



Effect of Phala Ghrita in the Management of Ksheena Shukra (Oligozoospermia): A Case Report

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Abstract:

Background: Incidences of male infertility are increasing in the present scenario, with low sperm count, decreased motility, abnormal forms of sperm being frequently observed in the reports of patients being visited to their physicians. It is estimated that about 30 million infertile couples in the country; 40 - 50 % cases are related with male partner, of which oligozoospermia is considered as one of the most prevalent factors.

Aim & Objective: A 30 years, healthy male patient visited the OPD of Kayachikitsa along with his wife. The couple were married and were unable to conceive even after having six years of married life. Semen analysis of this patient revealed low sperm count (13 million/ml) with no other abnormalities. This case was managed with *Virechana* procedure followed by *Phala Ghrita* 10ml once in a day with milk and sugar candy for two month. After this treatment, sperm count increased to 95 million/ml. The detail of this case highlights the role of *Shodhana* and *Phala Ghrita* in the management of oligozoospermia.

KEYWORDS: Infertility, Ksheena Shukra, Oligozoospermia, Phala Ghrita, Virechana

Background:

Male infertility refers to the inability of a male to cause pregnancy in a fertile female. Some of the known responsible factors for male infertility are poor semen quality, impaired endocrine inter relationship, testicular function and genetical factors etc.¹ Except some physical defects, low sperm count and poor sperm quality are responsible for the male infertility in more than 90% of cases. Though Modern medical treatment has reached to its peak in MART (Medically Assisted Reproductive Technology), artificial insemination, in vitro-fertilization, and intra cytoplasmic sperm injection, but it is not accepted widely in India because of many reasons² Besides having low success rates, these procedures are unable to provide benefit to all classes of people in a society. Ayurvedic texts have described many aphrodisiacs drugs³ which are effective as well as can reach common men. Among these *Phala Ghrita*⁴ is a commonly used Ayurvedic poly-herbal formulation. Moreover, when these drugs are administered after proper *Shodhana*, they are more effective. In this case study, a success story of patient suffering from Oligozoospermia has been presented who was treated with *Virechana* procedure followed by oral administration of *Phala Ghrita*.

CASE REPORT

A 30 years, apparently healthy male patient visited the OPD of Kayachikitsa along with his wife. The couple were married and were unable to conceive even after having six years of married life. On inquiry, his complaint was Post act exhaustion, early ejaculation and body ache.

Patient came from urban set up and was labourer working under extreme hot environment. In addition he was in habit of taking excessive salt and spices in his routine diet. He was irregular in regards of food intake and had irregular bowel pattern. He was also addicted to tobacco chewing since long. Before coming to this hospital, he had never been managed for this condition and was not taking any medication for the same. The female partner was also having no history of irregular in menstruation and other hormonal and anatomical parameters were also normal.

Physical examination of the patient showed that he was an individual with general built, fair nourishment state and was having proportionate body. Patient had normal size of penis. Skin texture of penis was normal with curve shaft, normal prepuce and glans. On inspection, no signs of hydrocele or varicocele were found. After detailed examination, semen analysis was done where in total sperm count was 13 million/ml, motility of sperm 55% and 10% sperm was abnormal in form. All other haematological and biochemical parameters were within normal limit. (Image -1)

Treatment Protocol:

On taking into account, that the chief cause of infertility was low sperm count, it was decided that patient can be treated with *PhalaGhrita* as it is reported to have *Vrishya* (Aphrodisiac) property. Moreover before administration of *Vajikarana* drugs, proper *Shodhana* of the body is described and thus *Virechana* procedure was done prior to starting of *PhalaGhrita* administration. For the purpose of *Virechana*, for the first 3 days, for *Deepana* and *Pachana*, 2gm of *TrikatuChurna* was administered twice in a day with lukewarm water after meal. On the 3rd day, after assessing the status of the patient, plain ghee in the dose of 40ml was given, early morning on empty stomach with lukewarm water and was observed for the proper *Snehana* features and accordingly for next 5 days, the dose of ghee was given in increased pattern till the patient achieve proper *Snehana* features. Patient had consumed 200ml of Ghee on 5th day of *Snehana*. After completion of *Snehana*, for the next 3 days whole body massage and fomentation with *BalaTaila* and *Vashpa Swedana* was done daily. During this period, patient was kept on normal diet with precautions, to avoid excessive oil or heavy food items. On the day of *Virechana* after whole body massage and fomentation in the morning *Virechana Yoga*⁵ of *TriphaladiKwatha* was given. For the preparation of *TriphaladiKwatha*, 50gm of coarse powder of *Triphala* and 25gm of *Trivritta* was taken. To this 4times water was added and boiled until it was reduced to one fourth. To this prepared *Kwatha*, 5 gm of *Danti* powder was added taking into consideration of *Koshtha* of the patient. During *Virechana* the vital of the patients and details of *Vega/ Upvegawere* recorded and patient remained stable throughout the procedure. Patient had attained *MadhyamaShudhhi* with 16 Vega of *Virechana*.

After completion of *SamsarjanaKrama*, *PhalaGhrita* 10 ml once a day orally was given to patient before breakfast in the morning with a cup of lukewarm milk and sugar candy for the duration of two months.

Results:

Semen analysis reports were done with appropriate precautions and were repeated after completion of procedure of *Virechana* and after two months treatment with *PhalaGhrita* orally.

The total sperm count which was 13 million/ml at the beginning of the course of *Virechana* increased to 82 million/ml after completion of *Virechana* procedure, which further increased to 95 million/ml after two months treatment of *PhalaGhrita*. Similarly there was progressive improvement in Sperm motility 55% to 95%. After end of this therapy, couple was successful in attaining parenthood. (Image -2)

Discussion:

Samshodhana (cleansing procedures) is one of the important therapies of Ayurveda which deals mainly with elimination of the aggravated *Doshas* from the body, resulting in permanent and prolonged effect of drugs. This is the reason why, Ayurveda advocates the use of *Shodhana* (cleansing procedures) prior to *Shamana* therapy especially *Rasayana* (Rejuvenate) and *Vajikarana* (Aphrodisiac) therapies⁶. The reason is, *Shodhana* procedures open the occluded channels in the body and this enhances the therapeutic efficacy of the drug. Also, it is reported that *Virechana* enhances the quality level of *Shukra* (Semen)⁷. *PhalaGhrita* is a commonly used and prescribed Ayurvedic polyherbal formulation in male and female infertility. In classics, *Phala Ghrita* has also been indicated in the management of *ShukraDosha* and due to the drugs like *Ashwagandha*, *Shatavari*, *Gokshura*, *Punarnava* which processed in medicines like *Manjishtha*, *Daruharidra*, *Haridra*, *Priyangu* and cow milk it has been attributed with potent aphrodisiac effect along with potency of penetration till *Shukra Dhatu*.

Conclusion:


It can be stated that *Virechana* procedure followed by *PhalaGhrita* intake orally can increase total sperm count and thus, can be adopted as treatment protocol for the cases of oligozoospermia with no other major complication.

References:

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Case No M 121
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INSTITUTE FOR POST GRADUTE TEACHING & REASERCH IN AYURVEDA
GUJARAT AYURVEDA UNIVERSITY JAMNAGAR
DEPARTMENT OF PATHOLOGY


SEMEN ANALYSIS

Name of Patient: *Jayendra Vadhwa* **Age:** yr *30*
OPD Reg. No: *54840* **Date:** *5/11/15*
Provisional Diagnosis: *oligo* **Physician:** *[Signature]*

Date of Examination: *5/11/16* **Collection place:** *lab*
Time of Examination: *10:10 Am* **Collection time:** *9:30 Am*
Appearance: *Opaque grayish white*
Quantity: *2:0ml*
Liquification time: *20min*
Reaction: *Acidic/Alkaline*

Sperm count : *13* million cells/ml
Motility : *55* %
Active progressive motile : *40* %
Sluggishly progressive motile : *15* %
Non Motile : *45* %
Abnormal forms : *16-18* %
Others : *3-6* % *Pus cells / WBC*
Remarks : %
Date: *5/11/16* **Pathologist:** *[Signature]*

2964

This is Case of Dr Jitendra
 Guide Dr M (Sgt.)
 Dept of PC
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GUJARAT AYURVEDA UNIVERSITY JAMNAGAR
DEPARTMENT OF PATHOLOGY



SEMEN ANALYSIS

Name of Patient: Jeyendram Age: yr 30
 OPD Reg. No: 54840 Date: 19/12/16
 Provisional Diagnosis: oligozoospermia Physician: J. (M) Vastan

 Date of Examination: 19/12/16 Collection place: Home collect
 Time of Examination: 10:00 AM Collection time: 9:10 AM
 Appearance: Opague Grayish white
 Quantity: 25 ml
 Liquification time: 20
 Reaction : Acidic / Alkaline
 Sperm count : 62 million cells/ml
 Motility : 10 %
 Active progressive motile : 02 %
 Sluggishly progressive motile : 08 %
 Non Motile : 90 %
 Abnormal forms : 15 %
 Others : 1 %
 Remarks : _____ %
 Date: 19/12/16 Pathologist: _____

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 Dept of PC
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GUJARAT AYURVEDA UNIVERSITY JAMNAGAR
DEPARTMENT OF PATHOLOGY



SEMEN ANALYSIS

Name of Patient: Jeyendram Age: yr 30
 OPD Reg. No: 7132 Date: 23/12/16
 Provisional Diagnosis: oligozoospermia Physician: J. (M) Vastan

 Date of Examination: _____ Collection place: Home collect
 Time of Examination: 10:20 AM Collection time: 9:25 AM
 Appearance: Opague Grayish white
 Quantity: 2.0 ml
 Liquification time: 25
 Reaction : Acidic / Alkaline
 Sperm count : 95 million cells/ml
 Motility : 95 %
 Active progressive motile : 80 %
 Sluggishly progressive motile : 15 %
 Non Motile : 05 %
 Abnormal forms : _____ %
 Others : 02 %
 Remarks : _____ %
 Date: _____ Pathologist: _____

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*Theosis Case of Dr Jitendra
Case Dr M (Case)
Dept of M*

wo-39/10.000/5-2016/Bioche

INSTITUTE FOR POST GRADUATE TEACHING & RESEARCH IN AYURVEDA
Gujarat Ayurved University, Jamnagar.
Request for the Biochemical Investigations

Name..... Jayendra Nath Vadher Age & Sex 30
O.P.D. No. 54840 Date 28/9/15 I.P.D. No. Date
Provisional Diagnosis..... obesity Ward/Bed No.....
Investigations Required as mark Below.
Date of Request 5/11/15 Physician..... J Deptt. M Sign..... J

REPORT OF THE DEPARTMENT OF BIOCHEMISTRY

Test	Report	Unit
<input type="checkbox"/> Blood Sugar (F/R)	<u>91</u>	mg/dL
<input type="checkbox"/> Blood Sugar (PP)		mg/dL
<input type="checkbox"/> S. Cholesterol	<u>160</u>	mg/dL
<input type="checkbox"/> S. Triglyceride	<u>105</u>	mg/dL
<input type="checkbox"/> HDL Cholesterol	<u>60</u>	mg/dL
<input type="checkbox"/> S. VLDL		mg/dL
<input type="checkbox"/> S. LDL		mg/dL
<input type="checkbox"/> Blood Urea	<u>21</u>	mg/dL
<input type="checkbox"/> S. Creatinine	<u>1.0</u>	mg/dL
<input type="checkbox"/> S. G. P. T.	<u>25</u>	IU/L
<input type="checkbox"/> S. G. O. T.	<u>30</u>	IU/L
<input type="checkbox"/> Total Protein		gm/dL

Test	Report	Unit
<input type="checkbox"/> Albumin		gm/dL
<input type="checkbox"/> Globulin		gm/dL
<input type="checkbox"/> Alkaline Phosphatase		IUL
<input type="checkbox"/> Bilirubin (T)		mg/dL
<input type="checkbox"/> Billirubin (D)		mg/dL
<input type="checkbox"/> Uric Acid		mg/dL
<input type="checkbox"/> S. Calcium		mg/dL
<u>S. FOL</u>	<u>5.9</u>	<u>mg/dL</u>
<u>S. LH</u>	<u>5.1</u>	<u>mg/dL</u>
<u>S. Test</u>	<u>699.92</u>	<u>mg/dL</u>

Remarks :-

Date :-

BC/6205/20/L-2017

[Signature]
Biochemist

*Theosis Case of Dr Jitendra
Case Dr M (Case)
Dept of M*

wo-39/10.000/6-2016/Bioche

INSTITUTE FOR POST GRADUATE TEACHING & RESEARCH IN AYURVEDA
Gujarat Ayurved University, Jamnagar.
Request for the Biochemical Investigations

Name..... Jayendra Nath Age & Sex..... 30
O.P.D. No. 54840 Date 28/9/15 I.P.D. No. Date
Provisional Diagnosis..... obesity Ward/Bed No.....
Investigations Required as mark Below.
Date of Request 23/12/17 Physician..... J Deptt. M Sign..... J

REPORT OF THE DEPARTMENT OF BIOCHEMISTRY

Test	Report	Unit
<input type="checkbox"/> Blood Sugar (F/R)	<u>89</u>	mg/dL
<input type="checkbox"/> Blood Sugar (PP)		mg/dL
<input type="checkbox"/> S. Cholesterol	<u>119</u>	mg/dL
<input type="checkbox"/> S. Triglyceride	<u>60</u>	mg/dL
<input type="checkbox"/> HDL Cholesterol	<u>41</u>	mg/dL
<input type="checkbox"/> S. VLDL		mg/dL
<input type="checkbox"/> S. LDL		mg/dL
<input type="checkbox"/> Blood Urea	<u>19</u>	mg/dL
<input type="checkbox"/> S. Creatinine	<u>1.0</u>	mg/dL
<input type="checkbox"/> S. G. P. T.	<u>19</u>	IU/L
<input type="checkbox"/> S. G. O. T.	<u>20</u>	IU/L
<input type="checkbox"/> Total Protein		gm/dL

Test	Report	Unit
<input type="checkbox"/> Albumin		gm/dL
<input type="checkbox"/> Globulin		gm/dL
<input type="checkbox"/> Alkaline Phosphatase		IUL
<input type="checkbox"/> Bilirubin (T)		mg/dL
<input type="checkbox"/> Bilirubin (D)		mg/dL
<input type="checkbox"/> Uric Acid		mg/dL
<input type="checkbox"/> S. Calcium		mg/dL
<u>S. FOL</u>	<u>5.1</u>	<u>mg/dL</u>
<u>S. LH</u>	<u>4.8</u>	<u>mg/dL</u>
<u>S. Test</u>	<u>620.1</u>	<u>mg/dL</u>

Remarks :-

Date :-

BC/ /20 -20

[Signature]
Biochemist

Theater's case of Dr Jitendra
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Dept + of

36/20,000/4-2016/Hiform-1
INSTITUTE FOR POST GRADUATE TEACHING & RESEARCH IN AYURVEDA
Gujarat Ayurved University, Jamnagar.
HAEMATOLOGICAL INVESTIGATION FORM

Name.....Jayendrabhai Vadhwa..... Age & Sex..... 30
O.P.D. No.....2822..... Date.....23/2/17..... I.P.D. No..... Date.....
Provisional Diagnosis.....aligerosoker..... Ward/Bed No.....
Investigations Required.....As Below.....
Date of Request..... Physician.....M..... Deptt.....ICU..... Sign.....[Signature]

Total W. B. C. :- 6.600 /Cumm

Differential W.B.C. Count :-

Neutrophils	:-	<u>59</u>	%	Blood Indices :
Lymphocytes	:-	<u>35</u>	%	MCV :-
Eosinophils	:-	<u>03</u>	%	MCH :-
Monocytes	:-	<u>03</u>	%	MCHC :-
Basophils	:-	<u>00</u>	%	AEC :-
Other Cells	:-	<u>-</u>	%	

Haemoglobin :- 13.6 gms. %
P.C.V. :- 39.8 %
E.S.R. :- 02 mm/ hr (Westergreen)
Total R.B.C. count :- 4.86 mil /cumm
Platelet count :- 261 10³ / ul

General Blood Picture :-
Parasites
Blood Group :- Rh - Factor :-

Date : 23 FEB 2017; Pathologist [Signature]

5754

Theater's case of Dr Jitendra
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INSTITUTE FOR POST GRADUATE TEACHING & RESEARCH IN AYURVEDA
Gujarat Ayurved University, Jamnagar.
HAEMATOLOGICAL INVESTIGATION FORM

Name.....Jayendrabhai Vadhwa..... Age & Sex..... 30
O.P.D. No.....2822..... Date.....23/2/17..... I.P.D. No..... Date.....
Provisional Diagnosis.....aligerosoker..... Ward/Bed No.....
Investigations Required.....As Below.....
Date of Request..... Physician.....M..... Deptt.....ICU..... Sign.....[Signature]

Total W. B. C. :- 6.600 /Cumm

Differential W.B.C. Count :-

Neutrophils	:-	<u>59</u>	%	Blood Indices :
Lymphocytes	:-	<u>35</u>	%	MCV :-
Eosinophils	:-	<u>03</u>	%	MCH :-
Monocytes	:-	<u>03</u>	%	MCHC :-
Basophils	:-	<u>00</u>	%	AEC :-
Other Cells	:-	<u>-</u>	%	

Haemoglobin :- 13.6 gms. %
P.C.V. :- 39.8 %
E.S.R. :- 02 mm/ hr (Westergreen)
Total R.B.C. count :- 4.86 mil /cumm
Platelet count :- 261 10³ / ul

General Blood Picture :-
Parasites
Blood Group :- Rh - Factor :-

Date : 23 FEB 2017; Pathologist [Signature]

5754

The best case of Dr Jitendra
Guide Dr. M. V.
INSTITUTE FOR POST GRADUATE TEACHING & RESEARCH IN AYURVEDA
Gujarat Ayurved University, Jamnagar.
HAEMATOLOGICAL INVESTIGATION FORM

wa-70/20,000/1-2016/H-Form-1

Name: Jitendra Age & Sex: 30

O.P.D. No. 4 Date: 21-11-16 I.P.D. No. _____ Date: _____

Provisional Diagnosis: AS Ward/Bed No. _____

Investigations Required: AS Physician: Dr. Jitendra Deptt: MC Sign: [Signature]

Date of Request: 21-11-16 Physician: [Signature] Deptt: MC Sign: [Signature]

Total W. B. C. :- 9200 /Cumm

Differential W.B.C. Count :-

Neutrophils	:-	<u>71</u>	%
Lymphocytes	:-	<u>23</u>	%
Eosinophils	:-	<u>03</u>	%
Monocytes	:-	<u>03</u>	%
Basophils	:-	<u>00</u>	%
Other Cells	:-	<u>-</u>	%

Blood Indices :

MCV :- _____

MCH :- _____

MCHC :- _____

Haemoglobin :- 13.2 gms. %

P.C.V. :- 38.5 %

E.S.R. :- 10 mm/ hr (Westergreen)

Total R.B.C. count :- 4.59 mil /cumm

Platelet count :- 256 10³ / ul

B. T.mt. &sec. C.T.mt. &sec.

General Blood Picture :-

Parasites


Blood Group :-

Rh - Factor :-

Date : 5 NOV 2016 3729

Pathologist [Signature]

માતા તંદુરસ્ત-બાળક તંદુરસ્ત, વ્યક્તિ તંદુરસ્ત-સમાજ તંદુરસ્ત.



મમતા કાર્ડ

આંક 93

કુટુંબની વિગત વાડર

માતાનું નામ : જીતેન્દ્રીબા જલવંશી ઉંમર : 23

માતાનો ઓળખ નંબર : _____

માતાની જન્મ તારીખ : _____

પિતાનું નામ : જલવંશીભાઈ શિવુભાઈ વાડર

સરનામું : સી.વિ.વ.સ. ૨ સી. ૭

મોબાઈલ નંબર* : ૯૯૭૯૯૬૦૪૪૦

*વિગતવાર-સંબંધીનો મોબાઈલ નંબર આપી શકાય છે.

માતાનું શિક્ષણ : અશિક્ષિત/પ્રાથમિક/માધ્યમિક/ઉ. માધ્યમિક/ગ્રેજ્યુએટ

જલમની વિગત

બાળકનું નામ : _____

જન્મ તારીખ : / / જન્મનું વજન : / / ગ્રામ

ભેળી : બાબો : જન્મ નોંધણી નંબર : _____

દીકરો-દીકરી એક સમાન

ગર્ભાવસ્થાની વિગત

છેલ્લા માસિકની તારીખ : ૬/૧૨/૧૬ સુવાવડની સંભવિત તારીખ : ૨૩/૯/૧૭ કુલ જીવિત બાળકો / કુલ ગર્ભ : /

છેલ્લી સુવાવડનું સ્થળ : સંસ્થા ઘર ઘાલની સુવાવડનું સ્થળ : સંસ્થા ઘર

જનની સુરક્ષા ચૂકવણી : _____ તારીખ : / / જનની સુરક્ષા યોજના નોંધણી નંબર : _____

સંબંધિત સંસ્થાઓની માહિતી

આંગણવાડી : _____

પેટા કેન્દ્ર : જાડી- લાંદર જી. બી સેક્યુ ૭૦૬૯૦૩૬૯૫૦

પ્રાથમિક આરોગ્ય કેન્દ્ર : જાડી સેક્ટ

હોસ્પિટલ/એફ.આર.યુ. : _____

આંગણવાડી રજી. નં. : _____ પેટા કેન્દ્ર રજી. નં. : _____ તારીખ : / /

રેકર્ડ તારીખ અને સ્થળ : _____

આરોગ્ય અને પરિવાર કલ્યાણ વિભાગ
ગુજરાત રાજ્ય

નોંધ: માતા અને બાળક માટે આ કાર્ડ અગત્યનું હોવાથી સાચવીને રાખવું. સંઘર્ષ સેવા માટે જવાનું સાચ ત્યારે આ કાર્ડ સાથે રાખવું.

સગર્ભાવસ્થાની વહેલી નોંધણી: માતા અને બાળકના આરોગ્ય માટે જરૂરી.