Evaluation of Semen Analysis after Use of Shukrataralya Hara Yoga

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ABSTRACT

Evidence of male sub fertility is significantly arising in urban and rural society. Abnormalities of semen and disabilities regarding coital act are seen frequently in young generation. Shukra i.e. semen is the seventh basic element called shukradhatu, is responsible for the physical strength, production of fetus in life human beings. According to ancient Indian philosophy, Moksha is fourth most important basic duty called Purushartha and it is depend upon progeny of human kind. A good progeny can be resulted only from shuddha shukra. Hence treating the shukradushti plays prime role in cases of ill fertility or sub fertility. Also couples having bad obstetric history or history of congenital malformations needs to rule out and treat shukradushti. Various raskalpas, plant products (drug formulation) and therapies like rasayana and vajikarana including dincharya and rutucharya can improves such abnormalities. Vanga bhasma (incinerated ash of metal tin) and mushalia is one of the combinations described by Rasa Tarangini which states that consumption of this yoga can destroy Tarala dosha, within one month. So study conducted keeping this reference in front and its effect is studied for various semen abnormalities with modern parameters.

Key words: shukra, shukradushti, rasayana, vajikarana.

INTRODUCTION

Near about 9% of couples from entire world population suffering from failure to get a child. Now a days exposure to chemicals, pollution, radiation, T.V., mobiles, computers is markedly increased in the society. Work patterns are extremely stressful and sedentary lifestyles with consumption of faulty food. Additionally consumption of alcohol, tobacco chewing, smoking are also highly responsible factors which leads towards male infertility. Ayurveda says that a seed is unable to produce a plant once it get affected by micro organisms, or get wet due to water or burned due to fire. Same way a person having defective semen and sperms cannot produce his progeny. Shukra dhatu is said at seventh number in process of dhatu production i.e. Metabolism. It will be of better quality only if the production of prior dhatus will takes place properly. The choose combination has properties of rasayana karma and also of vajikarana karma which are very important in the process of formation of all dhatus and improvement of shukra quality.

Aim and Objectives

1.To study complete ayurveda literature on shukra dhatu and shukra dushti with special reference to shukrataralya.
2.To study complete ayurveda literature available on vanga dhatu and Talmuli (black mushali).
3.To study modern literature available on seminal abnormalities and its treatment options.
4. To study effect of shukrataralyahara yoga on various seminal abnormalities.
5. To propose cost effective management of various seminal abnormalities.

**Inclusion criteria**
1. All cases of oligozoospermia, asthenozoospermia, teratozoospermia.
2. All married cases in age limit of years 21 to 35 years.
3. Minor degree varicocele (I & II).

**Exclusion criteria**
1. All cases of major systemic illness.
2. Known cases of hernia, hydrocele and major degree varicocele (I & II).
3. Cases of azoospermiya.

**Study Design**
**Reference:** Rasatarangi 18th chapter shloka number 36. [1]
Consumption of Talmuli and Vanga upto one month will relive Shukra taralya forever.

**Type of study:** open uncontrolled study.

**Study centre:** M.A. Podar Hospital, kashyapa ward.

**Number of cases:** 60

**Drug:** It is combination of vanga bhasma and black mushali which is an Indian herb administered in dose of 125 mg and 3 gm respectively in powder form twice a day with cow milk and cow ghee, as vanga bhasma is fat soluble hence ghee is used as anupana material. Already prepared, authentic and standardized vanga bhasma from shree Dhoot Papeshwar Pvt. Ltd batch no. d 82/2 Aug 2006 was used. Black mushali root stalk purchased from Dadar pharmacy and powder preparation done at same place i.e. Shree Dhootpapeshwar Pvt. Ltd, with standardization and authentification.

**MATERIALS AND METHODS**
The formulation contains combination of vanga bhasma and black mushali which is an Indian herb administered in dose of 125 mg and 3 gm respectively in powder form two a day with cow milk and cow ghee. As vanga bhasma is fat soluble hence ghee is used as anupana material. Already prepared, authentic and standardized vanga bhasma from shree Dhoot Papeshwar Pvt. Ltd batch no. d 82/2 Aug 2006 was used. Black mushali root stalk purchased from Dadar pharmacy and powder preparation done at same place i.e. Shree Dhootpapeshwar Pvt. Ltd, with standardization and authentification.

**REVIEW OF LITERATURE**
**Shukra dhatu:** Shukra is seventh dhatu amongst all of body and is best amongst them. It is also known as retas, beeja, virya and indriya. Shukra is present all over body [2] but specially lies in testes and mammary glands. It is produced from majja dhatu [3] during process of metabolism. There is no waste material during formation of shukra hence it is a pure dhatu. According to various Acharyas time period for its production is different. Charaka says it is of 24 hours, [4] while wagbhata says it is of six days. [5] According to Parashara it is 8 days while Sushruta states this time period is up to 30 days. [6] Some of Acharyas says it is depends upon power of Agni. Those persons having weak agnibala may have delay in the production of shukra while those having strong agnibala will get early production of respective dhatus in their body.

**Characteristics of shuddha shukra:** [7-9]
It is Snigdha (unctus), Bahala (viscus), Madhura (sweet), Avisra (without unpleasant smell), Guru (heavy contain), Picchila (sleepary), Shukla (white in colour), Bahu (large amount), Ghana (dense), Sphatikabham (like white crystal), Tailkshoudrabham (sometimes appears like oily or like honey), Madhugandhi (smells like honey) and Avidahi (does not cause burning while emission).

**Shukra kshaya:** [10] (Deficiency of shukra): Emotional and stress factors like anger, jealous, fear, worry, excess cry leads to deficiency of shukra. Also any chronic illness, fever, excess use of shodhana...
chikitsa and over practice of sexual act leads to shukra kshaya.

**Symptom of shukra kshaya:** [11] In state of deficit shukra expulsion of semen gets delay and causes severe pain while emission and it is also blood stained. Deficient shukra causes weakness of mind and deficiency in rasadhatus, which results in weakening of heart and further dhatus.

**Shukra vruddhi:** Increased level of shukra leads to high sexual desire and sometimes results in shukrashmari i.e. stony hard solidification of semen.

**Causes of shukra dushti:** [12] Participation in sexual act before mature age, abnormal or over practice of sexual habits, and suppressing sexual urge after getting stimulation of it, are the responsible factors for shukradushti. Also abuse of kshara karma, shastra karma and agni karma can cause shukra dushti.

**Types of shukra dushti:** There are eight types of shukra dushti as follows.
1. *Fenila:* semen with air bubbles.
2. *Tanu:* extremely liquid
3. *Ruksha:* dry
4. *Vivarna:* abnormal color
5. *Puti:* with unpleasant odor
6. *Picchila:* sticky in nature
7. *Anya dhatu upasanshtra:* mixed with other body contents like blood, stool etc.
8. *Awasadi:* which causes depression after ejaculation.

*Taral shukra* is resembles with *tanu dosha* of shukra. *Taralta* means high liquidity.

**Diseases due to shukra dushti:** [13] Impotence, erectile dysfunction, loss of libido caused due to shukra dushti.

**Modern concept of semen:**

**Physiology & Anatomy of male reproductive system:**

External genetalia contains scrotal sacs ininguinal region and a penis, while internal genetalia composed of two testes, epidydemis, vas deference, prostate gland, seminal vesicles and urethra. Testes are endocrine glands which secretes hormone testosterone which is responsible for development of secondary sexual characters in males. Testes also produce male gametes called sperms, which are stored and matured in somniferous tubules. Matured sperms expelled out from urethra with semen during coital act.

Semen is the suspension of spermatozoa in the secretion of the epidydemis, prostate, seminal vesicles and cowper’s glands. Volume at each emission is about 2-4 ml, containing 100-200 millions of spermatozoa, 80% of which remain actively motile for 45 minutes but not more than 3 hours. They should not contain more than 25% abnormal forms. Volume and sperm count decreased with number of emissions. About 50% of men contain 20-40 million sperms /ml of semen, but containing lower the 20% generally remain sterile. Semen contains fructose, sorbitol, spermine, citrate, acid phosphatase, lipids, fibrinolysis and prostaglandins. Its specific gravity is 1.028 & ph is 7.35-7.59. Seminal buffers serve to protect the sperm against the low ph of the vagina .Its color is highly viscid opalescent, grayish white. Prostaglandins helps in the movement of spermatozoa to the fallopian tube through uterus.

**Factors affecting sperm production:**

1. **General health and lifestyle:** Regular exercise, sufficient rest, wellbeing with healthy life style positively affect sperm...
production while ill health and sedentary lifestyle adversely affect it.

2. **Social relationship:** Pleasant environmental conditions and stress free life helps in secretion of certain hormones which help to produce sperms. Stressful life may lead to sub fertility in male.

3. **Obesity and age:** Increased body mass index and age above 35 years associated with fertility issue.

4. **Chronic infections:** Any illness of longer duration with disturbed thermo regulatory mechanism leads to defective spermatogenesis.

5. **Food:** Spicy, oily, salty and fast food with low nutritional elements causes defective spermatogenesis.

6. **Addiction:** Alcohol, smoking and tobacco chewing in excess quantity hampers sperm production.

7. **Exposure:** Exposure to radiations, heat, chemotherapy, pesticides, and chemicals impairs sperm production.

**Disorders of male reproduction:** Loss of libido, erectile dysfunction, premature ejaculation, sterility, varicocele, male hypogonadism, blockage of epidydemis or ejaculatory ducts, anatomical defects like phimosis and paraphimosis are some of the common issues seen in cases of male reproduction defects.

**Drug review:**

**Vanga Bhasma (Tin):**

It is tin metal i.e. *Stannum (Sn)*, having Atomic number 50, Atomic wt 118.6 gm, specific gravity 7.298 (at 20°C). It is found in two forms i.e. Silver like bright white metal, softer than gold and harder than lead. It is in group IV of periodic table with group members like carbon, silicon, germanium and lead. Second is gray tin which is non pure, and in compound form with lead, bismuth, arsenic and copper. According to Ayurvedic texts this white tin is called as *khuraka vanga* in pure form, while gray or impure tin is *mishraka vanga*. The purest (non toxic) metal is available in 99.8% pure form even after modern sophisticated methods of purification.

**Medicinal properties:** According to Ayurvedic concept it is bitter (*tikta kashaya*), dry, hot and light (*ruksha, ushna, laghu*) having *ushna virya* and having properties controversial to *kapha*. It increases *vata* and *pitta dosha* in body. Tin is present in most of animal tissues in small quantity and is an essential element for growth in rats. It is toxic due to its poor absorption and rapid turnover.

**Medicinal Uses:** Diabetes, obesity, loss of libido, lipolysis, aphrodisiac, rejuvenation and prevents nocturnal emission. It has prime role in improvement of premature ejaculation and erectile dysfunction.

**Talmuli:** Black mushali (*Curculigo orchioides gearte*)

It is a perennial herb, grows upto10-35cm, root stalk stout and found in sub tropical Himalayas from kumauna west Bengal, western ghats, konkana and nilgiri hill. It contains flae glycosides, cycloartend, sucrose, palmetic, oleic, linoleic, arachidic and behenic acids. Also contains sitosterol, stigmasterol, curculigo sappnis. It is having hypoglycemic, anticancer, hepatoprotective, anti inflammatory properties. Flavanone glycosides shows powerful uterine stimuli in guinea pigs, rats and rabbits. Study conducted in 10 cirrhotic patients given a commercial available drug which contain Curculigo orcheoides with other herbs shown reduced levels of serum enzymes, cholesterol and bilirubin with raised levels of proteins. This shows hepatoprotective properties of black mushali. According to Ayurveda it is *madhura* (sweet) and *tikta* (slight bitter) in taste. It is having *guru, snigdha and picchil guna*. It causes *vata-pitta shaman*.

**Medicinal uses:** skin disorders, jaundice, diarrhea, indigestion, seminal abnormalities, dysurea and loss of libido.

**GOKSHEER (COW MILK):** Charaka mentioned milk is best *jivaniya draya* i.e. best life promoting and supportive substance. Its latin name is *Lac mulgere* and *dugdha, kshira, payas, gorasa, amrut, jivana, piyusha* are its Sanskrit synonyms. It
suppress vata and pitta dosha while raises kapha in body. Ksheera is madhura, sheeta and contains protein, fats, carbohydrates, minerals and vitamins. It is balya, vrishya (aphrodisiac), rasayana (rejuvenating), medha vardhaka. It is beneficial for old aged, for kshatkshina (injured), kshudhita (hungry), after vyayama (exercise), vyavaya (sexual act).

GOGHRITA (Clarified butter): [20] It is also called sarpi or navneetkam. It is yellowish to white depending upon the carotene content. It is having madhura properties and is piita-vata shamaka. Ghrita is rasayana, agnivardhaka, helps to improve colour of skin. It is helpful for growth of dhatus, jivaniya and vajikara.

Research Trials methodology
After written informed consent, the combination of vanga bhasma and talmuli is administered orally with gokshira and ghrita in selected cases. Properly designed CRF is filled with all primary information of individual case. Drug is given twice a day for 60 days and post trial investigations done. Follow up kept for every 20 days to observe any adverse reactions. All data collected is filled in CRF. After all research formalities data is processed for statistical evaluation.

OBSERVATIONS AND RESULTS
Before and after study data shows that there is no significant change seen in semen parameters like ph, liquefaction time and existence of fructose. Sperm count per ml, viability and motility of sperms has been significantly increased in post trial investigations while non motile and abnormal forms reduced. This can be understood better with help of bar diagrams given below.

DISCUSSION AND CONCLUSION
This trial was conducted on patients of various seminal abnormalities including oligozoospermia (low sperm count), asthenozoospermia (less motility), teratozoospermia (abnormal forms), erectile dysfunction, premature ejaculation etc. as parameters of study were objective hence no data is processed about subjective
parameters to concise the study. Properties of drug material like madhura, vrushya, rasayana, sheeta, dhatu poshaka and yogvahi leads to rejuvenate the all dhatus and resulted into betterment of shukra dhtu. It helped to minimize the shukra dushti and to increase sperm count. Enriched dhatu converted to shuddha shukra and shukra vrudddhi occurred in trial cases. Hence this study shows effectiveness of shukrataralyahara yoga for various seminal abnormalities and it can be safely administered in cases up to period of two months. Further study has to be continued with objective parameters and extending the study period to get more better and specific results.

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