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Case Study

EFFECT OF KAPIKACCHU CHURNA AND STHIRADIPANCHAMOOLA YAPANA BASTI KARMA IN THE MANAGEMENT OF KSHEENASHUKRATA W.S.R. TO OLIGOSPERMIA: A CASE STUDY

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KEYWORDS: Oligospermia, Ksheenashukrata, Kapikachhu churna, Sthiradipanchamoola Yapana Basti, Kala Basti karma, Semen analysis.

ABSTRACT

Ayurveda is a science of life and it has taken the foremost place in the management of life style disorder. Oligospermia refers to semen with low concentration of sperm and is a common finding in male infertility. Often semen with a decreased sperm concentration may also show significant abnormalities in sperm morphology and motility. In general Male infertility factors are suspected of contributing to infertility in almost 40% of infertile couples,A male patient aged 25 years was presented with desire to get child and other associated symptoms were *Daurbalya* (weakness),*Timira Darshana*(black out), *Mukha Shosa* (dryness of mouth), *Panduta* (paleness), *Shrama* (Fatigue or Tiredness), *Aharsana* (weak penile erection), *Maithune Ashakti* (Problematic or not satisfactory coitus), *Rati Anabhimukhata* (Lack of sexual desire), & *Medhra-Vrishana Vedana* (Pain in scrotum and penis).

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On basis of symptoms and semen analysis he was diagnosed as case of *Ksheenashukra* (oligospermia). The patient was managed with *Kapikacchu churna* and *Sthiradipanchamoola Yapana Basti Kala Basti karma*. Result were assessed by grading for sexual parameters like sexual desire, erection, ejaculation and symptoms of *Kshinashukra*. Seminal Parameters was done by Semen Analysis. *Kapikacchu churna* and *Basti* treatment gave significant improvement in all the symptoms of *Kshinashukra* and seminal parameters like sperm count, motility.

INTRODUCTION

The *Pushartha Chatustaya*-fourfold factors of successful life like *Dharma*, *Artha*, *Kama* and *Moksha* find mentioned in ancient literatures^[1]. Kama is mentioned as the most important dimension of life responsible for continuation of progeny. *Vajikarana*^[2], i.e. science of aphrodisiac one of the eight branches of Ayurveda specialties, deals in detail with the reproductive health.

In present era, modernization is affecting all aspects of human life in the form of diet, diurnal, climatic change and harmful irradiations contributing a lot in producing *Shukra Dusti* (poor quality semen) as a result, a vast populace is being reported suffering from reproductive dysfunctions in both the sexes.

As per Ayurveda classics *Garbhotpadan* is a vital function of *Shukra Dhatu*^[3]. *Acharya Sushrut* has described characteristic features of fertile *Shukra Dhatu*, i.e. *Shukra* should be abundant in quantity, thick and viscous in consistency, sweet in taste, honey like odor, *Guru* (heavy) in *Guna* and white in color^[4].

Any abnormality in *Shukra Dhatu* ultimately results in failure of conception. As per modern medical science, the most common abnormalities of sperm are Oligospermia (low sperm number), asthenospermia (reduced motility of sperm) & teratospermia (abnormal morphology of sperm) among which Oligospermia is one of the leading causes of infertility in males. It is defined as the less sperm in ejaculated semen (less than 20 million per milliliter of semen)^[5].Even in Ayurveda literature *Ksheenashukrata* has been described as one of the most important cause of infertility in man^[6].Keeping this point in mind a case study was done on Oligospermia (*Ksheenshukrata*) discussed here.

Case Report

A 25 year old patient, registration no.-42723, residing in Jaipur, was visited *Kayachikitsa* OPD of *Arogyashala*, National Institute of Ayurveda, Jaipur on 15th September 2015, presented with chief complaints of desire to get child and Other associated symptoms were *Daurbalya* (weakness), *Timira Darshana* (black out), *Mukha Shosa* (dryness of mouth), *Panduta* (paleness), *Shrama* (Fatigue or Tiredness), *Aharsana* (weak penil erection), *Maithune Ashakti* (Problematic or not satisfactory coitus), *Rati Anabhimukhata* (Lack of sexual desire), & *Medhra-Vrishana Vedana* (Pain in scrotum and penis).All these symptoms started since last 2years. In this period patient consulted many Allopathic & Ayurveda physicians and got some relief in associated complaints, but not satisfied. On the basis of symptoms Prashant Sasane, Ram Kishor Joshi. Kapikacchu Churna and Sthiradipanchamoola Yapana Basti Karma in the Management of Ksheenashukrata w.s.r. to Oligospermia

and semen analysis patient diagnosed as case of Oligospermia and *Ksheenashukra* according to Ayurvedic view.

General Examination: Pallor/ Icterus/ Cyanosis /Clubbing – absent, Lymphadenopathy- non palpable, Edema –absent, BP- fluctuating but most of the normal blood pressure observed 110/80 mm of Hg. Pulse – 84/min regular.

Systemic Examination: CVS – no abnormality detected in cardiovascular system, RS- no abnormality, P/A-soft, non- tender, mild hepato-spleenomegally on palpation, CNS- Higher mental function were intact.

History of past illness: No h/o Mumps/ HTN/ TB/ DM /Br.Asthma/ Jaundice/Typhoid fever/Allergy to specific allergen, No h/o any surgery.

Personal history: Appetite – Reduced, Addiction – Alcohol twice in a week, Bowel habit – constipated, 1 times/day Diet – Mixed, consist of meat twice in a week, Micturition – Normal Sleep –7-8 hours/day.

Astavidha Pareeksha: Nadi-84/min, Mootra- Prakruta, Mala- Saam, Jihwa- Coated, Drik- Prakruta, Shabda-Prakruta, Sparsha - Samanya, Akruti –Prakruta

Dashavidha Rogi Pariksha: Prakruti -Vata pittaja, Vikruti -Dosha-Vatapittaja, Dushya- Shukra, Sara/Praman/Samhanana/Saatmya/Satva – Madyama.

Local examination: prepuce skin normal with both testis were well placed distended, proper hygiene maintained, no varicocele, no edema, no redness/ scar mark.

Table 1: Semen analysis before treatment on dated -12 Sept 2015

	Volume –	3 ml	
•	Appearance	-	Opaque white
•	рН	-	7.5
•	Liquefaction tin	me -	30 min
	Total sperm c	ount -	20 million/ml
•	Rapid liner progressive(RLP) – 00% Grade 4		(RLP) – 00% Grade 4
•	Sluggish liner progress.(SLP) – 10% Grade 3		
•	Non Progressive (NP) - 30% Grade 2		
	Immotile (IMM) – 60% Grade 1		
•	Normal form	- 50%	
•	Head abnormality - 15%		
	Mid piece abno	ormality -	- 20%
٠	Tail abnormality - 15%		
	Exudate /HPF - 12-15		

Table 2: Assessment criteria

Sr.N	Symptoms	Grade
1.	Daurbalya (weakness)	 0 = No weakness and he can perform routine work effectively 1 = Slight weakness but he can do routine work normally 2 = Slight weakness and feel difficulty in performing routine work 3 = Marked weakness and can't perform his routine work 4 = Marked weakness and can't do any type of work
2.	<i>Timira Darshana</i> (black out)	 0 = No black outs 1 = Occasional black outs for short duration 2 = Occasional black outs for small duration leading to fainting 3 = Frequent black outs for small duration leading to fainting 4 = Frequent black outs for longer duration & leading to fainting
3.	<i>Mukha Shosa</i> (dryness of mouth)	 0 = Feeling of thirst 7-9 times/24 hours, either/or Intake of water 5-7 times/24 hours with quantity 1.5-2 liters/24 hours 1 = Feeling of thirst 9-11 times/24 hours, either/or Intake of water 7-9 times/24 hours with quantity 2-2.5 liters/24 hours 2 = Feeling of thirst 11-13 times/24 hours, either/or Intake of water 9-11 times/24 hours with quantity 2.5-3 liters/24 hours 3 = Feeling of thirst 13-15 times/24 hours, either/or Intake of water 11-13

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		times/24 hours with quantity 3-3.5 liters/24 hours 4 = Feeling of thirst > 15 times/24 hours, either/or Intake of water > 13 times/24 hours with quantity > 3.5 liters/24 hours
4.	Panduta (paleness)	0 = Absent 1 = Present in palpebral conjunctiva only 2 = Also presenting in nails, tongue and lips 3 = Also presenting in palms and face 4 = Present on whole body
5.	<i>Shrama</i> (Fatigue or Tiredness)	 0 = No tiredness with any type of exertion 1 = Tiredness only with excessive exertion 2 = Tiredness with moderate exertion 3 = Tiredness with mild exertion 4 = Tiredness even without any exertion
6.	Aharsana (weak penil erection)	 0 =Erection whenever desired/ normal. 1 = Erection with occasional failure 2 = Initial difficulty but able to penetrate. 3 = Initial difficulty but unable to penetrate 4 = No erection by any method
7.	<i>Maithune Ashakti</i> (Problematic or not satisfactory coitus)	 0 = No problem in coitus 1 = Able to perform satisfactory coitus once in a day 2 = Able to perform satisfactory coitus at the interval of 1 week 3 = Able to perform satisfactory coitus at the interval of 2 week 4 = Not able to perform a satisfactory coitus
8.	<i>Rati Anabhimukhata</i> (Lack of sexual desire)	 0 = Normal sexual desire 1 = Lack of sexual desire 2 = Sexual desire only on demand of partner 3 = No sexual desire at all 4 = Anti-sexual desire or desire against the sexual activity
9.	<i>Medhra-Vrishana</i> <i>Vedana</i> (Pain in scrotum and penis)	 0 = No pain 1 = Occasional mild pain during coitus and lasts after coitus 2 = Frequent mild pain during coitus and lasts after coitus 3 = Persistent mild pain during coitus and long lasting 4 = Persistent severe pain during coitus and long lasting

Table 3: Treatment procedure

	1
1] Kapikacchu churna	Dose: 6 grams per oral twice a day, empty stomach
	Anupana: 200 ml of cow whole milk.
	Duration: 30 days
2] Sthiradipanchamoola Yapana Basti (Kala Basti karm)	Dose: 350 ml daily
	Duration : 15 days

OBSEVATION & RESULT

Excellent relief in all symptoms like *Daurbalya* (weakness), *Timira Darshana* (black out), *Mukha Shosa* (dryness of mouth), *Panduta* (paleness), *Shrama* (Fatigue or Tiredness), *Aharsana* (weak penil erection), *Maithune Ashakti* (Problematic or not satisfactory coitus), *Rati Anabhimukhata* (Lack of sexual desire), *Medhra-Vrishana Vedana* (Pain in scrotum and penis).

_	Tab	le no.4 : Showing result		
S.No	Symptoms	Score Before Treatment	Score After Treatment	Percentage of Result
1.	Daurbalya (weakness)	3	0	100%

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2.	Timira Darshana (black out)	2	0	100%
З.	Mukha Shosa (dryness of mouth)	4	1	75%
4.	Panduta (palness)	3	1	50 %
5.	Shrama (Fatigue or Tiredness)	4	1	75%
6.	Aharsan (weak penil erection)	2	0	100%
7.	<i>Maithune Ashakti</i> (Problematic or not satisfactory coitus)	4	0	100 %
8.	Rati Anabhimukhata (Lack of sexual desire)	2	0	100%
9.	<i>Medhra-Vrishana Vedana</i> (Pain in scrotum and penis)	3	0	100%

Table 5: Semen analysis during treatment on dated -5th Octomber2015

•	Volume –	5 ml			
•	Appearance	-	Opaque white		
•	рН	-	8		
•	Liquefaction tin	me -	within 30 min		
•	Total sperm c	ount -	40 million/ml		
•	Rapid liner pro	gressive(RLP) – 55%		
•	Sluggish liner p	orogress.(SLP) – 40%		
	Non Progressiv	ve (NP)	- 30%		
•	Immotile (IMM) – 05%			
•	Normal form	- 70%			
•	Head abnorma	lity - 15%			
•	Mid piece abnormality - 20%				
•	Tail abnormality - 05%				
•	Exudate /HPF -	- 10-15			
	Table 6: Semen analysis after completion of treatment on dated -20th November 2015				
•	Volume –	5 ml			
•	Appearance	-	Opaque white		
•	рН	-	8		
•	Liquefaction tir	ne -	30 min		
•	Total sperm count - 55 million/ml				
-	Rapid liner progressive(RLP) – 30% Grade 4				
•	Sluggish liner progress.(SLP) – 25% Grade 3				
•	Non Progressive (NP) - 30% Grade 2				
	Immotile (IMM) – 15% Grade 1				
•	minotile (imm	J - 1370 (
•	Normal form	- 70%			

- Mid piece abnormality 05%
- Tail abnormality 15%
- Exudate /HPF 6 8

DISCUSSION

Modernization is affecting all aspects of human life in the form of diet, diurnal, climatic change and

harmful irradiations contributing a lot in producing *Shukra Dusti* (poor quality semen) as a result, a vast

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Oligozoospermia refers to semen with low concentration of sperm and is a common finding in male infertility. Often semen with a decreased sperm concentration may also show significant abnormalities in sperm morphology and motility. In general Male infertility factors are suspected of contributing to infertility in almost 40% of infertile couples.

As per Ayurveda classics *Garbhotpadan* is a vital function of *Shukra Dhatu* (Semen) and *Ksheenashukrata* has been described as one of the most important cause of infertility in man.

Discussion of Kapikacchu Churna^[7]

Kapikacchu Churna having Snigdha Guna, Sheeta Virya, & Madhura Vipaka i.e., Vatapittahara, Balya, Brimhana, Vrishya.

As per Samanya Vishesha theory of Ayurveda it beneficial in the treatment of Ksheenashukrata. Kapikacchu is Vatapittahara, Balya, Brimhana, Vrishya, Kaphapitta-arshahara and Vajikarana. It improves vigour and vitality. It increases stamina and libido and acts as a restorative nutrient for the nervous system by supporting healthy production of the sex hormones. Kapikacchu increases the population of sperm; hence it improve the sperm quality and quantity and proves that the Vajikarana drug in male infertility especially in Oligospermia.

Discussion of Sthiradipanchamoola Yapana Basti^[8]

Basti is the one of the cleansing therapy. Basti is the best remedy for *Tridosha* treatment according to *Ayurvedic* classics. Basti karma is important treatment in Shukardosha by Charak's statement "Prashashtahashukradosheshubasti Karma Visheshatha"^[9].

In Ksheenashukra predominance of Vata and Pitta, which leads to the condition of Shukra Kshaya, Drugs used in Preparation of Sthiradipanchamoola Yapana Basti specially attributed with the property of Vrushata. Vata pitta shamaka, Rasavana, and Dipana, Srotoshodhana. So, Basti by its own potency is able to expel morbid *Doshas* and establishes the *Dhatushamyata*. Sthiradipanchamoola Yapana Basti contain Sthiradipanchamoola (Shalparni, Parshanparni Kantakari, Brihti Gokshur) Shashtika Shali Chawal, Godhuma, Masha, Ksheera (goat milk)., Hen egg, Madhu, Ghrita, Sharkra, Saindhava. Sauvarchala Lavana which having Vatapittaghna, Brihana, Vrishya, Balya properties.

CONCLUSION

 Sedentary lifestyle, stress, faulty dietary habits, intake of fast and junk food, addictions like Alcohol, Smoking, Tobacco and habits like Masturbation, increased attraction to internet and porn movies, watching erotic pictures etc. leads to marked rise in incidence of *Ksheena shukrata*.

- *Shukra Dhatu* has multi-functional identity, out of which it is essential for reproduction, better physical health & better sexual life.
- *Vitiated Vata and Pitta Dosha* are the main culprit of *Shukralpata* because of its causativity of quantitative and qualitative defect in seminal parameters.
- Oligospermia can be correlated with *Vataja Shukra Kshya*.
- Trial drug showing highly significant relief e in all symptoms and semen analysis parameters.
- *Kapikacchu churna & Sthiradipanchamoola Yapana Basti*are safe and effective in the management of *Ksheena shukrata* (Oligospermia).

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