitis, internal haemorrhage, septicaemia, toxemia, shock or even death also. This proved its *Sadyapranaharatva* explained in Ancient text.
- *Acharya Charaka* include *Guda* in *Dasha Pranayatana* (important seats of *Prana*)- this also reveals its fatal nature if get traumatised.

CONCLUSION

Guda Marma is one of the most crucial *Marma*. Various structures like *Sira*, *Snayu*, *Mamsa*, *Asthi*, *Sandhi* are conjointly placed in it which reveals its complexity and immensely igneous nature. *Acharya Charaka* included it in *Dashpranayatana* whereas *Acharya Sushruta* and *Vagbhata* included it in *Sadyapranahara Marma*. Due to its pernicious and fateful nature some safeguards are mentioned in Samhitas to protect the *Marma* from any type of anguish. Similarly, even today also while dealing with the proctological diseases and its procedures any injury to this *Marma (Guda)* shows life threatening and certainly fateful results. Hence, to avoid these consequences, a clear anatomy of *Guda Marma* is a prerequisite

for understanding disease pathology and further treatment. As the prevalence rate of proctological diseases is on increasing verge due to sedentary lifestyle we are adopting, we tried to put forth this subject in order to highlight, the *Sadyapranahartva* of *Guda Marma* mentioned in Ayurveda which is still relevant as well as imperative. Hence while dealing with ano rectal diseases, it is necessary for the proctologist to give prime importance to *Sadyapranahara Guda Marma*.



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