



ISSN: 2230-9926

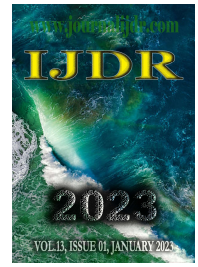
Available online at <http://www.journalijdr.com>

# IJDR

International Journal of Development Research

Vol. 13, Issue, 01, pp. 61385-61388, January, 2023

<https://doi.org/10.37118/ijdr.26217.01.2023>



RESEARCH ARTICLE

OPEN ACCESS

## EFFECT OF AYURVEDIC FORMULATION ON SEVERE OLIGOSPERMIA (KSHEENSHUKRA) - A CASE STUDY

Dr. Sanjay K Tiwari\*

MD Kayachikitsa, Ch Brahm Prakash Ayurved Charak Sanasthan, Khera Dabar, Najafgarh, New Delhi – 110073

### ARTICLE INFO

#### Article History:

Received 11<sup>th</sup> November, 2022

Received in revised form

26<sup>th</sup> November, 2022

Accepted 15<sup>th</sup> December, 2022

Published online 27<sup>th</sup> January, 2023

#### KeyWords:

Ksheenshukra, Kheenretas, Shukra kshaya, Vajikarana, Oligospermia, Oligozoospermia.

\*Corresponding author: Dr. Sanjay K Tiwari,

### ABSTRACT

Producing progeny is a natural gift given by the mother nature to the living organism, and it is an important part of human life as well. Therefore, infertility is viewed as a highly physical and emotional problem in Indian society. About half of infertility cases are caused by male factors. Approximately 35% of infertile men are due to oligospermia. There is no promising cure for this disease, but Ayurvedic preparations often show significant improvements in semen parameters. Oligospermia can be correlated with the Ksheenshukra entity in the Ayurvedic literature. This case study features a 26-year-old subject whose initial sperm count was 3.5 million/mL. Virechana karma was done on this subject with snehapan (go ghrita), external snehana, and swedana and then Vajikarak aushadha was used to heal the subject. We employed shilajitvadi lauha, vanari kalpa, ashwagandha churna, gokshura churna and shatavari churna as vajikarak aushadha to help with sperm count. About 3 months were spent administering the medication. When semen analysis was performed again after these medications, it was discovered that there were 80.0 million/mL total sperm count. Here is the presentation of how to successfully handle an ksheenshukra (oligospermia) case using Ayurveda.

Copyright©2023, Dr. Sanjay K Tiwari. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Citation: Dr. Sanjay K Tiwari. 2023. "Effect of ayurvedic formulation on severe oligospermia (ksheenshukra) - a case study", *International Journal of Development Research*, 13, (01), 61385-61388.

## INTRODUCTION

Reproducing is very emotional and physical aspect of living form and producing progeny is a natural gift given by the mother nature to the living organism, and it is an important part of human life as well. For this reason, whatever causes humans to non procreate, make human infertile. Therefore, infertility is viewed as a highly physical and emotional problem in Indian society. In total about 50 % of infertility cases are caused by male factors alone or in combination with female factor.<sup>i</sup> Oligospermia is reason in about 35% cases of infertility due to men.<sup>ii</sup>

## CASE REPORT

**Case History:** A male subject aged 26 years old from Uttam Nagar, New Delhi came in with the aforementioned complaint at the outpatient clinic, Kayachikitsa department, Ch brahm prakash ayurved charak sansthan (CBPACS), Khera dabar, Najafgarh, New Delhi. By profession, he was a worker at a shop.

### Chief complaints

1. Unable to procreate - 2 years.

**History of present illness:** A 26-year-old male subject presented to OPD complaining of sterility for 2 years. The subject was reported apparently alright about 2 years ago; he had been married for more than a year and was then planning to have a child, thus the couple began trying for a child at that time. They keep trying for the baby, did not succeed, hence they visited nearby hospital for the same. There they got counselling about the time and frequency which they followed. Along with that some basic tests were done, which came out fine for the female, male did not opt for the tests initially, but later on, he opted to go for the tests, which came out pathogenic. He took medication from the same place, and followed the counselling as well, but it did not work out. Later on when he undergone test, the total sperm count came even less. He visited a

different hospital for the same, where he got medicated, but again it did not worked out. Finally, he is visiting CBPACS for further management now.

**History of past illness:** No history of any major illness/ hospitalization.

#### Personal History

**Table 1. Details of personal history**

1.	Diet	Mixed
2.	Appetite	Appropriate
3.	Bowel habit	Often constipated, 1-2 times a day
4.	Micturition	Regular, 5-6 / 1-2 D/N
5.	Sleep	Normal, 7-8 hours in 24 hours
6.	Addiction	Nil

**Family History -** Father (age 55 years) - Diabetic since last 5 - 6 years.

#### General Examination

**Table 2. Details of general examination**

1.	Pulse	76 beats/min
2.	Height	168 cm
3.	Weight	79.7 kgs
4.	BMI	28.23
5.	Respiratory Rate	18/min
6.	Pallor	No
7.	Edema	No
8.	Icterus	No

#### Dashvidha Pariksha

**Table 3. Details of dashvidha pariksha**

1.	Prakriti	Vata - kaphaj
2.	Vikriti	Vata - Pittaj
3.	Sara	Avara
4.	Sanhanana	Madhyama
5.	Pramana	Sama
6.	Satmaya	Madhyam
7.	Satva	Avara
8.	Ahara shakti	Vishama
9.	Vyayama shakti	Avara
10.	Vaya	Bala

#### Local Examination

**Inspection:** There was no localized swelling, swollen veins, discoloration, redness, and no scar formation in the genital area.

**Palpation:** No tenderness, elevated local temperature, edema, or any anatomical abnormalities. No evidence of varicosity of veins or hernias at the time of examination.

#### Treatment plan

**Table 4. Details of treatment modalities used**

S. No.	Treatment Modality	Drug and dosage
1.	Deepana and Pachana	- Agnitundi vati 1 BD after meal - Lavan bhaskar churna 3 gm BD before meal
2.	Snehapana	- For 5 days with go ghrita in increasing order of dose (30 mL, 60 mL, 90 mL, 120 mL and 150 mL)
3.	Sarvanga Snehana	- By til tail all over body for next 3 days
4.	Sarvanga Svedana	- Vashpa Svedana all over body for next 3 days
5.	Virechana	- Done after proper snehapana, snehana and svedana with abhyadi modak, (madhyama shuddhi was done)
6.	Sansarjana Krama	- Was followed after virechana for next 5 days (according to madhyama shuddhi)
7.	Shamana Chikitsa	- Detail below

Shaman Aushadha

Table 6. Details of shamana aushadha used

S. No.	Name of drug	Dose	Route of Administration	Anupana	Duration
1.	Shilajitvadi lauha	250 mg after meal	Oral	Dugdha	3 months
2.	Vanari kalpa	10 gm HS	Oral	Dugdha	3 months
3.	Ashwagandha churna	2 gm BD after meal	Oral	Dugdha	3 months
4.	Gokshura churna	2 gm BD after meal	Oral	Dugdha	3 months
5.	Shatavari churna	2 gm BD after meal	Oral	Dugdha	3 months

## RESULT

Semen analysis was done both prior to and following therapy (following three days of abstinence) as follows:

Table 7. Details of semen analysis pre and post treatment

S. No.	Character	Before Treatment	After Treatment	Unit
<b>Physical Examination</b>				
1.	Volume	2.0	2.0	mL
2.	Colour	-	Whitish	
3.	Reaction	-	Alkaline	
4.	Liquefaction time	-	30	Minutes
<b>Microscopy</b>				
1.	Total sperm count	3.5	80.0	Million/mL
2.	Active motility	10	20	%
3.	Sluggish motility	20	35	%
4.	Non motility	70	45	%
<b>Sperm Morphology</b>				
1.	Normal form	-	70	%
2.	Abnormal form	-	30	%
3.	Pus cells	0-2	1-2	/HPF
4.	Epithelial cells	-	1-2	/HPF

Test Name	Value	Unit	Biological Ref Interval
<b>PHYSICAL CHARACTERISE</b>			
QUANTITY	2.0	ml.	
COLOUR	WHITISH		
REACTION	ALKALINE		ALKALINE
COLLECTION AT	AT LAB		AT LAB
LIQUEFACTION TIME	30 MIN		30 MIN
<b>MICROSCOPIC FEATURES</b>			
TOTAL SPERM COUNT	80	MILLION/cc	NIL
ACTIVE MOTILE	20	%	NIL
SLUGGISH MOTILE	35	%	NIL
NON MOTILE	45	%	NIL
NORMAL FORMS	70	%	NIL
ABNORMAL FORMS	30	%	NIL
PUS CELLS	1-2	/HPF	
RBCs	NIL	/HPF	NIL
EPITHELIAL CELLS	1-2	/HPF	NIL
BACTERIA	NIL		NIL
OTHER			

ADVICE: CLINICAL CORRELATION.

Figure 1. Semen analysis report pre-treatment

SEMEN EXAMINATION	
QUANTITY	2 ml
LIQUEFACTION TIME	25 - 30 min
SPERM COUNT	3.5 million/cc
MOTILITY - ACTIVE	10%
SLUGGISH	20%
IMMOTILE	70%
MORPHOLOGY	Unremarkable
PUS CELLS	0-2/HPF
URINE TEST FOR PREGNANCY	POSITIVE / NEGATIVE
(SENSITIVITY)	
(LMP)	
INTERNAL QC PROGRAMME BEING RUN	

Figure 2. Semen analysis report post-treatment

## DISCUSSION

**Shilajitvadi lauha:** It contains *shilajatu*, *madhu*, *maricha*, *shunthi*, *pippali*, *tapy*, and *lauha raja bhasma*<sup>iii</sup>. It is indicated in *rajyakshma*, *raktaalpta*, *raktakshaya*, *jeernajvara*, *pandu*, *kshaya*, *raktapitta* and *prameha*. It is also considered a good *rasayana* and *vajikarana dravya*<sup>iv</sup>, therefore used in the management of this subject.

**Vanari kalpa:** A proprietary drug of Sandu Pharmaceutical. It contains primarily *Kapikachu* and *kalpa* is formed with the help of sugar. It claims to help restore masculinity and potency. It improves physical strength, reduces stress and promotes well-being, and is a powerful aphrodisiac. It is therefore used in the management of this subject.<sup>v</sup> *Kapikacchu*<sup>vi</sup> has *madhura* and *tikta rasa*, *ushna virya*, *madhura vipaka* and *guru & snigdha guna*. It is *atyanta vrishya*, *vatanashaka*, *brihana*, *balakarak*, *kapha*, *pitta* and *rakta nashaka*.

**Ashwagandha**<sup>viii, ix, x</sup>: It is *tikta* and *kashaya rasa*, *ushna virya*, *madhura vipaka*, *laghu guna*. It has *vata-kaphapaha doshaghnta*. It is *rasayana*, *balya*, *vajikarana*, *kanti prada*, *bala prada* and *virya prada* in *karma*. It is therefore used in the management of this subject.

**Gokshura churna**<sup>xi</sup> - It has *madhura rasa*, *sheeta virya*, *madhura vipaka* and *guru & snigdha guna*. It has *balkarak*, *bastishodhak*, *agnideepak*, *vrishya* and *pushtikarak karma*. It is indicated in *ashmari*, *prameha*, *shwasa*, *kasa*, *arsha*, *mutrakricchra*, *hridyaroga*, and *vata vikara*. It is therefore used in the management of this subject.

**Shatavari churna**<sup>xii, xiii</sup>: It has *madhura* and *tikta rasa*, *sheeta virya*, *madhura vipaka* and *guru & snigdha guna*. It is *stanyajanana*, *shukrajanana*, *mutrajanana*, *balya*, *vrishya*, *chakshushya*, *vayasthapana*, *agnivarshaka*, *tridoshaghna* and *alpasangrahaka*. It is indicated in *napunsakta*, *shukrataralya*, *shukrameha*, *shukralpata*, *atisara*, *netraroga*, *mutrakricchra*, *grahni*, *raktapitta* and *apasmara*. It is therefore used in the management of this subject

## CONCLUSION

To date, there are no satisfactory, clinically significant current therapies for the management of oligospermia. Ayurvedic treatment here represents a non-invasive, inexpensive and relatively inexpensive treatment option. Here a subject suffering from oligospermia who was successfully treated with the Ayurvedic treatment modality presented it was done.

## REFERENCES

- <sup>i</sup> Partin, A.W. Male infertility. In: Dmochowski, R.R, Kavoussi, L.R, Peters, C.A (eds.) Campbell Walsh Wein Urology. Philadelphia: Elsevier; 2021. p. 1428.
- <sup>ii</sup> Internet - Sighted from - <https://www.ncbi.nlm.nih.gov/books/NBK279160/>, sighted on 07/11/2022.
- <sup>iii</sup> Govt of india. Lauha kalpana. Shilajitvadi lauha. The Ayurvedic Formulary of India Part-2. New Delhi: Natinal Institute of Science Communication and Information Resources, CSIR; 2003. p. 311
- <sup>iv</sup> Baidyanath. Lauha mandoor prakaran. Ayurveda Saara Sangraha. Naini, allahabad: Shree Baidyanath, Ayurveda Bhavan Limited; 2010. p. 506-507.
- <sup>v</sup> Internet - Sighted from - <https://sandu.in/product/sandu-vanari-kalpa-ayurvedic-herbal-medicine-for-men-health-improve-strength-200-g/> Sighted on - 10/11/2022
- <sup>vi</sup> Acharya bhavamishra. Guduchyadi varga, Kapikacchu. In: Chunekar, K.C (ed.) Bhavprakash Nighantu. Varanasi: Chakhambha Bharti Academy; 2013. p. 341-343.
- <sup>vii</sup> Sharma, P.V. Shatavari. Dravyaguna Vigyana, Vol. 2. Varanasi: Chaukhambha Bharti Academy; 2012. p. 569-571.
- <sup>viii</sup> Acharya bhavamishra. Guduchyadi varga, Ashwagandha. In: Chunekar, K.C (ed.) Bhavprakash Nighantu. Varanasi: Chakhambha Bharti Academy; 2013. p. 379
- <sup>ix</sup> Dhanvantari Nighantu, guduchyadi varga, Ashwagandha, 302-303. AYUSH. National Institute of Indian Medical Heritage (NIIMH). [Online]. Available from: <https://niimh.nic.in/ebooks/e-Nighantu/dhanvantarinighantu/?mod=read&h=ashwagandha>. Accessed on - 20/11/2022.
- <sup>x</sup> Sharma, P.V. 9nd Chapter, Ashwagandha. Dravyaguna Vigyana, Vol. 2. Varanasi: Chakhambha Bharti Academy; 2012. p. 763-764.
- <sup>xi</sup> Acharya bhavamishra. Guduchyadi varga, Gokshura. In: Chunekar, K.C (ed.) Bhavprakash Nighantu. Varanasi: Chakhambha Bharti Academy; 2013. p. 279-280
- <sup>xii</sup> Acharya bhavamishra. Guduchyadi varga, Shatavari. In: Chunekar, K.C (ed.) Bhavprakash Nighantu. Varanasi: Chakhambha Bharti Academy; 2013. p. 378-379.
- <sup>xiii</sup> Sharma, P.V. 9nd Chapter, Shatavari. Dravyaguna Vigyana, Vol. 2. Varanasi: Chakhambha Bharti Academy; 2012. p. 562-563.

\*\*\*\*\*