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Case Report

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A CASE STUDY ON AROHANA SNEHAPANA IN KSHINA SHUKRA

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ABSTRACT

Ayurveda is a science of life, and it has taken the foremost place in the management of lifestyle disorders. In a country like India where the population is a burning problem, infertility is a much more serious problem that may become the basis of marital disharmony. The major Focus of fertility problems in the past has been the female patient but with the advancement of diagnostic technology, it was realized that males were also responsible for infertility. In general Male infertility, factors are suspected of contributing to infertility in almost 40% of infertile couples. Out of many causes of male infertility, Oligospermia is the leading cause. In the present case study, A 32-year-old male patient (Registration No 104290) had visited *Panchakarma* OPD of *SJGAyurveda* Medical College & Research Center, *Koppal* with chief complaints of low sperm count, erectile dysfunction to get a child since married life of 5 years and the associated complaint was the inability to maintain a prolonged erection. Based on the patient's complaints and semen analysis reports the patient was diagnosed with Oligospermia (*KSHINA SHUKRA*) according to Ayurvedic view. The patient was treated with *Arohana snehapana* with *Ashwagandha Ghrita* and *Madhutalika Basti*. This case report provides us with a guideline that even nearly oligospermia can be successfully treated in Ayurveda with valid *Chikitsa Siddhanta*.

Keywords: Oligospermia, Snehapana, Arohana, Madhutalika Basti,

INTRODUCTION

Though the population of the world is increasing day by day yet 20-30% population of the world are the victims of infertility.^[1] In India, 1 out of 10 couples suffer from infertility and in about half of cases, men alone are the victims. Fertility is an essential thing for a human being. It is an important factor to keep both the partners leading a happy married life. *Acharya Kashyapa* while explaining the importance of children; says that '*Aputrasya Gatirnasti*', without progeny the person will not attain Mtsh

Vajikarana is the specialized branch of *Ashtanga Ayurveda* deals with *Shukra Dushti* and *Klaibya*. Though it mainly concentrates on *Shukra Dosha* and *Vandhyatwa* (Infertility), the basic aim of this therapy is to maintain sexual potency, fertility and to procreate healthy progeny ^[2] to fulfil the four-fold means of life i.e., *Dharma, Artha, Kama* and *Moksha*.^[3]

A couple may be considered infertile if notconceived even after one year of regular sexual intercourse without any contraception. 40% of infertility is due to male sexual dysfunction. It is due to the factors like Oligozoospermia, Asthenozoospermia, etc. ^[4] For successful fertility sperm count should be 40 mill/ml or more,^[5] but studies have shown that if sperm cells are having good progressive motility besides less sperm count (even less than 20 million/ml), there is a probability of conception.

There is no satisfactory treatment in modern medicine for these conditions as it is based on Hormonal therapy. This Hormonal therapy has got its side effects and limitations. Even with the advancement of modern techniques, the success rate of conception is low; the cost of treatment is very expensive, and the common man cannot afford it. So, *Ayurveda* is the better option for these conditions.

In Ayurveda terms like Kshina Shukra, Alpa Retas, Kshina Retas, Shukra Dosha are indicated towards Oligospermia. In this case study, the patient suffering from low sperm count has been presented who was treated with Arohana snehapana and Madhutalika Basti procedure followed by Shamanoushadhi.

CASE REPORT

A 32-year-old male patient (Registration No 104290), residing in Koppal, visited *Panchakarma* OPD of *S J G Ayurveda* Medical college & Research cent*re, Koppal* on 13th January 2021, presented with chief complaints of Unable to get a child since married life of 5 years. And other associated complaints were the Inability to maintain erectile dysfunction, less penile rigidity, Watery semen, post-coital exhaustion, Early ejaculation of 3-4min for 5 years.

Based on the patient's complaints and semen analysis reports the patient was diagnosed with Oligospermia and *Kshiina Shukra according* to *Ayurvedic* view.

History of Present Illness

- The patient was normal 5 years back. After getting married he was unable to conceive his partner even after regular unprotected sexual intercourse and inability to maintain a prolonged erection.
- He was non-diabetic, non-hypertensive with a good physical build. His appetite was normal, with regular bowel habits. He had a chronic history of tobaccochewing for 10 years.
- He came to *SJGAyurveda* Medical college & Research cent*re*, *Koppal* for *Ayurvedic* management of Infertility.

History of Past Illness

- No/H/o DM, HTN, Thyroid disorder, TB, Mumps
- No H/o Trauma, No/H/o Pelvic Surgery
- He did not have any kind of allergies concerning food and medicines.

Family History

No significant family history was found.

Personal History

- Diet: Mixed
- Addiction: Tobacco chewing/Smoking (Since 10years)
- Sleep: 6-7 hours/Day (Undisturbed)
- Occupation: labour
- Education: 10th standard
- Bowel Habits: Regular 1time/day
- Micturation: 4-5 times/day

General Examination

- Built: Well, built
- Gait: Not Affected
- Clubbing/Cyanosis/Icterus/Edema/ Lymphadenopathy: Absent
- Pallor: Mild

Systemic Examination

- CVS: S1, S2+. No murmurs. NAD
- RS: NVBS, B/L Air entry equal, NAD
- CNS: Higher mental functions were intact.
- Sensory and Mental functions: Normal.
- P/A: Soft, Non-tender, No organomegaly on palpation.

Reproductive System (Local Examination)

- Prepuce skin: Normal with both testes are distended.
- Proper hygiene was maintained.
- Testicles: No abnormalities, No tenderness
- Spermatic cord: No abnormality detected.
- No Varicocele, No edema, No redness
- Penis: No abnormality detected.
- Secondary sexual characters: Normal (Pubic hairs, Axillary hairs, Beards and Moustache)

Vital Signs

- Pulse Rate: 82b/min (With normal Rhythm and Volume)
- Weight: 78kgs

Investigations

Before Treatment Semen Analysis:

SEMEN ANALYSES REPORT SL NO: 34113 Volume: 1.0. Liquefaction Appearance DATE: 01/02/2021 **RCPT NO: 14834** ml : Grey Opaque : 20 min Active Motilie Sluggish progressive Non-Motile TOTAL Sperms COUNT: Pus Cells :10% Movement: 10 % :80 % 02 millions/ml : 10-15.

After Treatment Semen Analysis:

SEMEN ANALYSES	SL NO: 34334	Volume:2.0. ml	Appearance: Grey Opaque	Liquefaction	
REPORT DATE: 17/02/2021	RCPT NO: 16177			: 30 min	
Active Motilie	Sluggish progressive	Non-Motile	TOTAL Sperms COUNT:	Pus Cells	
: 20 %	Movement: 60 %	: 20 %	32 million/ml	: 5-10.	

Impression: Good volume of semen with more number sluggish and active sperms are seen.

Respiratory Rate: 19 cycles/min

- Blood Pressure: 130/70 mm of Hg
- Temperature: 98.4°F

Ayurvedokta Pariksha [Physical Examination] Ashtavidha Pariksha [8 Types Of Examination]

- Nadi: 82 b/min (Sama Nadi)
- Mala: Regular 1time/day (No vit Vibandha; Prakruta Varna, Gandha).
- *Mutra:* 4-5time/day (*Prakruta Varna, Gandha*)
- Jiwha: Militate
- Shabda: Prakruta
- Sparsha: Khara (Prakruta)
- Drika: Prakruta
- Akruti: Madhyama

Dashavidha Pariksha [10 Types Of Examination]

- Prakruti: Kapha-Vataja
- Vikruti: Dosha- Vata, pitta Dushya- Rasa, Majja, Shukra
- Sara: Madhyama
- Samhanan: Madhyama
- Pramana: Madhyama
- Satmya: Madhura, Lavana, Katu Rasa

Roga Pariksha: Nidana PanchakaNidana

Atisevana of Amla, Lavana, Katu Aahara dravyas Atisevana of Ruksha and Ushna, Ativyayama Virudda

- Satwa: Madhyama
- Ahara shakti: Abhyavarana Shakti: Madhyama Jarana Shakti: Prakruta
- Vyayamashakti: Pravara
- Vaya: Madhyama

Ahara-Vihara

Poorvaroopa

Phenila Shukra, Tanu Shukra and Ruksha Shukra.

Roopa

Linga Shaitilya, Glana Shishnata, Nirbeeja/Nirveerya,Mogasankhalpa, Maithuna Ashakta,

Upashaya

Vrushya, Brumhana

Anupashaya

Vata Vardhaka Ahara (Ruksha, Laghu, Katu) Vata Vardhaka Vihara (Ativyayama, Ativyavaya)

Samprapti Ghataka

- Dosha: Tridosha with Vata-Pitta Pradhana (Vyanavata, Apanavata)
- Dushya: Rasa, Majja, Shukra Pradhana
- Agni: Shukra Dhatwagni
- Ama: Dhatwagni Janya Ama.
- Srotas: Rasavaha, Majjavaha, Shukravaha and Manovaha
- Sroto Dusti: Sanga.
- Adhisthana: Shukravaha Srotas (Vrushana and Medra)
- Udbhava Sthana: Pakwashaya.
- Vyakta Sthana: Apana Kshetra (Vrushana and Medra)
- Sanchara Sthana: Rasayani, Shukravaha Srotas
- Vyadhi Swabhava: Chirakari
- Rogamarga: Abhyantara
- Sadhyasadhyata: Krichrasadhya

MATERIALS AND METHODS

Treatment given

- *Kesari Shakti Kalpa* (1 teaspoon twice a day)
- Tab *Durance* (1 tablet with lukewarm water BD after food)
- Churna-Ashwagandha- (10gms with lukewarm milk BD after food)
- Sri Gopala Taila (Local Application)
- Duration of treatment: 2 months

Panchakarma

- Arohana Snehapana with Ashwagandha Gritha for seven days
- Madhutalika Basti in Yoga Basti pattern
- (2 part of course 1-*Snehapana* and 2-*Madhutailika Basti* Schedule)

1stcourse: From 02/02/2021 to 08/02/2021 - 7days, 2ndcourse: From 09/2/2021 to 16/02/2021 - 8days

Arohana Snehapana^[06]

- The word *Arohana* means the act of rising, ascending. [Monier Williams 1899].
- Arohana Snehapana can be defined as an oral administration of Sneha in the increment dosage.
- The clear-cut references of Arohana Snehapana are available on Kalyan karaka [6th A.D], where it is quoted that the individual who is posted for Snehapana should drink Ghrita or Taila in the increment [Krama Vardhitam Pibet] Dosage for 3,5 or 7 days.
- Then *Acharya Vangasena* [9th A.D] described the method of *Arohana Snehapana*.

Opnion of Vangasena regarding dosage of Arohana Snehapana:

DOASGE[MATRA]	DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7
UTTAMA	12KARSHA	14KARSHA	16KARSHA	18KARSHA	20KARSHA	22KARSHA	24KARSHA
MADHYAMA	6KARSHA	7KARSHA	8KARSHA	9KARSHA	10KARSHA	11KARSHA	12KARSHA
HRASVA	3KARSHA	3 ^{1/2} KARSHA	4KARSHA	4 ^{1/2} KARSHA	5KARSHA	5 ^{1/2} KARSHA	6KARSHA

By going through all the opinions mentioned in the table it seems that the *Arohana Krama Snehapana* is advised to achieve *Snigdha Lakshana* within 7 days. But the method of *Arohana Krama Snehapana* is left to the discretion of the physician.

• According to *Kosta* of the person, one has taken *Ghritha* in *Hrusva, Madyama & Uttama Matra*

Ashwagandha Ghrita^[07]

- The ingredients of this *Ghrita* are having *Brumhana*, *Balya* and *Vrushya* properties. Its indication in *Ksheena Shukra* and *Vandyatwa* has been explained.
- Acharyas have stated that by using this Ashwagandhadi Ghrita, a Person becomes capable to perform sex even with one hundred women. It

turns the elderly into youthful and the person can even make a sterile woman pregnant.

Madhutalika Basti Dravya's^[08]

- Madhu : 1 Prasruta -96gms
- Saindhava Lavana: 1/2 Karsha -6gms
- Sneha Dravya: Murchita Tila Taila-1 Prasruta-96gms
- Kalka Dravya: Shatapuspha Churna –1 Tola-12gms
- Kwatha Dravya: Erandamooladi Mooladi 200gms
- Avapa Dravya: Ushnajala 500ml
- Total 8 days of treatment has been advised

Madhutalika Basti^[09]

- Basti Karma is considered as the best treatment in Shukra Dosha by Charaka's statement "Prashashtha-Shukradosheshu Basti Karma Visheshatha".
- The ingredients used in the Preparation of *Madhutalika Basti* are *Madhu, Saindava, Murchita Tila Taila, Shatapushpa Kalka and Erandamooladi Kwatha* Because these are especially attributed with the property of *Vrushya, Shukrala, Brumhana, Rasayana, Dipana* and *Srotoshodhana* which enhance the quality and quantity of *Shukra.*
- Most of the ingredients of *Basti Dravyas* are having *Sheeta Virya*, *Madhura Vipaka*, *Balya*, *Snigdha* and *Vatapitta Shamaka* properties.
- Therefore, *Madhutalika Basti* by its potency can expel morbid *Doshas* and establish the *Dhatusamyata*. It is said to possess the best *Brimhana* and *Rasayana* effect which magnifies the quality of *Rasa Dhatu* and *Dhatwagni*.

Shodhana in Klaibya

The main factors involved in the *Samprapti* of *Klaibya* are *Bahudoshavastha* particularly *Prakupita*

Vata, Dhatukshaya in general and Shukra Kshaya in particular with the involvement of Shukravaha Srotodusti and Manodosha. Hence to overcome Bahudoshavastha, Shodhana is must that to Sasneha Shodhana. Some scattered references glorify the importance of Shodhana in Klaibya.

- *"Beejam Bhavati Karmukam"*^[10]
- "Prashasta Shukradosheshu Bastikarma Visheshata"^[11]
- "Basti Prayogaat Shandopi Puman Bhavati Sarvasha"^[12]
- "Ksheena Shukram Vajikaroti"^[13]
- In Klaibya and Vandhyatwa, Basti may be given in the form of Niruha, Anuvasana, Uttara Basti and Yapana Basti. Basti removes obstruction in the path of Shukra Visarga, protects the body from Dhatu Kshaya.^[14]

Kesari Shakti Kalpa^[15]

- Kesari kalpa is Madhura, Tikta Rasa, Snigdha, Guru Guna, Sheeta Virya, Madhura Vipaka and Shukrala Prabhava. i.e., Vatapittahara, Balya, Brimhana, Vrishya.
- If we look at the *Kesari Kalpa* daily with lukewarm milk which acts like anti-ageing properties which help to boost stamina, builds immunity, helps in faster cell generation and works towards the elimination of fatigue. it detoxifies the body and builds healthy tissues; thus, the theory of *Ayurveda* is beneficial in the treatment of male infertility.
- in Kesari Kalpa ingredients which are Amla-rich sources of vitamin –c which helps in the motility of sperm, Ashwagandha- which revitalizes body and mind, Saffron-Rich a source of Antioxidants, Swarna Basma-Precious ingredient that acts as an anti-ageing property. So, it is said to be the best Vajikarana Dravya in male infertility.



Durance Capsule^[16]

- The ingredients of this capsule are kokalaksha (Hygrophila spinosa), kaunchbeeja (Mucuna Pruriens), Shatavari (Asparagus racemosus), Gokshura (Tribulus terrestris), musali (Curculigo orchiodes), Jatiphalam (myristica Fragrans) Raktashalmali (Bombax malabaricum).
- All these ingredients are having Shukra Janaka, Shukra Pravartaka, Balya, Vayosthapaka, Shukra Sthambhana and Apanavata Dustihara properties.
- So, it corrects Erectile Dysfunction by relaxation of the cavernosum muscles resulting in increased blood flow. It also promotes Spermatogenesis by improving testicular functions.

Sri Gopala Taila^[17]

• This *Taila* was used for local application which promotes blood flow to the groin and helps to

achieve stronger erection.

- The ingredients of this *Taila* are having Vatashamaka, Shukra Sthambhaka, Shukra Rechaka, Balya and Vrushya properties.
- It helps in Vaso-dilation of the penile tissue to allow stronger erections and thus corrects ED.
- It helps stay powerful and prolongs Ejaculation time so that person will get maximum desired pleasure.
- It also helps to soothe and moisturize.

Murchita Tila Taila^[18]

It was used for Sarvanga Abhyanga in this patient because it is Brumhana, Balya, Pusthivardhana and Vatashamaka.

Pathyapathya

- Strictly advise to no TOBACCO /ALCOHOL
- Advised to avoid salty, spicy and fried items in their routine diet.
- Advised to avoid any sort of physical or mentalexertion.
- Advised to follow Abstinence during transit
- Excessive exposure to heat or working under more temperature.
- Travelling or day sleep.

DISCUSSION

To produce progeny four things are necessary i.e., *Ritu, Kshetra, Ambu* and *Beeja* and the presence of any *Dushti* in the above factors will lead to *Shukra-dushti* which is the prime cause of infertility.

In the present era, Modernization is affecting all aspects of human life in the form of diet, diurnal, climatic change and harmful irradiations contributing a lot in producing *Shukra Dusti* (poor quality semen) as a result, a vast population is suffering from Male Infertility.

Out of many causes of male infertility, Oligospermia is the leading cause. According to WHO guidelines Oligo-spermia is the condition where the Sperm count is less than 20million/ml or 40million/Ejaculate and Sperm Motility less than 40%.^[19] As per Ayurveda classics, Garbhotpadana is a vital function of Shukra Dhatu.^[20] If there is any form of Bijadusti (Shukra Dusti) ultimately fails conception.^[21] Acharya Sushruta explained that there is vitiation of Apana Vayu and Vyana Vayu in the Shukradosha because the site of Shukra is the whole body and Apana Vayu is responsible for the proper expulsion of Shukra Dhatu. i.e., vitiation of Apana Vayu can impair the function of Shukra.

OBSERVATIONS

Subjective observation

After *the Snehapana* procedure followed by *Madhutalika Basti* patient was feeling lightness in the body with improved appetite and no weakness was reported after *Basti* evacuation. The patient has also reported a feeling of general wellbeing, physical and mental fitness and improvement in vigour and dynamism after completion of *the Basti* regimen. The results observed after the treatment was excellent. i.e., Marked improvement in sexual parameters like Sexual Desire, Erection and prolonged Ejaculation time was also observed.

Objective Observation

Significant improvement was observed in total sperm count (i.e., from 02 to 32million/ml) and sperm motility (i.e., from 10 to 40% actively progressive sperms).

RESULTS

- This case study showed that Arohana Snehapana followed by Madhutalika Basti, and Vajikarana Yoga's we used were containing Shukra Janaka, Shukra Vardhaka and Shukra Shodhaka properties.
- By this, we could be able to achieve from Oligospermia into normal sperm count and gradual progress helped to impregnate his partner.

CONCLUSION

Male Infertility is mainly discussed under the heading of *Klaibya* and *Kshina Shukra with* some scattered references relating to the symptoms in *Shukragatavata, Shukravrutavata, Shukra Kshaya* and *Sama Shukra* conditions. Based on the present study, it can be concluded that the combined effect of *Arohana* Snehapana followed by Madhutalika Basti, and Vajikarana Yoga's have shown excellent results in bringing about excellent improvement in sexual and seminal parameters in cases of Oligospermia. However, it needs through more extensive studies and a greater period whether the ultimate goal of Vajikarana i.e., conception is achieved in all cases of male infertility through this line of treatment. The present case study highlights the efficacy of Arohana Snehapana followed by Madhutalika Basti, and Vajikarana Yoga's. But a study on a larger sample size could yield a significant statistical result.

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TOTAL SPERM COUNT	2 MILLIONS Million's/M	-	NON MOTILE	20 %	%			1
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