

ROLE OF SHODHANA AND APATYAKARA GHRITA IN THE MANAGEMENT OF OLIGOSPERMIA (KSHEENASHUKRA) - A CASE REPORT

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ABSTRACT

Infertility is a global problem, affecting approximately 15 percent of couples of reproductive ages. Male reproductive failure leading to infertility is a rising concern all over the world for the last 2 decades. Except for some physical defects, oligospermia, and asthenospermia are responsible for male infertility in more than 90% of cases. *Ayurveda* has a suitable treatment option for oligospermia patients who needs a natural conception. The disease *Ksheena Shukra* mentioned in Ayurvedic classics can be correlated with *Oligospermia*. *Samshodhana* and *vajikarana* is the line of treatment mentioned for *Ksheena Shukra*. A 36-year-old man visited the Kayachikitsa OPD of IPGT & RA, Jamnagar complaining of failure to father a progeny since marriage. He was diagnosed as oligospermia and treated with *Virechana* and *Apatyakara Grita Pana*. Overall effect of the therapy showed marked improvement in the sperm count and semen volume.

Keyword: *Apatyakara Ghrita, Ksheena Shukra, Oligospermia, Vajikarana*

INTRODUCTION

Infertility is a disease of reproductive system defined by failure to achieve the clinical pregnancy after 12 months or more of regular unprotected sexual intercourse.¹ Male factor infertility accounts for 40-50% of all infertility cases². The causes of male infertility are many and varied. Delayed parenthood, environmental issues, genetic factors, occupation, drugs etc play a significant role in the cause of male infertility. Most of the male infertility cases manifest as abnormal se-

men parameters, in which oligospermia is the most commonly observed. According to the latest criteria of WHO, a sperm count less than 15 million/ ml of semen is considered as oligospermia³. In most cases of oligospermia including its idiopathic form there is no direct medical or surgical intervention agreed to be effective in modern medicine. Oligospermia can be correlated with *Ksheena Shukra* mentioned in Ayurveda texts. Ayurveda has a separate branch for re-

productive medicine known as *Vajikarana*. It deals with the preservation and amplification of sexual potency of a healthy man and conception of healthy progeny as well as management of defective semen, disturbed sexual potency and spermatogenesis along with treatment of seminal related disorders in man. Today to explore fertility agents from herbal source is of top priority in the field of research in andrology. Thus Ayurveda remains the suitable treatment option for oligospermia patients who want a natural conception.

In this case, it was planned to conduct a *Shodhana* prior to *Vajikarana*. For *Vajikarana*, *ApatyakaraGhrita* was selected from *Vajikarana Adhyaya* of *CharakaSamhita*. It's a polyherbal preparation in which the contents are easily available and cost effective.

Case Report

A 36-year-old man came to O.P.D of *Kayachikitsa*, I.P.G.T & R.A Jamnagar, complaining of failure to father a progeny for 6 years since marriage. He got married 6 years before and the couple had been trying

for child since then. His wife was under Ayurvedic treatment for PCOD. He was a known case of oligospermia for 4 years and tried allopathic medicines like clomiphene citrate and vitamin tablets. He was also taking some Ayurvedic patent preparations in between. He was not affected with other sexual issues like premature ejaculation, erectile dysfunction and loss of libido. Semen analysis was performed, and the sperm count was found 2 million/ml. the ejaculate volume was 1.0 ml which was also below normal. All other seminal parameters were normal. Routine blood analysis, biochemistry investigations and routine urine analysis were also done to assess any illness. fertility markers like serum FSH, LH and testosterone were also within the normal limits. On general examination and genital examination, the patient was found normal. The patient had history of occupational exposure to extreme heat and he was affected by the emotional stress due to his illness.

The patient underwent *Snehapana* followed by *Virechana* and then *ShamanaGhritapana*. The details of the procedure are described in table 1.

Table 1

| PROCEDURE | MEDICINE | DOSE | DURATION |
|-----------------------------------|---|--|---------------------------|
| <i>Deepana</i> and <i>Pachana</i> | <i>Trikatu Churna</i> | 3g | Twice in a day for 3 days |
| <i>Snehapana</i> | <i>Go Ghrita</i> | Day 1- 30 ml Day 2- 60 ml Day 3- 100 ml Day 4- 150 ml Day 5- 200 ml Day 6- 250 ml | 6 days |
| <i>Virechana</i> | <i>Haritakyadi Churna</i> ⁴ with luke warm water | 18 g | 1 day |
| <i>Samsarjana Krama</i> | <i>Peya</i> <i>Vilepi</i> <i>Akrita Yusha</i> <i>Krita Yusha</i> | | 5 days |
| <i>ShamanaGhritapana</i> | <i>Apatyakara Ghrita</i> ⁵ with 1 glass luke warm milk | 10 ml ghee | Once a day for 2 months |

Results

Virechana was carried out using *HaritakyadiChurna*. It is a drug combination with *UbhayaShodhanaprop-*

*erty*⁶. When 18 grams of *HaritakyadiChurna* was given with luke warm water 4 *VamanaVega* and 10

VirechanaVega were obtained which is taken as *MadhyamaShuddhi*.

Semen analysis was done after *Samsarjana Krama* and after 2 months of *Ghritapana*. After *Samsarjana Krama* the sperm count increased to 8 million/ml and semen volume was increased to 2ml from 1 ml. At the end of therapy sperm count was 63 million/ml and semen volume was 3.5 ml. After the therapy serum testosterone level was increased to 676 ng/dl from 554.9 ng/dl, which was the value before the treatment.

DISCUSSION

Ksheenashukra is one among the eight *Shukra-Dosha*⁷ and is caused by vitiated *Vata* and *Pitta*. The line of treatment mentioned for *KsheenaShukra* is *Shodhana*⁸ and administration of *Shukrakara Dravya*. *Shodhana* is needed before *Rasayana* and *Vajikarana* treatment. *Shodhana* can expel the vitiated *Dosha* out of body and bring about *Sroto Shodhanathereby* enhances the circulation of nutrients and efficacy of drugs. The drug *Haritakyadiyogais* a unique formulation for *Shodhanaprior* to administration-*Rasayana* and *Vajikarana*. It's a combination of *Rasayana* drugs having *Vamaka* and *Virechaka* properties⁹. It contains *Rasayanadrugs* like *Haritaki*, *Amalaki*, *Vacha*, *Vidanga*, *Haridra* and *Pippali*. The anti-oxidant properties of these drugs can break the oxidative chain reaction which is one of the main causative factors of impaired spermatogenesis. They are rich in phenolic and flavonoids which are well known scavengers of free radicals. *Virechana* helps in *Vatanulomana* and *SrotoShodhana*. This will further help in the proper movement of *Vata* in the body. The *Sheegragathi* of *VyanaVata* is enhanced which results in the forceful ejaculation of semen. Subsequently this results in the increased volume during ejaculation.

The drug *ApatyakaraGhrita* contains *Rasayana*, *Vrishya* and *Vajikarana* drugs like *Shatavari*, *Vidari*, *Masha*, *Kapikachu* and *Gokshura* which bring about qualitative and quantitative improvement of *ShukraDhatu*. The spermatogenic effect of these drugs has been understood in various studies^{10,11}. *Ghrita* itself is *VataPittaShamana*, *Shukrala* and *Vrishya*. Most of the

contents are *Vata PittaShamana* which helps to break the *Samparapti* of *KsheenaShukra*. The *Rasayana* and *Brimhana* effect of *ApatyakaraGhrita* help in *Dhatu-Poshana* and subsequent increase in *ShukraDhatu*¹². The *Vajikarana* effect of these contents might have increased the testosterone level. Treatment of infertility is never complete with only medications. Ayurveda says that there is a positive correlation between *Manasa Hetu* like *Chinta*, *Shoka*, *Krodha*, *Bhaya* etc and *Shukra Kshaya*.¹³ Therefore, proper counselling was given to the patient about the positive outcomes of the treatment.

CONCLUSION

Thus it can be said that Ayurvedic treatment is highly effective in cases of oligospermia. Efficacy of *ShukraVardhanaAushadha* can be augmented if it is preceded by *Shodhanaby Haritakyadi Churna*. From this case report it can be stated that administration of *ApatyakaraGhrita* after performing *Shodhana* was an effective treatment protocol for the case of oligospermia. There was no adverse drug reaction reported during this study.

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