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Ayurvedic management of *Ksheena Shukra* - A Case Study

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ABSTRACT

Male infertility has gotten less attention, despite its widespread coverage. A demographic survey found that males alone contribute 40-50%. Infertility management in modern medicine has limitations and drawbacks. Furthermore, it can only guarantee 30 to 40% results. It is quite expensive, and the average person cannot afford it. Low sperm count (oligospermia) and increased immotility 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 28-year-old male who had been diagnosed as Oligonecrospermia with increased immotile sperm with 02 years of married life and his wife with regular menstrual cycle, were treated successfully with Ayurvedic management. After *Aamapachana*, the patient was given *Shamana chikitsa* (Tab Addyzoa Charak Pharmacy, *Chandraprabha Vati*, *Gokshuradi Guggulu*, *Narasimha Rasayana*, *Punarnavasava*).

Key words: *Ksheena Shukra*, infertility, *Asthenospermia*, *Pachana*, *Shamana*

INTRODUCTION

The inability of a couple to conceive after a year of consistent sexual activity without the use of contraception is known as infertility.

Infertility in men suggests that a particularly fertile female is incapable of becoming pregnant.^[1] In India, male infertility is one of the most pressing yet neglected reproductive health issues at the moment. Because of this unsettling manner of living, the incidence of this problem is growing daily. Male factor was revealed to be responsible for around 30-40% of

cases of infertility.^[2] Typically, infertility affects 8-12% of couples.^[3] male factors, or other unknown causes might all contribute to infertility. Men are affected by infertility in 2.5-12% of instances worldwide, while male issues account for 40-50% of situations when a woman is unable to conceive.^[4]

Low sperm count is termed as the oligospermia which according to WHO is less than 15 million sperm/mL, consistent with the 5th percentile for fertile men.

Oligospermia can be classified as^[5]

1. Mild: concentrations 10 million - 15 million sperm/mL
2. Moderate: concentrations 5 million - 10 million sperm/mL
3. Severe: concentrations less than 5 million sperm/mL

In *Ayurveda*, *Acharyas* explained that the function of *Shukra Dhatu* is reproduction. *Shukra* is formed from the *Majja Dhatu*, hence *Shukra* is the essence of *Majja Dhatu*.

According to *Acharya Sushruta*: *Vataja*, *Pittaja*, *Kaphaja*, *Granthibhuta*, *Putipuyanibham*,

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Mutrapurisha Gandhi, and *Ksheena* are the eight *Shukra Dushti* kinds that are referenced in *Ayurveda*^[6]. *Ksheena Shukra Vikara*'s condition is characterized by impaired motility and decreased semen quality.

Ksheena Shukra is a *Vata Pittaja Vyadhi*, manifested as a result of *Shukravaha Srotodusti*. Prevalence in *Madhyama Vayas* being a disease from *Apana Vayu* province, in which decreased quality and quantity of *Shukra Dhatu* is observed. The cause of infertility as explained in classics are due to defects in *Beejansha* (sperm and ovum), *Aahar*, *Vihara*, *Vichara* and *Bala*. Systemic symptoms like *Shrama*, *Dourbalya*, *Angamarda*, *Panduta*, *Sadana* and delayed and blood tinged ejaculation are associated *Ksheena Shukra*.^[7,8]

In conventional medication, numerous choices for primary infertility are accessible ranging from drugs to IVF with their own limitation.^[9] The scope of Ayurvedic infertility treatment has been expanded, and it can quickly resolve complicated infertility problems. For the treatment of *Shukra Dushti*, *Ayurveda* had recommended *Shamana* and *Shodhana Chikitsa*.

Ayurveda has promoted a distinct branch that addresses spermatogenesis and the treatment of aberrant semen in addition to Sexual potency is referred to as the *Vajikarana Tantra* (medication for aphrodisiacs). According to *Ayurveda*, males over 16 and under 70 should undergo *Vajikarana therapy* to preserve optimal sexual activity and healthy semen. Treatment for oligospermia involves the use of *Rasayanas* and *Vajikara Dravyas*, or medications (aphrodisiacs or virilifactory); on the inside, *Panchakarma* and *Vajikarnana* therapies for rejuvenation and lifestyle adjustments will not only aid in improved conception but also in the production of healthy offspring.

AIM AND OBJECTIVE

To assess the efficacy of Ayurvedic management (*Shamana Chikitsa*) in the management of *Ksheena Shukra Vikara* w.s.r. to Oligoasthenospermia.

MATERIALS AND METHODS

A single case study

CASE HISTORY

A 28-year-old male resident of Gangur, Hassan district, Karnataka, Agriculture by occupation, moderately build, married for 2 years, was apparently healthy before 2021, then he started complaining of failure to conceive even after active married life and burning sensation in epigastric region and his 19-year-old wife had regular menstruation cycles. She had no significant past or family history of reproductive tract disorders and pelvic infections and had not undergone any surgical procedures since birth. But there was issue to conceive. So, they approached to Gynaecologist, in the routine check-up, report if wife was normal but he was diagnosed as Oligozoospermia. Simultaneously, he as suffering from generalized weakness for 1 year.

Past history: N/K/C/O DM/ HTN / Thyroid dysfunction.

Family history: Nothing Specific

Personal history

Diet - Mixed

Appetite - Good

Bowel - 1-2times/ day

Micturition - 3 to 4 times / day 1 time / night

Sleep - Good

Medical/ Surgical History: Nothing Specific

Dasha Vidha Pareeksha

Prakruti - Pitta-Kapha

Vikruti - Vata -Pitta

Sara - Madhyama

Samhanana - Madhyama

Pramana - Dhairgya - 178cms

Dehabhara - 79kg

Satmya - Madhyama

Satva - Madhyama

Ahara Shakti - Abhyavarana Shakti - Madhyama

Jarana Shakti - Madhyama

Vyayama Shakti - Madhyama

Vaya - Youvana

General examination

Built - Moderate

Nourishment - Moderate

Temperature - 98.2°F

Respiratory rate - 20/min

Pulse rate - 82 bpm

Blood pressure - 130/90 mmHg

Height - 163cms

Weight - 79 kg

Tongue - Uncoated

Systemic examination

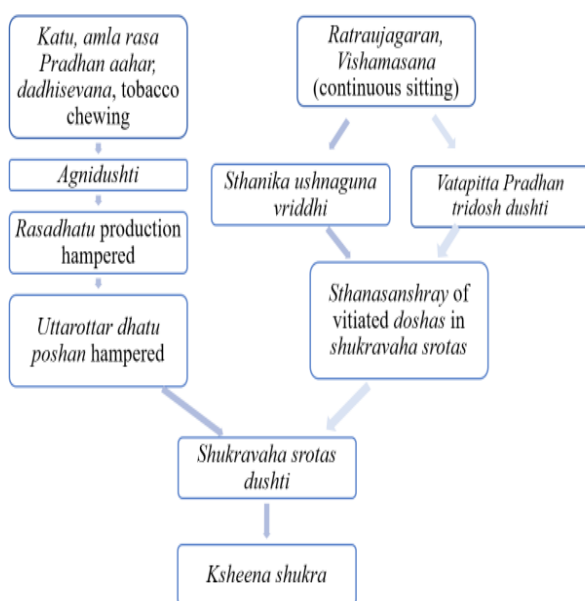
CVS: S1 and S2 heard

CNS: Conscious and well oriented with date, time and place.

RS: Normal vesicular breathing, no added sounds.

P/ A: Soft, Non tender

Samprapti



Investigation

Semen Analysis on 16/03/2023 (3days Abstinence)

Volume - 2.5ml

pH - 7.5

Specific gravity - 1.027

Total sperm no. - 08million/ml

Percent Motility - 10%

Sluggish Motile - 10%

Immotile - 80%

Pus cells - 8-10 cells/hpf

Materials and Methods

Pachana

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

Shamana Chikitsa (for 30 days)

1. Cap. Addyzoa 1TDS
2. *Chandraprabhavati* 1 TDS
3. *Gokshuradi Guggulu* 1TDS
4. *Narasimha Rasayana* 1TSF with Milk
5. *Punarnavasava* 3TSF BD

Pathya-Apathya

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

RESULTS

Before treatment, the Sperm count was 08 million/ml and after treatment, it increased to 22 million/ml and after 2 months of follow-up it doubled. Actively motile % increased from 10% to 30% and Immotile % reduced from 80% to 35%.

Test name	Before treatment [16/03/2023]	After Treatment [30/06/2023]
Volume	2.5ml	2.5ml
Fructose	Present	Present
Colour	Greyish White	Greyish White
Reaction	7.5	7.7

Viscosity	Viscid	Viscid
Liquefaction time	30mins	More than 1hr
Total sperm count	08millions/ml	22millions/ml
Actively motile	10%	30%
Sluggish motile	10%	35%
Immotile	80%	35%

DISCUSSION

Generally, in Oligozoospermia the sperm count as well as its motility is found to be low. Treatment of Oligozoospermia 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*.

Shamana Chikitsa

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*.

Patient was given oral medication for 2 months.

Cap. Addyzoa

Capsule Addyzoa is a proprietary Ayurvedic medicine manufactured by Charak Pharmaceuticals. Addyzoa is a herbomineral spermatogenic antioxidant. Addyzoa Capsule has varied free radical scavenging action and hence, Addyzoa limits successfully the damage to the sperm cells because of reactive oxygen species (ROS). *Withania somnifera*, *Tinospora cordifolia* and *Emblica officinalis* are potent antioxidants in Addyzoa, which acts by lessening the excessive oxidative stress, which is answerable for sperm damage. *Shuddha*

Shilajit, *Mucuna pruriens* and *Withania somnifera* improves sperm count. *Asparagus racemosus* recovers

seminiferous tubules and builds spermatogenesis. In this way, Addyzoa improves sperm count, motility and morphology and furthermore increases semen density.^[11]

Chandraprabhavi^[12]

Chandraprabha Vati is a herbomineral compound preparation, which is choice of drug for urinary tract infections and furthermore improves the functioning of male reproductive organs. It does *Apananulomana*, acts as a spermatopoeitic specialist, serves to rejuvenate the body, increases strength, appetite and *Oja* and has been accounted for to have enormous free radical scavenging activity.

Gokshuradi Guggulu^[13]

Gokshura (Tribulus terrestris) is having *Madhur Rasa, Guru- Snigdha Guna, Sheeta Veerya, Madhura Vipaka* and pacifies *Vata* and *Pitta*. *Vatapittahara Karma* does the *Samprapti Vighatana* in the *Kshina Shukra*, as it is a *Vata-* and *Pitta-*predominant disease. However, *Madhura Rasa, Snigdha,* and *Guru Guna* increase the *Shukra Dhatu* qualitatively and quantitatively. *Gokshura* is known for its utility in *Mutravaha Srotas*, by correction of the *Apana Vata*, it exerts action on the *Shukra* also, along the lines similar to how *Shukra Visarga* is governed by *Apana Vata*. According to classics Whole drug is a choice for *Mutrakrichra, Mutraghata* and *S hukradosha*

Narasimha Rasayana^[14]

the ingredients of *Narasimha Rasayana* have proven pharmacological action, having antioxidant, immunomodulatory, anti-inflammatory, anti-ageing, aphrodisiac and anti-cancerous activity. While evaluating the pharmacological actions of the contents of *Narasimha Rasayana*, it was observed that more than 50% of the drugs show antioxidant, antimicrobial and anti-inflammatory activities. Drugs like *Amalaki, Shatavari, Haritaki,* and *Khadira* have proven immunomodulatory action. The drugs like *Chitraka, Shimshapa, Vijaysara, Bhallataka, Bhringraj, Shatavari,* and *Amalaki* help counteract inflammation in the body.


The present review revealed that the ingredients of *Narasimha Rasayana* are proven to be antioxidant,

immunomodulatory, anti-inflammatory, antiaging, anticancer and aphrodisiac activity.

▪ **Punarnavasava**^[15]

Punanava, *Guduchi*, and *Gokshura* used to be *Rasayana* drugs. *Punarnava*, *Guduchi*, and *Gokshura* are particularly effective in treating *Mootravaha Samsthana* disorders. These drugs should be recognized as *Naimittika Rasayana* for the kidneys and other organs of *Mootravah Srotas*. These drugs, by definition, impart *Rasayana* properties, as evidenced by clinical studies in which patients reported an increase in *Jatharagni*, quantity and quality of sleep, sense of well-being, functional capacity, and, to a lesser extent, a decrease in disease features. as per classics *Punarnavasava* is used for Dyspepsia, abdominal lump, abdominal diseases/enlargement, inflammation, spleen and liver disorders

Before Treatment



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Patient No	: 26402	Bill No	: 14364/22-23
Patient Name	: MR. CHETHAN	Bill Date	: 16-Mar-23
Age/Sex	: 29 Yrs / Male	Phone No	: 9535846331
Doctor	: Dr. CHAITHRA TEJASWI	Bill Type	: Cash Bill

TEST NAME	RESULTS	UNITS	NORMAL RANGE	METHOD
CYTOLOGY				
SEMEN ANALYSIS				
TIME OF COLLECTION	9:50 AM			
VOLUME	2.5 ml			
COLOUR	Greyish white			
REACTION (PH)	7.5		7.2 - 7.8	
VISCOSITY	Viscid		Normal	
TIME OF LIQUIFICATION	30 mins		30 min	
SPERM COUNT	08	millions/ml	> 20	
ACTIVE MOTILE	10%			
SLUGGISH MOTILE	10%			
IMMOTILE	80%			
DEBRIS	Present			
ROUND CELLS	6-8 cells/hpf			
PUS CELLS	8-10 cells	/HPF	<3	
EPITHELIAL CELLS	4-6 cells	/HPF	<3	
RBC'S	NIL			
SPERM AGGLUTINATION	Absent		Absent	
NORMAL FORM	10%			
ABNORMAL OF HEAD	25%			
MID PIECE DEFECT	30%			
ABNORMAL OF TAIL	15%			
MIXED	20%			
FRUCTOSE	Present			

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After Treatment



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Patient No	: 29890	Bill No	: 2828/23-24
Patient Name	: MR. CHETHAN	Bill Date	: 30-Jun-23
Age/Sex	: 30 Yrs / Male	Phone No	: 9535846331
Doctor	: Dr. YADU GOPAN	Bill Type	: Cash Bill

TEST NAME	RESULTS	UNITS	NORMAL RANGE	METHOD
CYTOLOGY				
SEMEN ANALYSIS				
TIME OF COLLECTION	10:18am			
VOLUME	2.5ml			
COLOUR	Greyish white			
REACTION (PH)	7.7		7.2 - 7.8	
TIME OF LIQUIFICATION	More than 1 hour		30 min	
SPERM COUNT	22	millions/ml	> 20	
ACTIVE MOTILE	30%			
SLUGGISH MOTILE	35%			
IMMOTILE	35%			
ROUND CELLS	1-2 cells /hpf			
PUS CELLS	1-2 cells	/HPF	<3	
EPITHELIAL CELLS	1-2 cells	/HPF	<3	
RBC'S	NIL			
SPERM AGGLUTINATION	Absent		Absent	
FRUCTOSE	Present			
Microscopy: Majority of sperms show normal morphology				
Impression: Normal study				
*** End Of Report ***				

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CONCLUSION

Ayurvedic medicine treats infertility by *Shodhana* and *Shamanaoushadhis*. It concentrates on all factors, such as *Aahara* and *Vihara*, which are vital in the expression of any pathology. In the current situation, we used Ayurvedic principles to treat *Shukradushti*. We discovered that after completing the right treatment based on Ayurvedic principles, as well as modifications in food and daily regimen, semen parameters such as sperm count and motility improved significantly. The improved status of *Dhatu*s, as well as the action of the substances, resulted in increased sexual desire, duration of coitus, orgasm or sexual satisfaction, and increased sperm count and motility.

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