

A CLINICAL STUDY TO EVALUATE THE EFFICACY OF VIDARYADI CHOORNA IN THE KSHEENA SHUKRA W.S.R TO OLIGOSPERMIA

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ABSTRACT

Ksheenashukra is a condition in which both quality and quantity of *shukra* may be altered and may lead to *shukradushti* when in body *vata*dosha and *pitta*dosha are vitiated. The *Shukra* mentioned in *Ayurveda* can be compared easily to that of semen of modern medicine. An attempt was made to treat the *KsheenaShukra* (Oligospermia) at OPD level and study was made to assess the efficacy of *VidaryadiChoorna* on seminal parameters without any classical *Shodhana* procedures. As the drug under trial has *balya*, *Vrishaya*, *shukrala*, *vajikarana* and *rasayana* properties and are used with *ksheera* as *Sahapana*, which is mentioned as *sadhyaShukra karaka*. Hence the trial of the drug “*vidaryadichoorna*” was done on 30 patients from the OPD of J.I.A.R. and assessment of the patients on the selected criteria was continuously analysed. All clinical signs and symptoms were assessed. Before the medication, thorough laboratory investigations were done. Duration of clinical trial was of three months and all the patients were regularly followed up after one month to evaluate the therapeutic effect of the trial drugs. Single group study has been performed and significant results were seen.

Keywords: *ksheenashukra*, oligospermia, *vidaryadichoorna*.

INTRODUCTION

Ayurveda is a science of life, which emphasizes on two main objectives of maintenance and promotion of positive health and management of the diseases. Dietary habits and lifestyle modalities plays a major role in the causation of any disease. In *Ayurveda* it has been explained elaborately to live a healthy disease free life by following *dinacharya*, *ritucharya*, *aacharrasayana*, *sadavritta*. With the onset of time most of the dietary habits like *virudhahara* and *vidagdahara*, sedentary life style where people prefer to take outside food more often because of busy work schedules, have made

humans more vulnerable to many diseases than ever before.

Male infertility can be defined as an inability to induce conception to any defects in its reproductive system especially due to defect in spermatogenic function. Male having pathological semen reports include low sperm count, poor sperm motility, low sperm volume, low or absence of fructose and sperm functional tests. The incidence of male infertility may vary from place to place and nation to nation, however magnitude of the problems remains the same.

Ksheenashukra is a disease of *shukra* in which both quality and quantity of *shukra* may be altered & may lead to *shukradushti*, when in the body *vata* and *pitta* are vitiated then they derange the normal quality & quantity of *shukradhatu*. As a result of the vitiation of *vata* and *pitta* as the channels which carry *shukra* (*shukravahasrotas*) undergoes *dushti*, which further incapacitates the normal individual from conceiving his life partner and ends in infertility.

Condition *ksheenashukra* can be co-related with oligospermia by definition; the oligospermia is characterized by the lowered sperm count which is less than 20 million/ml from the normal range 20-160 million/ml. The corresponding decrease in the sperm count is responsible for the inability for conception.

KsheenaShukra is a condition where in *ShukraDhatu* gets vitiated either quantitatively or qualitatively due to the vitiated *Vata* and *PittaDosh* that are provoked due to said *nidana*. *Shukra* is the *Param Sara* of *ahara rasa*. The function attributed to *ShukraDhatu* as well as the semen is *Garbhotpadana*.

Also, in the present era, due to the change in life style, hectic activities, and busy life schedules and lack of time also, many a time's patients though fit are not ready to undergo *Shodhana* procedures. Keeping this in mind, an attempt was made to treat the *KsheenaShukra* (Oligospermia) at OPD level and study was made to assess the efficacy of *VidaryadiChoorna* on seminal parameters without any classical *Shodhan* procedures. As the drug under trial is having *balya*, *Vrishaya*, *shukrala*, *vajikarana* and *rasayana* properties and are used with

ksheera as *Sahapana* which is mentioned as *sadhyaShukra karaka*. Hence the trial of the drug "*vidaryadichoorna*" was done on the 30 patients from the OPD of J.I.A.R. and assessment of the patients on the selected criteria is continuously analysed.

AIMS & OBJECTIVES

To study the efficacy of *vidaryadichurn* in *ksheenshukra* to oligospermia.

MATERIALS AND METHODS

Selection of the patient: the study was conducted in single group clinically and pathologically diagnosed selected from the O.P.D and I.P.D of J.I.A.R.

GROUP: single group

INCLUSION CRITERIA: -

1. Total Sperm count < 20 million/ml.
2. Male patients of age ranging from 20 to 45 years.

EXCLUSION CRITERIA

- Age below 20 and above 45 years.
- Total Sperm count > 40 million/ml.
- Patients with azoospermia and aspermia.
- Genetic defects like Klinefelter's syndrome.
- Patients with diseases like Varicocele, Accessory sex gland infection, Sexually transmitted diseases, etc.

CLINICAL ASSESSMENT: -

SUBJECTIVE PARAMETERS:

- Relief in the symptoms of *Ksheenashukra*.

Klaibyam, *Sukraavisarga*, *Medra-Vrshnavedana*, *Maidhunaashakti* etc.

- Sexual health parameters- Desire, Erection, Ejaculation and Orgasm will be graded and assessed.

OBJECTIVE PARAMETERS:

- Semen analysis i.e. Total sperm count and Motility.

Before starting the treatment all patients was given *triphalachoorna* in the dose of

5gm at bed time for *kosthsuddhi* for 5 days

Table NO.1 DRUG DESIGN: -

Sample size	30 Patients
Medicine	VidaryadiChoorna
Dose	4gm BD, 2 hours before the meal
Anupana	Milk
Duration	60 Days
Follow up	1 Month

REGIME: - All the patients were strictly advised to avoid the *Aharas* and *Viharas* which causes vitiation of *vata dosha* and *pitta doshas*. Patients were also advised to keep *brhamcharya* during the course of treatment.

ings were recorded before and after the completion of treatment. They are Loss of Sexual Desire, Loss of Erection, Loss of Rigidity, Loss of Orgasm and Premature Ejaculation. Findings of Semen analysis in terms of Semen Volume, Sperm Count, Sperm Motility and Viscosity was recorded before and after treatment and was used for analysis of result

OBSERVATION AND RESULTS

The study was conducted in single group clinically and pathologically diagnosed cases selected from the JIAR. The total 30 number of the patients were taken and thoroughly analysed. To access the result of the study, both objective and subjective find-

TABLE NO.2 EFFECT OF VIDARYADI CHOORNA ON TOTAL SPERM COUNT

Mean	D	%	S.D.	S.E	T	p	df
BT	AT						
19.20	56.96	37.77	196.7	21.88	3.99	9.45	0.001 29

In the present study, the mean total sperm count before and after the treatment were 19.20 and 56.96 respectively. The percentage increase in the mean was found to be 196.7%. The improvement found to be statistically significant with ‘t’ test value 9.45

for df 29. Here $p < 0.001$ which indicates that in our present study the effect of the drug is highly significant on the total sperm count.

TABLE NO.3 EFFECT OF VIDARYADI CHOORNA ON VOLUME

Mean	D	%	S.D.	S.E	T	p	Df
BT	AT						
1.90	2.883	0.983	51.73	0.499	0.09	10.77	0.001 29

In present study, the average volume of the semen ejaculated before and after the treatment was 1.90 and 2.883 respectively. The percentage increase in volume of semen

was 51.73 % on average. The improvement found to be statistically significant with ‘t’ value 10.77 for df 29. Here $p < 0.001$ which

indicates that in our study effect of drug is highly significant on the volume of semen.

TABLE NO.4 EFFECT OF VIDARYADI CHOORNA ON MOTILITY

Mean	D	%	S.D.	S.E	T	p	Df
BT	AT						
28.67	53.40	24.73	86.25	14.63	2.67	9.25	0.001 29

In the above table, initial mean score on average was 28.67 which were increased to 53.40 after 60 days. The percentage of improvement on average was 86.25%. The increase in motility was statistically highly significant with “t” value being 9.25 for 29.

Here $p < 0.001$ which indicates that in our study, the drug is highly significant on motility of sperms.

TABLE NO.5 EFFECT OF VIDARYADI CHOORNA ON VISCOSITY

Mean	D	%	+ve ranks (AT>BT)	-ve ranks (AT<BT)	Ties (AT=BT)	Z	P	df
BT	AT							
1.47	2.63	1.167	79.38	29	0	1	5.01	0.001 29

The initial score of viscosity of the semen on average was 1.47 units which were raised to 2.63 units after 60 days of treatment. The improvement on average was found to be 79.38%. The improvement was found to be statistically significant with ‘z’ value 5.01 for 29 df. Here $p < 0.001$ which indicates that the drug in the trial is highly significant on viscosity of semen.

opposite qualities leads to decrease in the qualities of subject¹⁵².

Probable Mode of Action of Vidaryadi-Choorna on KsheenaShukra

The probable mode of action of Vidaryadi-Choorna can be analyzed by analyzing the Rasa, Guna, Veerya, Vipaka, Doshgnata and Karmas. In VidaryadiChoorna, majority of the drugs are madhur in Rasa, Shita in Virya, Madhur in Vipaka, Guru and Snigdha in Guna and Vata-PittaDoshgnata. They are having shukral properties and having qualities similar to the shukra. The mode of action of drug can also be understood on the basis of SamanyaVisheshNyaya, according to which drug with similar qualities leads to enhance their similar qualities in the subject and drug with

The drugs such as ShwetMusli and Ashwagandha are basically Nervine and help in relieving psychobiological stress and thereby control Vataat Manasand Sharirikalevel as AtiChintaand Shoka are the main cause for Rasa kshaya resulting in KsheenaShukra. Vidarikand and ShwetMusli being Vrishya, Balya, Brimhanaand Rasayana helps in step wise formation of all dhatus and hence in the end formation of shukradhatus. Akarkarabha is also Balya, Vajikaran, Kamoudipanand being shukrasthabhan it holds the shukradhatu and prevent fromkshaya. Shothaharproperty of Akarkarabha helps to counter the inflammation because of infection.

CONCLUSION

The final conclusion can be drawn on the basis of all the clinical observations and the results obtained during the study: -

- Dominance of Vata and Pittadoshain the disease KsheenShukra can be inter-

preted by clinical data which shows that majority of patients (46.66%) were having *Vata-Pittaprakarti*, rest of the patients were *Pitta* and *Vattapradhanprakarti*. Majority of the patients were from *Madhyavaya* which is again period of *pittapradhanta*.

- *Vidaryadi Choorna* found highly effective for the treatment of *Ksheen-Shukra* and its associated symptoms.
- *Vidaryadi Choorna* contains drugs which have *Shukral*, *Vajikaran*, *Vrishya*, *Brimhana*, *Balya*, *Rasayana*, *Kamoudipak* and *Shukrastambhak* properties.
- Drug also showed promising results in the ejaculatory control and the viscosity of semen.
- No side effects were observed by the patients during the trial period of the drug.
- Being presence of potent drugs in the selected formulation, it can be tried in the other diseases associated with *Shukravaha Srotodusti*. Further research can provide more fruitful results.
- The modality of treatment was less time consuming, economical, non-invasive, and very easy and can be done at OPD level.

In this present study, out of 30 patients 22 patients were markedly improved and showed significant results whereas 5 patients showed mild improvement and rest 3 patients did not respond to this treatment. *Vidaryadichurna* showed 196.7% increase in total sperm count, 51.73% improvement in volume of semen, 86.25% in motility of sperms and 79.38% in viscosity of semen.

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