



Management of Ksheena Shukra Dushti (Oligoasthenozoospermia) - A Case Report

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ABSTRACT

Infertility affects 8-12% of couples worldwide, wherein a male factor is primary or contributing cause in around 50% of couples. Oligoasthenozoospermia now is a major factor in male infertility. Present study is a case report of a male patient aged 30 years with 8 years of married life c/o primary infertility with history of reduced sperm motility even though not having any addictions or systemic diseases. On semen analysis he was diagnosed as Oligoasthenozoospermia, with history of low sperm count with Sperm count 24 million /ml and immotile sperms 05%. The use of an Uttrabasti along with oral medication was found to be effective in the management of Ksheena Shukra Dushti (Oligoasthenozoospermia). Effective result noted to increase in the sperms count with an improvement in the liquefaction of the semen and motility of sperms.

Key word: Ksheena Shukra Dushti, Oligoasthenozoospermia

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INTRODUCTION

Infertility affects 8-12% of couples worldwide, wherein a male factor is primary or contributing cause in around 50% of couples (1). Sperm counts and motility are the most important indicators of male fertility and only a certain amount of normal progressively motile sperm can ensure the fertilization of an egg. Oligoasthenozoospermia is a manifestation of spermatogenesis and functional maturation disorders. Oligoasthenozoospermia now is a major factor in male infertility (2).

Present study is a case report of a male patient aged 30 years with 8 years of married life c/o primary infertility with history of reduced sperm motility even though not having any addictions or systemic diseases. On semen analysis he was diagnosed as Oligoasthenozoospermia, with history of low sperm count with Sperm count 24 million /ml and immotile sperms 05%.

The incapability to conceive a child can be worrying and frustrating, but a number of treatments are available for male infertility. Male infertility is a major cause of infertility with a strong influence on the psychology and physiology of couple. According to the criteria of the World Health Organization (WHO) 5th edition manual (2010), a man suffers from asthenozoospermia when there are less than 32% progressively motile sperm in the ejaculate (sperm that move), Or less than 40% of total motile sperm (motile sperm with and without displacement). In addition, oligozoospermia when the concentration of sperm is less than 15 million per milliliter of seminal sample (3).

Oligoasthenozoospermia condition can be correlated with Ksheena Sukra explained in Ashta Sukra Doshas by Brihathrayees and Sodhana chikitsa followed by Samana chikitsa was given based on the Dosha dushti lakshanas.

CASE REPORT

A couple attended the OPD of Prasuti tantra and Stri Roga of Government Ayurveda Hospital, Nanded on 04 Feb. 2023 with the complaint of inability to conceive even after 8 years of married life, having regular unprotected sexual intercourse. On detailed evaluation of case, it was found that, the female partner had regular menstrual cycles with normal bleeding pattern but was suffering from B/L Tubal block and undergoing treatment for same in the institute. Whereas, male partner had a history of reduced sperm motility and was advised for semen analysis by private practitioner before visiting the institute. Report revealed the semen volume as 2ml, Sperm concentration 24 million /ml, progressive motility 5 %, Non

progressive motility 20% and immotile sperms 60%. The sample also shows 70% abnormal sperm morphology, reduced viscosity and increased liquefaction time. The physical examination and examination of external genitalia did not reveal any abnormal findings.

Past medical history: Not significant

Past family history: Not significant.

General examination:

General condition- fair; Built- Moderately built; Nourishment- Moderately nourished; Pallor-Absent; Oedema-Absent; Nails-No clubbing; Cyanosis-Absent; Icterus -Absent; Lymphadenopathy-Absent; P- 82/min; BP-110/70 mmHg; RR-18/min; Height-170 cm; Weight-58kgs; BMI-20.1kg/m².

Systemic examination:

- RS: Clear
- CVS: S1 S2 heard
- CNS: conscious, well oriented,
- P/A: Soft, Non-tender, No organomegaly.

Vayaktika Vrutanta: Diet- mixed Appetite- normal, Bowel: Constipated, Bladder Frequency- 5-6 times/day & 0-1/ night; Sleep- Sound, Habit- tea 2 times / day; Addiction- Nil; Psychological status: normal;

Rogi Pariksha :

Prakruti – VataPittaja: Vikruti- Vata, Sara – Madhyam, Sanhanan- Madhyam, Praman -170 cm wt- 58 kg, Satmya – Madhyam, Satva -Madhyam, Aahar shakti – Madhyam, Vyayama shakti -Madhyam, Vaya - Madhyam, Jihwa - Samaavastha.

Investigations:

Semen Analysis report (27-01-2023): Oligoasthenozoospermia

(04-02-2023) CBC: Hb- 13.7%, wbc 10,000, Platelets 2.19 lac;

Urine routine and microscopic - Within normal limit

Blood sugar- 88 mg/dl

VDRL- NON Reactive;

HbsAg- Negative

Differential Diagnosis: Ksheena Shukra Dushti

Diagnosis: Ksheena Shukra Dushti (Oligoasthenozoospermia)

Treatment given:

Uttara basti with 40 ml Tila tail for 1 day.

Prior to the management of Uttara Basti,

Sthanika Abyanga (local oleation therapy) followed by Mridu Nadi Sweda (mild sudation therapy)

Oral treatment:

Tablet Amogh Shakti 1 tab twice daily for 2 month

Follow up and outcomes:

After 2 months, the patient was advised to have a follow-up in the OPD with a reassessment of Semenogram.

Table1: Semen Analysis report:

TEST/DATE	30-04-2019	27-01-2023	After 2 month treatment (27/03/2023)
volume	2ml	2ml	2 ml
viscosity	Reduced	Normal	Normal
liquefaction	Mechanically Liquefied after 1 hr	Mechanically Liquefied after 2 hr	30 min
Sperm count	02 mil/ml	24 mil/ml	55 Mil/ml
Motility			70 %
Progressive	12%	05%	-
Sluggish	23%	15%	-
Non-motile	65%	60%	30%
Morphology			Normal
Normal forms	32 %	30%	
Abnormal forms	68%	70%	
Pus cells	2-4	1-2	2-3

DISCUSSION

Oligoasthenozoospermia is the combination of Asthenozoospermia (reduced sperm motility) and Oliogozoospermia (low spermatozoon count). This can be correlated with Ksheena Shukra Dushti mentioned in Ashtashukra dushti of Ayurveda classics.

The treatment was started with Uttar Basti stat. and aimed in *Vatanulomana*, shukra dosha hara and Vajeekarana. Basti karma is specific therapy for vataja disorders. Even Basti chikitsa is considered as “half of the whole treatment” (Ardhachikitsa) and sometimes complete treatment.

Probable mode of action of Uttara Basti with Tila Taila:

Uttara Basti (a type of Basti) one among the Panchakarma is capable of performing all sorts of actions like Shodhana, Shamana and Bramhana etc. Acharya Charaka has mentioned that Basti is *Vishesh (specilised)* and prashsta chikitsa (unique treatment) in shukra dusti (4). Action of Tila Taila mentioned as Brihana, Vrishya, Sthairya, and Balya (5). Therefore it was planned to administer basti in present case to obtain Shukravaha sroto Shuddhi (decontamination of channels), alleviate Shukra dusti and act as Vatanulomana.

Probable mode of action of Tablet Amogh Shakti®:

Ingredients of Amogh Shakti are Shatavari, Gokhru, Ashwagandha, Safed Musli & Kaunch Beeja, Saffron, Shilajeet, Ashwagandha. Shatavari, safed musali and Kaunch are act as Shukra janana, vrushya (6). There is no such curable disease in the world that cannot be won by Shilajit (7).

Table 2: Properties of Drugs used in Amogh Shakti

Drugs(8,9)	Rasa	Vipaka	Virya	Doshaghnata	Use
Shatavari	Madhura, tikta	Madhura	Sheeta	Vatapitta shamaka	Shukra, Vruddhikara
Gokhru	Madhura	Madhura	Sheeta	Vatapitta shamaka	Shukra, Vruddhikara, Basti shodhaka
Ashwagandha	Madhura	Madhura	Ushna	Vatakapha shamaka	Shukrajanana, Shukra Virechaka
Safed Musli	Madhura, tikta	Madhura	Sheeta	Vatapitta shamaka	Vrushya, Balya, Rasayana
Kaunch Beeja	Madhura, tikta	Madhura	Sheeta	Vata shamaka	Vataghna, Vrushya, Brahmaniya

Treatment with Amogh Shakti revealed significant increase in the number of sperms with an improvement in the volume of the semen and motility of sperms (8).

CONCLUSION

In present case patient was with Ksheena Shukra Dushti (Oligoasthenozoospermia) and correction of the same was done through this treatment and relief of Oligoasthenozoospermia of 3yrs which was not responding to oral medications, proved the efficacy of the intervention, thus the results are not by chance. The use of Utrabasti along with oral medication was found to be effective in the management of Ksheena Shukra Dushti (Oligoasthenozoospermia). The suitable dietary modification and oral medications can effectively prevent the recurrence of Ksheena Shukra Dushti (Oligoasthenozoospermia). In present study, effective result noted to increase in the sperms count with an improvement in the liquefaction of the semen and motility of sperms.

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