CASE STUDY

Effect of Virechana in Oligo-Astheno-Teratozoospermia w.s.r. to Shukradushti

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ABSTRACT

Oligoasthenoteratozoospermia (OAT) is a condition that incorporates oligozoospermia (low number of sperm), asthenozoospermia (poor sperm development), and teratozoospermia (strange sperm shape). Semen can be corresponded to Shukra in Ayurveda and Oligoasthenozoospermia can be considered as a condition in which Shukradhatu is quantitatively and subjectively spoil down. Panchakarma treatments have been kept in incomparable worship by the traditional experts of Ayurveda in improving different assortments of Shukradushti. A male patient aged 28 years with UHID no. 226037 admitted in IPD of All India Institute of Ayurveda, New Delhi with chief complaints of reddish colored semen, acidity, generalized weakness, and early ejaculation. His semen analysis report showed semen color pink to reddish, total count 20 million/ml, 30% normal sperms, 40% actively motile and 40 % sluggish motile sperms and R.B.C. 20-25/HPF. Virechanakarma was carried out as per classic method. After treatment there was significant relief in subjective symptoms & semen analysis report was pretty satisfactory. This case study encourages us to step in further.

KEYWORDS

Oligoasthenoteratozoospermia, Virechana, Shukradushti

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INTRODUCTION

Oligoasthenoteratozoospermia (OAT) is characterized by semen with oligozoospermia (low number of sperm), asthenozoospermia (poor sperm movement), and teratozoospermia (abnormal sperm shape). OAT is the most common cause of male subfertility. In Ayurveda we can correlate semen with *shukra Dhatu*. *Shukra Dhatu* is meant for reproduction and also provides the qualities of *dhairya, chyavan, priti, dehabala, harsha*. Keeping in mind the clinical presentation Oligoasthenozoospermia, it can be correlated to *Shukradushti* in Ayurveda, a condition in which *shukradhatu* is quantitatively and qualitatively deteriorates. Based upon physico-chemical properties of *Shukra* eight types of *shukradushti* are mentioned in Ayurveda which are *phenil, tanu, rooksha, vivarna, pooti, pichhil, anyadhatuupamsrishta & avsadi*. Another one is based upon involvement of *Doshas* Vataj, Pittaj, Kaphaj, Shonitaj Kunapgandhi, Granthi, Puti-puya, Kshina Shukra, Mutrapurish Gandhi. *Panchakarma* therapies have been kept in supreme veneration by the classical authorities of Ayurveda in ameliorating different varieties of *shukradushti*. *Acharya Kashyapa* while describing the concept of *Virechana Palashruti* (effect of the procedure) mentions that that sperms become active or motile or increase due to *Virechana* effect. Hence in the present case study effect of *Virechana* was assessed in the management of *shukradushti* (oligoasthenoteratozoospermia).

CASE REPORT

A male patient aged 28 years with UHID no. 226037 was admitted in IPD of All India Institute of Ayurveda, New Delhi with chief complaint of failure to get child since 2 years and other associated complaints like reddish colored semen, *Dourblya* (generalized weakness), *MukhaShosa* (dryness of mouth), *Shrama* (Post act exhaustion), acidity, and early ejaculation. His semen analysis report showed semen color pink to reddish, total count 20 million/ml, 30% normal sperms, 40% actively motile and 40% sluggish motile sperms and R.B.C. 20-25/HPF. He has *vata-pittajaprakriti, madhyamavaya*, poor appetite, irregular *koshtha*, hard stools, and coated tongue. His urine color was yellowish. He had no any major illness in past. No any drug history or family history related this was found. The patient was diagnosed as oligoasthenoteratozoospermia and
shukradushti as per Ayurveda on the basis of semen analysis report.

**TREATMENT** Virechana karma was carried out as per classic methods.

Table 1 Treatment plan

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Medication</th>
<th>Dose</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deepana-Paachana</td>
<td>Avipatti Choorna⁷</td>
<td>3gm twice /day</td>
<td>1st to 4th day</td>
</tr>
<tr>
<td></td>
<td>Sudarshana Choorna⁸</td>
<td>3gm twice /day</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Saptasaram Kashya⁹</td>
<td>15 ml twice/day</td>
<td></td>
</tr>
<tr>
<td>AbhyantaraSnehpaana</td>
<td>Phalaghrita¹⁰</td>
<td>1st day – 40ml</td>
<td>5th to 10th day</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2nd day – 70ml</td>
<td>(6 days)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3rd day – 100ml</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>4th day – 130 ml</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>5th day – 160ml</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>6th day – 200ml</td>
<td></td>
</tr>
<tr>
<td>SarvangaAbhyanga</td>
<td>ShudhaBalaTaila¹¹</td>
<td>q.s.</td>
<td>11th to 14th day</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(4 days)</td>
</tr>
<tr>
<td>Bashpa Sveda</td>
<td>DashmoolaKwatha¹²</td>
<td>q.s.</td>
<td>11th to 14th day</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(4 days)</td>
</tr>
<tr>
<td>Virechana</td>
<td>TrivritAvleha¹³</td>
<td>70gm</td>
<td>14th day</td>
</tr>
<tr>
<td></td>
<td>TriphlaKwatha¹⁴</td>
<td>100ml</td>
<td></td>
</tr>
<tr>
<td></td>
<td>NimbamritadiErandaTaila¹⁵</td>
<td>30ml</td>
<td></td>
</tr>
</tbody>
</table>

Madhyamashuddhi observed with 18 vegas. No complications observed. After virechana, samsarjana karma was advised for 5 days.

After completion of Samsarjana Karma following drugs are prescribed:
1. AamlakiChoorna¹⁶ 3gm twice/day with water before food.
2. MulethiChoorna¹⁷ 3gm twice/day with water after food.
3. NaarsimhaRasayan¹⁸ 2tsf twice/day with milk after food.

The above regimen was continued for 2 months.

**OBSERVATION & RESULTS**

After treatment there was significant relief in subjective symptoms like weakness & acidity. Appetite became good & bowel became regular after the treatment. Improvement in sexual parameters like early ejaculation, sexual Desire, erection was also observed. Semen analysis report was done after two months of Virechana, report was quite satisfactory. Semen color became milky white which was pink to reddish before. Sperm count increased from 20 million/ml to 60 million/ml. There was 50% actively motile sperms after treatment which was 40% before treatment. Normal forms sperms were 50% after therapy which were 30% before treatment. Details are mentioned in image-1 & image-2.
DISCUSSION
In the present case patient had pink to reddish color semen. *Pitta Dosha* causes *Shukra Vivarnata* (Semen Color other than normal) according to Acharya Charaka. Patient had symptoms of *Ksheena Shukra* subjectively as well as objectively \(^{19}\). According to Acharya *Sushruta* *Ksheena Shukra* has *Vata* and *Pitta Dosha*\(^{20}\).*Chala Guna* is of *Vata Dosha*. So poor sperm movement or asthenozoospermia is thought to be due to *VataDosha*. Patient also had abnormal sperm shape or teratozoospermia. *Shodhana* is specially indicated in *Shukradushti*. Among five types of *Shodhana*, *Virechana* is specially indicated in *Retodosha* or *Shukradosha*\(^{21}\).*Virechana* is considered best in treating *Paittika* disorders, *Pitta* combined with *Kapha* & in *Pittanubandhi Vatavyadhi*. *Phalaghritais* used for *Abhyantara Snehapan* as it is indicated in *Shukradosha* by Acharya Vagbhatta. *Virechana* eliminates the *Srotorodha* and active transformation of *Dhatu* through *Dhatvagni Vyapara* and the most desirable *Shuddha Shukra* is procured. Acharya Kashyapa has glorified *Virechana Karma* and explained its importance in the management of infertility. *Virechana Karma* purifies the *sperma* (*Beeja*), thus making it effective in achieving fertilization.

CONCLUSION
On the basis of this single case study it can be concluded that *Panchakarma* treatments like *Virechana* gave satisfactory results in
all the symptoms of Kshina shukra. Significant improvement in sperm count & sperm motility and reduce in abnormal form of sperm proves the efficacy of Virechana Karma in Shukra dushti. Thus, the results obtained were highly promising, it shows that the role of Panchakarma in Shukradhusti is highly appreciable and gives hope for being researched further.
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