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Effect of Jeevantyaadi Yamak Anuvasana Basti and Kokilaksha Churna in tne Management of Oligospermia – a Case Study

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ABSTRACT :
Oligospermia is one of the most psychologically depressing disease which has a negative impact on patients personal and social life. Oligospermia is one of the major life style disorder affecting approximately 7% of the male population. It was reported that 40% of infertility cases are related to men of which Oligospermia is one of the cause. There is need to find out the treatment modality that could help in treatment of the disease.

The disease Oligospermia can be considered under the umbrella of Shukra Dushti and more precisely Kshina Shukra, it is a disease in which there is quantitative and qualitative detoriation of Shukra Dhatu viz spermatozoa however in Oligospermia there is only quantitative reduction of sperms.

The Jeevantyaadi Yamak Anuvasana Basti has been recommended with high emphasis in Ksheena Shukra. The contents of Basti having Vajikarana actions and properties hence, it has been selected for clinical evaluation in Oligospermia. The Kokilaksha mentioned in Ayurveda classics as having Vajikarana/Shukrala effects and has been clinically found to have spermatogenic effects. Therefore, it was thought desirable to assess clinical effects of Kokilaksha Churna in combination with the Jeevantyaadi Yamak Anuvasana Basti. By carrying out a clinical study.

KEYWORDS : Male infertility, Oligospermia, Kshina Shukra, Jeevantyaadi Yamak, Anuvasana Basti, Kokilaksha Churna, Vajikarana.

I. INTRODUCTION :

Oligospermia is defined as low sperm count per ml in semen ejaculate. WHO classified sperm count less than 15 million per ml semen as oligospermia, again there are different types of oligospermia i.e. mild, moderate and severe. In mild oligospermia sperm count 10-15 millions per ml ejaculate, in moderate condition 5-10 millions sperms per ml ejaculate semen, in severe condition 1-5 millions sperms are found in 1 ml ejaculate semen. Oligospermia is one of the most psychologically depressing disease which has a negative impact on patients personal and social life. Due to changing life style world is facing an enormous burden of life style disorders. Oligospermia is one of the major life style disorder affecting approximately 7% of the male population. It was reported that 40% of infertility cases are related to men of which Oligospermia is one of the cause. There is need to find out the treatment modality that could help in treatment of the disease. In modern medical science Oligospermia is treated with clomiphene citrate , Tamoxifen, Testosterone, vit E, vit C etc which are giving desired results but they are having many side effects like tenderness of pectoral muscle, irritability, acne and may also accelerate prostate cancer growth. So the world is looking towards Ayurved for better and safe management for the same.

The disease Oligospermia can be considered under the umbrella of Shukra Dushti and more precisely Kshina Shukra, it is a disease in which there is quantitative and qualitative detoriation of Shukra Dhatu viz spermatozoa however in Oligospermia there is only quantitative reduction of sperms.

The management principle in Ayurveda includes Basti therapy as main stay which facilitates and pecification of Doshas. Therfore in general all type of Shukra Doshas have to be managed by Basti Karma and with various herbo-mineral compound or single drug. In the present study Jeevantyaadi Yamak Anuvasana Basti is prepared with Ghrita and Taila which has been recommended with high emphasis in Shukra Dushti and Artava Dushti will be evaluated in condition of Oligospermia. The drug Kokilaskha is also described by Acharaya Charaka under Shukra

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Shodhan Mahakashaya with great emphasis in the treatment of Shukra Dushti. In Guduchyaadi Varga of Bhavprakash Nighantu, Kokilaksha is described for its Vrishya Karma.

II. MATERIAL AND METHOD :

Patient came to Pt. KLS Govt. Ayu. Hospital, Panchakarma OPD. After taking full history of patient he was advised to investigate for Semen Analysis. After the investigation and proper history taking of patient was diagnosed with Oligospermia (Ksheena Shukra) . Patient treated with Anuvasana Basti followed by Kokilaksha Churna for 45 days. After 45 days, he was investigated again for Semen Analysis.

Place of study : Pt. KLS Govt. Ayurved Hospital, Bhopal, Panchakarma OPD.
Name of patient : xxxx
Registration No. : 15535
Date of first visit : 07/06/21
Age : 32 years
Gender : Male
Wt : 70 kg
HT : 5.6 inches

III. CASE REPORT :

A 32 years old male patient with normal vitals reported for treatment of premature ejaculation, decreased sexual desire, general debility and fatigability since 4 years. Personal history revealed that he worked in educational institute as a peon, no habits of tobacco, drinking occasionally, no major stress. He was not having past medical history of tuberculosis, mumps, orchitis, hydrocele, trauma to gonadal part or history of any other long term debilitating disorder or life threatening emergency, he was not having history of previous surgical intervention like herniorrhaphy, vasectomy reconstruction and no history of consumption of gonadotoxic agent. Patient was married since 5 years and the couple want a child. His wife failed to conceive inspite unprotected frequent intercourse even during ovulation period since last 4 years. The woman was normal at the clinical and endocrinological examination. No other parameters except sperm count was altered in the male subject. He was advised semen analysis after proper abstinence. Before starting medicine semen examination report revealed very low sperm count 10 millions/ml out of which about 80% sperms were motile and 50% sperms were sluggishly motile while 20% were non-motile. 5% sperms were abnormal. Smear showed 2-3 pus cells. Semen analysis was performed before at baseline and after 45 days of treatment, which consisted of Anuvasana Basti with Jeevantyaadi Yamak and Kokilaksha Churna were used. After medicine semen examination report revealed sperm count 22 millions/ml out of which about 70% sperms were motile and 30% sperms were sluggishly motile while 30% were non-motile. 5% sperms were abnormal. Smear showed no pus cells.

STUDY DURATION : 45 days
INVASTIGATION : Detailed Semen Analysis

TREATMENT PLAN :

Table No. 01 : Procedure, drug and duration

PROCEDURE	DURATION	DRUG	DOSE	TIME
Basti Karma (Anuvasana Basti)	21 days	Jeevantyaadi Yamak	100ml.	After meal
Oral drug	45 days	Kokilaksha Churna	5gm BD with luke warm water	After meal

IV. RESULTS :

Table No. 02: Examination of seminal fluid

Tested On	**07/06/21**	**26/07/21**
Method	Masturbation	Masturbation
Abstinence	3 days	3 days
Physical Examination		
Amount	1.5 ml	1.5 ml
Appearance	Opaque white	Opaque white
Viscosity	Normal	Normal
Liquefication	20 min.	30 min.

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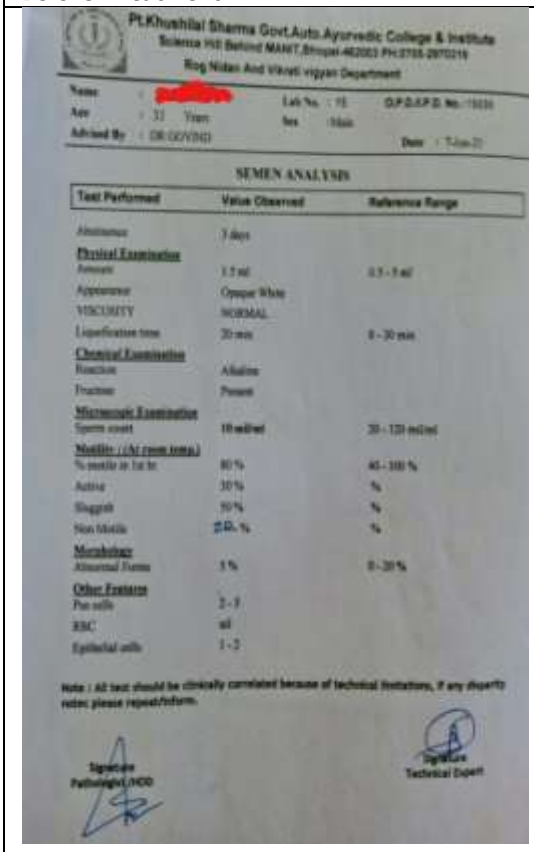
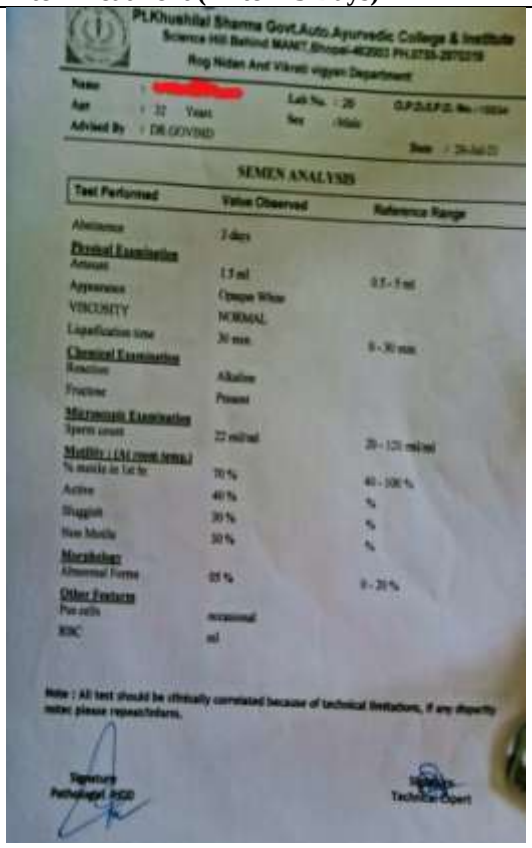
Chemical Examination		
Reaction	Alkaline	Alkaline
Fructose	Present	Present
Microscopic Examination		
Sperm Count **Motality (At room temp.)**	10 mil./ml.	22 mil./ml.
% motile in 1st hr.	80%	70%
Active	30%	40%
Sluggish	50%	30%
Non motile	20%	30%
Morphology		
Abnormal forms	5%	5%
Other features		
Pus cells	2-3	Occasional
RBC	NIL	NIL

Before Treatment	**After Treatment (After 45 Days)**
	

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V. DISCUSSION :

After understanding the Samprapti Ghataka of the disease, the selection of Anuvasana Basti with Jeevantyaadi Yamak has been done, because Yamak has the combination of two Snehas and in present study this Yamak was prepared with Ghrita and Taila. Ghrita has the virtue of Pitta-Anila Harama, Rasa, Shukra, Ojasa Vardhanama and Taila has best Vata Shamaka Properties so we had selected the particular Yamak in disease. It already understood that the Kshina Shukra is the Vata-Pitta Predominance disease and in the present study Jeevantyaadi Yamak is prepared with Ghrita, Taila, Kshira and known Vajikarana and Brimhana drugs i.e; Kevanch Beeja, Shatavari etc. which has been recommended with high emphasis in Shukra Dushti. So Acharya Charaka has praised Jeevantyaadi Yamak Anuvasana Basti as the Best enhancer of Shukra and Agni, best in Brimhana Karma, Mutra Roga Nashaka, Shukra Roga Nashaka and Vata-Pitta Nashaka. Acharya Kashyapa also elaborates the virtue of Anuvasana Basti, according to Acharya Kashyapa the Anuvasana Basti is enhancer of Agni and treats the infertility (Punsavashakti) as it bestows child to the childless parents. So the Jeevantyaadi Yamak Anuvasan Basti has the properties to breakdown the Samprapti of disease. Hence the Jeevantyadi Yamak Anuvasana Basti is selected in present study.

The main line of treatment in Oligospermia is “Kshine Shukrakari Kriya” means the Dravyas, which increases Shukra i.e having Vrishya virtue like Madhura, Snigdha, Guru, Jivana and Brimhana Dravyas should be given. Shukra Dushti should be treated on the lines of involved Doshas i.e., in case of Oligospermia (Kshinashukra) treatment has to be planned in line with Vataja Pittaja Shukradushtihara Aushadha Dravya. Acharya Bhavaprakasha has mentioned Kokilaksha in Guduchyaadi Varga and it has Vajikaraka virtue. Thus, this drug was selected for evaluation of its efficacy in cases of Oligospermia.

VI. CONCLUSION :

The word Ksheena is a broader term. When used in context of Alpa, it indicates reduction in quantity of ejaculated sperm i.e. low sperm count or Oligospermia. In present study, the therapy, Jeevantyaadi Yamak Anuvasana Basti and Kokilaksha Churna orally were found to be effective in the management of Oligospermia.

As a matter of fact, all the Panchakarmas measures including Basti are advocated in Shukradusti and Shukrakshaya by classical authorities.

FURTHER RECOMMENDATION :

Same study may be repeated by taking large sample size preferably in multicentric way.

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