Review on Etiopathogenesis of Shukra Dushti (Oligoathenoteratozoospermia) - Male Infertility

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ABSTRACT

Fatherhood is the prime desire of every male. Infertility is an major universal issue affecting humanity. It is noticed in approximately 60-80 million couple worldwide among which 40-50% of infertility is estimated to be due to male factors. Male infertility was remarked in Ayurveda as Klaibya and Anapathya. Here Shukra Dusthi is qualitative and quantitative reduction of shukra dhatu. Ashta Shukradushti Lakshana can be correlated with the Semenogram based on doshik involvement. Shukra kshaya, Shukravaha srotodusti and Mano dosha's are the prime factors involved in the pathogenesis by their respective Nidana's. Shukradushti can be corelated with reduction in Sperm count, sperm motility and Sperm Morphology pradhana due to vitiation of Vata tridosha's. Oligoasthenoteratozoospermia is combination of three abnormal seminal parameters i.e Oligozoospermia which is Reduced sperm than 15million/ml 39 million/Ejaculate. or Asthenospermia, reduced sperm motility (progressive motility and sluggish Motility) less than 40% and Teratoozoospermia is reduced percentage of Normal Sperm Morphology less than 5%, when all the three semen parameters are Reduced in quantity it can be said as OAT Syndrome. A separate branch as Vajeekarana (Aphrodisiac therapy) was established among eight branches of Ayurveda, emphasizing the awareness of physiology of Shukradhatu (Sperm) and its role in Reproduction along with the measures to procreate children. The clinical diagnosis of Shukradushti (vitiation of semen) by clinical signs and symptoms and Retopareeksha (Semen Analysis) is essential for the management of Klaibya, by utilizing drugs possessing Vrushya (Aphrodisiac) Shukrajanana (Spermatogenic), Shukrashodhana (semen purifier) properties and diet-lifestyle modifications. Literature pertaining to Shukradhatu, Shukradushti, Klaibya, Vaieekarana from Ayurvedic classical literatures, Authentic texts and reputed journals were referred to collect the relevant information. The mention of Shukra pareeksha in the era of absence of microscope for diagnosis of Shukradushti shows the awareness on the importance of male infertility in the ancient period.

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KEYWORDS: Etiopathogenesis, Nidana panchaka, Male Infertility, Ayurveda,

oligoasthenoteratozoospermia, Shukra dushti, Vaajikarana

INTRODUCTION

Shukradhatu is one among Saptadhatu, the main function of shukra dhatu is Garbha-utpanna (reproduction)¹. Shudda shukra lakshanas are snigdha, ghana, picchila. madhura, avidahi and sphatika varna. Due to Aharaja, Viharaja and Manasika Nidana causes Shukravaha Srota Pradushana and Apanavata and Vyana vata dusti

leads to Shukradusti. Shukra dusti is characterized by Phenila, Tanu, Ruksha, Vivarna and so on.²

Oligoasthenoteratozoospermia (OAT) is a condition that includes Oligozoospermia means low sperm count(<15million/ml), Asthenozoospermia means poor Sperm motility (40%)³, Teratozoospermia refers to abnormal sperm morphology (<05%)⁴. so

shukrsdusti be considered as can Oligoasthenoteratozoospermia in which both quality and quantity of shukra is reduced and lead to infertility. Globally Oligoasthenoteratozoospermia (OAT) affects approximately 30% of all infertile men⁵. WHO (2023) has estimated incidence of global infertility as 17.5%. the contribution of male factor alone to this total infertility is reported as 26.2% to 46.6%. Infertility is an indeterminate universal issue affecting humanity, clinically defined according to World Health Organization (WHO), International Classification of disease (ICD) -11 as "A disease of the reproductive system defined by the failure to achieve a clinical pregnancy after 12 months or more of regular unprotected sexual intercourse⁶.

Due to advancing age, incorrect lifestyle and environmental factors plays an important role on natality and may causes Oligoasthenoteratospermia finally leads to male infertility, its consequences on the future human population makes this an important public health issue in this century.

Many aspects of male fertility are influenced by genetics and the important role of genetic abnormalities in the causation of human male infertility is now increasingly taken note of . With powerful modern technologies such as ICSI and

ROSNI now being able to by pass severe male factor infertility, the diagnosis of genetic infertility is gaining added importance to do away with the conditions potentially transmissible to offspring.⁸

Even though the modern investigation tools play an important role in diagnosing etiological factors for infertility but because of their costly investments they are not reaching to the middle or poor class people. In such conditions the Ashtavidha shukra dushti lakshanas told by acharya charaka are much usefull in diagnosing specific nidana for infertility due to shukra dosha.

The diagnostic tools explained for the shukra dushti in ayurveda are dependant on physical appearance of shukra⁹. In this era, it is very much essential to make ayurvedic diagnostic tools more scientific by using modern parameters so in this clinical study an effort is made to find out the diagnostic parameters for male infertility by using Ashtavidha shukra dushti lakshanas in the focus of modern parameters and to find out etiological factors and their role in pathogenesis of Shukra Dushti.

Male infertility was remarked in *Ayurveda* as *Klaibya*, *Anapathya*, *Shandatva*, *Napumsaka* and is classified into various types according to different Authors Table. No)1. ¹⁰⁻¹³

Table 1: Classification of Klaibya (Male-infertility) according to various literatures

Charaka Samhita	Sushruta Samhita	Bhavaprakasha	Bhaishajya Rathnavali
1.Beejopagathaja Klaibya	1. Manasa klaibya	1.Manasa klaibya	1.Manasa klaibya
2.Dhwajabhangaja Klaibya	2.Soumyadhatu Kshaya (Aharaja) klaibya	2.pitta nimitta klaibya	2.Pittaja klaibya
3.Jaraja Klaibya	3.Shukrakshayaja klaibya	3.Shukrakshayaja klaibya	3.Shukra kshayaja klaibya
4.Shukra Kshayaja Klaibya	4.Marma Chedaja klaibya	4.Medrarogaja klaibya	4.Medrarogaja klaibya
•	5.Sahaja klaibya	5. Marma Chedaja klaibya	5. Upagataja klaibya
	6.Bhramhacharyaja klaibya	6. Shukrastambha	6.Shukra sthambha
	(kharashukra nimmita)	nimittaka	nimittajaja klaibya
		7 Sahaja klaibya	7.Sahaja klaibya

Klaibya manifests due to vitiation of the Beejabhaga(part of sperm) or Beeja (Sperm) in the foetus¹⁴ and Shukradushti/Retodushti¹⁵ (vitiation of Semen). Eight types of Shukra dushti's are mentioned by authors based on the vitiated doshas (humours of body) and characteristics which play a major role in diagnosis (Table 2)¹⁶⁻¹⁹

Table 2: Types of Shukra dushti's (vitiation of Semen) according to various Acharyas

Acharya Charaka	Acharya Sushruta	Ashtanga Hridaya	Shtanga Sangraha
1. Phenila	1. Vataja	1. Vataja	1. Vataja
2. Tanu	2. Pittaja	2. Pittaja	2. Pittaja
3. Ruksha	3. Shleshmaja	3. Shleshmaja	3. Shleshmaja
4. Vivarna	4. Kunapa	4. Kunapa Gandhi	4. Kunapa
5. Puti	5. Granthi	5. Granthi	5. Granthi
6. Picchila	6. Putipuya	6. Putipuya	6. Putipuya
7. Anyadhatu Samshrishta	7. Ksheena	7. Ksheena	7. Ksheena
8. Avasadi	8. Mutra-Pureesha	8. Mutra-Pureesha	8. Mutra-Pureesha
o. Avasaui	Retasa	Retasa	Retasa

A separate branch as Vajeekarana (Aphrodisiac therapy) was established among eight branches of Ayurveda²⁰ emphasizing the importance and measures to procreate children. The preventive measures to avoid vitiation of semen or infertility is also mentioned in classical literatures.

AIMS & OBJECTIVES

- ➤ To understand the etio-pathogenesis and role of Shukra dushti (Vitiation of semen) in Klaibya (Male infertility).
- To diagnose Klaibya (Male infertility) due to Shukra dushti (Vitiation of semen) with special reference to Male infertility.

MATERIALS

Literature pertaining to Formation of Shukradhatu, Etiopathogenesis of Shukradushti, Klaibya, Briefly about Vaieekarana Treatment from Ayurvedic classical literatures and reputed journals are referred to gather information.

FORMATION OF SHUKRA DHATU

Formation of shukra by Majja Dhatu: By Uttarottara Dhatu Nirmana Krama

Majja Dhatvagni digests the Majjadhatu results in formation of two parts Mala & Prasada Bhaga. Malabhaga is Akshivit and Twaksneha (oiliness of skin). Prasad part is further divided into two parts 1) Poshakabhag 2) Poshyabhaga. Poshya(Sthayi rasa- stable tissue element) bhaga nourishes Majja Dhatu itself. While after the action of Shukra dhatwagni on Posha kabhag(Asthayi- unstable tissue element which provides nourishment to the successive tissue element) of Majjadhatu leads to the formation of Shukradhatu.²¹

Table No. 03 Shuddha Shukra lakshana (Features of pure Semen):22-24

Tuble 10. 05 Shuudha Shukia lukshuha (Teatures of pure Semen):22 24						
Characteristics	Charaka Samhita	Sushruta Samhita	Astanga Hridaya	Astanga Sangraha		
Colour 1.Shukla (White) Inte		1.Taila Nibha 2.Kshoudra Nibham (like oil or honey)	1.Shukla 2.Ghirita ma Kshika taila nibham	1.Shuklam 2.Grita taila kshoudra anya tamavama		
Consistency	1.Bahala (thick) 2.Snigdha (unctuous) 3. Picchila (slimy) 4.Bahu (large quantity) 5.Sphatika sannibha 6.Saratva	1.Drava (Liquid) 2.Snigdha 3.Sphatikam	1.Snigdha 2.Bahu 3.Bahala	1.Soumya 2.Picchila 3.Bahu 4.Bahala		
Taste	Madhura	Madhura	Madhura	Madhura		
Smell	Avisra	Madhu gandhi		Madhu gandhi		

Shukravahasroto mula (channels carrying Semen) and its Dushti (vitiated) lakshana Shukravaha srotomulas are Vrushana (testis), Shepha (penis) ²⁵ and Vrushana, Sthana (Breast) ²⁶ according to Acharya Charaka and Acharya Sushruta respectively.

Shukravaha Sroto Dushti (vitiation of channels carrying semen) leads to Klaibya (infertility), Aharshana (lack of ejaculation), Shukra Dosha (vitiation of sperm), Apathya (Sterile) and Praja (progeny) born with Alpa ayu (short lived), Viroopa (disfigured), Kleeba (impotent).²⁷

Klaibya (Male infertility)

Klaibya is a condition of inability to perform sexual act or lack of desire in sexual act28. General signs of Klaibya is that the man becomes incapable of performing the act and gets afflicted with dyspnoea, frustration and perspiration on the body. His phallus becomes loose and he will be unable to ejaculate the semen. 29 Klaibya is one among the Shukrapradoshaja vikara (diseases due to vitiated dosha affecting shukra dhatu) and mainly occurs due to Shukra/Reto dushti i.e "Retodoshodbhavam klaibyam". 7Among the types of Klaibya explained by various Acharyas, Shukra Kshayaja klaibya (Oligospermia) is mentioned by all the Acharyas. Shukra dushti is the major resultant leading to Klaibya in most of the other types of Klaibya like Aharaja (food), Manasaja (Mental factors), Bhramhacharyaja (due to suppression of urge), Shukrasthambhaja (obstruction of Shukra), Marmachedaja (injury of vitals), Medrarogaja (diseases of genital organs) and Pittaja klaibya (due to

Pitta dosha).6-9Thus, understanding Shukra dushti in detail plays a vital role to evaluate and manage the Klaibya.

Etiologies Leading to Various Shukra Dushti Klaibya 30

The causes of Male infertility in about 70% remain unknown and this can be traced out by understanding the following parameters. **31**

Beejopaghatha (Congenital cause) The defect in the Beeja or Beejabhaga leads to Kleeba (impotent) child. This is the cause of Beejopaghathaja Klaibya/ Sahaja Klaibya

Vaya (Age) Elderly male aged above 60/70 years with Vata dosha predominance are under the category of Jara (old age), which is the cause of Jaraja Klaibya.

Aharaja Hetu (causes due to food articles intake) - Intake of Asathmya bhojana (unwholesome food), food which are predominant of Ruksha (ununctuous), Tikta (Bitter), Kashaya (Astringent), Lavana (salt), Amla (Sour), Ushna (Hot) attributes. This is the cause of Aharaja klaibya.

Viharaja Hetu (causes due to lifestyle) - Ativyavaya (Excessive Sexual indulgence), Ativyayama (Excessive exercises), Untimely Sexual intercourse, Sexual intercourse through tracks other than the female genital organ, Abstinence from sexual rapport during appropriate time, Sexual intercourse with women who are not passionate, Shukra vegadharana (withholding the urge of ejaculation). Here, Shukra vegadharana leads to Shukra udavarta (misdirection of Shukra) **32** and thus is the cause of Brahmacharyaja Klaibya/ Shukrasthambha nimmitaja klaibya.

Manasika Hetu (Mental factors)- Chinta (Worry) Shoka (grief) and Avisrambha (lack of confidence), Bhaya (Fear), Krodha (Anger). This causes Manasaja klaibya.

Vyadhija Hetu (Emaciated due to diseases)- Shukradhatugata Jwara (type of fever), Rajayakshma (Tuberculosis) results into Klaibya. Medraroga (diseases of genital organs) causes Medrarogaja klaibya. **33**

Agantuja Karana (External factors) Injury by Shastras (Sharp instruments), Kshara (Alkalies) and Agnikarma (cauterization). Injury to Marmas (vital organs). This is the cause of Marmopaghataja klaibya/ Veeryavahini sira cheda janya klaibya/upaghataja klaibya.

Rasavaha roto dushti karana Rasavaha sroto dushti (Vitiation of Channels carrying Rasa) leads to Klaibya, 34 hence it is necessary to understand the causative factors. 35

Shukravahasroto dushti karana Excessive indulgence in intercourse, withholding of urges, untimely sexual intercourse and injury of channels carrying semen by alkali and sharp instruments.36

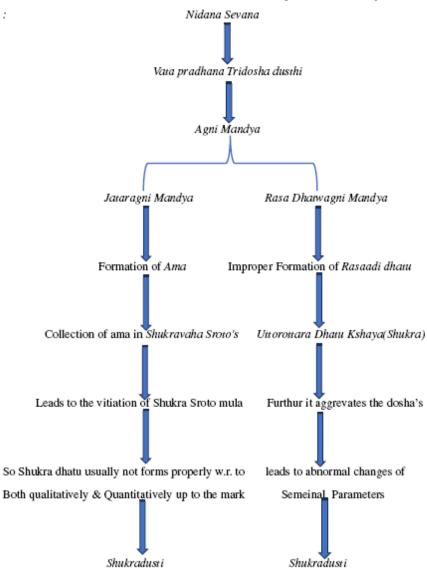
All the above mentioned causes results ultimately into Shukra Kshaya (Oligospermia/Hypospermia) leading to Shukra Kshaya Janya Klaibya.

Sexual Abnormalities - Asekya (scanty parental germ cell), Sougandhika (foul Genetalia), Kumbika (lasciviousness), Irshyaka (after seeing intercourse of others), Shandaka (impotent due to infactuation).**37** Dwiretaa (Hermaphrodism), Pavanendriyatva (Aspermia), Samskaravahi (Anaphrodisia), Narashanda (Male sterility), Vakri (Hypospadia), Irshyabhirati (Mixoscopia), Vatikashandaka (Eviration).**38** These can result into Klaibya due to lack of natural desire to indulge in act.

Pathogenesis of Shukra Dushti-Klaibya: दोषाः पृथक् समस्ता वा प्राप्य रेतोवहाः सिराः ॥१३८॥

शुक्रं संदूषयन्त्याशु 39

Due to the above mentioned causative factors, the Vatadi Doshas get aggravated individually or all together and reach the Retovaha sira (seminal channels) and vitiates the semen (Shukra dushti) upon localization 39. which finally can result into Klaibya.



SAMPRAPTI GHATAKA:

Dosha: Vata, Pitta & Kapha

Dhatu: Rasa, Rakta, Majja, Shukra

Dhatu: Rasavaha, Raktavaha, Majjavaha, Shukravaha

Agni: Jataragni, Dhatwagni

Ama: Jataragnimandyajanya, Datwagnimandyajanya

Srotodushti: Sanga

Udbhavasthana: Amashaya & Pakwashaya

Sanchara Sthana: Sarvasharira
Adhishtana: Medra, Vrishana
Vyaktha Sthana: Vrishana, Medra
Rogamarga: Bahya & Madhyama

Vyadhiswabhava: Chirakari

Vyadhi prakara: Nija and Agantuja.

Diagnosis of Shukadushti - Klaibya:

For the diagnosis of any disease, the knowledge on causative factors, clinical features and examinations /investigations are necessary.

Causative Factors: If the above explained causative factors are noted during case history taking, then the probability towards the diagnosis of Shukra dushti leading to Klaibya can be inferred. **Retopareeksha** (Seminal

Analysis): Acharya Charaka mentioned that semen should be examined before adopting treatment for its colour, by which the nature of the afflicted Dosha can be ascertained and appropriate therapeutic measure can be applied.**40** The clinical features of Shukra dushti explained below guides to ascertain the afflicted dosha.

Clinical Features:

1. Shukra Dushti Lakshana 41-44

Shukra dushti lakshanas occurs due to vitiation of Dosha's and will be noticed with various pathology. (Table 4-5)

Table No. 04 Shukra dushti lakshanas (Features of vitiated semen)

	Tubi	ie No. 04 Silukra	ausiiti iuksii		uics of viti	atea sem	CII)	
Shukra Dushti Types	Vataja Shukra Dushti	Pittaja Shukra Dushti	Sleshamaj a Shukra Dushti	Kunapa Gandhi/ Anya dhatu Samrisht a Shukra Dushti	Granthi / Avasadi Shukra Dushti	Puti puya Shukr a Dushti	KSheena Shukra Dushti	Mutra- Purishaj a Shukra Dushti
Dosha Lakshan a	Vata Ruksha (ununctuou s) Phenila (frothy) , Shyava (whitish black) Aruna (red), Krishna (black) Varna, Alpa (small quantity), Vicchinnam (broken), Rujam/Tod a (pain), Chirat (delayed ejaculation) , Krucchrena pravartana (ejaculation with difficulty) Na Tat Garbhaya Kalpate (Not leading to foetus formation)	Pitta Ushna (Hot) Visra gandha (Foul smell) Peeta/Neela varna (yellowish/bluis h colour), Vivarna (discolorations) Osha Chosha Daha (Burning sensation) during ejaculation	Kapha Snigdha (unctuous), Pandu/Shu kl varna (Whitish), Picchila (slimy), Prabhuta (more quantity), Vibaddha (obstructive nature), Kandu (itching) Associated with Majja (marrow)	Rakta Scientific Ch and Rakta Dead body odour Ejaculate d in profuse quantity.	Kapha – Vata Resemble s Grathita (clot) form Sinks when placed on water Ejaculate d with difficulty	Rakta- Pitta Pus like Appear a nce	Vata – Pitta Dourbalya t a Mukhasho s ha Pandutva Sadana Shrama Klaibya Shukra avisarga Medravru s hana vedana Ashakti maitune	Tridoshaj a possess the odour of Mutra and pureesha

Sadhya - Asadhyata (Prognosis) of Shukra Dushti and Klaibya 45-46

Sadhya (Curable) = Vataja Shukra dushti, Pittaja Shukra dushti and Kaphaja Shukra dushti

Krucchra Sadhya (difficult to cure) = Kunapa Gandhi, Granthibhuta, Puti pooya and Ksheena Shukra dushti's.

Asadhya (**Incurable**) = Sannipataja Shukra dushti, Dhwajabhangaja klaibya and Kshayaja klaibya ⁴⁷, Sahaja Klaibya and Marmachedaja Klaibya ⁴⁸

Here, Kshayaja klaibya is considered as Asadhya by few authors, though treatments are detailed to manage that condition mainly. In this case, it can be correlated to Azoospermia condition causing infertility, which is incurable. On the other hand, on correlating the Kshyaja klaibya to Oligospermia or Hypospermia causing infertility, it can be considered to be under Krucchra sadhya condition.

Chikitsa (Treatment) of Shukradushti - Klaibya:

Oligoasthenoteratozoospermia is a *Shukra Pradoshaja vikara* involving Vata *Pradhana Tridosha*. So here *Sukraduşţi chikitsa* as per classics can be understood under *Samanya Chikitsa* and *Vishishta Chikitsa*.

Samanya Chikitsa:

This constitutes Panchakarmanusara Vishodhana,⁴⁹ (Indu tika) by following Snehana, Svedana, Vamana, Virechana, Niruha Basti, Anuvasana Basti and especially Uttara Basti⁵⁰. Vagbhata advocates Doşhanusari Chikitsa and the treatment described in Guhya Roga pratishedha adhyaya. Charaka asserts Vajikaraṇa formulations which are sukha & hitakara in shukradusthi conditions; Raktapittahara Chikitsa and Yonivyapat Chikitsa can be employed here⁵¹. Suṣruta while defining Vajikaraṇa says this treatment is useful in Alpa, Dushta, Ksheena and Vishuskha Retas. Dalhaṇa commenting on this says Apyayana, Prasadana, Upachaya and Shukrajanaka Chikitsa are to be respectively adopted in these four conditions.⁵²

Vishishta Chikitsa:

Vataja Sukradusti:⁵³

Apart from Samanya Chikitsa specifically the drugs and measures which alleviate Vata doşa should be employed in the treatment of Vataja sukraduşti. Acharya charaka explained Niruha and anuvasana basti's are used in Vaataja shukra dusthi.

Pittaja Sukradusti:54

Charaka advocates Rasayana's like Abhayamalaki Rasayana. Vagbhata advocates Ghritpana prepared from Kandekshu, Gokşura, Guduchi; Virechana with Trivrut churņa and Ghee; Asthaana Basti with Sriparni, Payasya treated with Kṣhira; Anuvasana - Uttara Basti with oil of Madhuka - Mudgaparni.

Kaphaja Sukradusti:55

In addition to Samanya chikitsa specifically Pippali Rasayana, Amalaki Rasayana, Loha Rasayana, Triphala Rasayana, Bhallataka Rasayana are advised in Kaphaja type. Ghritapana - Pashana bheda, Ashmantaka, Amalaki are used for preparation of Ghrita for Abhayantara snehana; Vamana with Madanaphala kwatha; Virechana with Danti, Vidangachurṇa; Asthapana Basti with decoction of Aragwadha, Madanaphala; Anuvasana – Uttara Basti with taila of Madhuka and Pippali.

Kunapagandhi Sukradusti:56

Ghrita prepared from Dhatakipushpa, Khadira, Arjuna, Dadima are claimed beneficial apart from Ghrita of Salasaradi gaņa and Asanadi gaņa dravya in Kunapa retas(Su.Sha.01/06).

Granthibhuta Shukraduşti:57

In this condition, Ghrita which is prepared from Shati, Parushakadi kalka and kashaya siddha grita paana areadvised.

Puva Sukradusti:58

Parusakadi gana, Vathadi gana and Nyaghrodadi gana drugs are used in the preparation of Ghritapana and this is said to be useful in Puya variety of Sukradusti.

Ksina Sukradusti:59

Svayonivardhana dravyas, Sukrakarikriya are advised by Vagbhata while Sushruta propounds the treatment told in Kshinabaliya Adhyaya of Chikitsasthana.

Mutrapurigagandhi Sukradusti:58

Ghrita made of Hingu, Ushira, Chitraka is claimed to be beneficial by Suṣruta. Acharya Vagbhata expounds the use of Ghrita prepared out of Chitraka, Vitunnaka, Priyangu, Hingu, Samanga, Mruṇala. Indukara says patients with severe vitiation are to ignored as this condition is Asadhya. Dalhaṇa concludes that Shodhana procedures are to be employed first, succeedingly the specific medications are to be started.

UPASHAYA OF SHUKRA DUSTI

Those Ahara, Ausadha and Vihara that bring homeostasis in Vikrita dosha, Dhatu and mala temporarily. So, Upashaya of Ksheena Shukra is which alleviate signs and symptoms of Kshina Shukra.

TABLE NO 05 SHOWING UPASHAYA OS SHUKRA DUSHTI:

AHARA	AUSADHA	VIHARA(Cha.Chi.30:130-137)
Atikatu-Amla Tikata-Lavana-Rasa sevana	Dhanyaka(Bh.P.)	Atimaithuna
Katu-Amla paki Dravya Atisevena shaka(Bh.P.)	Kulattha	Amaithuna
Sarshap tail(Cha.Su.27:290)	Atasi(Bh.P.)	Shukra - veghdharna
Takra (Su.Su.45:84)	Chanaka	Ayonimaithuna
	Yavani(Bh.P.)	Chinta
	Shatpushpa	Atisahasa
	Maricha	Akalamaithuna

ANUPASHAYA OF SHUKRA DUSHTI:-

Anupashaya means opposite of *Upashaya*. Those *Ahara*, *Ausadha* and *Vihara* that aggravate the condition further, they are *Shukra* decreasing factor. *Upashaya* and *Anupashaya* are the tools, which aid correct diagnosis

AHARA	AUSADHA	VIHARA
Ksira(Cha.Su.1:107)	Ardraka (Cha.Su.27:166)	Abhyanga(Cha.Su.5)
Dadhi(Cha.Su.27:225)	Ashvagnadha (Bh.P.)	Snana utsadana (Cha.Su.5:94)
Ghrita(Cha.Su.27:231)	Shatavari (Bh.P.)	Padatra dharna (Cha.Su.5:100)
Taila(Su.Su.45:112)	Shatavari (Bh.P.)	Gandh-Malya dharana (Cha.Su.5:96)
Vasa (Cha.Su.13:16)	Gokshura (Bh.P.)	
Majja (Cha.Su.13:17)	Vidari (Cha.Su.27:121)	nal • 7
Mamsarasa (Cha.Su.27:65)	Bala (Bh.P.) in Scienti	fic 2
Ikshu (Cha.Su.27:225)	Mushali (Ra.N.) rch and	: d

where there arises difficulty in Vyavachedana of disease.ment

TABLE NO 06 SHOWING ANUPASHAYA OS SHUKRA DUSHTI:

DISCUSSION:

Among various synonyms mentioned for male infertility, Klaibya/Vondhyatva can be related to impotency inability to bear a child, Anapathya/Shanda/Napumsaka to sterility who is unable to give birth to a child. Beejopaghataja klaibya can be considered as a congenital cause leading to infertility, Dwajabhangaja klaibya with premature ejaculation or the injury to channels carrying semen, Jaraja klaibya with Male Viropause and Shukra kshayaja klaibya with oligospermia. The other types mentioned by various Acharyas based on the cause of Klaibya can be grouped under Shukra Kshaya Klaibya.

Shukra can be related to sperm, semen and Androgen in different contexts based on the action established. The properties of the pure semen which is composed of sperms with seminal and prostatic fluids can be correlated to the Shuddha Shukra/Retas gunas and semen and sperm abnormalities with Shukra dushti. and also macroscopic and microscopic features of sperm/semen abnormalities can be related to various Shukra dushti.

Table 07: Relation of Shuddha shukra guna and sperm quality

	Shuddha Shukra Guna	Semen Quality
1.	Snighda	Mucoid consistency of Semen
2.	Ghana	Specific gravity

3.	Picchila	Viscosity of semen for Ejaculation
4.	Madhura	Fructose and Carbohydrate components of the semen
5.	Avidahi	Slight Alkaline in nature for the motility of Semen
6.	Shweta – Sphatika Sannibham	Milky White colour of Semen
7.	Bahalam	Volume of Semen
8.	Bahu	Sperm Count

Shukra Dushti	Semen Abnormality
Nashta Shukra	Aspermia
Alpa Retas	Hypospermia
Kunapa Gandhi	Hematospermia
Putipuya	Pyospermia
Ksheena Shukra	Oligospermia
Abeeja Shukra Dushti	Azoospermia
Kapha – Vataja Shukra Dushti	Asthenozoospermia
Vata pradhana sanniapataja Shukra dushti	Teratozoospermia
Ashukra	Necrozoospermia

CONCLUSION:

The Regimen related to the Ahara, vihara, Sedentary lifestyle and Pshycological factors affecting the Shukra Utpatti(Semen formation) and Importance of examination of Semen by their respective Nidana panchaka before planning the Treatment, being highlighted the principle of the early Diagnosis and Intervention as the key for Success.

After Shodhana (Detoxification) and Vajeekarana yoga prayoga (Aphrodisiac therapy), the health and productivity of Shukra is assessed to be enhanced and is expected to provide the scientific results to attain success in treatment and help men to attain progeny. Hence-forth can be beneficial prior to In-vitro fertilization and Assisted reproductive therapy. Thus, integrative approach by establishing Retodushti (vitiation of semen) through advanced scientific method is beneficial in management of Klaibya (Male infertility).

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