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## "Sarvada Sarvabhavanam Samanyam Vriddhikaranam" for the Corroboration of the Theory, the Medical Study of Shukrajanan Mahakashaya and Shukrashodhan Mahakashaya in Ksheenashukra (Oligospermia)

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### ABSTRACT:

Man in the modern era is fastened by many physical and mental ailments. *Ksheenashukra* is one of the diseases caused by vitiated *Vata* and *Pitta*. The present study deals with sample size of 20 patients who presented with *Ksheenashukra* symptoms in two groups each for 2 months. Group -A were given *Shukrajanan Mahakashaya* and Group B were given *Shukrashodhan Mahakashaya*. The herbs which were not available were substituted by representative herbs. The medicines given were in form of decoction; dose 20 ml BD for two months. According to the basic principles of *Ayurveda* that is principle of *Samanya* (similar identities) the properties identical to those of *Shukra Dhatu* will help it to increase in the body. At the end of the trial the comparative study of both the groups was comprehended in form of results. In case of quantitative ( sperm count, P<sup>H</sup>, volume of semen) analysis Group-A showed better results. In case of qualitative analysis (motility of sperms) Group-B was found better than Group-A. With respect to subjective parameters Group-A Showed better results than Group- B.

**Keywords:** *Shukrajanan, Mahakashaya, Dhatu*

### INTRODUCTION

According to all *Acharya* combination of *Chetna* (soul or life element) and *Panch Mahabhuta Vikara* (derivates of 5 basic elements of nature) is called *Shareera*. This body is the establishment of grief-stricken disease and pleasurable health. *Dosha, Dhatu & Mala* to be modulated by their natural evidence is a condition of maladies. The aetiology behind decreasing and increasing of *Dhatu* is respectively

*Tikshna* (High) and *Manda* (Low) *Dhatuagni*. *Sama Dhatuagni* leads to formation of *Samyak Dhatu*. In the sequence of *Dhatu Poshak Krma Sukra* is the last *Dhatu* and is the essence of all the *Dhatu*s. The presence of living and highly motile sperm with in ideal *Sukra* (semen) is responsible for giving rise to well-being and healthy progeny. If the semen is not forming properly the one is not able to give rise to new birth. For the purpose of prevention



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and solving this problem, an attempt has been made to mitigate the disease by the use of medicinal formulations. Signs of oligospermia should be taking for the purpose of diagnosis in form of subjective criteria. In the form of the objective criteria laboratorial investigations of semen is performed and after using medicines, the statistical changes have been made.

**Principle:** - The essential principle of treatment in Ayurveda is “*Sarvada Sarvabhavanam Samanyam Vriddhikaranam (Ch.su. 1/44).*” Intake of medicine or food with qualities similar to those of our bodily tissues, according to this *Siddhanta*, will result in an increase. With the help of this principle in this scientific article an effort is made to increasing the Sukra (semen) by using *Shukrajanan & Shukrashodhan Mahakashaya*, for the reason that properties of these medicinal formulations are same as those properties of *Sukra*.

## AIMS AND OBJECTIVE

1. *Sarvada Sarvabhavanam Samanyam Vriddhikaranam*:- To confirm and prove the principle.
2. Results and effects of *Sukrajanan Mahakashaya* in oligospermia and its medical studies
3. Results and effects of *Sukrashodhana Mahakashaya* in oligospermia and its medical studies.

## MATERIALS AND METHODOLOGY

Under this case history of patient, selection of patient and facts, facts have been determined about diagnosis. The result assessment, an attempt has been made to present the simplest results using the appropriate statistical methods by evaluating the symptoms based on impaired symptoms and changes in laboratory tests.

For the research work, 40 patients have been selected from the National Institute of Ayurveda, Jaipur on the basis of their symptoms. The details of the individual case history and disease of all the selected patients have been taken on the basis of history sheet.

### Criteria of patient selection: -

#### A. Inclusion Criteria:

1. Age limit - Above 16 years and up to 70 years, patients were taken for research
2. Marital Status - Married oligospermia patients.
3. Symptoms: *Daurbalya*, *Mukhshosh*, *Pandu*, *Shrama*, *Shukravisarg* (nightfall & early discharge), *Klaivya* (impotency), *Medruvrishan Vedna* (Pain in penis and scrotum), *Maithun-ashakti* (unable to perform sexual

activities), *Chirat-prasek* (difficulty & delay ejaculation) & ejaculation with little amount of blood.

#### B. Exclusion Criteria:

1. Unmarried persons.
2. Patients under 16 years of age and above 70 years of age.
3. Female patients.

**Laboratory investigations: - Semen Analysis-** (Semen volume, P<sup>H</sup>, Total sperm count, Sperm motility, Liquefaction time, Appearance, Odour & Viscosity)

#### Drug use:-

The effects of drug used on selected patient have been studied in two groups.

1. Group - (A) Use of *Sukrajanan Mahakashaya* in 20 patients.
2. Group - (B) Use of *Shukrashodhan Mahakashaya* in 20 patients,

In these, if drugs are not available then substitute drugs have been taken. 20 ml of decoction is given for patients twice a day for 2 months.

#### Drug formulations:-

Formulations used in research work is *Shukrajanan Mahakashaya* and *Shukrashodhan Mahakashaya*, ingredients of formulations, method of creation, pattern of formulations created and properties of its components have been studied in detail.

\**Shukrajanan Mahakashaya* = *Ashwagandha*, *Satavri*, *Vidarikanda* – 4 – 4 grams each.

*Mudgaparni*, *Mashaparni*, *Jatamansi* - 2 - 2 grams each.

\**Shukrashodhan Mahakashaya* = *Kustha*, *Katfal*, *Talmkhana*, *Samudraphen* each 4- 4 grams.

They have been used to nourish *Shukra* in *Dhatukshayavastha*, especially in *Shukrakshayavastha* (attenuated), because *Shukra* having *Madhur*, *Snigdha*, *Sheet* and *Soumya guna* properties same as used medicine of *Shukrajanan* and *Shukrashodhan Mahakashaya*, so in oligospermic patient when these *gunas* get decreases then ‘*Sarvada Sarvabhavanam Samanyam Vriddhikaranam*’ with the help of this principle these *gunas* get increases to treat and manage oligospermic patient easily.

**Pathya-aahara:** - *Ksheer*, *Ghrit*, *Sathi Rice*, *Masha* (Udad), *Mansarasa*, *Munkka*, *Pindkharjur*, Almond, Cashew nut, Walnuts etc.

**Pathya -vihara:** - Song-music, Sweet words, Pleasures, Beautiful pictures, Best bed, posture etc.

**Apathya -aahara:** - Mustard oil, *Viruddhahar*, Bitter,

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*Tikta*, Hot, *Vidahi*, acidic food etc.

**Apathya- vihara:-** Hypocrisy, extreme labour, night awakening etc.

**Criteria for disease prevention:** - Taking the above-mentioned disease assessment criteria, they were intently selected and consumed medicine twice a day for two months with strictly following *Pathya apathya*.

1. Decreased symptoms of disease.
2. Achieving appropriate results in lab tests of the patient.
3. Increase in the general health of the patient.
4. Implantation of embryo in the wife by the suffering patient.

#### Statistical analysis-

For research work, *Shukrajanan* and *Shukrashodhan Mahakashaya* was used for two months in two groups of 20 - 20 patients. Before the start of treatment and after the end of the medical period, BT and AT were taken according to the prescribed criteria for the determination of disease. The mean difference, % of change, SD, SE and t-values was obtained by applying paired student t -test to them.

P value was obtained on the basis of degree of freedom (d.f.) and t-value obtained. Significant and insignificant were analyzed based on this P value.

Insignificant P < 0.10

Significant P < 0.01

Highly Significant P < 0.001

Based on the percentage of relief in symptoms, the outcome evaluation was done as follows -

Full profit - 76 - 100% on profit,

Best Gain - 51 - 75% on profit,

Medium profit - 26 - 50% on profit,

Minor profit - 01 - 25% on profit &

No Gain - at 00% on profit.

## RESULTS

(Objective parameters)

In a total of 20 selected patients, the preclinical status of the use of *Shukrajanan Mahakashaya* and the advantageous position in the figurative position after use is presented statistically as follows.

According to graph no-1, the general benefit was achieved in *Shukrajanan Mahakashaya*, in *Daurbalya*- 86.49%, in *Mukhshosh*- 62.50%, in *Pandu*- 70%, 80% in the *Sadan*, 75.76% in *Shrama*, 46.88% in *Klaivya*, 62.50% in

*Medruvrishan Vedana* & 75% gain in *Toda* (pain like pricking)

## DISCUSSION

Out of 6 drugs formulations used are mainly *Madhur*, *Snigdha*, *Madhur Vipaka* and *Vatapitta Vhamaka* due to this they are *Daurbalya* and *Mukhshosh Nashak* parallel to that *Shrama*, *Sadan*, *Toda* are *Vata* prominent factors *Vata Shamaka* formulations of gives good results in the improving these symptoms, results seen in *Pandu*, *Klaivya*.

#### Semen test –

In the laboratory test of semen, the results obtained before and after the use of *Shukrajanan Mahakashaya* are shown as follows:-

1. According to graph no 2, while using *Shukrajanan Mahakashaya*, good results are seen in count of sperms in semen.

2. The effect on semen volume was normal with the use of *Shukrajanan Mahakashaya*

3- The level of gain on semen PH from drug use remained normal.

4. Using *Shukrajanan Mahakashaya*, the effect on R.L.P was generally beneficial.

5. Using *Shukrajanan Mahakashaya*, the effect on S.L.P beneficial.

6. Using medicinal formulations effect on mortality of sperms N.P was uneconomical.

7. Using medicinal formulations effect on mortality of sperms I.M was uneconomical.

The ideal *Gunas* of *Shukra* are *Snigdha*, *Picchala*, *Avidahi*, *Guru*, *Bahala* (more in amount). In the case of oligospermia these *Gunas* get reduced and while using formulations containing these *Gunas* good results are seen in oligo-spermic patient. *Sarvada Sarvabhavanam Samanyam Vriddhikaranam*'' with the help of this principle following results are achieved. Aphrodisiac properties are present in these formulations which lead to increase enthusiasm and happiness in body which becomes the cause of increasing the amount of semen indirectly. This disease is due to *Vatapitta* and formulations used in this are *Vatapitta Shamaka*. Graph-2

\*Statistical analysis of drug use in Group - (B)

\*In class - (B) 20 patients have been selected in which the advantageous position in the symptomatic situation before the use of *Shukrashodhan Mahakashaya* and the

symptomatic situation after use is presented statistically as follows.

According to graph no. 3, the use of *Shukrashodhan Mahakashaya* was beneficial in a symptomatic situation - 84.00% beneficial in *Daarbalya*, 72.22% in *Mukhshosh*, 73.33% in *Pandu*, 75% in *Sadan* and 66.66% in *Shrama*, 39.33% in *Klaivya*, 46.66% in *Medruvrishan vedana* and in *Toda* 33.33% benefit.

In above used medicinal formulations ingredients having property of *Madhur Rasa*, *Snigdha*, *Sheeta*, *Picchala* and *Tridosha shamaka* that "why they gives beneficial results in *Mukhshosh* and *Daarbalya* same with *Toda* and *Shrama* which are due to dominance of *Vata*. *Sadan* is due to accumulation of *Aama*, medicines used having property of *Laghu* and *Tikta Rasa* so they helps in *Aama Pachana*. Result of this, *Rasapusti* is occurs which lead to formation of *Suddha Shukra* so that there are beneficial results in *Pandu*, *Medruvrishan Vedana* and *Klaivya*.

In the laboratory test of semen, the results obtained before and after the use of *Shukrashodhan Mahakashaya* have shown the following results:-

1. According to graph no 4, the effect on sperm count was generally beneficial.
2. The effect of the use of *Shukrashodhan Mahakashaya* on semen-volume was of general benefit.
3. The effect of the use of *Shukrashodhan Mahakashaya* on pH of semen was of general benefit.

The *Shodhan* medicines are helpful in the manufacture of *Pakadhatu* by eliminating obstruction by cleaning and routing the channels. Result of this is formation of adequate amount of *Suddha Sukra* which has a normal (neither acidic nor alkaline) nature.

1. Using *Shukrashodhan Mahakashaya* effects on motility of sperm R.L.P was beneficial.
2. Using *Shukrashodhan Mahakashaya* motility of sperm S.L.P was beneficial.
3. Using *Shukrashodhan mahakashaya* motility of sperm N.P was not that much beneficial.
4. Using *Shukrashodhan Mahakashaya* motility of sperm I.M was beneficial.

Medicines used in *Shukrashodhan Mahakashaya* having properties *Laghu*, *Snigdha*, *Sheeta*, *Picchala* and *Madhur*. Due to *Laghu* and *Snigdha Gunas* they provide *Bala* and motility to sperms. Due to *Madhur*, *Picchala* and *Sheeta*, they provide enthusiastic spermatozoa. They clear the

channels in body (*Srothas*) to make the sperm motile without any restrictions.

\*Comparative statistical analysis of the effect of drug formulations with unpaired student t- test on both the selected group of patients suffering from oligospermia is as follows -

1. The effect of *Shukrashodhan* and *Shukrajanan Mahakashaya* on statistically symptomatic *Shukrajanan* was more effective in curing the symptoms of patient.
2. Statistically the difference between the effect of *Shukrajanan* and *Shukrashodhan Mahakashaya* on sperm count remained non-significant. However, *Shukrajanan Mahakashaya* was more effective.
3. Statistically the difference between the effect of *Shukrajanan* and *Shukrashodhan Mahakashaya* on semen volume remained non-significant. However, *Shukrajanan Mahakashaya* proved more beneficial than *Shukrashodhan Mahakashaya* in increasing semen volume.
4. Statistically the difference between the effect of *shukrajanan* and *shukrashodhan mahakashaya* on pH of semen remained non-significant. However, *shukrajanan Mahakashaya* proved more beneficial in maintaining the pH of semen than *Shukrashodhan Mahakashaya*.
5. Statistically the difference between the effect of *Shukrajanan* and *Shukrashodhan Mahakashaya* on R.L.P remained non-significant. However, *Shukrajanan Mahakashaya* proved more beneficial than *Shukrashodhan Mahakashaya* to increase R.L.P.
6. Statistically the difference between the effect of *Shukrajanan* and *Shukrashodhan Mahakashaya* on S.L.P remained non-significant. However, *Shukrajanan Mahakashaya* proved more beneficial than *Shukrashodhan Mahakashaya* to increase S.L.P
7. Statistically the difference between the effect of *Shukrajanan* and *Shukrashodhan Mahakashaya* on N.P remained non-significant. However, *Shukrajanan Mahakashaya* proved more beneficial than *Shukrashodhan Mahakashaya* to increase N.P.
8. Statistically the difference between the effect of *Shukrajanan* and *Shukrashodhan Mahakashaya* on I.M remained non-significant. However, *Shukrajanan Mahakashaya* proved more beneficial than *Shukrashodhan Mahakashaya* to increase I.M.

## CONCLUSION

The researcher targeted the principle "*Sarvada Sarvabhavanam Samanyam Vriddhikaranam*" and took out

the *Shukrajanan* and *Shukrashodhan Mahakashaya* for the fault of *Shukradhatu*. The effectiveness of treatment has been determined by the use of classical symptoms and laboratory tests of 40 patients’ pre and after medically.

1. In the research presented, "*Sarvada Sarvabhavanam Samanyam Vriddhikaranam*" was confirmed through medical studies because the increase in *Shukra* from the drug used was visible due to the quality of generality (*Samanya*) in the medicine used and *Shukra Dhatu*.
2. Both qualitative and quantitative growth was observed from *Shukrajanan Mahakashaya* while using *Shukrashodhan Mahakashaya* qualitative increase was seen more than quantitative growth.
3. The main reason for this is *Ruksha, Tikta, Kashaya*, excessive hot, excessive sour, un-habitual food intake as well as excessive involve in sexual activities.
4. Due to mental reasons such as worry, grief, fear, anger etc., *Vata* and *Pitta* get vitiated (*Prakop*) and leads to oligospermia.

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**Conflict of Interest – None**

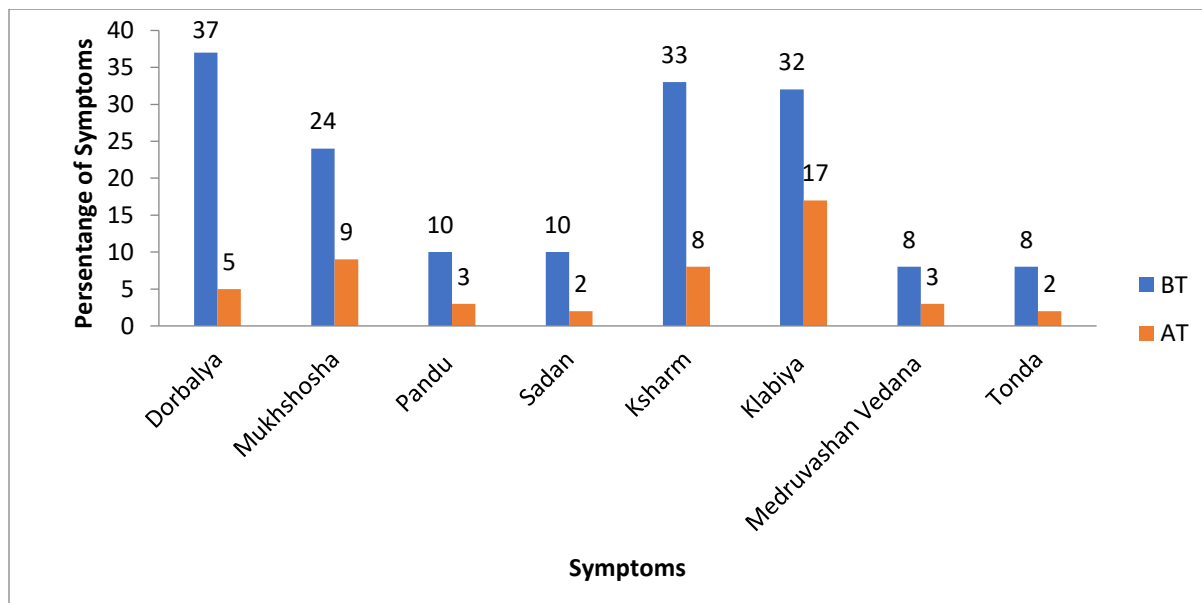
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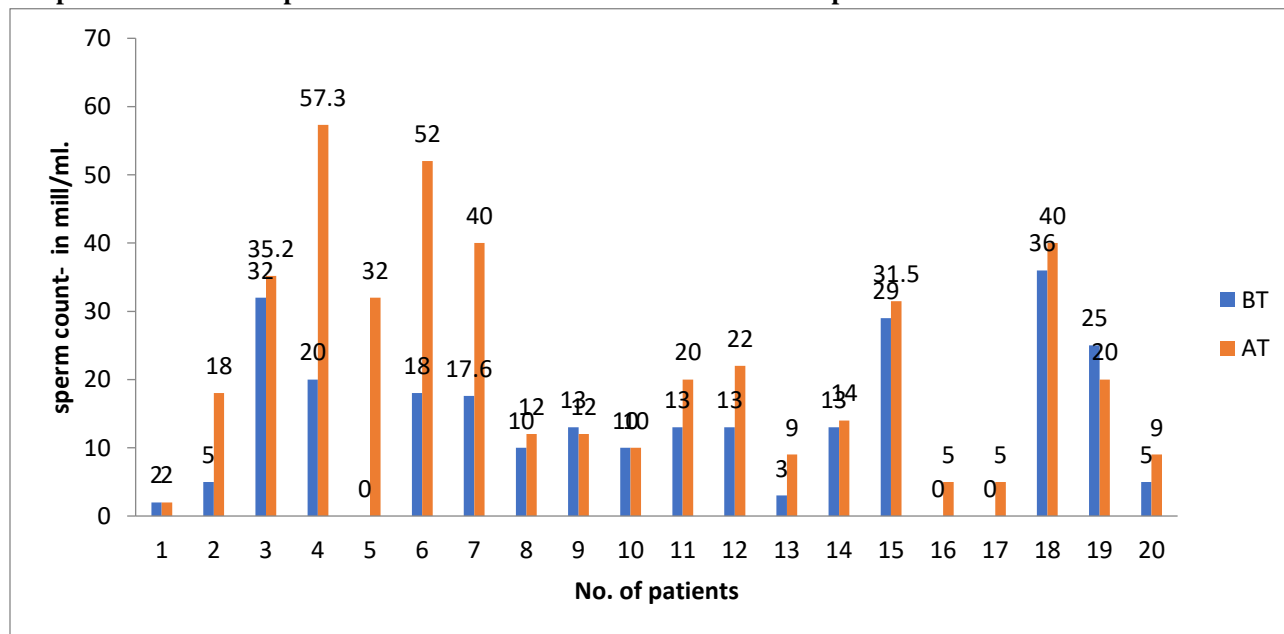
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**Graph no-1:- Percentage of Difference in symptoms In Group A**

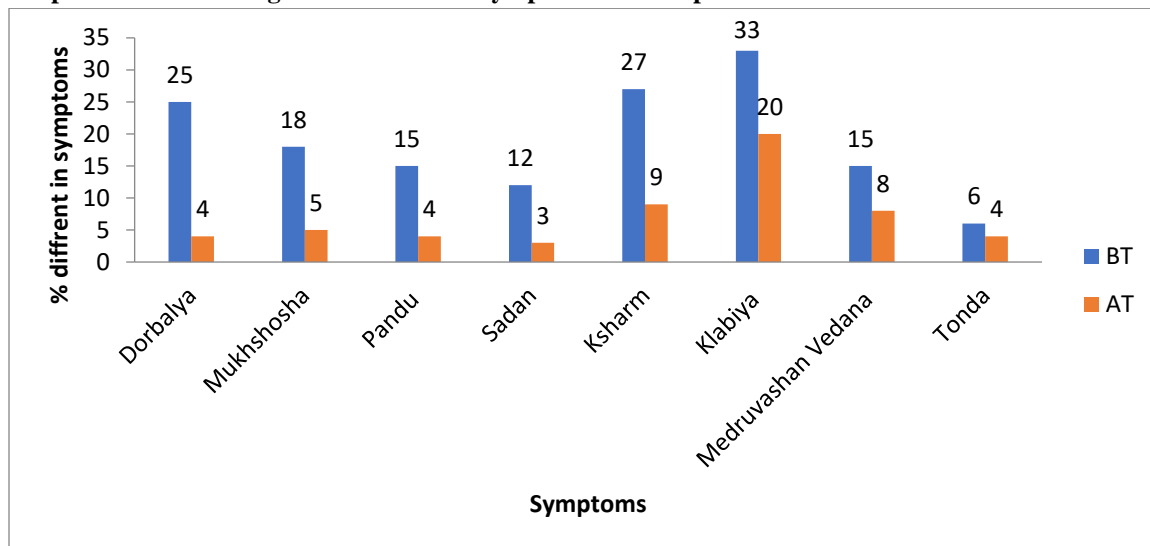


**Graph-2 Difference of Sperm count before and after Treatment In Group A**





**Graph no.3 :- Percentage of Difference in symptoms in Group B**



**Graph no. 4:- Difference of Sperm count before and after Treatment In Group B.**

