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Case Study

ROLE OF MARMA THERAPY IN SURYAVARTA: A SINGLE CASE REPORT WITH SPECIAL REFERENCE TO FRONTAL SINUSITIS

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ABSTRACT

Suryavarta is one among the eleven Shiroroga explained in Ayurveda. Acharya Charaka describes Suryavarta as headache that increases at sunrise and reduces gradually by sunset. This headache is predominantly Vata-Pitta Pradhan Urdhwajatrugata Vyadhi. Frontal sinus inflammation correlates clinically with this classical description in many patients. Marma therapy is a unique non-invasive therapeutic approach described in Ayurveda aimed at regulating Prana Vata, balancing Tridosha and restoring normal neurological circulation in Urdhwajatrugata region. A 45-year-old male patient with acute Suryavarta of 1 month duration was treated only with Marma Therapy without internal medicines. Marma therapy was given twice daily on Sthapani, Avarta, Apanga, Shankha, Utksepa, Simanta, Vidhura, and Adhipati Marma points for 1 minute each point for a duration of 30 days. Significant improvement of 90% reduction in headache intensity and associated symptoms such as photophobia, frontal heaviness and morning rise pain was observed at the end of treatment duration. This case demonstrates that Marma Therapy alone can serve as effective primary therapy in Suryavarta and also offers a safe non-pharmacological management for acute sinus type headache disorders.

INTRODUCTION

Shiroroga is well elaborated in classical Ayurvedic texts. Suryavarta is a specific type of headache explained by Charaka where pain increases during sunrise and subsides with sunset due to Vata-Pitta aggravation. (Charaka Chikitsa Sthana 26/33, Page 603, Chaukhamba Sanskrit Pratishthan 2020). Marma points are vital anatomical sites controlling Prana Vata and overall neurological homeostasis (Sushruta Sharira Sthana 6/3 Page 369, Chaukhamba Orientalia 2020). In majority clinical presentation, Suryavarta displays similar pain pattern to frontal sinus headache or sinus-based migraine phenotype.

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AIMS AND OBJECTIVE

To study the role of *Marma* Therapy in management of *Suryavarta* with special reference to acute frontal sinusitis.

MATERIAL AND METHODS

Case Presentation

Patient Details Age: 45 years Gender: Male

Occupation: Engineer

Medical History: No significant systemic illnesses; occasional seasonal allergies.

Symptoms: Headache since one month with classical *Suryavarta* features. Pain was frontal and increased especially in early morning hours. Heaviness over forehead, photophobia and nasal blockage sensation were present. No fever or discharge. Patient denied oral medication and preferred external modality only.

Diagnosis: The patient was diagnosed with Migraine based on clinical examination and patient-reported symptoms, consistent with Ayurvedic diagnosis of *Suryavarta*.

Treatment Plan: *Marmas* used in *Marma* therapy for *Survavarta*.

Treatment	Marma therapy
Treatment given	Marma therapy - twice one minute for each Marma
Treatment duration	7 days
After treatment	8 th day
Follow up period	20th day, 30th day
Total study duration	30 days

Treatment Protocol

S.No	Marma points	Stimulation time	Marma therapy sittings	Total time period
1	Adhipati	0.8sec	Twice daily	30 days
2	Simanta	0.8sec	Twice daily	30 days
3	Utsepa	0.8sec	Twice daily	30 days
4	Shankha	0.8sec	Twice daily	30 days
5	Apang	0.8sec	Twice daily	30 days
6	Avrata	0.8sec	Twice daily	30 days
7	Sthapani	0.8sec	Twice daily	30 days
8	Vidhur	0.8sec	Twice daily	30 days

According to their anatomical location of *Marma* points, every *Marma* point will be stimulated for 15-18 times on an average in single sitting.

- **1.** *Adhipati Marma* The *Adhipati Marma* is located at the top most portions of the head. The stimulation is done by joining tip of all four fingers and thumb. There are also two different postures from which stimulation of these *Marmas* are performed.
- **2.** *Simanta Marma* The *Simanta Marma* is situated on all the four side of head. Put both the hands on the head. Join the tip of fingers of both the hand (coronal and sagittal sutures) and put the thumb on back side of head (lambdoid sutures). The pressure is applied by the tip of finger and thumb.
- **3.** *Utkepa Marma Utkhepa Marma* situated above the temples at borders of hair line. The stimulation is done by either by the tip of index finger or middle finger.
- **4.** *Sankha Marma- Shankha Marmas* are located above the outer end of the eyebrows, in between

the *Karna* and *Lalata*. The stimulation is done by either by the tip of index finger or middle finger.

- **5.** *Sthapni Marma* The *Sthapni Marma* is located between the eyebrow. The stimulation is done by the pulp of the thumb is kept over the *Sthapani Marma*, upward and inward pressure is given to stimulate.
- **6.** *Apanga Marma* The *Apanga Marmas* are situated on *Bhrupuchha Adho* (eyebrows below outside the eye). A gentle pressure has been applied with the help of tip of index finger on both sides.
- **7.** *Avarta Marma* The *Avarta Marmas* are situated in the centre the eyebrows, in the upper border of orbital cavity, on the forehead. The stimulation is done by thumb pressure directly upwards and posteriorly.
- **8.** *Vidhura Marma* The *Vidhura Marma* is located on the back side of ear. The pressure has been applied on Vidhura Marma with the help of thumb in posterior aspect of ear.

Assessment Criteria

Subjective Parameters

Parameters	Before treatment	After treatment 8 th day	1st follow up on 20th day	2 nd follow up on 30 th day
Vedna	4	3	1	0
Nasavarodha	3	2	1	0
Shirogurutwa	2	1	1	1
Chardi	3	3	2	0
Photophobia	2	1	1	0

Objective Parameters

Parameter	Before	After treatment	1 st follow up	2 nd follow up
	treatment	8 th day	on 20 th day	on 30 th day
Veg pravruthi	4	3	1	0

RESULTS

Post 30 days therapy, patient reported 90% improvement in pain intensity, photophobia and heaviness. No adverse reactions.

DISCUSSION

Suryavarta is Vata-Pitta predominant and sunrise aggravation corresponds to Pitta udayakala with Vata provocation. Marma therapy acts by regulating Prana Vata, opening Urdhwajatrugata Srotas and reducing neurovascular spasm. Sushruta emphasizes that Marma are vital points maintaining Prana functions (Sushruta Sharira Sthana 6/14 Page 372, Chaukhamba 2020). This case demonstrates Marma therapy effectiveness without medicines showing how non-invasive methods can manage sinus type headaches.

Patient Compliance: The patient reported high compliance and satisfaction with the Ayurvedic treatments, noting a preference for natural remedies over conventional medications.

Limitations: The study was limited by the single case design and short follow-up period. Further research with larger sample sizes and longer duration is recommended.

CONCLUSION

This case study demonstrates the potential of Ayurvedic management, by *Marma* Therapy in effectively reducing symptoms and improving clinical outcomes in patients.

Marma therapy alone provides significant clinical relief in Acute *Suryavarta*. This is a safe, economical, simple and non-pharmacological approach.

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