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

Bhagiya Shital¹, Bhatt NileshKumar², Thakar Anup B³, Jitendra Varsakiya⁴
¹ PhD Scholar, Dept of Panchakarma, IPGT & RA, Jamanagar.
² Assistant professor, Dept of Kayachikitsa, IPGT & RA, Jamanagar.
³ Professor & HOD, Dept of Panchakarma, IPGT & RA, Jamanagar.
⁴ PhD Scholar, Dept of Kayachikitsa, IPGT & RA, Jamanagar.

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 Dhatu. 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. 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. 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. Male infertility may be contributing to total infertility in large. 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. 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 therapies only, the occluded channels in the body will be cleared off to enhance the therapeutic efficacy of the drug.

**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)

Total 24 patients were registered while 20 completed the treatment.

<table>
<thead>
<tr>
<th>Group</th>
<th>No. of Pt.</th>
<th>Drug</th>
<th>Dose</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>10</td>
<td><strong>BaladiYapana Basti:</strong> 15gmGuda+15 gmKalka+50 ml Ghrita +50 ml Taila +450 ml BaladiKshirpaka</td>
<td>600 ml</td>
<td>1 month( with 3 days interval)</td>
</tr>
</tbody>
</table>
| B     | 10        | • **BaladiYapanaBasti** : As per Group A  
• **VajikaraṇaYoga:** 1) Kokilakṣa 2) Masa 3) Goksura, 4) Atmagupta 5) Satavari | 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 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.

Juneja Yashwant (2009)

<table>
<thead>
<tr>
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<th>No. of Pt.</th>
<th>+Drug</th>
<th>Dose</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>06</td>
<td>**Asthapan Basti:**Baladi Basti: 100 gmGuda +25gmKalka (Madanphal,Pippali, Yashti madhu) + 75 mlGhrita +75 mlTaila+450 ml BaladiKwatha 250 ml Anuvasan Basti:Erandtaila</td>
<td>500 ml</td>
<td>15 Days By classical Basti Putak method</td>
</tr>
<tr>
<td>B</td>
<td>06</td>
<td>As per Group A</td>
<td>100 ml</td>
<td>By Enema pot and Syringe</td>
</tr>
</tbody>
</table>
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.

**Nakul Jethva (2011)**

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</table>
| A     | 16        | **Deepan-Pachana:** PanchkolaChurna 6 grams/day  
**Snehapan:** Go-ghrita  
**Virechana:** TrivritaKvath + Eranda Taila + DrakshaPhanta.  
**SansarjanaKrama:** as per Shudhhi of the patient.  
**AmalakiRasayan:** 3 Grams/twice a day | 45 Days |
| B     | 13        | **AmalakiRasayan:** 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 improved 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.

**Sanket D Zinzuwadia (2013)**

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<th>Duration</th>
</tr>
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</table>
| A     | 15        | **Deepan-Pachana:** PippaliChurna 5 grams/day  
**Snehapan:** Go-ghrita  
**Virechana:** HaritakyadiShodhanyoga  
**SansarjanaKrama:** as per Shudhhi of the patient.  
**ShatavariGhrit:** 20 ml/ in two divided dose | 45 Days |
| B     | 15        | **ShatavariGhrit:** 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, 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. Acharya Charaka has advised Sneha Virechana in the very beginning of treatment for Klaibya.

Acharya Charaka gives a very practical example. 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. 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.

“SankalpoVrishyanam”- 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 Srotot 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.

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. The site of action...
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 “Kshina Shukra Prasadha Vikara” in Shukra Dosha i.e. in Kshina– Shukra therapy is Basti(Anuvasana&Niruha) which is made out of Shukravardhaka Dravyas i.e. GhritaTaila etc. is given. Charaka Samhita, Sushruta Samhita explain various recipes of Vrishiya Basti which can be effectively used in the condition. Susruta and Charaka have mentioned Bastikarma (Asthapana) to the patients of Shukra Dushti. Kshina Shukra has predominance of Vata and Pitta. Basti is the best remedy for Tridosha treatment according to Ayurvedic classics. 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.

In Kshina Shukra Atmaithuna is a prime cause, hence Yapana Basti may be indicated. It has also Rasayana Guna. Rasayana means ‘Rasasya Ayanam’, which maintains the flow (Ayana = gati path) of Poshaka Rasa. Rasayana generally is Agnivardhaka and Srotovishodhaka in nature. At the same time it improves the quality of Rasa dhatu 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 towards the 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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Corresponding Author: Dr. Shital Bhagiya, PhD Scholar, Dept of Panchakarma, IPGT & RA, Jamanagar. Email: Shital1811@Gmail.Com

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