



Case Study

AYURVEDIC MANAGEMENT OF OLIGOASTHENOZOOSPERMIA - A SINGLE CASE STUDY

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ABSTRACT

Male infertility makes up half of all infertility globally, and numerous etiological factors play a significant role to it. Oligoasthenozoospermia is a sperm disorder that involves two disorders at the same time, Oligozoospermia (low sperm count) and Asthenozoospermia (Abnormal sperm motility). The signs and symptoms of oligoasthenozoospermia can be co-related with *Kshina Shukra* in Ayurveda. In Ayurveda *Asta-vidha Shukra dushti* are mentioned. *Kshina Shukra* is one among the *Asta-vidha Shukra dushti*, in which qualitative as well quantitative vitiation of *Shukra dhatu* occur. While describing the *Dushti* associated with *Shukra* and *Artava*, *Vagbhatacharya* explained *Kshina Shukra* as a pathological condition caused by vitiated *Vata* and *Pitta*.

The present case study explains the role of *Shodana aushadi* and *Shamana aushadi* in the management of oligoasthenozoospermia. The patient has report of low sperm count and abnormal morphology was subjected to Ayurvedic management protocol initially *Shodana* treatment and then *Shamana aushadi*, administration of *Satavari Kshira paka* for 30 days.

This Ayurvedic treatment protocol including a combination of both *Shodana* and *Shaman* therapies were helpful in improving the seminal parameters like sperm count will increase from 10 million/ml to 90 million/ml, Actively motility increase from 0% to 30%, Moderately motility increase from 0% to 30%, Slightly motility increase from 10% to 20%, Non motile decrease from 90% to 20% and number of normal spermatozoa increase to 98%. Hence this approach can be considered in patients with low sperm count and motility.

INTRODUCTION

The case of this study is a 23 year old married, non-smoking, non-alcoholic male patient with primary infertility since 2 years of married life. Laboratory investigation of seminal parameters on comparing with normal revealed oligoasthenozoospermia. The clinical symptoms identified in the present case report correlate to *Kshina Shukra* comprehended in Ayurvedic classics.

In the present case report explains the role of *Shodana* with *Chatuh prasrutika basti* and *Shamana* with *Satavari Kshirapaka* in the management of Oligoasthenozoospermia.

Patient Information

The patient got married in the year 2019 at the age of 21. She was unable to conceive even after two years of unprotected sex, they decided to consult a doctor and husband was diagnosed with oligoasthenozoospermia. They visited our outpatient department (OPD) in Center of Excellence in Panchakarma. Dr.Sarvepalli Radhakrishnan Rajasthan Ayurveda University, Jodhpur, Rajasthan, India on 22/12/2021 OPD number 42026. He had nothing specific in history of previous illness. Family history was negative for any tuberculosis. His personal history revealed a sedentary life styles [Table 1].

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Table 1: Personal History of Patient

Diet	Vegetarian
Micturition	7-8 times in a day, 2-4 times in night
Bowel	Regular/ Slightly constipated
Appetite	Moderate
Sleep	Disturbed
Addiction	Nil

Ashtavidha Pareeksha: *Ashtavidha Pariksha* (Eight fold Classifications) has been mentioned in below [Table 2].

Table 2: Ashtavidha Pariksha of Patient

1. <i>Nadi</i> (Pulse)	68/Min	5. <i>Shabda</i> (Speech)	<i>Spashta</i> (Normal)
2. <i>Mutra</i> (Urine)	7-8 times in a day	6. <i>Sparsha</i> (Touch)	<i>Rukshata</i>
3. <i>Mala</i> (Stool)	1-2 times per day	7. <i>Drik</i> (Eyes)	<i>Samanya</i> (Normal)
4. <i>Jihva</i> (Tongue)	<i>Sama</i> (Coated)	8. <i>Akriti</i> (Built)	<i>Madhyama</i>

Clinical findings

The physical and external genital organ examination did not reveal any abnormal findings. Patient was basically *Vatapradhana Vata-Pitta Prakruthi*. History of slightly chronic constipation was found. Patient was used to take spicy, *ruksha, sheetapradhana ahara* and also have some stressful life. Latest report of semen analysis is showed 90% non-motile sperm in a total of 10 million/ml count.

Diagnostic assessment

Based on the signs and symptoms the present case was diagnosed as *Kshina shukra* (Oligoasthenozoospermia). The assessment was done by comparing baseline parameters with repeated evaluation after 1 months of administration of initially by *Shodana* treatment (purification therapy) and then continuing with *Satavari Kshirapaka* (orally). Baseline seminal parameters includes

- Volume: 1.5ml
- Colour: Greyish white
- Viscosity: Normal
- Reaction PH : 8.5
- Liquefaction time: 30 Minutes
- Total count: 10 million
- Actively Motile: 00%
- Moderately motile: 00%

- Slightly motile: 10%
- Non motile: 90%
- Viability: 10%

Therapeutic intervention

Therapeutic plan was begin with administration of *Shodana Chikitsa* followed by *Shaman Chikitsa*. Initially his *Agni* is improved by *Dipana- Pachana* (Improving Digestion) with *Panchakola Churna, Aroghya vardhini vati* as a *purvakarma* (Pre-operative procedure) of *Shodana*. He attained *Nirama* (signs of digestion of *Ama*) stage by 5 days. *Accha Snehapana* (Intake oil in large quantity) was started with cow's ghee. *Samyak snigdha lakshana* (signs of proper oleation) was observed after 7 days of *Snehapana*. *Sarvanga Abhyanga* (Body massage with oil) was done with *Til tail* along with *Svedana* (Sudation) for 3 days followed by *Virechana* (Therapeutic purgation) with *Virechana aushadis*. After *Virechana* he take 5 days for *Samsarjana karma*, then he was subjected to *Chatuh prasrutika basti*^[1] for 15 days duration. After completion *Shodana* procedure he was subjected to *Shaman chikitsa* for 1 month with *Satavari Kshirapaka* internally with *Sita*. [Table 3], [Table 4]

Table 3: Therapeutic intervention

Sl.No	Drugs/Therapy	Dose	Anupana	Duration
1	<i>Panchakola Churna</i>	5Gm	Luke Warm Water	5 Days
	<i>Aroghya Vardhini Vati</i>	1BD	Luke Warm Water	5 Days
2	<i>Snehapana with Go Ghruta</i>			7 Days
3	<i>Abhyanga and Svedana with Til taila</i>	50 ml		3 Days
4	<i>Virechana</i>	200ml	Luke Warm Water	1 Day
5	<i>Chatuh Prasrutika Basti</i>	418ml		15 Days
6	<i>Shatavari Kshirapaka</i>	100ml		30 Days

Table 4: Drug review

Sl.No	Drugs	Botanical Name/English Name	Rasa	Guna	Virya	Vipaka	Karma
1	Sneahapana						
	Go Ghruta	Butyrum depuratum	Madhura	Snigdha, Guru, Sheeta	Sheeta	Madhura	Vata-Pitta Shamaka, Vrushya, Shukra vardhaka, Dipana, Rasayanam.
2	Chatu Prasritika Basti						
	Hapusha	Juniperus communis	Katu, Tikta	Guru, Rooksha, Tikshana	Ushna	Katu	Kapha Vata Shamana, Dipana, Anulomana, Artavajanana
	Madhu	Mal depuratum	Madhua, Kashaya	Guru, Rooksha, Sheeta, Sookshma	Sheeta	Katu	Vrushyam, Srotovishodanam, Saukumaryakaram.
	Tila tailam	Sesamum Indicum	Madhura, Katu, Tikta, Kashaya	Guru, Snigdha, Saram, Sookshmam	Ushna	Madhura	Balakaram, Varnyakaram, Vrushyam, Medhyam.
	Saindhva lavana	Sodium Chloridum	Lavana, Madhura	Snigdha, Laghu, Tikshna	Sheeta	Madhura	Tridosaharam, Vrushyam, Agnideepanam
	Go-Dugdha	Milk	Madhura	Snigdha, Pichila, Guru, Mridu	Sheeta	Madhura	Vatapittara shaamaka, Balyam, Shukrakaram, Jaranashanam, Varnya, Brimhana
	Go Ghruta	Butyrum depuratum	Madhura	Snigdha, Guru, Sheeta	Sheeta	Madhura	Vata-Pitta Shamaka, Vrushya, Shukra vaedhaka, Dipana, Rasayanam.
3	Shamana Chikitsa						
	Satavari	Asparagus racemose	Madhura, Tikta	Guru, Snigdha	Sheeta	Madhura	Vatapitta shaman, Vrushya, Shukrjala, Stanyajanan, Medha-Agni-Bala vardhani

Sadhyasadyata of Ksheena Shukra (Prognosis)

Determination of *sadhya asadhya* is important before the commencement of treatment. It will help to find out whether the disease is curable or not. *Ksheena Shukra* is a *Dwidoshaja vyadhi* with involvement of *Vata* and *Pitta dosha*, and is recognized as *Krichra Sadhaya*^[2]. *Pitta Prakruti Purusha* has less *Shukra*, and if he has *Shukra Kshaya*, his prognosis will be more *Kashtasadhya*.

Pathya-Apathya

Patient was asked to take *Madhura, Guru, Brumhana, Snigdhapradhana bhojana*^[3] including *Dugdh, Shali, rotti, etc Rukshaannapan, Ratrijagarana*, spicy foods, sex was prohibited and also advised to avoid excessive travelling.

Follow up and outcomes

After 30 days, the patient was advised to have a follow up on the OPD with reassessment of semenogram. After treatment there was a good improvement in the seminal parameters.

Table 4: Improvements in Parameters before and after treatment

Sl.No.	Seminal Parameters	Before Treatment	After Basti Treatment	After 30 days of treatment
1	Volume	1.5 ml	1	3 ml
2	Colour	Greyish white	Greyish white	Whitish
3	Viscosity	Normal	Normal	Normal
4	Reaction PH	8.5	8	8
5	Liquifaction time	30 Minutes	30 minutes	30 minutes
6	Total count	10 million	90 million	70 million
7	Actively Motile	00%	20%	30 %
8	Moderately motile	00%	20%	30 %
9	Slightly motile	10%	20%	20 %
10	Non motile	90%	40%	20 %
11	Normal spermatozoa		98%	98%
12	Abnormal spermatozoa		2%	2%

Discussion

Ksheena Shukra is a *Vyadhi* in which *Shukra Dhatu* is quantitatively and qualitatively vitiated. Also certain degree of quantitative reduction in *Shukra Dhatu* is indicated by three conditions namely *Alpa-Ksheena-Vishushka Retas*.

Acharya Sushruta has also mentioned the word *Ksheena Retas*, while elaborating definition of *Vajikarana Tantra*,^[4] While *Dalhana* opines *Ksheena Retas* is moderately low level of *Shukra* occurring in middle age group due to some etiopathology. Fertility potential of *Shukra Dhatu* is also affected by disease *Ksheena Shukra*. These *lakshnas* can be included under qualitative vitiation of *Shukra Dhatu*.

Hence it can be concluded that in *Ksheena Shukra* due to consumption of various etiological factors and *Dushti* of *Shukravaha Srotas*, *Shukra Dhatu* production is not up to its mark and ejaculated in low volume. In short, which indicate towards quantitative and qualitative changes of *Shukra Dhatu*. The doshik involvement in this condition is *Vata & Pitta Doshas*.

Oral administration of *Panchakola churna & Aroghyavardhini vati* having *Dipana-Pachana* properties helps in *Agni Vardhana* (Enhancing digestive fire) also balances the *Dhatu Parinama*. *Go Ghruta is Madhura rasa, Snigdha, Guru, Sheeta Guna, Sheeta Veerya, Madhura Vipaka*. Its *Vata-Pitta Shamana, Vrushya, Shukra Vardhaka, Ojovardhaka, Vayasthapanam, Rasayanam, Dipana, Balakara, Kanthivardhaka* ^[5,6,7]. The treatment protocol includes *Koshta Shuddhi* through *Virechana*, then administered *Chatuh Prasrutika Basti* procedure followed by *Shamana Chikitsa* with *Shatavari Kshira paka*. *Virechana* helps in attaining *Agni Dipti* and *Sroto Vishudhi* (Purification of Channels) and hence supports the proper *Dhatu Parinama*. *Shatavari* having

Madhura Tikta Rasa, Guru, Snigdha Guna, Sheeta Veerya, Madhura Vipaka. It have property like *Vata-Pitta Shamana, Vrushya, Shukrala, Medhaagnibala vardhana* ^[8]. These treatment modalities give result in *Kshina Shukra* and creating a satisfactory improvement in the seminal parameters. This *chikitsa* could improve the quality as well as quantity of semen by increasing sperm motility and concentration and by reducing sperm morphological defects. It also maintained the thickness and consistency of semen which might be helpful in improving the viability and motility of sperms.

CONCLUSION

This Ayurvedic treatment protocol including a combination of both *Shodana* and *Shaman* therapies were helpful in improving the seminal parameters to a satisfactory level. Hence this approach can be considered in patients with low sperm count and motility.

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