

KSHEENA SHUKRA (OLIGOSPERMIA): A REVIEW**¹*Dr. Ramdas G. Tarpewad and ²Dr. Hemalata R. Jalgaonkar**¹PG Scholar, Ashtang Ayurved Mahavidyala, Pune.²H.O.D (Prasuti and Streerog Dept.), Ashtang Ayurved Mahavidyalaya, Pune.Article Received on
13 Sept. 2019,Revised on 04 Oct. 2019,
Accepted on 25 Oct. 2019

DOI: 10.20959/wjpr201912-16139

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ABSTRACT

Ritu, Kshetra, Ambu and Beeja are the essential causes for the formation of Garbha, among these Male Beeja (Sperm) plays an important role in conception, any vitiation in this may lead to male infertility. Infertility is a problem of global proportions, affecting on an average 8-12% male population worldwide. Various biological and environmental factors affect the sperm count in males. Low sperm count (Oligozoospermia) is one of the main causes of male infertility which is correlated with Kshina Shukra. Kshina Shukra is a condition

in which there is qualitative and quantitative decrease of Shukra. Infertility is the inability of a sexually active, noncontracepting couple to achieve spontaneous pregnancy in 1 year. Low sperm count (oligozoospermia) is one of the main causes of male infertility and is correlated with Ksheena Shukra (oligozoospermia).

KEYWORDS: Infertility, oligospermia, ksheena shukra.**INTRODUCTION**

Dharma, Artha, Kama and Moksha are the four tenets in life. Without the achievement of these, the aims of life are not achieved. A part from achieving these is producing offsprings. Ritu, ksheetra, Ambu, Beeja are the essential causes for the formation of Garbha, among these Male Beeja (Sperm) plays an important role in conception any, vitiation in this may lead to male infertility. Infertility is a social stigma. It is a problem of global proportions, affecting on an average 8-12% worldwide. When infertility is taken as a whole, problems due to the male factors account to 40%. A number of factors involved in the genesis of this condition include age, infectious agents (such as Chlamydia trachomatis), along with testicular factors, mitochondrial changes, environmental pollutants and subtle hormonal changes. Excessive intake of alcohol may also decrease the semen quantity. Ksheena shukra

is a condition in which there is qualitative and quantitative decrease of shukra leading to infertility. Ksheena shukra in some conditions can be correlated with Oligospermia which is characterized by the lowered sperm count less than 20 million/ml. Ayurveda, the holistic medicine describes potent drugs and efficient therapeutic procedures to face the problem of infertility.

Ayurveda is a science of life, which emphasizes on two main objectives of maintenance and promotion of positive health and management of the diseases. Dietary habits and lifestyle modalities plays a major role in the causation of any disease. Dinacharya, Ritucharya, Aachara Rasayana, Sadavritta. With the onset of time most of the dietary habits like Virudhahara, Virudhvihara Dagdahara, chinta, shooka, krodha, sedentary life style where people prefer to take outside food more often because of busy work schedules, have made humans more vulnerable to many diseases than ever before. Male having pathological semen reports include low sperm count, poor sperm motility, low sperm volume, low or absence of fructose and sperm functional tests. The incidence of male infertility may vary from place to place and nation to nation, however magnitude of the problems remains the same. Ksheena shukra is a disease of shukra in which both quality and quantity of shukra may be altered, when in the body Tridosha is vitiated mainly vata dosha and pitta dosha then they derange the normal quality & quantity of shukradhatu. As a result of the vitiation of vata and pitta dosha as the channels which carry shukra (shukravahasrotas) undergoes dushti, which further incapacitates the individual to conceive leading to infertility. Ksheena shukra as per ayurvedic text are - Daurbalya (weakness), Mukhshosha (dryness of mouth), Pandutva (pallor), Sadana (malaise), Shrama (dyspnea on exertion), Klaibya (impotence) and Shukra avisarga (unable to ejaculate). Ksheena shukra can be co-related with oligospermia. Oligospermia is characterized by the lowered sperm count which is less than 20 million/ml from the normal range 20-160 million/ml. The corresponding decrease in the sperm count is responsible for the inability for conception. Shukra is the Param Sara of Ahara Rasa. The function attributed to ShukraDhatu as well as the semen is Garbhotpadana. Vajikarana is such specialized branch of Ayurveda which involves a detailed description on various abnormalities of Shukra and their modes of treatment. It also includes details of shukra janana, shukra praseka and various aspects of Shukra in a Swastha. Many yogas have been explained which vouch on curing Shukra dosha and improving the quality & quantity of the shukra. Also, in the present era, due to the change in life style, hectic activities, busy life schedules and lack of time, many a time's patients though fit are not ready to undergo Shodhana procedures. Keeping

this in mind, an attempt was made to understand the concept of Ksheena Shukra (Oligospermia) and its samprapti vighatana by Ashwagandhadi lehyam on seminal parameters. As the drug is having balya, brumhana, shukrala, vajikarana and rasayana properties and are used with ksheera as Sahapana which is mentioned as sadhya Shukra karaka.

DISEASE REVIEW AS PER AYURVEDA

The term Ksheena Shukra comprises of two words Ksheena and Shukra. The term Ksheena is derived from “Kshi + Kla”. This has got the meanings like Sukshma, Abala, Durbala, Kshama and Tanu. The word Shukra is derived from the Sanskrit root “Suc-Klede” meaning purity. Literally, Shukra means the one which is in pure state, bright and white.^[1]

Nirukti Ksheena Shukra

Ksheena Shukra is a condition in which there is swamanaan alpeebhuta shukra.² The condition in which the quantity of Shukra is alpa is termed as Ksheena Shukra.

Paryaya of Shukra

Paryaya of Shukra mentioned in Amarakosha.

- Paurusam: the character which is inherent in Purusa
- Pumsatva: the fertility factor essential for conception
- Ananda Samudbhava: this indicates the matter which is ejaculated at the time of orgasm or extreme pleasure
- Majja Samudbhava: the substance which is formed out of Majja Dhatu
- Veerya: the factor responsible for any action
- Retas: the matter which is ejaculated at the time of sexual intercourse
- Tejah: that which shines
- Beejam: that which has the capacity to give rise an offspring

Paryaya of Ksheena Shukra

Acharya Sushruta and Vagbhata have used the term “Ksheena Retas” as a synonym of Ksheena Shukra.

Nidana of Ksheena Shukra

Sushruta and Vagbhata explain that Vata and Pitta are the two doshas involved in the causation of Ksheena Shukra. Vata and Pitta Prakopaka Hetus, Samanya Dhatu kshaya

Karana and Shukra Kshaya Karana are explained in various classics which are responsible for Ksheena Shukra.

- Ativyavaya and Ativyaayama – excessive sexual intercourse and exercise
- Asatmya Ahara sevana – intake of incompatible food
- Akala Maithuna – untimely sexual intercourse
- Ayoni Maithuna – coitus through marga other than yoni
- Amaithuna – No sexual intercourse for long time
- Intake of food which is having more Tikta, Kashaya, Lavana and Amla Rasa, Ruksha Guna and Ushna Veerya
- Narinaam Arasajnanam - Sexual intercourse with a woman who has no interest for sex
- Excessive Chinta (thinking) and Shoka (excessive grief).
- Atiyoga of Sastra, Kshara and Agni Karma
- Bhaya (Fear), Krodha (Anger) and Abhichara Karma (black magic)
- Vyadhi Karshana (debility due to diseases)
- Vegadharana (Suppression of urges)
- Kshata – injury (Injury to Vitapa Marma causes Alpa Shukrata).

SAMPRAPTI GHATAKA

Dosha: Tridosha especially Vata, Pitta

Dhatu: Rasa, Shukra

Srotas: Rasavaha, Shukravaha

Agni: Jataragni, Dhatwagni

Ama: Jataragnimandyajanya, Datwagnimandyajanya

Srotodushti: Sanga

Udbhavasthana: Amashaya

Sanchara Sthana: Rasayani

Adhishtana: Medra, Vrishana

Vyaktha Sthana: Shukra, Vrishana, Medra

Rogamarga: Madhyama

Vyadhiswabhabha: Chirakari

DISEASE REVIEW AS PER MODERN SCIENCE

Definition of The Term Oligospermia

According to Butterworth's Medical Dictionary, Oligospermia is defined as a condition in which too few spermatozoa are present in the semen. Whereas WHO 2010 defines Oligospermia as the condition where the sperm concentration is less than 15 mil/ml of semen.

Synonyms

1. Oligospermia
2. Azoospermia

Causes of Oligospermia

- Drugs, alcohol, smoking
- Strenuous riding (bicycle riding, horseback riding)
- Medications, including androgens
- Obstruction in Vas deferens
- Absence of Vas deferens, often related to genetic markers of cystic fibrosis
- Infections – Eg. Prostatitis
- Ejaculatory duct obstruction
- Thermal causes

Diagnosis of Oligospermia

- Sexual health parameters: Loss of libido, Erectile dysfunction, Premature ejaculation.
- Semen analysis i.e. Total sperm count, Liquefaction Time, Volume, Viscosity, pH, Sperm Count, Sperm Motility rate.

Pathya and Apathya In Ksheena Shukra

According to Charaka, Pathya for the Ksheena Shukra are the Sarpi Ksheera and Madhura Aahar ras aushadhas. Kashyapa and Ashtanga Sangraha also explained same, whereas Kashyapa added use of Avidahi Dravyas. Qualities like Katu, Theekshna, Vidahi and Tikta Dravyas are Apathya for Ksheena Shukra.

PATHYA IN KSHEENA SHUKRA

Aahara

Kshira, Dadhi, Ghrita, Taila, Vasa, Majja, Chataka mansarasa, Ikshu, Sharkara, Madhu, Raktashali, Maasha, Godhuma, Khajura, Amraphala, Priyala, Rasala.

Vihara

Abhyanga, Snanna, Maala Dharana, Padatrana Dharana

Aushadha

Ardra, Ashvagandha, Shatavari, Musali, Lasuna, Bala, Goksura, Atmagupta, Jivanti, Shringataka.

APATHYA IN KSHEENA SHUKRA**Aahara**

Atikatu Atitikta Atilavana Amla Rasasevanam, Shaaka, Mastu, Takra, Sarshapa Taila.

Vihara

Atimaithuna, Amaithuna, Akalmaithuna, Ayonimaithuna, Chinta, Atisaahasa, Shukra vega Dharana.

Aushadha

Dhanyaka, Kulathya, Atasi, Maricha, Yavani, Chanaka, Katabhi.

Diet in Oligospermia

Foods High in Vit A, High in Zinc, High in Vit B, High in Vit C, High in Vit E, High in Selenium, High in Omega -3 Fatty Acids are recommended in Oligospermia.

CONCLUSION

Ksheena shukra (Oligospermia) is burning issue in today's practice so its main cause deficiency secretion of sex hormone should be considered as key factor in treatment.

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