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Ayurvedic management of Ksheena Shukra - A **Case Study**

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ABSTRACT

Low sperm count (oligospermia) and reduced motility of sperms (asthenospermia) is the main causes of male infertility and it can be correlated with Shukravaha Srotas Dushti and is a problem of global proportions. Worldwide infertility is affecting on an average 8-12% of couples. Acharya Sushrut has explained 10 types of Shukra Dushti which are incapable of producing a progeny. Shukravaha Srotas Dushti leads to Aharsha, Klaibya etc. there is no direct correlation of oligospermia but we can correlate it with Shukra Kshaya or Ksheena Shukra. A 38-year-old male who had been diagnosed as Oligoasthenospermia with low sperm count and non-motile spermatozoa with 10 years of married life and his wife with regular menstrual cycle, were treated successfully with Ayurvedic management. After Aamapachana, patient was administered with YapanaBasti along with Apatyakar Ghrita as Sneha for 30 days. There was marked improvement in the seminal parameters.

Key words: Shukravaha Srotas Dushti, Ksheena Shukra, Male infertility, Yapana Basti, Apatyakar Ghrita.

INTRODUCTION

Oligospermia^[1] means a condition of reduced number of sperm cell spermatozoa. Oligospermia, may also show significant abnormalities in sperm morphology and motility. According to WHO 2010 criteria sperm concentration <15 million spermatozoa per milliliter^[2] is termed as oligospermia. Except for some physical defects, low sperm count (Oligospermia) and poor sperm quality is responsible for male infertility in more than 90% of cases.^[3]

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Shukra is the terminal tissue element of the body which is considered as the sara of all other Dhatus. The specific function of *Shukra* is *Garbhotpadan*.^[4] Healthy functioning of Shukravaha Strotas plays a vital role in maintaining the harmony and happiness in marital life. According to Charakacharya "The man alone without offspring looks like a single tree having single branch, shade less, fruitless and with foul smell".^[5]

Karma of Shukra is Dhairya, Chyavana, Priti, Dehabala, Harsha and helps in production of progeny.^[6] Charak Samhita as well as Sushrut Samhita explain about the Shukravaha Srotas & its Moolasthan.^[7,8] Acharya Sushrut has proposed the following Shukradoshas -Vata, Pitta, Kapha, Shonit, Kunap, Granthi, Puti, Puya, Ksheena, Mutra, Purish, Retas.^[9]

CASE STUDY

Presenting Complains

A 38 year old male pt. driver by occupation visited OPD of HASS's Ayurved Mahavidyalaya & Hospital in August 2021. He & his better half were trying for their second issue but unable to conceive despite unprotected Shrinidhi Sanjay Sabnis et al. Ayurvedic management of Ksheena Shukra - A Case Study

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coitus for more than a year. Past family clinical history was non-contributory.

Local Examination & History

Development of secondary sexual characters is normal. Pt. has never suffered from any chronic medical illness, Infections (mumps, orchitis, sexually transmitted infections) and genitourinary tract infections. There was no any history of delayed ejaculation, pre-mature ejaculation, erectile dysfunction, surgical procedures involving the inguinal and scrotal areas (vasectomy, orchiectomy and herniorrhaphy), exposure to heat or radiation. The local examination did not show any anatomical abnormalities and there were no signs of inflammation, ulceration or rashes on scrotum, testes or penis.

Semen analysis conducted on 02/08/2021 indicated oligospermia (5 million/mi with 40% active motile). Through detailed history it was found that patient is a habitual tobacco chewer and consumes alcohol occasionally. He was often sleep deprived as he is a cab driver.

Investigations

Complete Blood Count

Hb - 15.9%

WBC - 8470 cells/ mm3

ESR - 10 mm/hour

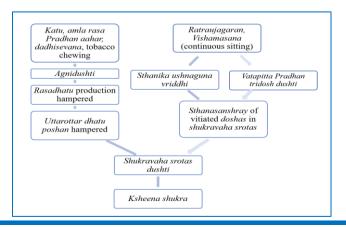
Random Blood Sugar - 102mg/dl

Semen Analysis

Total Sperm Count - 05 million /ml

Motility - 40% active motile

Samprapti



MATERIALS AND METHODS

Pachana

For Amapachana and Koshtha Shodhana Haritakyadi Churna^[10] 1tsp BD with hot water and jaggery was given for 5 days.

Abhyanga and Swedan

Sarvanga Abhyanga was done daily with Tila Taila and then Bashpa Sweda was given.

Shodhana Chikitsa

Yapana Basti^[11] was planned in Karma Basti schedule (30 days). In total 12 Yapana Basti and 18 Anuwasan Basti were administered. Sneh used in Yapana and Anuwasana Basti was Apatyakar Ghrita.^[12]

Shaman Chikitsa

- 1. Tb. Spermon 1BD
- 2. Half tsp *Shatawari* + half tsp *Ashwagandha Churna* with milk
- 3. Vanari Kalpa 2 tsp with milk BD

Pathya-Apathya

Patient was asked to stop the *Ratraujagrana* as well as tobacco chewing. Advised to have *Shadrasatmak Aahar* without prolonging the hunger.

RESULTS

Before treatment, the Sperm count was 05 million/ml and after treatment, it increased to 30 million/ml and after 3 months of follow-up it doubled. Actively motile % increased from 40% to 60%.

Test Name	Before Treatment [02/08/2021]	After Treatment [28/09/2021]	Follow Up after 3 months [04/01/2022]
Volume	01ml	01 ml	1.5 ml
fructose	Positive	Positive	Positive
Color	Greyish White	Pale yellow	Whitish
Reaction	Alkaline	Alkaline	Alkaline

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Viscous Viscosity Mucoid Viscous Liquefication < 30 minutes < 20 minutes < 30 minutes time 05 million / 30 million / 60 million/ **Total Sperm** Count ml ml ml 40% 50% 60% Actively motile 20% 10% 20% Sluggishly motile 40% Non motile 40% 20%

DISCUSSION

Generally, in Oligospermia the sperm count as well as its motility is found to be low. Treatment of Oligospermia should be aimed at increasing the sperm count as well as their motility. *Shukradushti* is the causative factor for the infertility. *Ksheenashukra* is a type of *Shukradushti* which can be correlated to Oligoasthenospermia. The treatment of *Ksheenashukra* mainly aims at *Shukrajanaka* and *Shukrapravartaka* in-terms of increasing the sperm count and motility by using *Vajeekarana Dravya*.

Haritakyadi Churna has Haritaki, Amalaki, Haridra, Shunthi, Pipalli, Vacha, Vidanga and Saindhav. Mainly these drugs being Katu, Tikta Rasa Pradhan, Ushna Veerya help to correct the Agnidushti as well as do Vaata and Mala Anuloman.

Drugs used in Yapana Basti were Sahachar, Bala, Darbhamool, Sariva, Bruhati, Kantakari, Shatawari and Guduchi. Kalka of Madanphala, Yashtimadhu and Pippali was added to the Ksheerapaka of above drugs. Along with the Kalka, Madhu, Saindhav, Tila Taila and Apatyakar Ghrita were added as Prakshepa Dravya. Apatyakar Ghrita is prepared by Shatawari, Gokshur, Masha, Aatmagupta and Vidarikanda along with 8 times quantity of Godugdha. Sahachar, Bruhati and Kantakari have Katu, Tikta Rasas, Katu Vipaka and Ushna Veerya. Thus, they help to regulate the vitiated Vata and correct its Prakrit Gati and Karma. Kantakari and Bruhati act on the actual Shukra Dhatu and help in its Sravana.^[13] Guduchi, Shatavari, Bala have Rasayan, Brumhan and Balya properties respectively as well as do Pitta Shamana.^[14] Sariva having Madhur Rasa and Vipaka, Sheeta Veerya will pacify the Pitta and act on Shukra Dhatu.^[15] Darbhamoola has regeneration property.

Bala Janana effect of Yapana Basti is observed if it is used for a long time, i.e., in Karma Basti schedule. Here it improves qualities of Dhatu upto the formation of Ojas by virtue of its Rasayana property and strengthens the body. Indriya Balam Param (increases strength of sensory and motor organs), Visham Avisham Bhavati Gatre (removes toxins from body parts), Medha Smriti Karam (promotes intellect and memory) and Jaravyadhi Prashamanam (allays aging). Rasayana conduce to the replenishment of Rasadi Dhatus. They contribute to the integrity of Saptadhatus and thus increase longevity.^[16]

Apatyakar Ghrita contains all Vrushya and Shukral drugs. Goghrita and Godugdha both are Nityasevaniya Dravya and Shukravardhak.^[17]

After completion of 30 *Basti*, patient was given oral medication for 3 months. Tab. Spermon includes drugs like *Shatawari*, *Ashwagandha*, *Aatmagupta*, *Musali*, *Talimkhana* and *Shilajatu* which are all in the category of *Vajikarana Dravya*. *Shatawari* and *Ashwagandha Churna* have *Balya*, *Vrushya* and *Rasayan* properties. *Aatmagupta Beeja* also promote the *Vriddhi* of *Shukra* due to its *Vrushya* and *Sheeta Veerya*.

OF. S.J. Nagalotimati	CIALITY HOSPITAL 3 회공업 생활을 리보고 지 h Memorial Diagno MLI - 580 021 Ph. 0836	2277501 - 2277502 - 2277503	
OPD NO Reg Date Patient Name Ref by I Dr. Vinaykum		AB NO: 5063 Printed On: 02/08/2021 - 1 Age : 38 Yrs Sex : Mak ar Hbl	14:10:44 0
	Result	Normal Values	
Semen Analysis			
GROSS EXAMINATION:			
Collection	: 1.30		
Volume	: 01 ml		
Colour	: Greyish White		
Appearance	: Opalscent		
Self Liquifacation time	: Within 30 minute	5	
Viscosity	: Mucoid		
CHEMICAL EXAMINATION			
рн	: Alkaline		
Fructose Test	: Present		
Active Motile	: 40 %		
Nonmotile	: 40 %		
Sluggish Motile	: 20 %		
Total Sperm Count	: 05 millions/ml	>15 millions/ml)	
Impresion	OLIGOSPERM	11A	
port Entered By	Patholog	ist	Biochem

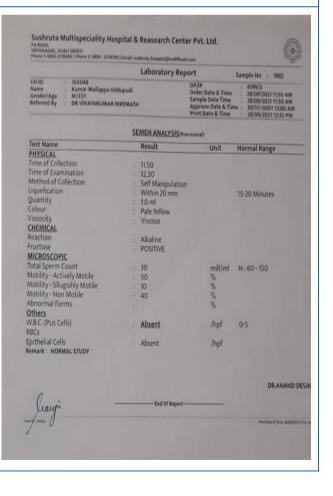
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Dr. S J Nagalotima	th Memorial Di	agnostic Laboratory
P.B.Road, Vidyanagar, H		0836-2277501 - 2277502 - 2277503
OPD NO : Reg Date :02/08/2021		LAB NO: 5063 Printed On: 02/08/2021 - 14:10:41 Age : 38 Yrs Sex : Male anagar Hbl
	Result	Normal Values
COMPLETE BLOOD CO	UNT	
Haemoglobin	: 15.9	M 14.0 - 17.0 gm/dl
W.B.C Count	: 8,470	F 12.0 - 16.0 4000 - 11000 Cells/ cumm
DIFFERENTIAL COUNT		40 - 75 %
Neutrophils	; 72	40 - 75 %
Lymphocytes	: 19	01 - 06 %
Eosinophils	: 02	2 - 10 %
Monocytes Basophils	; 00	0 - 1 %
E.S.R.	: 10	0 - 15 mm/hr
Random Blood Sugar	: 102	80 - 140 mg/dl
		Biochemist



VIDYANAGAR, HUBLI 580021 VIDYANAGAR, HUBLI 580021 Phone 1: 0836-2378600 Phone 2: 0836 - 237870	Laboratory	Report	Sample No : 6463
UH ID : 165048 Name : KUMAR MALLAPPA Gender/Age : M/35Y Referred By : DR.VINAYAKUMAR	UDDUPUDI	OP/IP Order Date & Time Sample Date Time	: 12920/0 : 04/01/2022 02:09 PM
	RBS(Provis	ional)	
Test Name	Result	Unit	Normal Range
Random Blood Glucose	: 115.8	mg/dl	>=200 : PROVISIONAL DIAGNOSIS OF DIABETES
	SEMEN ANALYS	(Provisional)	
Test Name	Result	Unit	Normal Range
PHYSICAL			
Time of Collection Time of Examination	: 2:30 pm		
Method of Collection	: 3:30 pm		
	: Self Manipula		
Liquefication	: Within 30 mi	n	15-20 Minutes
Quantity Colour	: 1.5 ml		
	: Whitish		
Viscocity CHEMICAL	: Viscous		
Reaction	· Alkaline		
Fructose	: Alkaline : POSITIVE		
MICROSCOPIC	: PUSITIVE		
Total Sperm Count	: 60	mill/ml	N: 60 - 150
Motility - Actively Motile	: 60	%	14.00 100
Motility - Sllugishly Motile	: 20	%	
Motility - Non Motile	: 20	%	
Abnormal Forms		%	
Others			
W.B.C. (Pus Cells)	: Absent	/hpf	0-5
RBCs			
Epithelial Cells	: Absent	/hpf	
Remark : NORMAL STUDY			
			1/
LAB Technician			DR.ANAND DES
al			
1033	End Of Reg	port	

CONCLUSION

Ayurvedic medicine deals with infertility by *Shodhana* i.e., detoxification. It focuses on all aspects like *Aahar*, *Vihara* that play an important role in manifestation of any pathology. In the present case we applied Ayurvedic principles in treating *Shukradushti*. We found that after completion of the proper treatment based on Ayurvedic principles and changes in diet and daily regimen there was significant improvement in semen parameters such as sperm count and motility of sperms. Due to improved status of *Dhatus* and as well as the action of ingredients showed increased sexual desire, duration of coitus, getting an orgasm or sexual satisfaction along with increased sperm count and motility.

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