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Case Study

AYURVEDIC MANAGEMENT OF OLIGOASTHENOZOOSPERMIA - A CASE REPORT

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ABSTRACT

Oligoasthenozoospermia is the condition where the two parameters, sperm count and sperm motility is altered. It depicts a decrease in the concentration and percentage of motile spermatozoa in a sperm sample and is determined by semen analysis. Researches show that nearly 50% of infertility in India is related to the male reproductive factors or diseases. Based on the study conducted by WHO from 1982 to 1985 in multicentres about 20% of infertility cases is due to male factors. Approximately 23% of Indian couples taking infertility treatment attributed the cause towards male factors. Oligoasthenozoospermia can be correlated to *Sukra kshaya Lakshanas* mentioned in *Ashta sukra dushtis*. A male patient aged 32 years with 2.5 years of married life revealed the semen volume as 2ml, Sperm concentration 1 million/ml, progressive motility 3%, Non progressive motility 2% and immotile sperms 95% with normal sperm morphology, increased viscosity and increased liquefaction time. After Ayurvedic management through *Sodhana* and *Samana chikitsa* for about 5 months revealed Normozoospermia with Sperm count 47 million/ml, progressive motility 25% and Non progressive motility15%. This shows the effectiveness of Ayurveda medicines in the case of Oligoasthenozoospermia and ensures that Ayurveda can provide spectacular outcome in the areas of Male infertility.

INTRODUCTION

This is a case report of a male patient aged 32 years with 2.5 years of married life c/o primary infertility with history of reduced sperm motility and not having any addictions or systemic diseases. On semen analysis he was diagnosed as Oligoasthenozoospermia, with Sperm concentration 1 million /ml and immotile sperms 95%. Infertility is one of the prevalent health problem in the current scenario which has serious social implications, nearly 50% of infertility is related to the disorders in the male. Oligoasthenozoospermia condition can be correlated with *Sukra kshaya* explained in *Ashta sukra doshas* explained by *Brihathrayees* and *Sodhana chikitsa* followed by *Samana chikitsa* was given based on the *Dosha dushti lakshanas*.

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Case Report

A couple presented with the complaint of inability to conceive even after 2.5 years of married life, having regular unprotected sexual life, attended the OPD of *Prasuthithantra streeroga* of GAVC, Trivandrum on 23rd September 2021. On detailed evaluation of the case, the female partner had regular menstrual cycles with normal bleeding pattern. Male partner had a history of reduced sperm motility, he was advised to do semen analysis. Semen analysis of the male partner aged 32 years revealed the semen volume as 2ml, Sperm concentration 1 million /ml, progressive motility 3%, Non progressive motility2% and immotile sperms 95%. The sample shows normal sperm morphology, increased viscosity and increased liquefaction time. There was no abnormality detected on physical examination.

Male partner had no other systemic illnesses, he had a history of dust allergy and took Ayurvedic treatment for the same. Based on the Lab investigations and the clinical history he was diagnosed as Oligoasthenozoospermia. As per Ayurvedic point of view this can be considered as *Ksheena sukla*, one among the *Ashtavidha sukra dushti*.

Personal history

i. Age : 32 years
ii. Occupation : Research Scientist
iii. Diet : Mixed
iv. Bowel : Normal
v. Bladder : Normal
vi. Sleep : Regular
vii. Psychological status : Normal
viii. Appetite : Adequate
ix. Height : 168 cm
x. Weight : 66kg
xi. Built : Moderate
xii. Body heat : increased
xiii. Addictions : Nil

The first phase of treatment was done as follows:

Date	Medicines	Dose	Duration
10/10/21	1. *Ashtachurnam*	1 tsp bd with hot water	3 days
13/10/21	2. *Avipathi churnam* for *Virecanam*	25 g with warm water	Once in 3 weeks
14/10/21 to 15/01/22	3. *Chirivilwadi kashayam* 4. *Chandanasavam* + *Saribadyasavam* 5. Capsule Addyzoa	15 ml *Kashayam* with 45 ml luke warm water bd B/F 15ml +15 ml bd A/F 2 bd A/F	3 months

Patient was advised to avoid hot water bath, tight undergarments, long bike rides, hot and spicy foods. He was asked to include vegetables and salads, wheat, fruits, nuts, dry fruits, milk, ghee in the diet, cold water sitz bath for 15 minutes every day and get adequate sleep as well.

Semen Analysis was repeated on February 5, 2022. Sperm concentration was 25 million/ml, progressive motility 20%, Non progressive motility10% and immotile sperms 70%. The sample shows normal sperm morphology, increased viscosity and increased liquefaction time. Impression was Asthenozoospermia, the patient felt less body heat and zestful compared to before treatment.

The second phase of treatment was as follows:

Date	Medcines	Dose	Duration
10/02/22 to 10/04/22	1. *Chirivilwadi kashayam* 2. Capsule Addyzoa 3. *Phalasarpis* 4. Profert M	15 ml *Kashayam* with 45 ml luke warm water bd B/F 2 bd A/F 10ml bd 1 hour before food 1 bd A/F	2 months

Semen analysis done on April 12, 2022, revealed Normozoospermia. Sperm count was 47 million/ml, progressive motility 25%, Non progressive motility15% and immotile sperms 60%. The couple was advised to try for conception.

Semen Analysis Reports

	October 7, 2021	February 5,2022	April 12,2022
Volume	2 ml	4ml	3 ml
PH	8	8	8
Sperm Concentration	1 million/ml	25 millions/ml	47 millions/ml
Progressive Motility	3%	20%	25%
Nonprogressive Motility	2%	10%	15%
Immotile	95%	70%	60%

Morphology Normal	80%	62%	69%
Head defects	10%	20%	17%
Tail defects	10%	18%	14%
Pus cells	1-3	2-3	0-2
RBC	0-1	0-1	Detected/hpf
Impression	Oligoasthenozoospermia	Asthenozoospermia	Normozoospermia

DISCUSSION

Oligoasthenozoospermia is the combination of Asthenozoospermia (reduced sperm motility) and Oliogozoospermia (low spermatozoon count). This can be correlated with *Sukrakshaya* mentioned in *Ashtasukra dushti* of Ayurveda classics.

The treatment was started with *Sodhana* and aimed in *Vatanulomana*, *Pittahara* and *Vajeekarana*. In our classics "*ksheene suklakari kriya*" was the *Chikitsa* mentioned for *Ksheena sukla dushti*. Initially *Ashtachurnam* was given for 3 days as *Deepana pachana* and *Agnivardhana*. *Virecanam* with *Avipathi churnam* was given on next day, as *Shodhana* (purificatory therapy) is the foremost and essential procedure in our *Sastra* before *Shamana Chikitsa*. *Avipathi* was selected mainly due to its *Pittahara* property [1]. *Virecana* (purgation therapy) is *Pitta hara*, it bestows with *Indriya bala* (strength to sense organs), *Agni deepthi* (keenness of digestive fire) and *Chiracha pakam vayasa* (slow ageing)[2].

Chirivilwadi kashayam was selected due to its *Vatanulomanatva* and *Agni vivardhanatva* property. This inturn will helps in the *Dhatvagni vivardhana* and proper formation of *Dhatus* which helps in the production of *Sukra dhatu*[3].

Chandanasavam and *Saribadyasavam* both have *Pittahara* property and almost all drugs are having *Snigdha seeta mrdhu gunas, Seeta veerya* and *Madhura vipaka*. *Chandanasava* is indicated in *Sukla meha*, *Balapushtikara*, *Hrdhya* and *Param agnisandeepanam*[4]. *Saribadyasavam* is indicated in *Vatarakta, Upadamsa* and *Vimsathi prameha*[5]. *Carakacarya* described *Vajeekarana yogas* and *Rakta pittahara yogas* are beneficial in *Sukradushti chikitsa*[6].

Tablet Addyzoa is a herbomineral antioxidant, with spermatogenic action having free radical scavenging action which reduces the possibilities of damage to the spermatozoa. These capsules promote spermatogenesis and improve the sperm motility and acts as a stress reliever. A comparative study conducted has the findings which reflects the composition of Addyzoa capsules contain an array of indigenous herbs like *Aswagandha, Silajathu* and *Purnachandrodaya rasa* which increases FSH and LH secretion and increases spermatogenesis and may help in the regeneration of seminiferous tubules. Addyzoa contains *Aswagandha* and *Kapikachu* which improves the motility and penetration by restoring the proper prooxidant : antioxidant balance[7].

Phalasarpis is a *Ghritha yoga* indicated in *Sukla dosha, pumsavana* and is *Ayushyam*, *Pushtikam* and *Dhanyam*[8]. This is indicated in male and female infertility. The individual drug in the *Yogam* has antioxidant property, with predominant *Madhura rasa* followed by *Katu, Tiktha, Kashaya* and *Amla rasa*. The *Yogam* has *Kaphavatahara* property and *Ushna veerya* which helps in improving the motility and viability of sperms. *Ghritha* as such is very much beneficial in increasing sperm count and quality, *Ghritha ksheera* is particularly indicated as *Pathya* in *Sukla doshas*.

Profert M capsule has antioxidant and immunomodulatory properties which improves blood flow to the sex organs and increases the sperm quality and motility. *Ashwagandha*, *Musali*, *Kapikachu*, *Sudha silajathu* present in this have aphrodisiac, rejuvenating and antiageing properties.

Males are found to be solely responsible for 20-30% of infertility cases but contribute to 50% of overall cases. Infertility is a condition characterized by the failure to achieve a clinical pregnancy even after 12 months of regular and unprotected sexual intercourse. Its prevalence among reproductive-aged couples is evaluated worldwide as between 8 and 12%. Semen decline that has been observed over the years, endocrine disrupting chemicals and consanguinity are other factors that may be involved[9]. The causes of male subfertility differs, but it includes factors related to congenital, acquired, or idiopathic that can diminish the spermatogenesis. Many health conditions can affect male fertility, which underscores the need for a thorough evaluation of patients to identify treatable or reversible lifestyle factors or medical conditions[10].

CONCLUSION

Oligoasthenozoospermia is the condition which is the primary cause of male infertility where there is deceased sperm count and diminished sperm motility. In brief about half of all the infertility cases can be attributed to the male factors. Oligoasthenozo-ospermia, correlated as *Sukrakshaya* condition in our classics can be treated in Ayurveda based on the *Dosha dushti lakshanas*. *Sodhana* (purificatory therapy) followed by *Samana chikitsa* along with modification in

diet and lifestyles can offer promising results in Ayurveda which is evident from this case report.

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