

Clinical Applications of *Sharir Rachana*: A Traditional Anatomical Framework with Modern Relevance

Author: Arvind Kumar¹

Co Authors: Shyoram Sharma²

^{1,2}Dept. of *Rachana Sharir* of Dr. Sarvepalli Radhakrishnan Rajasthan Ayurved University, Jodhpur, Rajasthan, India

ABSTRACT

Introduction:

Sharir Rachana, the anatomical science of Ayurveda, offers a profound understanding of the human body based on the principles of *Dosha*, *Dhatu*, and *Srotas*. Unlike the reductionist approach of modern anatomy, it integrates structural, functional, and spiritual dimensions, viewing the body as a dynamic interplay of physical and subtle energies. In recent years, the clinical relevance of this traditional anatomical framework has gained renewed attention, particularly in diagnostic interpretation, surgical procedures, and personalized therapeutic planning. **Methods:** A comprehensive review of classical Ayurvedic texts such as *Sushruta Samhita*, *Charaka Samhita*, and *Ashtanga Samgraha* was conducted to identify concepts related to *Sharir Rachana*. These were then correlated with modern anatomical and clinical practices through comparative analysis of key structures and physiological functions. Case examples from Ayurvedic clinical applications were evaluated to demonstrate practical relevance.

Results: The analysis revealed that *Marma Sharir* (vital points) corresponds closely with modern neurovascular and myofascial junctions, highlighting their significance in surgical safety and pain management. The *Srotas* (body channels) system aligns with the modern understanding of circulatory, lymphatic, and microvascular pathways, aiding in the holistic assessment of pathophysiological conditions. Similarly, *Garbha Sharir* (embryology) offers insights into fetal development and genetic expression. These correlations emphasize that Ayurvedic anatomy, though described in different terminology, provides clinically valuable perspectives applicable to modern integrative medicine. **Discussion:** *Sharir Rachana* serves as a bridge between traditional wisdom and contemporary anatomical science. Its holistic framework enhances diagnostic precision, supports preventive care, and enriches the understanding of psychosomatic and functional disorders. **Conclusion:** Integrating *Sharir Rachana* principles with modern anatomy can strengthen clinical reasoning, promote personalized healthcare, and foster interdisciplinary collaboration in medical education and practice.

Key Words *Sharir Rachana*, *Srotas*, *Garbha Sharir*, *Marma Sharir*, *Sira* and *Dhamani*

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INTRODUCTION

Ayurveda, the ancient Indian discipline of life and medicine, is based on a profound comprehension of the human body's anatomy (Sharir), physiology (Kriya), and pathological conditions (Vikriti). Among these, *Sharir Rachana*—the study of body structure—forms the foundation of clinical practice. Derived from the Sanskrit roots *Sharir* (that which continuously degenerates) and *Rachana* (arrangement or structure), it encompasses not only gross anatomy but also the subtle architecture of life energies and consciousness that sustain health¹. Classical Ayurvedic texts particularly *Sushruta Samhita*, *Charaka Samhita*, and *Ashtanga Samgraha* offer detailed and systematic descriptions of the human body. *Acharya Sushruta*, revered as the “Father of Surgery,” placed strong emphasis on anatomical knowledge for safe surgical practice, declaring that “*Sharira adhyayanam vina vaidyo na bhavati*”² (without the knowledge of anatomy, one cannot be a physician). His treatise, *Sushruta Samhita Sharir Sthana*, is an authentic compendium of ancient human anatomy covering *Marma Sharir*, *Sira-Dhamani*, *Srotas*, *Garbha Sharir*, and *Pramana Sharir*. In contrast to the reductionist framework of modern anatomy, which primarily focuses on physical structures, Ayurveda views the human body as an integrated entity of body (*Sharira*), mind (*Manas*), and spirit³ (*Atma*). The *Tridosha Vata*, *Pitta*, and *Kapha* represent the functional energies that

govern physiological and pathological processes. The *Dhatu*s (tissues) and *Srotas* (channels) act as the material and dynamic bases of life. Together, these principles form the foundation of *Sharir Rachana*, which offers both descriptive and functional understanding of human anatomy. In recent times, researchers and clinicians have begun to explore the correlations between *Sharir Rachana* and modern biomedical anatomy, particularly for its applications in diagnosis, surgical safety, rehabilitation, and preventive health. The following article provides a comprehensive discussion of these traditional concepts and their contemporary clinical relevance, drawing upon authentic Ayurvedic sources and comparative analysis.

MATERIALS AND METHODS

Primary data were collected from authoritative Ayurvedic texts:

Sushruta Samhita – Sharir Sthana, chapters 5–8; *Nidana and Chikitsa Sthana* for clinical references. *Charaka Samhita-Sharir Sthana*, chapters 1–7. *Ashtanga Samgraha* and *Ashtanga Hridaya-Sharir Sthana*. Classical commentaries: *Dalhana's Nibandhasangraha*, *Chakrapani Tika*, and *Arunadatta Tika*.

Methodology

The study followed a textual and comparative analytical approach:

Identification and extraction of key anatomical concepts from Ayurvedic texts.

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Categorization into systems *Marma Sharir*, *Sira-Dhamani*, *Srotas*, *Garbha Sharir*, *Pramana Sharir*, and *Asthi-Sandhi Sharir*⁴.

Correlation of these entities with modern anatomical structures and physiological functions.

Documentation of clinical applications supported by both traditional practices and modern evidence. This approach ensured an authentic interpretation of Ayurvedic knowledge in alignment with contemporary medical relevance.

Results-

1. *Marma Sharir* (Vital Points)

According to *Sushruta Samhita*, there are 107 Marma points, categorized into five types: *Mamsa Marma*, *Sira Marma*, *Snayu Marma*, *Asthi Marma*, and *Sandhi Marma*. Injury to these sites results in specific clinical outcomes instant death (*Sadyapranahara*), delayed death (*Kalantara pranahara*), deformity (*Vaikalyakara*), or pain⁵ (*Rujakara*).

Modern Correlation:

Marma points align with neurovascular junctions, acupuncture points, and motor points.

Shankha Marma (temporal region) corresponds with the *pterion*, a vulnerable area prone to epidural hemorrhage. *Hridaya Marma* corresponds with the cardiac plexus; *Nabhi Marma* aligns with the solar plexus⁶ (celiac plexus).

Clinical Relevance:

Marma knowledge ensures surgical precision, prevents accidental nerve or vessel injury, and forms the basis of *Marma Chikitsa* a therapeutic

approach similar to modern neuromuscular therapy and acupuncture. It is used in managing paralysis, musculoskeletal pain, and rehabilitation.

2. *Sira and Dhamani* (Vascular and Nervous Channels)

Sushruta describes 700 *Siras*⁷ and 24 *Dhamanis* as conduits of *Rakta* (blood), *Pitta*, *Vata*, and *Kapha*. The *Dhamanis* are categorized into *Urdhvagami* (ascending), *Adhogami* (descending), and *Tiryakgami* (transverse), representing arterial, venous, and capillary flows⁸.

Modern Correlation:

Dhamani represents arteries and nerves carrying pulsatile energy and sensation. *Sira* represents venous and lymphatic channels returning blood and waste products.

Clinical

Relevance:

Understanding *Sira Dhamani* guides *Raktamokshana* (bloodletting), leech therapy, and venipuncture, comparable to modern phlebotomy. It also aids in managing circulatory disorders such as varicose veins, hypertension, and vascular inflammation⁹.

3. *Srotas* (Physiological Channels)

Ayurveda identifies 13 major *Srotas*, each responsible for transporting a particular *Dhatu* or function. Each *Srotas* has three parts *Moola* (root), *Marga* (path), and *Mukha* (opening). Disturbances in these channels lead to *Srotodushti* (pathology).

Srotas Examples-

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Pranavaha Srotas - Respiratory and Circulatory System.

Rasavaha Srotas - Plasma and Lymphatic Circulation.

Medovaha Srotas – Adipose Metabolism.

Mutravaha Srotas – Renal and Urinary Systems.

Modern Correlation:

Srotas can be correlated with the modern understanding of microcirculation, interstitial fluid pathways, and cellular transport systems.

Clinical Relevance: By identifying specific *Srotodushhti*, physicians can pinpoint disease origin and select targeted therapies. For example, *Rasavaha Srotas dushti* manifests as edema or fatigue; *Medovaha Srotas dushti* correlates with obesity and metabolic syndrome¹⁰.

4. *Garbha Sharir* (Embryology)

Charaka Samhita Sharir Sthana states that the embryo forms from the combination of *Shukra* (sperm), *Shonita* (ovum), and *Atma* (soul), nourished by maternal *Rasa Dhatu*. Stages such as *Kalala* (semiliquid), *Budbuda* (bubbly), and *Pinda* (solid) resemble the stages of zygote formation and organogenesis¹¹.

Modern Correlation: Ayurvedic embryology prefigures the concept of fertilization, cell division, organ differentiation, and genetic inheritance. *Matrija* and *Pitrija Bhava* reflect maternal and paternal genetic contributions¹².

Clinical Relevance:

These principles guide antenatal care, fertility management, and *Garbha Sanskara* (prenatal education), which emphasizes the influence of

maternal diet and psychology on fetal development—a concept now supported by modern epigenetics¹³.

5. *Pramana Sharir* (Anthropometry)

Sushruta Samhita explains that correct measurement of the body (*Pramana*) is essential for strength, longevity, and beauty. Anthropometric ideals are based on proportionality, similar to modern concepts of symmetry and body mass index¹⁴.

Clinical Application: *Pramana* evaluation assists in *Prakriti Pariksha* (constitution assessment), determining metabolic type, and predicting disease susceptibility. It is also relevant in designing *Panchakarma* therapies and surgical procedures.

6. *Asthi and Sandhi Sharir* (Bones and Joints)

Sushruta Samhita enumerates 300 bones, including teeth and cartilages, and 210 joints, categorized into *Chala* (movable) and *Achala* (immovable). While the count differs from modern 206 bones, the description of bone types and joint movements is strikingly similar¹⁵.

Clinical Relevance:

Ayurvedic principles underpin orthopedic management such as *Bhagna Chikitsa* (fracture treatment), *Sandhivata* (osteoarthritis), and *Kati Basti* or *Pinda Sweda* for joint disorders¹⁶.

DISCUSSION

The comparative analysis reveals that the Ayurvedic concept of *Sharir Rachana* encompasses both macroscopic and subtle

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dimensions of human anatomy. While modern anatomy emphasizes physical dissection and tissue structure, Ayurveda integrates function, energy, and consciousness within its framework. *Marma Sharir* aligns with neurovascular and trigger point science, confirming the physiological basis of *Marma Chikitsa*. *Srotas Sharir* parallels systems biology and homeostasis, emphasizing interconnectedness rather than organ isolation. *Garbha Sharir* demonstrates that ancient scholars observed embryological phenomena with precision, anticipating many modern discoveries. Clinically, *Sharir Rachana* aids physicians in accurate diagnosis through *Rog Nidana Pariksha*, identifying the site and nature of pathological changes based on *Dosha* and *Dhatu* involvement. In surgery, *Marma* knowledge ensures minimal iatrogenic injury. In rehabilitation, *Marma Chikitsa* and *Sira Vyadha* improve circulation and pain relief. Integrative Relevance Modern anatomy, while highly detailed, often lacks the individualized and energetic understanding present in Ayurveda. The integration of *Sharir Rachana* principles can enhance personalized medicine, functional anatomy education, and holistic clinical practice. Concepts like *Tridosha*, *Srotodushti*, and *Marma* therapy correspond with modern interest in psychosomatic medicine, neural therapy, and fascia research. Furthermore, Ayurvedic anatomy recognizes the interplay of *Manas* (mind) and *Atma* (consciousness) in maintaining health—areas

now being explored through neuropsychology and mind–body medicine.

CONCLUSION

Sharir Rachana stands as one of the most sophisticated anatomical systems developed in the ancient world. Authentically grounded in *Sushruta Samhita* and allied texts, it combines structural, physiological, and energetic understanding of the human body. Its relevance extends far beyond historical curiosity offering practical insights into surgical safety, pain management, embryology, diagnostics, and preventive care. Incorporating the Ayurvedic anatomical model into modern clinical and educational frameworks encourages a more comprehensive and humane approach to medicine. As *Acharya Sushruta* emphasized, anatomical knowledge is indispensable for a true healer. Thus, the synthesis of *Sharir Rachana* with contemporary biomedical anatomy represents not only a union of science and tradition but also a pathway toward integrative, patient-centered healthcare.

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REFERENCES

1. *Sushruta Samhita, Sharir Sthana Nibandhasangraha* Commentary by Dalhana, Chaukhamba Orientalia, Varanasi, 2018.
2. *Charaka Samhita* Section: *Sharir sthana* Chapter: 1 Verse: 17 Edition: *Chakrapani Commentary* Publisher: Chaukhambha Sanskrit Sansthan Page Number: page 5–7 in *Sharir sthana* of Volume II.
3. *Ashtanga Hridaya* Section: *Sharira Sthana* Chapter: 1 (*Sharira Sankhya Vyakarana Sharira*) Verse: 3 Edition: *Ashtanga Hridaya* with commentaries by Arundatta and Hemadri Publisher: Chaukhambha Sanskrit Sansthan Page Number: page 3–5 in *Sharir Sthana* of Volume II.
4. *Ashtanga Hridaya* Section: *Sutra sthana* Chapter: 11 – *Doshadi Vijnaniya Adhyaya* Verse: 1 Edition: *Ashtanga Hridaya* with commentaries by Arundatta and Hemadri Publisher: Chaukhambha Sanskrit Sansthan Page Number: 175–180 in Volume I (Sutrasthana).
5. *Sushruta Samhita Sharir Sthana* 6/27, *Nibandhasangraha* Commentary by Dalhana, Chaukhamba Orientalia, Varanasi, 2018.
6. Dr. Vivek A. Nair & Dr. Haroon Irshad, “*Shankha Marma: Anatomical and Clinical Correlation with the Pterion and Middle Meningeal Artery*”, *International Journal of Novel Research and Development*, Vol. 9, Issue 12, Dec 2024, pp. c165–c167
7. *Sushruta Samhita, Sharir Sthana* chapter 7 *Nibandhasangraha* Commentary by Dalhana, Chaukhamba Orientalia, Varanasi, 2018.
8. *Sushruta Samhita, Sharir Sthana* chapter 9 *Nibandhasangraha* Commentary by Dalhana, Chaukhamba Orientalia, Varanasi, 2018.
9. *Sushruta Samhita* Section: *Sharir Sthana* Chapter: 7 – *Sira Vyakarana Sharira* Edition: *Sushruta Samhita with Dalhana commentary* Publisher: Chaukhambha Sanskrit Sansthan Page Number: 45–55 in *Sharira Sthana, Volume II*.
10. *Charaka Samhita – Vimana Sthana*, Chapter 5: *Srotovijnaniya Vimana* Kashinath shastri book.
11. *Charaka Samhita* Section: *Sharira Sthana* Chapter: 3 – *Garbha Vyakarana Sharira* Verse 4:
12. Text: *Charaka Samhita* Section: *Sharira Sthana* Chapter: 4 – *Purusha Vichaya Sharira* Verse 30–32: Edition: *Charaka Samhita* with Chakrapani commentary Publisher: Chaukhambha Sanskrit Sansthan Page Number: pp. 35–45 in *Sharira Sthana, Volume II*.
13. Verma P, Shukla A, Rastogi V. *Garbh Sanskar and Epigenetic Influences: A New Frontier in Prenatal Care*. The International Journal of Emerging Research (TIJER). May 2025; Volume 12, Issue 5: pp. 1–8.
14. Sushruta. *Sushruta Samhita, Sharir Sthana* Chapter 6, Verse 14. Edited by Acharya Yadavji Trikamji, Published by Chaukhambha Surbharati Prakashan, Varanasi, Reprint Edition 2018, Page 370

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15. *Sushruta Samhita, Sharir Sthana* Chapter 5, Verse 4. Edited by *Acharya Yadavji Trikamji*, Published by Chaukhambha Surbharati Prakashan, Varanasi, Reprint Edition 2018, Page 364.

16. *Sushruta Samhita, Chikitsa Sthana* Chapter 3 (*Bhagna Chikitsa*). Edited by *Acharya Yadavji Trikamji*, Published by Chaukhambha Surbharati Prakashan, Varanasi, Reprint Edition 2018, Pages 446–452.