A case study of Shukra Kshaya w.s.r. to Oligospermia

Mukul Panwar, Jitendra Sankhala, Manoj Meena, Shailendra Singh Mandloi

1Assistant Professor, Department of Kaya Chikitsa, WTM Ayurvedic Medical college and Hospital, Amroha, Uttar Pradesh, India.
2Assistant Professor, Department of Agada Tantra, WTM Ayurvedic Medical college and Hospital, Amroha, Uttar Pradesh, India.
3Assistant Professor, Department of Swasthavritta, WTM Ayurvedic Medical college and Hospital, Amroha, Uttar Pradesh, India.
4Senior Ayurved Medical Officer, Govt. Ayurved Dispensary, Tumbadiya, Chittorgarh, Rajasthan, India.

ABSTRACT

Male infertility is primarily caused by low sperm count (oligospermia) and reduced sperm motility (asthenospermia), which can be linked to Shukravaha Srotas Dushti and is an issue of global dimensions. Around the world, 8–12% of spouses struggle with infertility. Ten kinds of Shukra Dushti that cannot produce offspring have been described by Acharya Sushrut. The function of Shukra Dhatu according to modern aspects can be explained as reproductive strength of the person, in this Shukra means semen only. Factors affecting decrease of Shukra Dhatu leads to Shukra Kshaya can be co-related with oligospermia in males. Ayurvedic management was used to successfully treat a 36-year-old man who had been diagnosed with oligo-asthenospermia, a condition marked by low sperm count and non-motile spermatozoa. The man had been married for three years and his wife had a regular menstrual cycle. After Aamapachana, the aim of this case report is to evaluate the effect of Ayurvedic treatment in Shukra Kshaya which leads to male infertility. And its outcome reveals that the oligospermia associated with male infertility can be effectively managed by Ayurvedic treatments.

Key words: Shukravaha Srotas Dushti, Ksheena Shukra, Male Infertility, Case Report, Vrushya Chikitsa

INTRODUCTION

Failure to conceive is the hallmark of the male or female reproductive system disease known as infertility. Millions of individuals who are of reproductive age are affected globally. Primary or secondary are both possible. One of the divisions of Ashtanga Ayurveda, known as Vrushya Chikitsa, focuses on methods to increase semen production when it is insufficient. A disorder called oligospermia is defined as having fewer sperm cell spermatozoa. Significant sperm morphology and motility defects can also be present in oligospermia. Oligospermia is defined by WHO 2010 standards as having fewer than 15 million spermatozoa per millilitre. In more than 90% of instances, male infertility is caused by low sperm quantity (Oligospermia) and poor sperm quality, excluding some physical defects. Shukra is the body’s final cellular component and is regarded as the Sara of all other Dhatus. Shukra’s primary purpose is Garbhhotpadan. “The man alone without offspring looks like a single tree having a single branch, shade less, fruitless, and with foul odour,” said Charakacharya. Karma of Shukra is Dhaiyra, Chyavana, Priti, Dehabala, Harsha and helps in production of progeny. Charak Samhita as well as Sushrut Samhita explain about the Shukravaha Srotas & its Moolaasthan. Acharya Sushrut has proposed the following Shukradoshas - Vata, Pitta, Kapha, Shonit, Kunap, Granthi, Puti, Puya, Ksheena, Mutra, Purish, Retas.
CASE STUDY

Presenting Complains

In August 2021, a 36-year-old male patient driver made a visit to the OPD of the National institute of ayurveda Jaipur. He & his better half were trying for their second issue but unable to conceive despite unprotected coitus for more than a year. Past family clinical history was non-contributory.

Local Examination & History

It is typical for secondary sexual characters to develop. Patient has never had any sexually transmitted infections, genitourinary tract infections, or chronic medical conditions like the mumps or orchitis. There was no history of erectile dysfunction, premature ejaculation, and delayed ejaculation. The scrotum, testes, or penis did not exhibit any anatomical abnormalities during the local examination, nor were there any indications of inflammation, ulceration, or rashes.

MATERIALS AND METHODS

Pachana

Pachana for Koshtha Shodhana Haritakyadi Churna and Amapachana[10] for five days, 1 tsp. of BD in hot water with luke warm water was given.

Abhyanga and Swedan

S gargya Abhyanga was done daily with Dasmool Taila and then Vashpa Sweda was given.

Shodhana Chikitsa

Karma Basti’s schedule included Yapan Basti[11] (30 days). Overall, there were 18 Anuwasan Basti and 12 Yapan Basti administered.

Shaman Chikitsa

1. Ojaswani Churna - 3 gm with milk
2. Aswagandha Churna - 3 gm
3. Shatwari Churna - 2 gm
4. Vidarikand Churna - 1 gm with milk
5. Konchpak 1 tsp with 125 mg Shilajit BD with milk

Pathya-Apathya

The patient was instructed to stop chewing tobacco and Rat R atrina. It was suggested to consume Shadrasatmak Aahar without letting hunger linger.

RESULTS

The sperm count was 13 million/ml prior to treatment, did rise to 75 million/ml following treatment.

<table>
<thead>
<tr>
<th>Test Name</th>
<th>Before Treatment</th>
<th>After Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>pH</td>
<td>Alkaline</td>
<td>Alkaline</td>
</tr>
<tr>
<td>Total sperm count</td>
<td>13</td>
<td>75</td>
</tr>
<tr>
<td>Total motility</td>
<td>35</td>
<td>50</td>
</tr>
<tr>
<td>Non-motile sperm</td>
<td>45</td>
<td>35</td>
</tr>
<tr>
<td>Sluggish</td>
<td>20</td>
<td>15</td>
</tr>
<tr>
<td>Normal forms</td>
<td>60</td>
<td>60</td>
</tr>
<tr>
<td>Abnormal forms</td>
<td>40</td>
<td>40</td>
</tr>
<tr>
<td>Pus cells</td>
<td>3-4</td>
<td>2-4</td>
</tr>
<tr>
<td>Epithelial cells</td>
<td>1-2</td>
<td>1-2</td>
</tr>
</tbody>
</table>
**DISCUSSION**

Sperm count and motility are typically found to be low in oligospermia. Increasing sperm count and motility should be the goals of treatment for oligospermia. *Shukradushti.* *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 *Shukrajanaaka* and *Shukrapravartaka* in-terms of increasing the sperm count and motility by using Vajeekarana Dravya. Haritaki, Amalaki, Haridra, Shunthi, Pipalli, Vacha, Vidanga, and Saindhav are the members of the *Haritakyadi Churna*. These medications, which include Katu, Tikta Rasa Pradhan, and Ushna Veerya, primarily benefit in the correction of Agnidushti as well as *Vaata* and *Mala Anuloman*. Sahachar, Bala, Darbhamool, Sariva, Bruhati, Kantakari, Shatavari, and Guduchi were among the drugs used in *Yapana Bast*. To the *Ksheerapaka* of mentioned drugs, *Kalka of Madanphala, Yashtimadhu,* and *Pippali* were added. As part of the *Prakshepa Dravya*, the *Kalka* was joined by *Madhu, Saindhav, Tila Taila*. The name “*Ashwagandha*” describes the smell of its root, meaning “like a horse.” *Ashwa* means horse. Practitioners use this herb as a general tonic to boost energy and reduce stress and anxiety. Some also claim that the herb may be beneficial for certain cancers, Alzheimer’s disease, and anxiety. More research is necessary; to date, promising studies into the health benefits of *Ashwagandha* have mainly been in animals. This article looks at the traditional uses of *Ashwagandha*, how to take it, and the evidence behind its possible health benefits and risks. *Shatavari,* also known as the “Queen of Herbs,” has been used for centuries to balance hormones and as a general tonic to improve the health and libido of women. Being a potent adaptogenic herb, it helps manage diabetes mellitus, lower cholesterol, and triglycerides, and treat bacterial and fungal infections, oedema, infertility, depression, and cancer in addition to relieving physical and emotional stress. *Kaunch Pak* is a well-known *Ayurvedic* aphrodisiac in herbal jam form. *Kaunch* means seeds of *Kapikacchu*. It is used in male infertility treatment. It improves sperm count and quality. *Shilajit* has been used for centuries by people all over the world for achieving good health. The substance has been used for years for increasing the levels of testosterone in men. Men who consume *Shilajit* have higher sperm count and sperm motility. The patient received oral medication for two months following the completion of 30 *Basti*. Drugs like *Shatavari, Ashwagandha, Vidarikand, Ojaswani Churn,* and *Shilajatu,* all of which fall under the category of *Vajikarana Dravya,* are included in tab. Spermon. *Balya, Vrushya,* and *Rasayan* properties belong to *Shatavari* and *Ashwagandha Churna*. *Vrushya* and *Sheeta Veerya* help to promote the *Vriddhi of Shukra*.

**CONCLUSION**

Ayurvedic medicine treats infertility by detoxifying the body, or *Shodhana*. It focuses on all elements, such as *Aahar* and *Vihara*, which are crucial in the manifestation of any pathology. In this instance, we used *Ayurvedic* principles to treat *Shukradushti*. Effects of the ingredients increased sexual desire, length of coitus, having an orgasm or feeling sexual satisfaction, as well as sperm motility and count.
REFERENCES


How to cite this article: Mukul Panwar, Jitendra Sankhala, Manoj Meena, Shailendra Singh Mandloi. A case study of Shukra Kshaya w.s.r. to Oligospermia. J Ayurveda Integr Med Sci 2023;04:207-210. http://dx.doi.org/10.21760/jaiims.8.4.34

Source of Support: Nil, Conflict of Interest: None declared.