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## Ayurvedic management of *Klaibya* - Case Study

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### ABSTRACT

Impotency means a man who is unable to perform sexual intercourse, being powerless and unable to carry out sexual activities. The male sexual dysfunctions have been elaborately described as *Klaibya* in Ayurvedic classics. In clinical practices *Klaibya* is the most common psychosexual disorders. It refers to a problem during any phase of the sexual cycle that restricted the man from experiencing satisfaction from the activity. Now days the incidence of sexual dysfunction is increases due of age, sedentary life style, unhealthy foods etc. About 5% of 35 years old men and between 15% and 25% of 50 years old men experience sexual dysfunctions. *Vajikarana*, branch of *Ashtanga Ayurveda* is deals with fertility, potency and healthy progeny. In this branch diagnosis and management of infertility and Sexual dysfunction are dealt in detail.

**Key words:** Chandraprabha Vati, *Klaibya*, Kapikacchu Churna, Mustadi Yapan Basti, Oligoasthenozoospermia

### INTRODUCTION

*Vajikarana* is branch of *Ashtanga Ayurveda* deals with fertility, potency and healthy progeny.<sup>[1]</sup> In this branch diagnosis and management of infertility and Sexual dysfunction are deals in detail.<sup>[2]</sup> The male sexual dysfunctions have been elaborately described as *Klaibya*<sup>[3]</sup> in Ayurvedic classics. The word *Klaibya* in *Vajikarana* refers to impotence i.e., a man who is unable to perform sexual intercourse, being powerless, helpless or the inability to carry out sexual activities.<sup>[4]</sup>

It basically includes sexual desire disorders, sexual arousal disorders or erectile disorders, orgasm disorders and sexual pain disorders. *Sukradhatu* is the final tissue element produced from the progressive metabolic transformation of *Annarasa*.<sup>[5]</sup> It is responsible for *Bala* (strength), *Varna* (color) and *Upacaya* in both male and female and by this it can be presumed that probably the whole endocrine system with special reference to hypothalamic hypophyseal gonadal hormones can be included under the term *Sukra*. *Sukra* is that substance which is responsible for systemic body activities especially regeneration, reproduction, metabolism and tends to impart vigor and energy, and part of it comes out of the body at the time of sexual act and performs the specific function of reproduction.<sup>[6]</sup> Therefore *Shukra* is responsible for conception and any defect in *Shukra* leads to *Klaibya*. The process of erection and ejaculation is a complex phenomenon which covers both the psycho behavioral and physical aspects of sexual physiology or expression. *Sankalpa* (determination) is the mental preparation for the sexual act without this the further stage of sexual responses are not possible. Further

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sexual acts, *Pidana* i.e., Specific stimulation of the genital parts are also determined by *Manas*, and then only the acts are proceeded. So, any defective determination or making by *Manovikaras* will not keep the sexual thoughts and feelings intact. This is the first phase arousal defect of copulation or ejaculation because the ejaculation is strictly depending upon this phase.

After *Sankalpa*, *Cesta* and *Pidana* the *Sarva Sarirasrita Sukra* and *Manas* are stimulated simultaneously.<sup>[7]</sup> Therefore any of the defective coordination due to functional deficit of *Manas* also causes sexual dysfunctions in the form of erectile dysfunction and premature ejaculation. *Krodha*, *Soka*, *Bhaya*, *Ajnana*, *Moha* etc. are the *Manovikaras* and *Alpa Sattva* are the causes of the genesis of *Klaibya*. The external injuries, ageing, chronic debilitating disease, alcohol, endocrine abnormalities will directly show their effect on *Manas*. These are a few examples to show the *Manas* as a cause for *Klaibya* and it will in turn affect the *Manas* simultaneously. The classification of *Klaibya* according to *Acharya Charaka* has classified *Klaibya* into 4 types<sup>[8]</sup> viz *Dhwajabhangaja*, *Bijopaghataja*, *Sukra Kshayaja* and *Jaraja* while *Acharya Sushruta* has classified the same into 6 types<sup>[9]</sup> viz *Manasa*, *Saumya Dhatukshaya/Pittaja*, *Sukra Kshayaja*, *Medrarogaja*, *Sahaja* and *Sthira Sukranimitaja*, and *Bhavaprakasha*, *Klaibya* has been classified into 7 types<sup>[10]</sup> viz *Manasa*, *Pittaja*, *Shukrakshayaja*, *Medhrorogaja*, *Upaghataja*, *Shukrastambhaja* and *Sahaja*.

### General Symptoms of *Klaibya*

A person's persistent inability to perform sexual act even with the beloved, willing and submissive partner affecting the desire and capacity to perform sexual act due to difficulty in erection, non-erection or flaccidity of penis associated with tachypnea, perspiration, exhaustion, difficulty and or cessation of ejaculation where the efforts remain to fail is called the general symptoms of *Klaibya*.<sup>[11]</sup>

### Different types of *Klaibya* quoted by *Acharyas*

- *Dhwajabhangaja* and *Medhrorogaja* *Klaibya* are due to inflammatory disease of the Penis.

- *Bijopaghataja* *Klaibya* is due to abnormality in the sperms.
- *Jaraja* *Klaibya* is due to decreased levels of serum testosterone in old age i.e. Andropause or Male menopause.
- *Sukrakshayaja* *Klaibya* is due diminution of semen as a result of various *Aharaja*, *Viharaja* and *Manasika* factors.
- *Sukrastambhaja* *Klaibya* is due to prolonged sexual abstinence.
- *Sahaja* *Klaibya* (congenital impotence) i.e., defects due to various chromosomal abnormalities.
- *Manasika* *Klaibya* is the (psychogenic impotence) is due to various *Manasika Vikaras* and
- *Marmachedaja* *Klaibya* (impotence due to damage to the vital parts) is a result of pelvic fracture, Pelvic surgery etc.

## CASE

### Presenting Concern:

A 35-year male diagnosed with Oligoasthenozoospermia presented in outpatient department of Kayachikitsa in Sri Jayendra Saraswathi Ayurveda College and Hospital, Nazarethpet, Chennai-600123, with a desire of child. Patient has a married life of 7 years. Since 5-year couple tried to conceive but failed. Complaints of weakness, erectile dysfunction and early ejaculation also presented (Table 1).

**Table 1: Timeline of the case**

SN	Complaints	Duration
1.	Unable to conceive	5 years
2.	Weakness	1.5 years
3.	Problem in erection	3 years
4.	Early ejaculation	3.5 years

**Past H/o:** He had no history of diabetes, bronchial asthma, T.B and hypertension.

**Family H/o:** No family history of diabetes, hypertension, Bronchial asthma and T.B.

**Addiction H/o:** He had no addiction history of smoking, tobacco and alcohol.

### Semen analysis report

**Table 2: Previous semen analysis report**

SN	Test	Result
1.	Color	White
2.	Reaction	Alkaline
3.	Volume	0.5 ml
4.	Count	13 million
5.	Pus cells	Nil

### Diagnostic criteria

Diagnosis will be made on the basis of symptoms given in ancient text and modern literature. Laboratory investigation and clinical finding shall be considered for making diagnosis for *Shukra Kshaya*. As defined by the World Health Organization (WHO) in 2021, low sperm count indicated if less than 39 million sperm/ml and low motility indicated if less than 42%.

### *Shukra Kshaya Lakshana* <sup>[12]</sup>

1. *Durbalata* (General debility)
2. *Pandutavam* (Pallor)
3. *Sadan* (Bodyache)
4. *Sharm* (Tiredness)
5. *Mukha Sosha* (Dryness of mouth)
6. *Medha Vrishana Vedna* (Pain in penis and Scrotum)
7. *Dhumayativa* (Burning in penis and Urethra)
8. *Chirat Praseka* or *Alpa-Rakta-Yukta Shukra Pravritti* or *Shukra Avisarga* (Delayed or blood mixed or no ejaculation)
9. *Maithune Ashakti* (Problematic or not satisfactory coitus)
10. *Klaivya* (Impotence)

### Clinical finding

#### General Examination and Personal history

General Condition of the patient was good. No deviation in vital signs. He is Hindu of Indian ethnicity. He had a moderate appetite, Normal bladder, bowel

habit and regular sleep pattern. He had a sedentary life style, well-built and well nourished. He had BMI 26.6 and waist circumference 102 cm. His *Prakruti* was *Kaphaja Vataja* Dominant and *Sarata* was *Mansa-Meda Sarata*. He had *Madhyam Satva*.

### Clinical Investigation

Investigation was carried out before intervention like routine haematological test complete blood count (CBC), liver function test (LFT), Kidney function test (KFT), lipid profile, blood sugar FBS and PPBS, urine routine and microscopic all investigation was under normal range.

**Table 3: Therapeutic intervention**

#### Internal

SN	Medicine	Dose	Anupana	Time of administer
1.	<i>Gandharvasthadi Kashayam</i>	15 ml/twice	Warm water	Before food
2.	<i>Chandraprabha Vati</i>	1 tab/twice	With <i>Kashaya</i>	Before food
3.	Stresscom	1 cap/once	Water	Bed time
4.	<i>Kapikacchu Churna</i>	3 gms/thrice	Milk	After food

#### External

SN	Treatment	Medicine	Duration
1.	<i>Abhyangam</i>	<i>Mahanarayan</i> oil	3 days
2.	<i>Nadi Sweda</i>	-	3 days
3.	<i>Virechana</i>	<i>Trivrit Lehyam</i> (40gm) + <i>Triphala Kashaya</i> (50ml) + <i>Draksha Kashaya</i> (50ml)	1 day
4.	<i>Sastika Shali Pinda Sweda (SPSS)</i>	-	8 days
5.	<i>Mustadi Yapan Basti (Kashaya Basti)</i>	Honey - 200gm,	3 days

		<p><i>Saindhava lavana</i> - 15gm,</p> <p><i>Sneha</i> (<i>Ksheeribala</i> oil - 100ml + <i>Sukumara Ghritam</i> - 100ml),</p> <p><i>Kalka Dravya</i> (<i>Yastimadhu</i> - 15gm + <i>Satapusp</i> - 15gm),</p> <p><i>Kashaya</i> (<i>Musta</i> - 25gm),</p>	
6.	<i>Matra Basti</i>	<i>Ksheeribala</i> oil - 50ml + <i>Sukumara Ghritam</i> - 50ml)	5 days

		oil followed by <i>Nadi Sweda</i>	
23/10/22	SPSS <i>Matra Basti</i>	<i>Shastika Shali Pinda Sweda</i> <i>Ksheeribala</i> oil + <i>Sukumara Ghritam</i>	<i>Matra Basti</i> was given at 2:00 pm. Total Vegas came- 2
24/10/22	SPSS <i>Kashaya Basti</i>	<i>Shastika Shali Pinda Sweda</i> <i>Mustadi Yapan Basti</i>	<i>Mustadi Yapan Basti</i> was given at 11:00 am. Total Vegas came- 3
25/10/22	SPSS <i>Matra Basti</i>	<i>Shastika Shali Pinda Sweda</i> <i>Ksheeribala</i> oil + <i>Sukumara Ghritam</i>	<i>Matra Basti</i> was given at 2:00 pm. Total Vegas came- 1
26/10/22	SPSS <i>Kashaya Basti</i>	<i>Shastika Shali Pinda Sweda</i> <i>Mustadi Yapan Basti</i>	<i>Mustadi Yapan Basti</i> was given at 11:00 am. Total Vegas came- 4
27/10/22	SPSS <i>Matra Basti</i>	<i>Shastika Shali Pinda Sweda</i> <i>Ksheeribala</i> oil + <i>Sukumara Ghritam</i>	<i>Matra Basti</i> was given at 2:00 pm. Total Vegas came- 2
28/10/22	SPSS <i>Kashaya Basti</i>	<i>Shastika Shali Pinda Sweda</i> <i>Mustadi Yapan Basti</i>	<i>Mustadi Yapan Basti</i> was given at 11:00 am. Total Vegas came- 2
29/10/22	SPSS <i>Matra Basti</i>	<i>Shastika Shali Pinda Sweda</i> <i>Ksheeribala</i> oil + <i>Sukumara Ghritam</i>	<i>Matra Basti</i> was given at 2:00 pm. Total Vegas came- 1
30/10/22	SPSS <i>Matra Basti</i>	<i>Shastika Shali Pinda Sweda</i> <i>Ksheeribala</i> oil + <i>Sukumara Ghritam</i>	<i>Matra Basti</i> was given at 2:00 pm. Total Vegas came- 2

Date	Treatment	Treatment procedure	Observation
18/10/22	<i>Abhyangam</i> <i>Nadi Sweda</i>	<i>Abhyangam</i> with <i>Mahanarayan</i> oil followed by <i>Nadi Sweda</i>	Not specific was found
19/10/22	<i>Abhyangam</i> <i>Nadi Sweda</i>	<i>Abhyangam</i> with <i>Mahanarayan</i> oil followed by <i>Nadi Sweda</i>	He was feel lightness of body.
20/10/22	<i>Abhyangam</i> <i>Nadi Sweda</i>	<i>Abhyangam</i> with <i>Mahanarayan</i> oil followed by <i>Nadi Sweda</i>	He was feel lightness of body.
21/10/22	<i>Virechana</i>	<i>Trivrit Lehyam</i> + <i>Triphala Kashaya</i> + <i>Draksha Kashaya</i>	Patient <i>Virechana</i> medicine taken at 7:30 am Total Vegas came- 10
22/10/22	<i>Abhyangam</i> <i>Nadi Sweda</i>	<i>Abhyangam</i> with <i>Mahanarayan</i>	Advice <i>Samsarjan Karma</i>

### Assessment Criteria

Assessment shall be made by the improvement on the subjective and objective parameters before and after treatment on *Shukra Dhatu*.

### Subjective Parameters

The main symptoms of *Shukra Kshaya* (Chaturvedi Gorakhnath et.al, 2009; Shashtri Ambikadutta.2008; Kaviraj Atridev Gupt, 2011) shall be given grading which will be assessed.

### Objective Parameters

1. Semen Analysis Report
2. Biomarker Analysis (Serum FSH, Serum LH, Serum Testosterone, Serum Inhibin-B).

### RESULTS

There was marked improvement in sperm count (Table 5) as well as sperm motility after the treatment. Patient showed marked improvement in signs and symptoms of *Shukra Kshaya* and *Klaivya* as per the classics (Table 4) and modern parameters. There was marked improvement in serum testosterone & serum Inhibin-B level after the treatment in this case. Level of serum LH decreased after treatment (Table 6).

**Table 4: Patient showed marked improvement in signs and symptoms of *Shukra Kshaya* and *klaivya* as per the classics.**

SN	Lakshana	Before treatment	After Treatment
1.	<i>Durbalata</i> (General debility)	4	1
2.	<i>Pandutavam</i> (Pallor)	3	1
3.	<i>Sadan</i> (Bodyache)	2	2
4.	<i>Sharm</i> (Tiredness)	4	2
5.	<i>Mukha Sosha</i> (Dryness of mouth)	4	2
6.	<i>Maithune Ashakti</i> (Problematic or not satisfactory coitus)	4	1

7.	<i>Klaivya</i> (Impotence)	10	24
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**Table 5: Effect of therapy on objective parameters (semen analysis).**

SN	Test	Before treatment	After treatment
1.	Semen volume	0.5 ml	2 ml
2.	Semen colour	Whitish	Whitish
3.	Reaction	Alkaline	Alkaline
4.	Total sperm count	13 million	65 million
5.	Motile sperm	35%	47%
6.	Sluggish sperm	40%	50%
7.	Immotile sperm	35%	20%

**Table 6: Effect of therapy on objective parameters (Serum biomarkers of spermatogenesis).**

SN	Test	Before treatment	After treatment
1.	Serum FSH	9.09 mIU/ml	8.17 mIU/ml
2.	Serum LH	12.50 mIU/ml	6.03 mIU/ml
3.	Serum Testosterone	25.20 ng/dl	380.89 ng/dl
4.	Serum Inhibin- B	102.29 pg/mL	178.99 pg/mL

### DISCUSSION

1. ***Gandharvahastadi Kashayam*<sup>[13]</sup>** - It normalizes *Vata-Kapha Doshas* and its *Anulomana* property helps in relieving constipation. It contains *Gandharvahasta*, *Chirabilva*, *Chitraka*, *Vishwa*, *Pathya*, *Punarnava*, *Yavasa* and *Bhumiamla*. Majority of contents possess Anti-inflammatory action mainly *Punarnava* and *Gandharvahastha*. *Chirivilva*, *Viswa* and *Chitraka* reduce *Aamavastha* via their *Deepana* (carminative) and *Pachana* properties. *Pathya* has *Rasayana* properties which help to normalize all *Dhathus*. *Sahasra Yoga Kashaya Prakarana* 394, *Vatahara Kwatha*.

2. **Chandraprabha Vati**<sup>[14]</sup> - Chandraprabha Vati is one of the important formulations used in the classics. It is considered as *Sarva Roga Pranaashini* which cures all types of diseases. In *Sharangadhara Samhita* 37 ingredients have been mentioned, they are *Chandraprabha (Karpura)*, *Vacha*, *Musta*, *Bhunimba*, *Amrita (Guduchi)*, *Suradaru*, *Haridra*, *Ativisha*, *Darvi*, *Pippalimula*, *Chitraka*, *Dhyanaka*, *Triphala*, *Chavya*, *Vidanga*, *Gajapippali*, *Trikatu*, *Makshika*, *Sarja Kshara*, *Yava Kshara*, *Saindhava Lavana*, *Souvarchala Lavana*, *Vida Lavana*, *Trivrit*, *Danti*, *Patraka*, *Tvak*, *Ela*, *Vamslochana*, *Loha*, *Sheeta*, *Shilajatu*, *Guggulu* etc. It acts on *Tridoshaja* more commonly *Vatakapha Shamaka*, in acts on *Rasa*, *Rakta*, *Mamsa*, *Medas*, *Asthi*, *Majja*, *Shukra Dhatus*, in acts on *Bahya* and *Madhyama Rogamarga* and acts on all *Srotas*. In *Klaibya* the drugs like *Trivrit*, *Pippalimoola*, *Guggulu*, *Yavakshara* relieve anxiety, contains *Loha Bhasma* and *Shilajatu* it helps in increasing the *Bala*, reduce fatigue and general debility.
3. **Stresscom**<sup>[15]</sup> - It contains dry extract of *Ashwagandha*, is the manufacturing by Dabur India Ltd. *Ashwagandha*, *Withania somnifera* is very renowned herb of the *Ayurvedic* system of medicine as a *Rasayana* (tonic). *Rasayana* is described as an herbal, mineral and herbomineral preparation, it promotes a youthful state of physical and mental health and expands happiness. These can be given to small children as *Brimhana*, and are also taken by the middle aged and elderly to increase longevity. Among the *Ayurvedic Rasayana* herbs, *Ashwagandha* have the most prominent place. It is known as "*Sattvic Kapha Rasayana*". *Rasayana* herbs are mainly adaptogen/anti-stress action. It promotes the function of the brain and nervous system and improves the memory. It improves the reproductive system, followed by promoting a healthy sexual and reproductive balance and being a powerful adaptogen, it enhances the body's resiliency to stress. *Ashwagandha* improves the body's defense mechanism to disease by improving the cell-mediated immunity. It also

having antioxidant properties, it help to protect against cellular damage which caused by free radicals.

4. **Kapikacchu Choorna**<sup>[16]</sup> - *Kapikacchu (Mucuna pruriens Linn.)* is the most popular drug in *Ayurvedic* system of medicine. It is famous for its powerful aphrodisiac as it is well known to increase the sperm count<sup>[17]</sup> and to increase testosterone levels in the body as well. *Kapikacchu* is an agent that helps the body in building up the mass as well as endurance and also helps the body to increase the muscular strength. It is very commonly known as athletes friends as many sports person uses these supplements to enhance their body performance. This herb helps in reducing the fats in the body and side by side helps in increasing the muscle mass in the body. This herb is also promoting the mood for sexual indulgence thereby increases the libido power and is also beneficial for people who are undergoing depression. This drug mentioned in the *Ayurvedic* classic of different book. It's having *Guru*, *Snigdha Guna*; *Ushna Virya*; *Madhura Vipaka*; *Vatahara* and *Pittahara Karma*. Pharmacological actions are Antivenom activity, Hypoglycemic Activity, Aphrodisiac Activity, Antioxidant Activity, Antimicrobial Activity, Antiparkinson's Activity etc. *Kapikacchu Churna* effectively raised the sperm count. The results on sperm count found highly significant. It also showed good improvement in other seminal parameter like Volume of semen, Ph of semen, motility of sperms etc. It showed mild significant result in Non progressive sperm (NP) and Not significant in Slow linear progress of sperm (SLP). It also significantly increased the sexual desire, penile rigidity, erection and duration of ejaculation with orgasm.<sup>[18]</sup>
5. **Mahanarayan Oil**<sup>[19]</sup> - *Matra Basti* through rectum reaches instantly into systemic circulation thus has faster absorption and gives quick results. According to the modern science, there is no digestive action of fat or oil in stomach. The fat digestion and absorption takes place in large intestine and no food substances other than water

and salt are absorbed from the large intestine not because it is not possible but the Chyme contains no absorbable substances by the time it reaches the large intestine. *Mahanarayana Taila* is a renowned *Vata* balancing herbal oil formula in *Ayurvedic* medicine. The drugs of *Mahanarayana Taila* have *Prajasthapana*, *Rasayana*, *Balya* properties. The drugs of *Mahanarayana Taila* possess antioxidant, adaptogenic, immunomodulatory effects. It is a rich combination of *Ayurvedic* herbs, produce no irritation on skin and arrest further progress of chronic arthritic changes of joints, pain, stiffness, restricted movement, distortion and restores normal joint function. In the case, *Matra Basti* with *Mahanarayana Taila* improved the condition of the patient, perhaps it enhances the blood flow over low back area and helps the patient nourished.

6. **Sukumara Ghritam<sup>[20]</sup>** - *Sukumara Ghrita* was used for *Matra Basti* (consumption of fat through intestine) purpose. It is one of the examples for *Yamaka* (combination of two) type of *Sneha* (unctuousness) which contain *Ghrita* (ghee) and *Eranda Taila* (castor oil) as ingredients. It consists of *Dashamoola* (Ten roots) as *Kashaya Dravya* best *Vata Samaka Dravya* (*Vata*-normalizing drug). *Eranda Taila* having *Madhura* (sweet), *Katu* (pungent), *Kashaya* (astringent) taste, *Ushna Virya* (hot potency), *Srotovisodhaka* (clear obstruction), *Vata-Kapha Hara*, *Yoni-Sukra Visodhaka* (purify gametes) and facilitates *Vatanulomana* (normal movement of *Vata Dosh*).

7. **Sastika Shali Pinda Sweda<sup>[21]</sup>** - *Shastika Shali Pinda Sweda* it is one kind of *Snigdha Sankar Sweda*. Nutrients of *Shastika Shali* get absorbed it gives strength to the muscles and heat applied over the area it decreases stiffness as well as sweat pores open and flow out various metabolic wastes from body. Increased blood flow promotes relaxation process and increasing range of movement. If oleation and sudation could soften dried timber, then definitely it helpful to get body nutrition in a patient. The word '*Pinda*' means bolus, it refers to

the sudation achieved with the using of bolus which is made by drug. *Shastika Pinda Sweda* is carried out with the bolus of boiled *Shastika Shali* with *Balamula Kwatha* and *Ksheer*. It carries *Tnigdha*, *Guru*, *Sthira*, *Sheeta* and *Tridoshaghna* property. Though a *Sweda Karma*, it has *Brimhana Guna*. The properties of drugs used in *Shastika Shali Pinda Sweda*, such as *Brimhana*, *Snigdha*, and *Vata Shamaka*, are antagonistic to vitiated *Vata*. The location of *Vata* is thought to be the skin (i.e., *Sparshanendriya*), when these therapies are immediately applied to the skin, they rectify *Vata*'s disturbed functions, which in turn corrects the functions of *Vata*. In this procedure moist heat used, it is more effective than dry heat because it deeply penetrates the skin, so increases the effect on muscles, joints, and soft tissue. *Swedana* makes the skin more permeable by opening the skin appendage through sweating, dilating blood vessel, all these things help in absorption of medicine. Most of the things are not permeable through the skin but amphipathic nature of the milk helps in absorption of other medicine. This procedure regulates *Vata* functions and provides nutrition to muscular tissue and enhance strength. So, *Shastika Shali Pinda Sweda* is one of the most preferred methods of *Swedana* which is beneficial for this condition.

8. **Mustadi Yapan Basti<sup>[22]</sup>** - According to Acharya *Charaka's Basti Chikitsa* is the *Ardha Chikitsa* and it is important for the treatment of *Vata Dosh*. *Vata Dosh* is main reason for *Shukra Kshaya*. Moreover, the *Yapana Basti* are having *Rasayana* effect and can be administered for longer duration without any adverse effects to support life and promote longevity.<sup>[23]</sup> MYB performs as a *Shodhana* as well as *Rasayana* simultaneously. *Rasayana* becomes more effective when preceded by a suitable *Panchakarma* therapy. The ingredients of *Mustadi Yapan Basti* have predominant *Vatahara*, *Rasayana* & *Vajikaran* properties. Drugs used in *Mustadi Yapan Basti*, it especially attributed with property of "*Shukra-Mansa-Balajanan*". Due to drugs like milk, cow



ghee, *Sida cordifolia*, *Pluchea lanceolata*, *Tribulus terrestris*, *Glycyrrhiza glabra* which have properties of *Balya*, *Snigdha*, *Jivaniya*, *Guru*, *Madhura Rasa*, *Madhura Vipak* and *Sheet Virya*. *Tikta Rasa* may have positive impact on cell implantation and also reduce the degeneration of *Asthi* and *Majja Dhatus*.<sup>[24]</sup> Therefore, *MYB* has a good effect on neurological disorders and wasted muscles. *Susrhuta* explains when *Basti* is administered properly, it remains in large intestine through the anal root, pelvis area and below the umbilicus for some time, and the potency of the *Basti* materials spreads in the whole body through the channels and gives its effect with is a short periods.<sup>[25]</sup> So, the immense number of nerves which are located in Enteric Nervous System can be nourished easily and quickly due to *Sadyaobalajanana* and *Rasayana* effect of *MYB*. If *MYB* is given daily, it will reduce *Dourbalya*, can be improve muscle strengthening and others symptoms due to vitiated *Vata* will be reduced.

## CONCLUSION

Combination of *Sodhana* and *Shaman* treatment provided significant relief in the symptoms of Oligoasthenozoospermia. *Basti* along with medication may have acted on the systemic symptoms of *Shukra Kshaya* as well as give significant improvement on the seminal parameters like sperm count, sperm motility and gave significant improvement on the serum biomarkers specially on serum testosterone.

**Patient Perspective:** Patient told marked improvement in confidence during sexual intercourse. Patient told improvement in erection and performance during sexual intercourse. Patient felt better and felt marked improvement in weakness and increase level of sexual desire now. Overall patient had satisfactory and better sexual life after intervention.

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