

VAJIKARAN IN AYURVEDA: A TRADITIONAL TO SEXUAL HEALTH AND ITS MODERN INTERPRETATIONS**Dr. Tejbeer Singh^{*1}, Dr. Parminder Kumar Moudgil²**

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INTRODUCTION

Vajikarana is one of the eight specialities of Ashtang Ayurveda dealing with the management of pathophysiology of spermatogenesis and healthy sexual potentiation. This aphrodisiac therapy is advocated for various sexual and reproductive disease ie, Klaibya or Erectile dysfunction, Bandhyata or infertility, Shukraghata vata or azospermia and premature ejaculation. Vrishya, a synonym of vajikara, is the technical term indicating spermatogenic and aphrodisiac effect of a dravya (foods, herbs, spices and medicinal plants) including audio- visual, socio – religious effects. Currently, the importance of this branch has increased manifold, as more and more people are reporting to clinics with various disorders related to seminal parameters and sexual dysfunction.

KEYWORDS: Vajikaran, klaibya, bandhyata, shukraghata, vrishya.

Defination of Vajikarna^[1]

येन नारीषु सामर्थ्यं वाजीवल्लभते नरः।

व्रजेच्चाभ्यधिकं येन वाजीकरणमेव तत्॥५१॥

Vajikarna (aphrodisiac treatment) is that which produces lineage of progeny, quick sexual stimulation, enables one to perform sexual act with the women uninterruptedly and

vigorously like a horse, makes one charming for the women, promotes corpulence, and infallible and indestructible semen even in the old person, renders one great having a number of off-springs like a sacred tree branched profusely and commanding respect and popularity in the society. By this one attains eternity based on filial tradition here and hereafter along with fame, fortune, strength and corpulence.

MODERN PROSPECTIVE

Sexual arousal in a person is dependent upon degree of stimulation, whether psychic or physical. Erection is caused by parasympathetic impulses that pass from the sacral portion of the spinal cord through the pelvic nerves. These parasympathetic nerve fibres, in contrast to most other parasympathetic fibres, are believed to release NO (nitric oxide) and/or vasoactive intestinal peptide in addition to acetylcholine. The nitric oxide especially relaxes the arteries of the penis, as well as relaxes the trabecular meshwork of smooth muscle fibres in the erectile tissue of the corpora cavernosa and corpus spongiosum.^[2] (Guyton & Hall. 2006)^[24] Many medicinal herbs and drugs derived from herbs have been shown to have effects on the NO signaling pathway. For example, the saponins from ginseng (ginsenosides) have been shown to relax blood vessels (probably contributing to the antifatigue and blood pressure-lowering effects of ginseng) and corpus cavernosum (thus, for the treatment of men suffering from erectile dysfunction.^[3] (Francis 1 Achike & Chiu-Yin Kwan. 2003).^[25]

Apart from this mechanism another set of neurotransmitters including norepinephrine, dopamine, serotonin, acetylcholine, and histamine are supposed to work together for increasing sexual arousal. Of these set of neurotransmitters involved in the neurochemical control of sexual behavior, serotonin plays an inhibitory role and dopamine an excitatory role. Dopamine plays a crucial role in the central control of sexual behavior in males.^[4] (Plaus et al. 1990).

LITERARY REVIEW

Shukra Dhatus

Shukra vyapakatva

The seventh one is Sukradhara (semen-supporting) which pervades the whole body of all persons. As ghee in milk and juice in sugarcane are invisibly pervasive, semen should also be known so in the entire body of persons.

The example of milk fits into those who have profuse semen discharged even on mild coitus whereas that of sugarcane applies to those who have deficient semen and discharge it after much exertion.

Shuddha Shukra^[5]

स्फटिकाभं द्रवं स्निग्धं मधुरं मधुगन्धि च ॥११॥

शुक्रमिच्छन्ति, केचित्तु तैलक्षौद्रनिभं तथा ॥१२॥

19The normal semen is like quartz, liquid, unctuous, sweet. Sweet-smelting like honey while some mention it as resembling oil and honey.

Shukra Vruddhi Lakshan

1. Desire for sexual activities
2. Shukrashmari

Shukra Kshaya

1. Dourbalya
2. Dryness of mouth.
3. Pallor Panduta)
4. Fatigue
5. Klaibya (Impotency)
6. No hukas Pravrutti

Shukra Dushti

1. Phenila
2. Tanu
3. Rooksha
4. Vivarna
5. Puti
6. Pichilla
7. Anyadhatu upasamsrstam
8. Avasadi

Shukra Dhosa

Men with semen being vitiated by vata, pitta and kapha, having cadaveric smell, knotty, like putrid pus, deficiency and faeces are not capable of reproduction.

Shukravaha Srotas

Shukravaha Srotas are those channels that carry shukra dhatu all over the body.

Shukravaha Srotas Dusiti Hetu

1. Akala yonigaman.
2. Suppression of shukravega
3. Excessive sexual activities (indulgence).
4. Injury due to Shastra, Kshara, Agni.

Shukravaha Srotas Dushti Lakshan.

1. Klaibya
2. Loss of libido,
3. Child born as diseased, Napunsaka, Kuroopa and Alpayu
4. Infertility
5. Abortion or miscarriages

Causes of diminished male sexual health

1. Erectile dysfunction
2. Male infertility
3. Azoospermia
4. Premature ejaculation
5. Psychological factors

Erectile Dysfunction (ED)

This is a common male sexual disorder with significant psychological, relational, and physiological implications. It is characterized by the consistent or recurrent inability to achieve or maintain an erection adequate for satisfactory sexual performance. As men age, the likelihood of developing ED increases, with estimates suggesting that nearly 50% of men aged 40 to 70 years, experience some degree of erectile difficulty^[6] (Feldman et al., 1994). While ED was historically regarded as a primarily psychological issue, contemporary

research highlights its strong association with systemic physical health conditions, especially cardiovascular and metabolic disorders.

Male infertility

It is defined as the inability of a couple to conceive after 12 months of regular, unprotected sexual intercourse. The World Health Organization (WHO) estimates that 10–15% of couples worldwide are affected by infertility (WHO, 2020). Infertility may result from abnormalities in the male partner, female partner, or both, and may also be unexplained.

Premature Ejaculation (PE)

This is one of the most common forms of male sexual dysfunction and significantly affects the quality of life, emotional well-being, and sexual satisfaction of affected individuals and their partners. Though it has been recognized for centuries, its exact definition, causes, and treatment modalities have evolved considerably over time.

Azoospermia

This is a significant cause of male infertility and refers to the complete absence of spermatozoa in the ejaculate. It is a challenging clinical condition with implications for fertility, emotional well-being, and marital satisfaction. It affects approximately 1% of all men and 10–15% of infertile men^[7] (Taneja N., 2013). The diagnosis of azoospermia often raises concerns of irreversible infertility, but with recent advances in microsurgery and assisted reproductive techniques (ART), many patients with azoospermia can now father biological children.

Psychological factors

(a) Performance Anxiety

Anxiety related to sexual performance is a common trigger of ED, particularly in younger men. The fear of failure can inhibit the erection reflex, perpetuating the dysfunction.

(b) Depression and Mood Disorders

Depression reduces sexual desire and disrupts the brain's neurotransmitter systems involved in arousal and erection. Antidepressant medications may further compound the problem.

(c) Stress

Chronic stress elevates cortisol levels, negatively affecting sexual arousal and vascular response.

(d) Relationship Issues

Marital conflict, lack of intimacy, or unresolved interpersonal tensions can affect sexual function.

(e) Psychosexual Trauma

A history of abuse or traumatic sexual experiences can result in long-standing psychological inhibition toward sexual activity.

DISCUSSION

Seven dhatus are present in the body. The seven dhatus are the responsible for the development of our body. Shukra is the last dhatu also confers, strength, wisdom and power of the body. In the text of ayurveda the concept of vajikarana is described which offers a solution to minimize the shukra defects and to ensure a healthy progeny. Vajikaran is that which produces lineage of progeny, quick sexual act with the women uninterruptedly and vigorously like a horse, makes one charming for the women promotes corpulence, and infallible and indestructible semen even in the old person, renders one great having a number of off-spring like a sacred tree branched profusely and commanding respect and popularity in the society.

CONCLUSION

Vajikaran therapy improves the reproductive organs and vitalizes reproductive tissue increasing semen motility in man and making egg more viable for conception in women. It is symbol of sexual potency and performance.

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