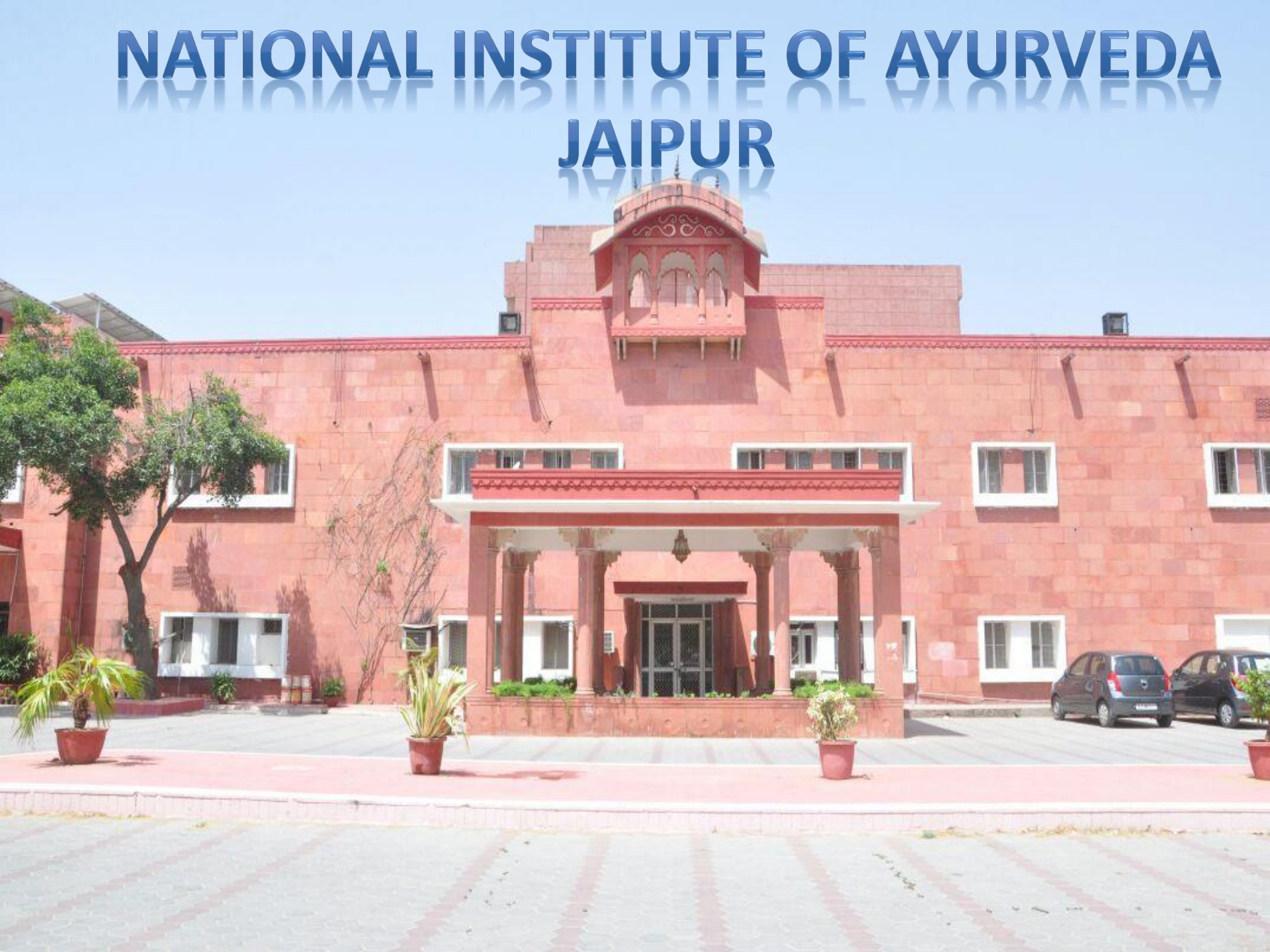
NATIONAL INSTITUTE OF AYURVEDA JAIPUR



KURPARA SANDHI

According to *Pratyaksha Sharir* the *Kurpara Sandhi* is the example of *Sandanshkora.*

....जानुकूर्परसीमन्ताधिपतिगुल्फमणिबन्धकुकुन्दरावर्तकृकाटिका श्चेति सन्धिमर्माणि (सु.शा.6/7)

According to *Ayurveda* the *Kurpara Marma* is a *Sandhi Marma* (structurally) and *Vaikalykara Marma* (prognostically).

प्रकोष्ठप्रगण्डयोः संन्धाने कूर्पर नाम, त्तत्र कुणि (सु. शा. 6/25)

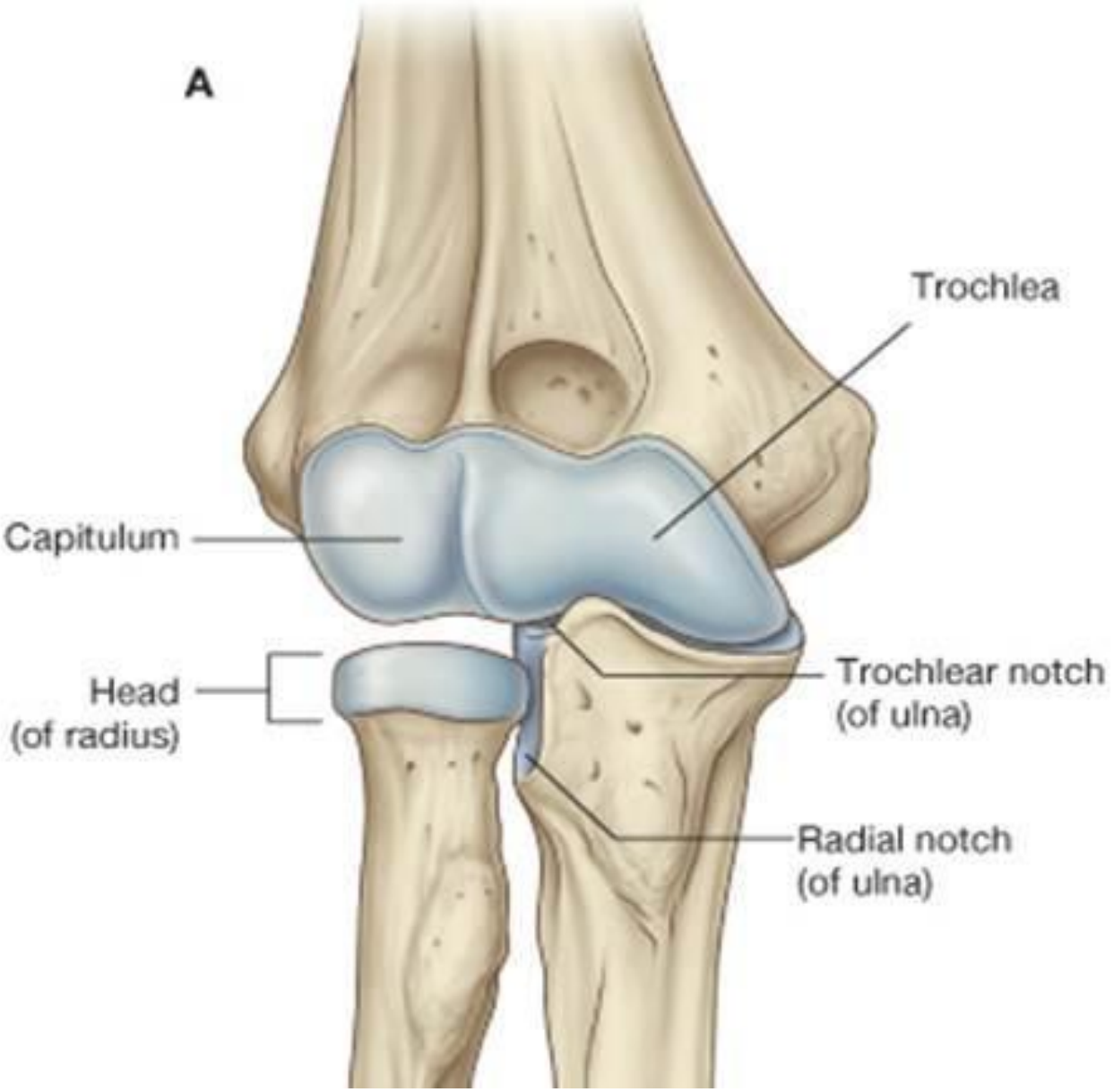
It is present in-between *Prakoshta* (humerus), *Prakanda* (radius, and ulna) *Asthi*.

त्रीण्येव जानु सपरं सह कूर्पराभ्याम् (सु.शा.6/29)

Measurement of the *Marma* is 3 *Angula*

Elbow Joint

- The humerus articulates with both the radius and the ulna at the elbow joint.
- The elbow joint is a hinge type of synovial joint
- The radius and ulna articulate by synovial superior (proximal) and inferior (distal) radio-ulnar joints and by an intermediate interosseous membrane and ligament.


A
Trochlea
Capitulum
Head
(of radius)
Trochlear notch
(of ulna)
Radial notch
(of ulna)


Humerus
Radius
Elbow
Ulna

Articular surface

It includes two articulations;

- These are the humero-ulnar between the trochlea of the humerus and the ulnar trochlear notch

- The humero-radial, between the capitulum of the humerus and the radial head.

- The humero-ulnar and humero-radial articulations form a largely uniaxial joint which is one of the most stable, joints in the body.

Fibrous Capsule

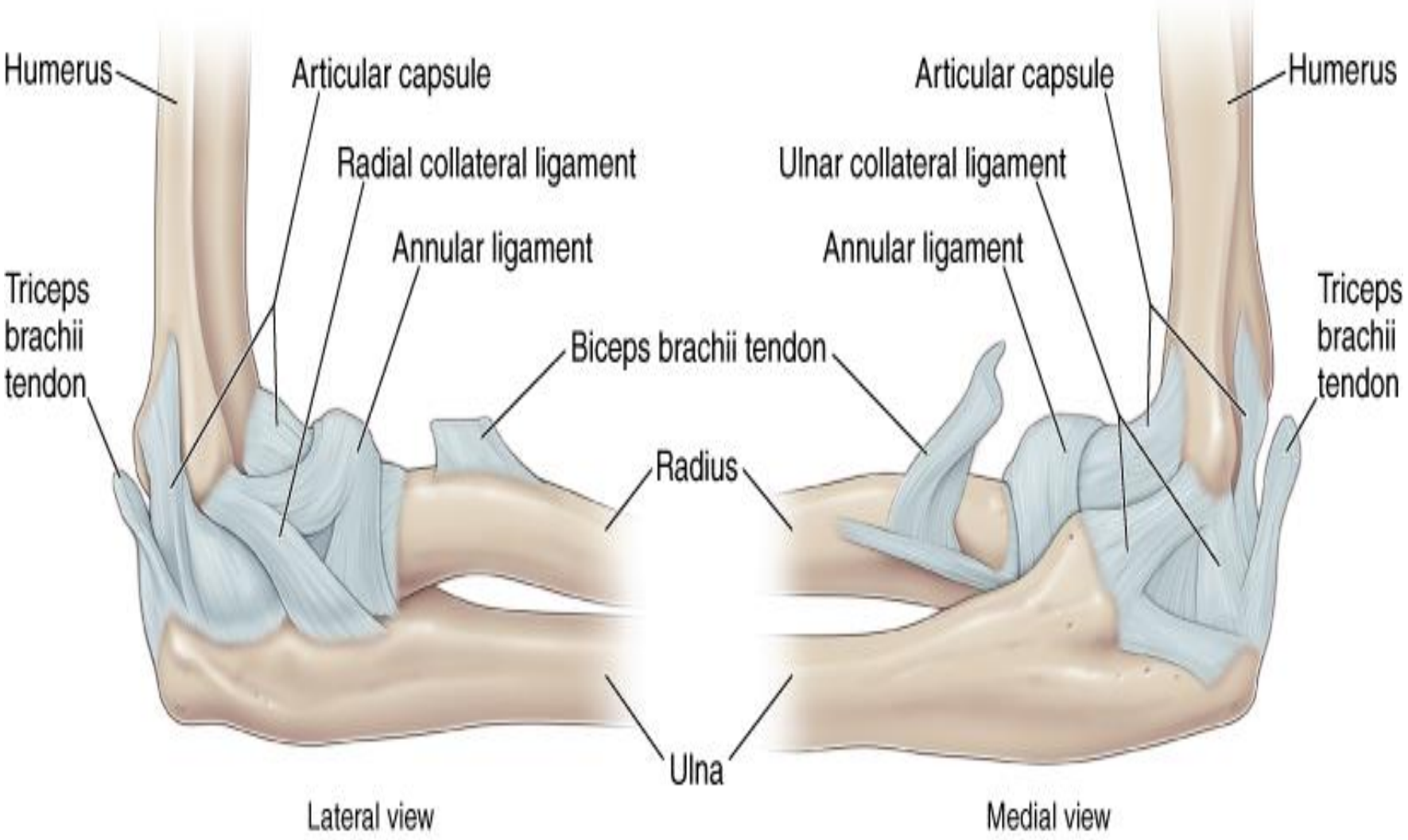
- The fibrous capsule is broad and thin anteriorly.
- It is attached proximally to the front of the medial epicondyle, and distally to the edge of the ulnar coronoid process and anular ligament, and is continuous at its sides with the ulnar and radial collateral ligaments.
- Posteriorly the capsule is thin and attached to the humerus behind its capitulum. Inferomedially it reaches the superior and lateral margins of the olecranon.

Ligament

1. Ulnar collateral ligaments.
2. Radial collateral ligaments.

Ulnar collateral ligament

- This is a triangular band
- Its apex is attached to the medial epicondyle of the humerus, and its base to the ulna.
- The ligament has anterior and posterior bands these are attached below to the coronoid process and the olecranon process their lower ends are joined to each other by an oblique band.



Source: Dutton M: *Dutton's Orthopaedic Examination, Evaluation, and Intervention*, 3rd Edition: www.accessphysiotherapy.com

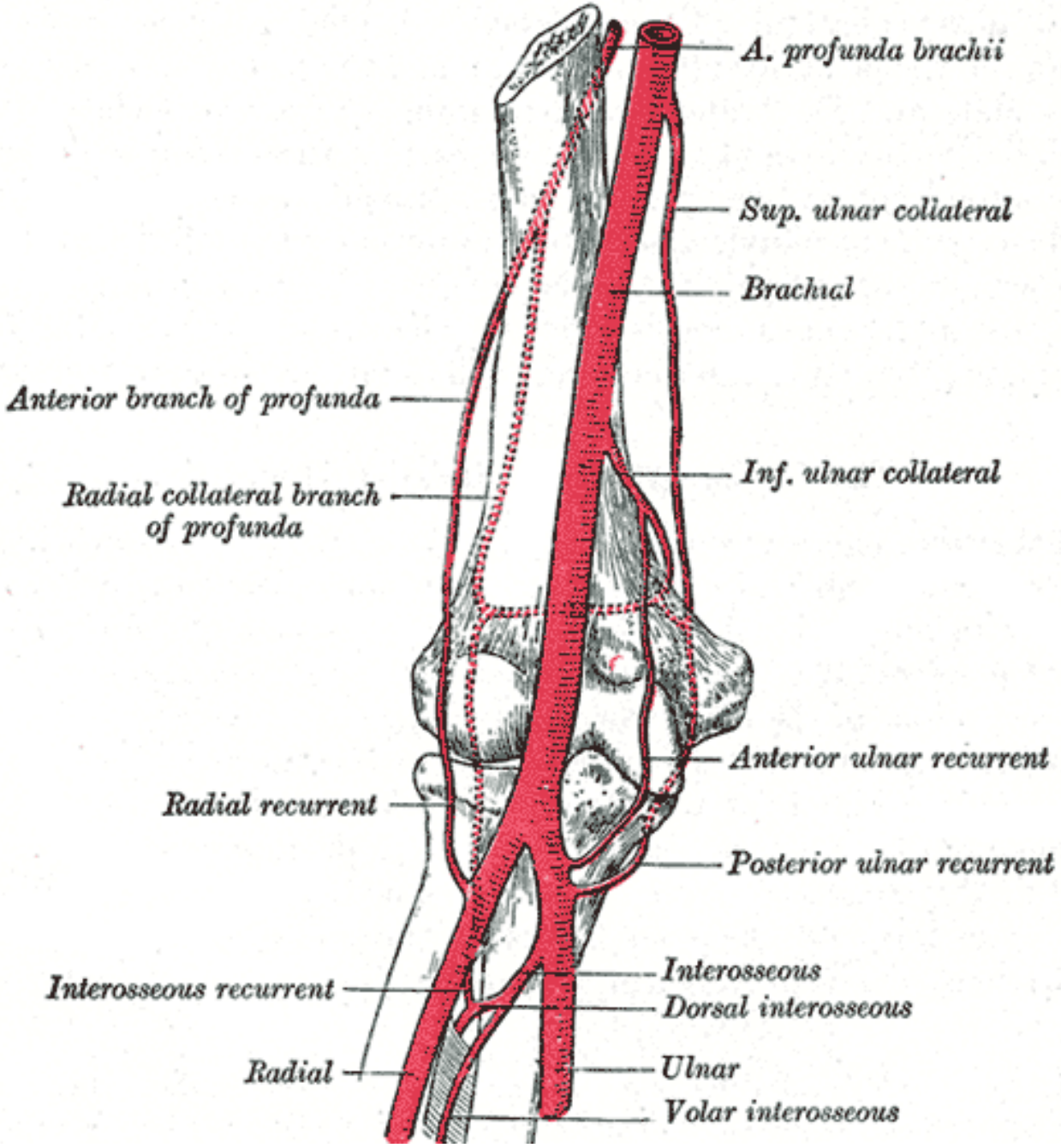
Radial collateral ligament

- It is fan shaped band extending from the lateral epicondyle to the annular ligament.

Blood Supply

The arteries supplying the elbow joint are derived from the anastomosis around the elbow joint.

- Brachial Artery
- Profunda Brachhii Artery
- Radial Artery
- Ulnar Artery


A. profunda brachii
Sup. ulnar collateral
Brachial
Anterior branch of profunda
Inf. ulnar collateral
Radial collateral branch of profunda
Anterior ulnar recurrent
Radial recurrent
Posterior ulnar recurrent
Interosseous
Interosseous recurrent
Dorsal interosseous
Ulnar
Radial
Volar interosseous

Movements

- Flexion
- Extension

Nerve Supply

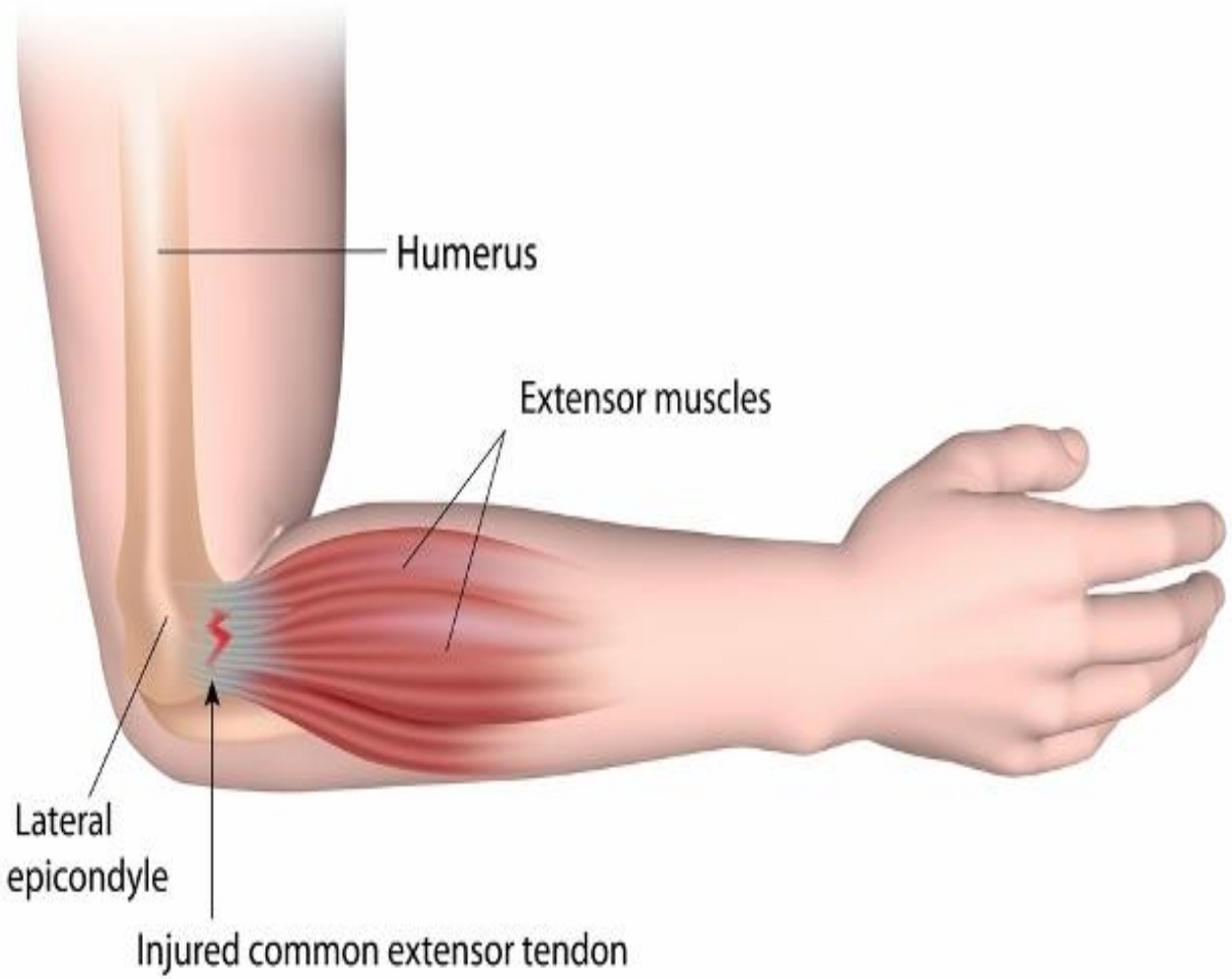
- Musculocutaneous
- Radial
- Ulnar Nerves.

Clinical Conditions

1) Lateral epicondylitis (Tennis Elbow)
2) Medial epicondylitis (Golfer's Elbow)
3) Cubital tunnel syndrome
4) Olecranon bursitis (students elbow)
5) Medial collateral ligament sprain
6) Posterior dislocation

Tennis Elbow

Right arm, lateral (outside) side




Affects
inside of
elbow
Muscle

Torn Ligaments of the Elbow

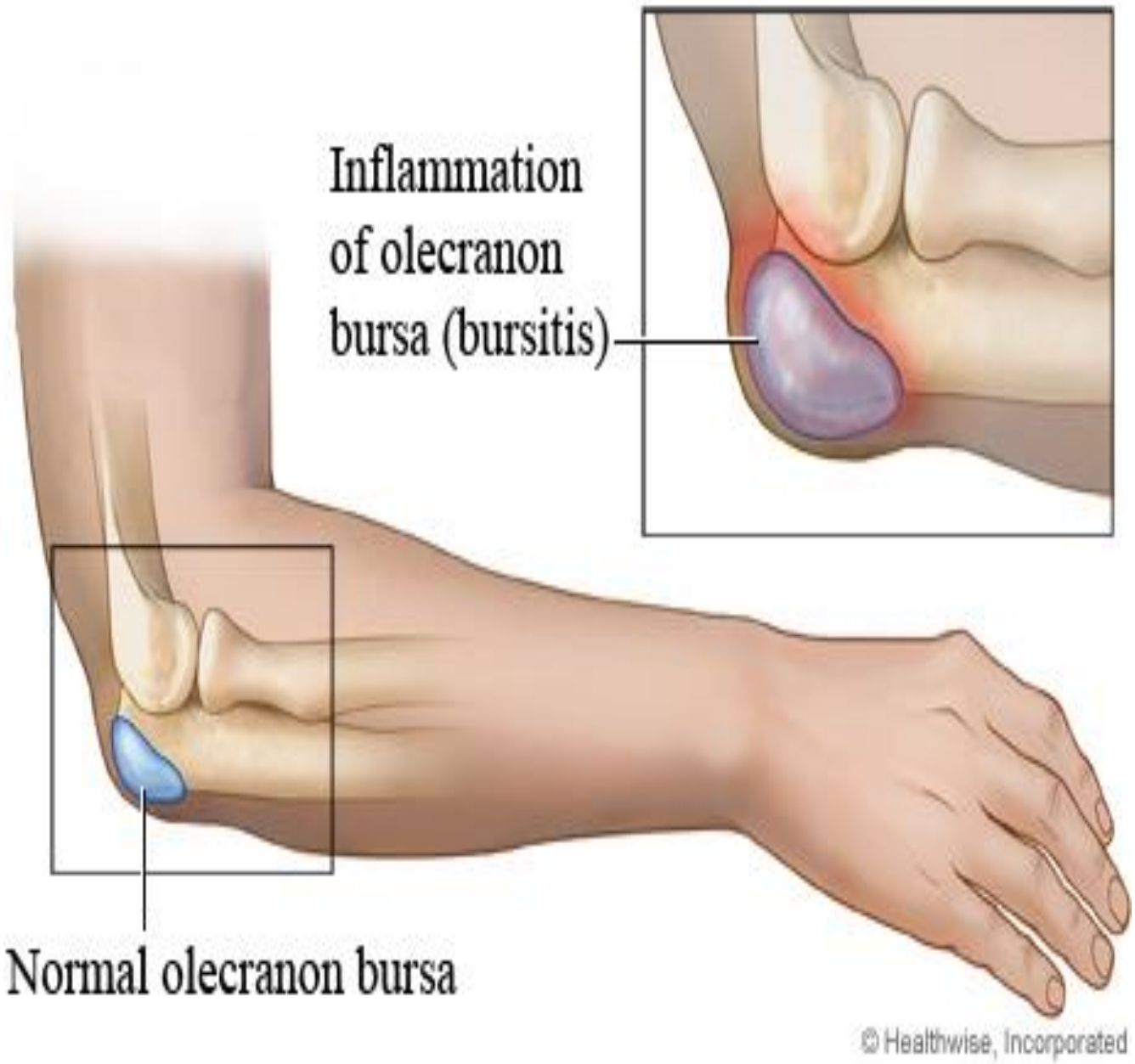
What Can Cause an Elbow Sprain

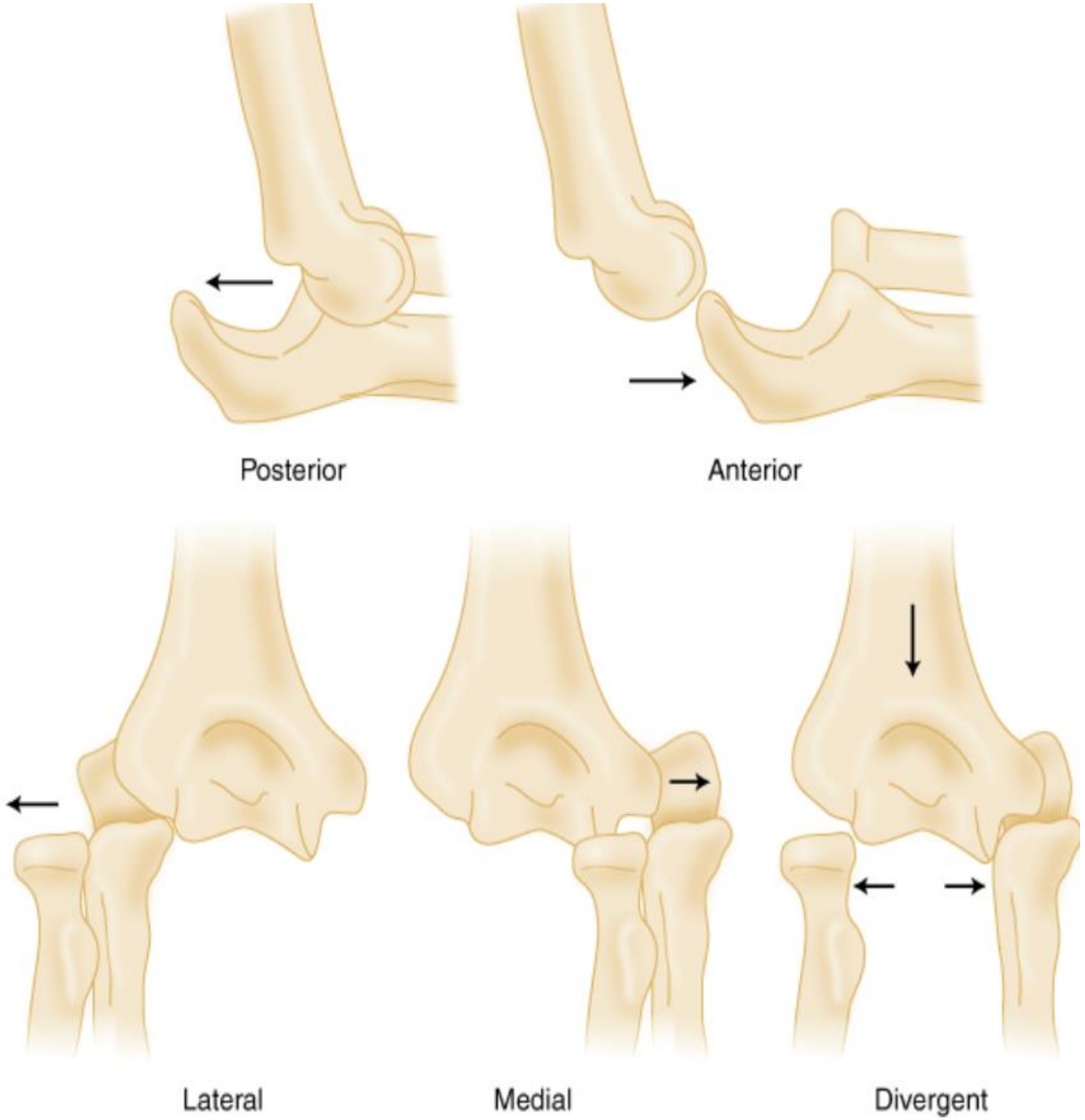
Elbow sprains can occur while partcipating in sports or in day to day activities. Suffering a direct blow to the elbow; Landing on an outstretched arm; A forced twisting of the elbow can lead to a sprain elbow.

Symptoms of a Sprained Elbow

- May have visible signs of bruising.
- Swelling and Tenderness
- Experience limited range in motion.
- Pain when moving the elbow

In most cases a sprain will not require surgery. However, in worst case scenarios where the ligament has been torn completely, surgery will be needed to repair the ligament.


Inflammation
of olecranon
bursa (bursitis)
Normal olecranon bursa
© Healthwise, Incorporated


Posterior
Anterior
Lateral
Medial
Divergent

THANK YOU

इदं आगमासिद्दत्वात् प्रत्यक्षफलदर्शनात् मन्त्रत्वात संप्रयोग्तव्यं अमिमांसस्य कथञ्चन ॥