



**ROLE OF SHAMAN PURVA SAMSHODHANA (PURIFICATION) IN THE  
MANAGEMENT OF KSHINA-SHUKRA (OLIGOZOOSPERMIA)-  
REVIEW STUDY**

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**ABSTRACT :**

*Ayurveda* very long back had realized the factors governing fertility and their defects that give rise to *Kshina Shukra* and *Klaibya*. The treatment of *KshinaShukra* has been highlighted as *Upachaya* of *Shukra Dhatus*. It can be done with the help of *Shukra* itself, or the drugs having *Shukra* like qualities or functions. The branch of *Ayurveda* deals with this specialty is known as *Vajikarana*. Before administration of *Vajikaran* drugs *Shodhana* is necessary. *Shodhana* therapy not only increases the bioavailability of the drug, but also cures the ailments. The role of *Shodhana* procedures as preoperative regimens before the administration of medicine is adequately substantiated by *Acharya Charaka*. *Acharya* enunciates that with these therapies only, the occluded channels in the body will be cleared off to enhance the therapeutic efficacy of the drug. So here attempt is made to collect the results which were achieved through *Shodhana* therapy and to discuss the mode of action of *Shodhana* in Oligozoospermia.

**Keywords :** *KshinaShukra*, Oligozoospermia, *Panchakarma*, *Shodhana*

**INTRODUCTION:** Since the *Vedic* period, having healthy and long living children has been praised and desired.<sup>i</sup> A person without a child is like a tree just with one branch devoid of fruits and shadow with an unwanted smell. Parenthood remains one of the most desired goals of every couple, and failure to procreate causes great anguish. Infertility is called when couple is unable to achieve pregnancy after one year of unprotected coitus.<sup>ii</sup> Male infertility has received less attention, even though it is widely reported. Worldwide, more than 70 million couples suffer from infertility and the majority of these reside in developing countries. In 1992 it was first reported in the study of decrease in semen quality in last 50 years. It showed a significant decrease in mean sperm count

from 113 mill/ml to 66 mill/ml and in seminal volume from 3.4 ml to 2.75 ml (1940 to 1990). The Indian reports, both from the Institute for research in reproduction, Mumbai and from Mehta et al, Bangalore seem to agree with this decline trend of semen quality over the years.<sup>iii</sup> Male infertility may be contributing to total infertility in large.<sup>ivvii</sup> Various *Ayurveda Acharyas* have mentioned various *Shukradosha* or *Shukradushti* as abnormal or decreased Sperm counts in various *Samhitas*. *Ayurveda* explains that *Shukra Dosha* is one of the disease conditions, which finally results in infertility. *Ksheena Shukra* is one of the major variety of *Shukra Dosha*, wherein, there will be diminished level of *Shukra* and ultimately leads to unproductiveness. In males with

Oligozoospermia the aim is to improve seminal parameters and sperm concentration in particular. Special branch of Ayurveda called *Vajeekarana* can contribute something to solve this problem then it would be a boon to global population, who are in deep depression due to infertility.<sup>vii</sup> For this purpose, all the classics of Ayurveda advocate the importance of *Shodhana* prior to give *Shamana* therapy. *Shodhana* therapy not only increases the bioavailability of the drug, but also cures the ailments. The role of *Shodhana* procedures as preoperative regimens before the administration of medicine is adequately substantiated by *Acharya Charaka*. He enunciates that with these ther-

apies only, the occluded channels in the body will be cleared off to enhance the therapeutic efficacy of the drug.<sup>viii</sup>

**AIM:** To establish effect of *Shodhanakarma* (*Panchakarma*) before *Shamana* in the management of Oligozoospermia.

**MATERIAL AND METHODS:** Works carried out in *Panchakarma* department at Gujarat Ayurved University, Jamnagar, India, between the year 2001-2016 were compiled and screened to revalidate the effect of therapy in Oligozoospermia.

#### RESULTS AND OBSERVATIONS:

##### **Sanjay Gupta (2006)<sup>ix</sup>**

Total 24 patients were registered while 20 completed the treatment.

Group	No. of Pt.	Drug	Dose	Duration
A	10	<i>BaladiYapana Basti</i> : 15gmGuda+ 15 gmKalka+50 ml <i>Ghrita</i> +50 ml <i>Taila</i> +450 ml <i>BaladiKshirpaka</i>	600 ml	1 month( with 3 days interval)
B	10	<ul style="list-style-type: none"> <li>• <i>BaladiYapanaBasti</i> : As per Group A</li> <li>• <i>VajikaraṇaYoga</i>: 1) <i>Kokilakṣa</i> 2) <i>Masa</i> 3) <i>Goksura</i>, 4) <i>Atmagupta</i> 5) <i>Satavari</i></li> </ul>	5 Grams/ 3 times/ Day	As per Gr. A 1 month

Highly significant results were found in all most all the parameters in Group B. Overall Effect of Therapy: In Group A 10% patients were able to impregnate their wives, 20% achieved complete remission. 30% got marked improvement, 20% got Moderate improvement, 10% showed mild improved

**JunejaYashwant (2009)<sup>x</sup>**

and 10% remained unchanged. In Group B 10% patients impregnate their wives, 50% got complete remission, and 20% were markedly improved. 10% patients were moderately improved, 10% remain unchanged. Among two Groups, Group B provided better result in all the parameters.

Group	No. of Pt.	+Drug	Dose	Duration
A	06	<b>Asthapan Basti:</b> <i>Baladi Basti</i> : 100 gmGuda +25gmKalka ( <i>Madanphal</i> , <i>Pippali</i> , <i>Yashti madhu</i> ) + 75 ml <i>Ghrita</i> +75 ml <i>Taila</i> +450 ml <i>BaladiKwatha</i> 250 ml <b>Anuvasan Basti:</b> <i>Erandtaila</i>	500 ml  100 ml	15 Days By classical <i>Basti Putak</i> method
B	06	As per Group A		By Enema pot and Syringe

Patients of both groups were administered placebo capsules for 30 days.

**Season for treatment:** *Varsha & Pravrit Ritu* (Rainy season) was selected for administration of *Basti*.

**Overall effect of therapy:** In group A Complete remission observed in 16.67% of

patient, marked improvement in 66.67% while 16.67% remained unimproved. In group B 16.67% patients were able to impregnate their partners; marked improvement was in 66.67% while 16.67% remained unimproved. Between two groups, group A provided better result in all the parameters.

**NakulJethva (2011)<sup>xi</sup>**

Group	No. of Pt.	Drug	Duration
A	16	<i>Deepan-Pachana</i> : <i>PanchkolaChurna</i> 6grams /day <i>Snehan</i> : <i>Go-ghrita</i> <i>Virechana</i> : <i>TrivritaKvath</i> + <i>Eranda Taila</i> + <i>DrakshaPhanta</i> . <i>SansarjanaKrama</i> : as per <i>Shudhhi</i> of the patient. <i>AmalakiRasayan</i> : 3 Grams/twice a day	45 Days
B	13	<i>AmalakiRasayan</i> : 3 Grams/twice a day	30 days

**Overall effect of therapy:** In group A 37.5% patients each were found mild and moderate improvement. Marked improvement in 18.75% of patients. One patient of the group found complete cure. In Group B total 46.16% patients got moderate improvement; 23.08% mild improvement, 15.38% patients each was found marked im-

**Sanket D Zinzuwadia (2013)<sup>xii</sup>**

Group	No. of Pt.	Drug	Duration
A	15	<i>Deepan-Pachana</i> : <i>PippaliChurna</i> 5 grams /day <i>Snehan</i> : <i>Go-ghrita</i> <i>Virechana</i> : <i>HaritakyadiShodhanyoga</i> <i>SansarjanaKrama</i> : as per <i>Shudhhi</i> of the patient. <i>ShatavariGhrit</i> : 20 ml/ in two divided dose	45 Days
B	15	<i>ShatavariGhrit</i> : 20 ml/ in two divided dose	30 days

**Overall Effect of therapy:** In Group A 26.67% were markedly improved, 53.33% moderately improved and remaining 20% were improved. In Group B 13.33% were markedly improved while 73.33% moderately improved and 13.33% were in improved category. Between two groups,

proved and unchanged respectively. Both therapies provided good improvement in certain seminal as well as all sexual parameters. Comparison of therapy suggest that group A provide better improvement in generalized manifestation of *Kshina Shukra* along with less sperm count.

Group A provided better result in all the parameters of Oligozoospermia.

**DISCUSSION:** Acharya Charaka widely explains utility of *Panchkarma* therapy, prior to *Shamana* therapy while explaining the treatment of many of the disorder.

**Discussion on VirechanaKarma:** Here, treatment of Oligozoospermia should be

aimed at increasing sperm count. For the treatment of *Kshina Shukra*, Acharya Charaka had stated to use *Shukra* or Substances those have quality like *Shukra*. *Kashyapa* indicated that by the use of *Virechana Karma*, one can get properly purified *Dhatu* and also the function of *Bija* i.e. *Shukra* is improved.<sup>xiii</sup> Acharya Charaka has advised *Sneha Virechana* in the very beginning of treatment for *Klaibya*.

Acharya Charaka gives a very practical example.<sup>xiv</sup> When person takes aphrodisiac recipes in appropriate quantity and in proper time, when the channels of circulation of his body are clean then they help in the promotion of virility and strength. Therefore, depending on the strength of the person, elimination therapies should be administered to him, before he resorts to these aphrodisiac recipes. As a dirty cloth does not get properly coloured, similarly in an unclean body, the aphrodisiac recipes do not produce the desired effects.

Among all *Panchakarma* type *Virechana* is mainly aimed at eliminating the *Pitta Dosha*. The *Shodhana Karma* of *Virechana* is simply clear along with its other benefits. Acharya Charaka mentioned the fruitfulness of *Shodhana Karma*.<sup>xv</sup> In text Acharya mentioned that it finally results into achievement of *Prashasta Shukra Dhatu*, theory accepted by various *Dhatu Poshana Nyaya*. *Apatya Prapti* and *Vrushata* are the benefits from *Shodhana Karma*. Thus, procurement of balanced *Shukra* that pervades the whole body is achieved. *Shishna* is one of the *Karmendriya*, and *Anand* is *Vishaya* of its. In text Acharya also mentioned *IndriyaPrasidati* which refers to enhancement

of sexual pleasure and performance which is a basic necessity in the process of reproduction.

“*Sankalpo Vrishyanam*”- This means that firm psychological determination to perform the sexual act is the best aphrodisiac parameter. *Manah Prasadana* which is the benefit of *Shodhana Karma* refers to the better mental status of an individual, which cures majority of the sexual disorders, which are of psychosomatic origin. The procurement of *Manas Prasadana* also refers to the availment of *Harsha*, *Tarsha* etc., which are one of the factors contributing to ejaculate the *Shukra*. *Shodhana* imparts *Bala* and *Pushti*, as *Bala* is the physiological action of *Shukra*, thus enhancement of normal functioning of *Shukra* is achieved through *Shodhana*.

Aetiopathogenesis of *KshinaShukra* exhibits a wide variety of pathology, *Sanga Srotodusti* is chiefly among it. *Virechana* eliminates the *Srotorodha* and hence the *Sroto Shodhana* is achieved. This facilitates the active transformation of *Dhatu* through *Dhatvagni Vyapara* and the most desirable *Shuddha Shukra* is procured. Acharya has clearly defined necessity of *Shodhana* in *Kshayaja Samprapti*.<sup>xvi</sup> If the impotency is caused by *Kshaya*, then the patient should first of all be oleated and fomented. Thereafter, *Snigdha Virechana* should be administered.

Acharya Sushruta clearly shows the *Vata Pitta* predominance in the manifestation of *Kshina Shukra* and *Virechana* is the treatment par excellence for curing the *Paittika* diseases because immediately after it is administered, it eliminates the vitiated *pitta* from its very root.<sup>xvii</sup> The site of action

of *Virechana Karma* is *Pakwashaya*, however *Pakwashaya* is the chief site of *Vata Dosha* and *Apana Vayu* is *Sthantha* element of the *Vata Dosha*, whose chief action also dwells with the ejaculatory factor of *Shukra Dhatus*.

*Acharya Charaka* describes *Klaibya* as one of the *Rasa Pradoshaja Vikara*. The disturbances in *Rasa Dhatus* will finally affect the functioning of *Shukra Dhatus* according to *Dhatu Poshana Nyaya*. The treatment of *Rasa Pradoshaja Vikara* is *Langhana*, and *Virechana* come into count by a type of *Shodhana*.<sup>xxviii</sup> In treatment of *Shukra Pradoshaja Vikara*, *Acharya* advocates timely elimination of *Dosha* in proper quantity by *Shodhana*.<sup>xxix</sup> *Acharya Charaka* had included *Klaibya* in *Santarpana Janita Vikara* and has considered it to be *Sanga* type of pathology. He had advocated *Virechana* in such a situation.<sup>xx</sup> Besides all these *Shandhya*(*Napumsakata*) has been considered one of the results of *Viruddhahara*, wherein *Virechana* has been highlighted along with *Vaman*.<sup>xxi</sup>

**Discussion On Basti Karma:** Properly administered *Basti* enhances the low level of *Shukra* and improves the virility, vigour and life span of an individual. The main line of treatment in *Kshina – Shukra* has been given as “*KshineShukrakariKriya*”. In *Shukra Dosha* i.e. in *Kshina – Shukra* the choice of treatment is *Basti*(*Anuvasana&Niruha*) which is made out of *Shukravardhaka Dravyas* i.e. *Ghrita**Taila* etc. is given. *Charaka Samhita*, *Sushruta Samhita* explain various recipes of *Vrishya Basti* which can be effectively used in the condition.<sup>xxii</sup>

*Sushruta* and *Charaka* have mentioned *Bastikarma* (*Asthapana*) to the patients of *ShukraDushti*. *Kshina Shukra* has predominance of *Vata* and *Pitta*. *Basti* is the best remedy for *Tridosha* treatment according to *Ayurvedic* classics.<sup>xxiiiiixxiv</sup> So *Basti* if designed to treat *Kshina Shukra* or to continue for a long period it should be *Yapana Basti*, *Basti* enhances *Bala* immediately. It is also indicated in the complications due to excessive sex in the *Pariharakala*.<sup>xxv</sup>

In *Kshina Shukra Atimaithuna* is a prime cause, hence *Yapana Basti* may be indicated. It has also *Rasayana Guna*. *Rasayana* means ‘*RasasyaAyanam*’, which maintains the flow (*Ayana* = *gati/ path*) of *PoshakaRasa*. *Rasayana* generally is *Agnivardhaka* and *Srotovishodhaka* in nature. At the same time it improves the quality of *Rasa dhatus* and *Dhatwagni*. As a result formation of better *Dhatu* takes place. *Yapana Basti* is nutritive and nourishing in nature as it is *Brimhana* also. It contains *Madhu* and *Taila*, which is highly appreciated by *Acharyas* for the treatment. All the *Dhatus* gets nourished by *Yapana Basti* enhancing body’s own *Dhatwagni* to maintain *Dhatusamya* and to increase the resistance of the body towardsthe invasion of the disease.

**CONCLUSION:** *Shodhana Karma* (*Panchkarma*) prior to *Shamana* Therapy is beneficial in improving Oligozoospermia condition. *Virechana* and *Basti* are choice of *Karma* for Oligozoospermia.

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