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## Ayurvedic management of male infertility: A case study

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### Abstract

Male infertility refers to a male's inability to result pregnancy in a fertile female and it has a strong impact on the psychology of a couple. Almost 20-40% of Infertility cases were found to be due to male factors. The study patient reported Oligozoospermia (low sperm count) and Asthenozoospermia (low sperm motility). Where medicinal treatment (*shaman chikitsa*) and purification therapy (*shodhana chikitsa*) i.e. *panchakarma* especially Intra Urethral *Uttar Basti* (IUUB) is the management. After 4 months of treatment, his condition is improved from severe Oligoasthenozoospermia to normozoospermia. *Ayurvedic Panchakarma* treatment i.e. *Shodhana karma*, *Uttarbasti* and *shaman chikitsa* is a safe and effective approach for male infertility.

**Keywords:** Infertility, *Uttar Basti*, *vajeekarna*, *Ksheena Shukra*

### Introduction

15% of married couples worldwide struggle with infertility, making it a global issue [1]. Infertility affects 15-20% of the overall population [2]; male factors account for 20-40% of this [3], with a frequency of about 23% in India. According to WHO (1992), oligospermia is defined as having less than 20 million sperm/ml and asthenozoospermia as having spermatozoa with motility less than 50% of active motile sperm [4].

Oligoasthenozoospermia is characterised by decreased motility and a reduced sperm count. Thousands of years ago, *Ayurveda* recognised the issue of male sexual dysfunction and created *Vajeekarana Chikitsa*, a distinct specialty (Aphrodisiac Therapy). One branch of *Ayurveda* called *Vajeekarana* treats disorders of the seminal fluid, defective semen, disturbed sexual potency, spermatogenesis, and male seminal disorders. It also preserves and amplifies the sexual potency of healthy men and helps them conceive healthy progeny [5]. *Vajeekarana* enhances a person's physical, psychological, and social well-being in addition to promoting sexual ability and performance [6].

Research studies have correlated the term "Oligozoospermia" with *Ksheena Shukra*, *Alpa Shukra*, *Shukra Dosha*, *Shukra Dushti*, *Shukra Kshaya*, and *Shukralpata*. *Shukradhatu Vikara*, *Beejopghata*, and *Ksheena Retasa* [7]. Among these, *Ksheena Shukra* is used in majority of the research works with special reference to Oligozoospermia is the seminal disorder in which sperm count is below 20 million/ml [8].

Ayurvedic study is essential for the treatment of oligospermia, asthenospermia, and azoospermia because modern medication for these conditions has numerous adverse effects and is expensive.

### Infertility (*Vandhyatwa*)

#### Definition

Infertility is defined as the incapacity to conceive after a year or more of Regular sexual intercourse with no contraceptive measures taken. In contrast, the fertile population is defined as those who do become pregnant after some reasonable time of regular sexual intercourse.

### Case Report

A male 35-year-old, non-smoking and non-alcoholic patient married for seven years reported with primary infertility and came to OPD of CSMSS *Ayurved Mahavidyalaya* for treatment. After performing a routine physical examination, there was no significant abnormality, the patient has severe Oligoasthenozoospermia. The clinical symptoms in the present case report correlate to *Kshina Shukra* comprehended in Ayurvedic classics.

Past history-No any  
 Personal history & Family history-any major history  
*Astasthanagata Pariksha*  
*Nadi* (pulse)-82 b/min *Vataja Nadi*  
*Mala* (stool)-Once in a day  
*Mootra* (urine)-3-4 times a day  
*Jihwa* (tongue)-Alpa Sam  
*Shabda* (speech)-*Spashta*  
*Sparsha* (touch)-*Anushna*  
*Druk* (eyes)-*Spashta*  
*Akruti* (built)-Moderate.  
*Prakruti Pitta-Kapha*,

Height-164cm  
 Weight-55kg

### Systemic Examination

CVS-S1 S2 normal  
 CNS-NAD  
 RS-AEBE Clear  
 GIT-NAD  
 Lab Investigations:  
 Semen analysis-Abstinence-6 Days

### Treatment Given

Table 1: Treatment

Sr. No	Treatment Modality	Drugs and Dose	Duration
1	Deepana, Pachana and Anulomana (04/01/2024)	1. <i>Hingvashtak Churna</i> <sup>[9]</sup> 2gm BD with <i>Ghritha Pragbhakt Kal</i> 2. <i>Ampachaka Vati</i> <sup>[10]</sup> 500 mg BD <i>Adhobhakt Kal</i> 3. <i>Avipattikar churna</i> <sup>[11]</sup> 2 gm at night with lukewarm water	For 5 Days
2	<i>Snehapana</i> (09/01/2024)	<i>Mahatiktaka Ghritha</i> 30 ml <i>hrasiyasi matra</i> upto 180ml.	For 6 Days
3	<i>Snehana and Swedana</i> (15/01/2024)	<i>Tila Taila</i> and <i>Dashmool Kwatha</i> respectively.	For 2 Days
4	<i>Vamana</i> (17/01/2024)	<i>Vamanarth-Madanphal Pippali churna</i> 6gm + <i>Vacha</i> 3gm <i>Vamanopag-Yashtimadhu kwatha</i> (5500ML) + <i>Saindhav Jal</i> (1000ML)	For 1 Day
5	<i>Samsarjan krama</i> (18/01/2024)	<i>Madhyam suddhi</i> ( <i>Manda, Peya, Yavagu, Yusha</i> )	For 8 days
6	<i>Snehapana</i> (26/01/2024)	<i>Mahatiktaka Ghritha</i> 30 ml <i>hrasiyasi matra</i> upto 150ml.	For 5 Days
7	<i>Virechan Karma</i> (01/02/2024)	<i>Virechana-Shunthi siddha eranda sneha</i> 50 ml	For 1 Day
8	<i>Samsarjan krama</i> (02/02/2024)	<i>Madhyam suddhi</i> ( <i>Manda, Peya, Yavagu, Yusha</i> )	For 8 days
9	<i>Basti Karma</i> (08/02/2024)	<i>Yog Basti-Madhutailik Basti Anuvasana</i> 120ml, <i>Niruha</i> 960ml <i>alternatively with sarvanga snehana and swedana.</i>	For 8 days
10	<i>Uttar Basti</i> (26/02/2024)	<i>Ashvagandha Ghritha</i> <sup>[13]</sup>	4 settings with 3 days interval.
11	<i>Shamana Chikitsa</i> (26/02/2024)	1) <i>Ashvagandha+Shatavari Kshirpaka</i> 20 ml BD 2) <i>Vanari Vati</i> 250 mg BD with a cup of milk. 3) <i>Gandarva Haritaki</i> 3 gm HS with <i>koshna jala</i> .	For 60 days

Table 2: Before treatment and after treatment report mentioned in below table

Criteria	Before Treatment (21/12/2023)	After Treatment (17/05/2024)
Sperm count	45 Mill	55 Mill
Viscosity	Viscous	Thick
Volume	2.0 ml	2.0 ml
Active Sperms	60%	80%
Sluggish Sperms	35%	10%
Type of motility	Low Motility	Forward progressive
Grade of motility	II	III
Others	----	Giant Headed, tail less

### Discussion

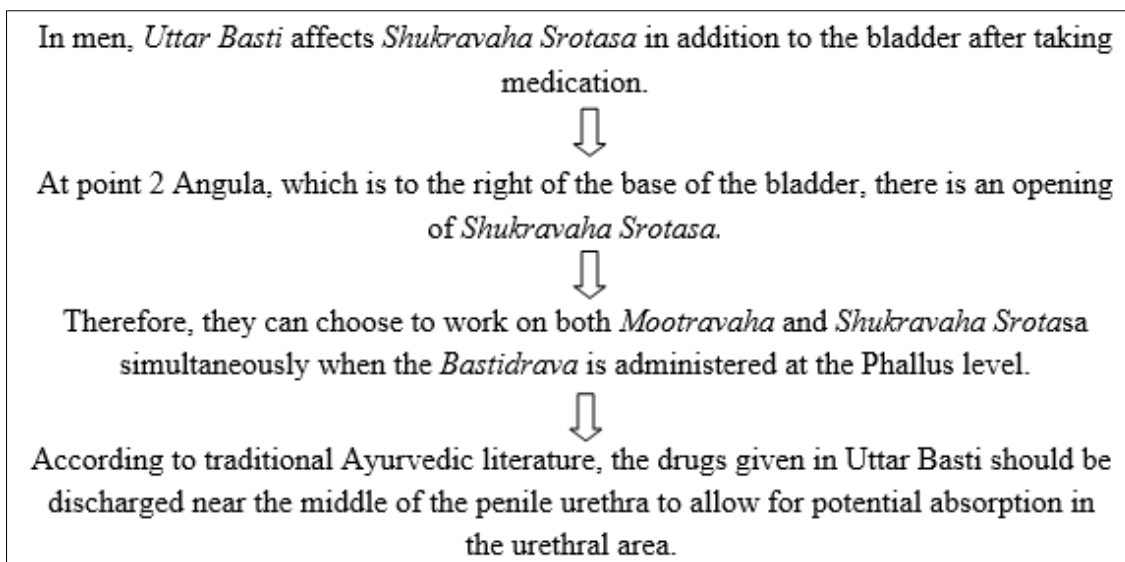
*Dipan*: It was done by *Hingvashtak churna* (2 gm-2gm before meals with *anupan Goghruta*). The contains in this drug are *agneya mahabhutatmak, katu amala lavan rasa pradhan, laghu ushna tikshna viryatmak* which stimulate & strengthen *jatharagni*.

*Pachan*: It was done by *Aampachak vati*. The ingredients in this drug digest the *aama* by *ushna virya*. So, by *dipan & pachan*, *Nirama ras* was produced the *saman vayu* was in its right position.

*Anuloman* with *Avipattikar churna*: The drug digest *apakva mala* correct vitiated *vata dosas*, facilitated easy evaluation of *mala* through anus, help the *Apan vayu* in its right position.

### Panchakarma

- Snehan (Bahya parimarjan)***: *Vata* is located mainly in the tactile sensory organ lodged in the skin, hence *sarvanga snehan (bahya parimarjan)* was beneficial to skin & *vaat dosha*. *Snehan* (oleation) loosens the morbid doshas to certain extent.
- Swedan (sudation)***: The qualities of *swedan* like *ushna, tikshna, sara, drava, snigdha*, helps in flushing out the wastage & toxins from the body through perspiration.
- Yogabasti***: Act locally as well as systematically help to normalize the vitiated *apan vayu*.
- Uttarbasti***: *Ashvagandha Ghrith* helps to reduce lipid peroxidation, enhance sperm motility and count, and regulate reproductive hormone levels when taken orally. It improves blood circulation throughout the body and enhances sperm quality naturally. Since oxidative stress is a major cause of low sperm count, *Ashvagandha Ghrith* is beneficial for restoring sperm count, improving semen health, and increasing fertility.

**Probable mode of action of Uttar Basti****Conclusion**

Based on the comparison of pre and post-treatment data, it can be said that the aforementioned treatment approach is successful in managing *Ksheena Sukra* (oligozoospermia).

In the treatment of male infertility, it can be concluded that a method based on Ayurvedic principles can lead to encouraging outcomes by improving not only sexual functioning indicators but also the quantity and quality of semen produced in 4 months of period. male impotence is caused by a variety of causes, but it is treatable with Ayurvedic medication and appropriate safeguards. A healthy diet, appropriate lifestyle choices, and appropriate medical care are required.

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