

PATHOPHYSIOLOGY OF SEXUAL DYSFUNCTION ON AYURVEDA BACKGROUND- A LITERARY REVIEW

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ABSTRACT

Ayurveda is an ancient science of life having in-depth knowledge of mankind physiologically as well as pathologically. Nature has built up a better platform for all living being; but life of modern man is far removed from the rules & nature. In fact, there has been a drastic change in his day by day activities including Life style, Food habits, Sexual life, Environmental Pollution, Industrial and occupational hazards. Due to all these factors infertility is increasing day by day. WHO has estimated incidence of global infertility as 16.7%. The contribution of male factor alone to this total infertility is reported as 26.2% to 46.6%. Since the beginning of recorded History, the Human race has placed a great emphasis on fertility. Infertility seldom causes any physical debility, but it severity affects the couples psychological harmony, sexual life and social function. The couple desiring a child but unable to conceive feels demeaned, deprived and bitter. Most culture regards children as an extension of self, as bearers and perpetuators of the family name and tradition as well as an expansion of one's hopes, aims and strivings. Infertility being a social stigma needs to be studied and treated. This article is aimed to recollect the information about factors causing infertility from available Ayurveda treatise.

Keywords: Ayurveda, Infertility, Pathophysiology

INTRODUCTION

Vajikarana has given separate place in *Ash-tanga Ayurveda* by almost all *Acharyas*. This shows that, infertility as well as problems related to reproductive system was given prime importance in ancient period as well.

The science of Ayurveda believes that the sexual inadequacies may be caused by the following causes:¹

- **Psychosomatic** - due to suppression of sexual urge again and again; not getting

- the partner of one's choice or forcefully engaging with someone who is not liked.
- **Dietetic** - due to excess intake of heavily salty or sour food substances or due to food with extremely low nutritional value.
 - **Over-indulgence** - by those who are aging / exhausted / promiscuous but not resorting to suitable *Vajikarana* therapies.
 - **STDs** - contracting them, and neglecting for long till complication appears.
 - **Injuries** – on testicles or adjacent are severing the spermatic cord and other surrounding structures.
 - **Practice of Celibacy** – constant suppression of sexual desires by those who believe in austerity results in to the permanent damage of semen producing organs in the body.
 - **Inherent** – due to some congenital defect if there is absence / malfunction / retarded growth of internal genitalia, impotence may be observed.
 - **Old age** – i.e. above 70 years of age, all factors basically leading to the weakness in *Shukra*.

ShukraDushti Vis-à-Vis Male Infertility-

Beside the above-mentioned types of *Klaibya* which is directly related to impotence and inability to perform the sexual act, Acharya Charaka has also described various abnormalities in the constitution so semen under the title of '*ShukraDushti*' which are basically the defects leading to infertility but treatment – wise more or less tend to be similar to *Klaibya* only.

There are eight types of abnormalities of semen described by Acharya Charaka. These are ²

- *Fenila* – *Vataja* (frothy semen)
- *Tanu* – *Vataja* (low liquefaction time)
- *Ruksha* – *Vataja* (decreased viscosity)
- *Vivarna* – *Pittaja* (semen with impaired color due to infection)
- *Puti* – *Tridoshaja* (purulent and foul smelling semen)
- *Pichhil* – *Kaphaja* (sticky –high viscosity)
- *Anya dhatusansrushta* (deranged constitution due to infiltration of other tissue humoral component)
- *Avasadi* – *Vataja* (causing weakness while ejaculation)

Acharya Charak has described treatment for all these 8 types of all *ShukraDushti*.

Impotence / *Klaibya* – (generally applicable to erectile dysfunction) in Ayurveda are classified in following manner by Acharya Charaka. This is of four types:³

- *Beejopaghatajanya* (Due to defects in spermatogenesis)
- *Dhwajopaghatajanya* (Due to quantitative structural deformity)
- *Vruddhavasthajanya* (Due to old age)
- *Shukrakshayajanya* (Due to diminution of the production / quality of seminal vesicle)

Charaka has also reported a fifth category of impotence named ***JanmajataKlaibya***⁴ the name of which is self-explanatory. It means the impotence which exists since birth and is due to (i) some genetic / defects caused by the destruction of internal reproductive organs during pregnancy itself or (ii) some other idiopathic factors. In such case, although the baby born may be alright externally but, becomes unable to performs sex when grows up.

Sex and Age: Persons below 16 years and above 70 years of age are unfit for sexual acts⁵. Pre-adolescent male copulating with a female elder to him will lose strength and vigor⁶, as the male sexual glands and neuroendocrines are not yet completely matured at this age. Middle aged person (in between 16 to 60 years) is dominated with *Pittadosha*, hence is bestowed with *Bala* (strength), *Virya* (potency) and *Paurusha* (Manliness) etc. which makes him fit for sexual copulation⁷. Sexual practice is contraindicated in general after 70 years of age because of dominance of *Vatadosha* which leads to loss of natural vitality and strength; and if the sex is practiced in this old age many crisis will occur in the body. According to Acharya Sushruta male should not marry up to 25 years of age (meanwhile he should acquire knowledge about sex) and then should get marry to a female above age of 16 years. Female is said to be fertile between 12 years to 45 years of age.

Seasons and Sex: Sexual practice should be based on health status, personnel strength and seasonal rhythms. Continuous and uncontrolled sex in all the days of the year is not recommended. During cold seasons (*Hemanta* and *ShishiraRitu*) naturally strength will be good and one can have sex as much as he wishes, whereas in autumn (*VasantaRitu*) sex on every third day is advocated; in Rainy season (*VarshaRitu*) sex at fortnight is preferred and lastly during hot season (*GrishmaRitu*) according to an individual's strength, sex can be practiced⁸.

Prakriti and Sex : Sexuality and potency are also determined by the somatic and psycho behavioral personality of an individual, and the observations made are as follows : (1)

Shleshmalaprakruti person is bestowed with good amount of *Shukra/Retas*, possess more sexual potency and entertain much sexual pleasure and also will have more number of offspring⁹. (2) *PittalaPrakruti* person is having less *Shukra*, less powerful in sexual congress and possess less offspring¹⁰ and lastly (3) *VatalaPrakruti* person is weak in sexuality and possess less offspring¹².

Satmya and Sex: If the two metabolic derivatives – *Majja* (Bone marrow) and *Shukra* (Semen + Androgen) are well nourished and potent in a person either by inheritance or acquired will be blessed with good progeny, good sexual power and loved by females.¹² One who consumes more milk and milk products (especially Ghee), mutton soups and other preparations will tolerate all food stuffs. He will be powerful, tolerant and good in sexual practice¹³.

Psyche (Manas) and Sex: Psyche and *Vata* are directly related. *Vata* controls, regulated, initiates and maintains the *Manas*. Sexual expressions and ejaculation are under the control of *Vata*¹⁴. The basic initiation of sexual instinct is under the influence of psychological integrity¹⁵. *Apana* and *VyanaVata* in association with *Sadhaka Pitta* and *Manas* influence the normal sexuality of an individual and any abnormality in this AVSM axis leads to *ShukravahaSritodushti* and hence *Shukradushti* leads up in infertility or sexual dysfunctions^{16,17,18}. A person's determination (*Samkalpa*) to have sex initiates the sex. *Harsha*, *Praharsha* (excitement) *Priti* (affection, love), *Bala* (capacity to have sex) and the psycho sexual endocrinal merits of *Shukra*^{19,20,21}. The entire body is the seat of *Manas* and *Shukra*; and *Hridaya* is the pivotal organ for regulation

of *Rasa*, *Shukra*, *Ojas*, *Manas* and *Vayu*, hence all psycho-sexo-endocrinal functions are interdependent. The *Harsha* – sexual excitement is depending on *Dehabala* (physical strength) and *Sattvabala* (psychological integrity) and also the *Vrishattva* – sexual capacity depends upon this excitement and this triangular HDSV axis is not constant²².

Sexo pathology: *Shukra* is the platform to exhibit the symptomatology of sexual dysfunctions. Any derangement in *Manas-Vata-Shukra* (MVS) axis due to any cause leads to *ShukravahaSrotodushti* and *Shukradushti* manifests either as infertility or sexual dysfunctions^{23,24}. The supporting factors are *Agni*, *Trayopasthambhas*, *Prakriti*, *Vayu*, *Bala*, *Sara*, *Ahara*, *Vihara*, *Manas*, *Agantufactors* and lastly even *Daiva* or *Karma*.^{25,26,27}

Sexual dysfunction and other diseases-

- **GrahaniRoga** (IBS Sprue, Malabsorption syndrome etc.): sufferer will develop *StrishuAharsha* (disinterest and aversion towards female and sex)^{28,29}.
- **Pandu and Kamala** (Haematological and Hepatobiliary disorders): The advanced stage of aggravated *Pitta* and *Vata* lead to *Halimaka*, which causes loss of vital strength (*Balakshaya*), decreased enthusiasm (*Utsahahani*) and even disinterest in female and sex.
- **Arsha** (haemorrhoids): The secondary effects of *ShleshmajaArsha* lands up in *Klaibyata*³⁰ and anorectal disorders pose the problems related to reproduction viz. *Apraharsha*, *Kshinaretas*, *Alpapraja* etc³¹.
- **Upadhmsa** (STDs): Consequences hampers the sexuality of the sufferer³². **ShukradhatugataJvara:** *Jvara* in general can

cause *ShephaStabdhatata* (Erectile Dysfunctions) and *Shukra-moksha* (Ejaculatory dysfunctions)³³.

- **Atisthaulya** (Obesity): Abnormal *Medas* (fat) deposition in the body has negative impact over sexual performance and the person suffers with *Alpamaituna*, *Klaibya* etc^{34,35}
- **Prameha** and **Madhumeha** on the body and sexuality are very serious, like decreased sexual copulation capacity, *Mushkavidirana* (Genital wounds etc.) and loss of strength (*Bala*) etc³⁶.

DISCUSSION

Sexual dysfunction and infertility can have its route cause in physiological or pathological factors. It can have its origin in genes also. In Ayurveda treatise, the types of *Shukradushti* and *Klaibya* are mentioned. It shows that in ancient era as well *Acharyas* were keenly observing the pathology of diseases. Also in many *Samhitas*, sexual problems are shown as consequence of some chronic diseased conditions. So, it becomes very clear that, whenever the case of sexual problems is to be solved, all the factors should be ruled out and treatment should be planned accordingly.

CONCLUSION

Ayurveda being a holistic science of medicine deals with the pathological conditions of all systems in body. Ayurveda treatment principals are based on balancing the psychological and *Doshika* imbalance in body. In sexual dysfunctions or infertility related issues, it becomes very important to treat the disease on pathological and psychological backgrounds.

So pathophysiology of sexual dysfunction should be thoroughly studied first as mentioned in Ayurveda classics to get the expected results of treatment planned.

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