

# Role of Baladiyapan Basti in Male Infertility

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## ABSTRACT:

WHO (1976) has estimated incidence of the most global infertility as 16.7%. Oligoasthenozoospermia is one of the most common cause of male infertility. Oligoasthenozoospermia is an alteration that involves two semen parameters commonly known as decreased sperm count and reduced motility of sperms. In Ayurveda it can be correlated with Vataj Shukradusti in which Shukradhatu is quality and quantitatively depreciated.

This study attempts to explore the effect of Baladiyapan basti on Vataj Shukradusti (Oligoasthenozoospermia). In this case study, 29yrs old male patient visited OPD of Panchkarma,LRP Ayurved college and PG Research Institute, Islampur Dist Sangali, with complain of low sperm count and reduced sperm motility, therefore leading to failure in conception. He was treated with Baladiyapan Basti for 15 days. This treatment yielded improvement symptomatically as well as in semen analysis.

**Keywords: Male infertility, Vataj Shukradusti, Oligoasthenozoospermia, Baladiyapan Basti.**

## INTRODUCTION:

Acharya Charaka mentioned about the types of klabhya, and Vandhyatava separately in sutrasthana and Sharirasthana respectively.

*“Chatvari klaibhyanti beejopaghata dhawj bhanga jarayashukrakshya” (Ca.su 19/5).* The four types of impotency are explained as Bhejopghataj (due to affiliation of sperm) Dhawjabhangaj (due to erectile dysfunction) Jaraj (old age) and Sukraskhayaj (due to deminution of semen).

Vandhyatava has been long standing problem since ancient period but it is most

burning issue nowadays because of improper lifestyle. In Siddhasthana Acharya Charaka explained Basti as "ARDHA CHIKISTA". Basti is the major therapy among snehadikarma as it is combination of different drugs and does samshodhan, samshaman, sangharana of dosha. Ayurveda put forwards the concept of Ritu, Kshetra, Ambu, Beeja suddhi, Ahara, Vihar, Achar Rasayan, Rasayan and Vajeekaran. These are unique concepts which contribute major role in management of infertility. It is need of time to categorize evaluate the efficacy of treatment especially panchkarma with respect to various factors of infertility.

**Aims and Objectives**

- To study the semenogram pattern in the patients of sukradushti, i.e Oligoasthanozoospermia.
- To study effect of Baladiyapan Basti and Vajeekaran yogain their combined regimen in patient of sukradusti.
- To compare the effect of Baladiyapan Basti (CA.si12/9) & their combined regimen in the patient of sukradusti.

**Criteria for Assessment**

For this particular study we assessed the patient of vataj shinasukra. The semen sample of patient were collected before, during and after the treatment. The analysis was done as per the recommendation of WHO (1992) before and after treatment. Assessment of therapies was made by adopting two parameters, semen analysis and sexual Health Scoring.

**Patient selection Criteria**

Patient having classical symptoms showing under the heading of the Sukradusti (Vataj shinasukra). In the various Ayurvedic text along with semenogram findings like abnormal physical characters, sperm count motility. The WHO criteria (1992) for semenogram i.e. sperm count <40 million and motility <50% was considered as Oligoasthanozoospermia.

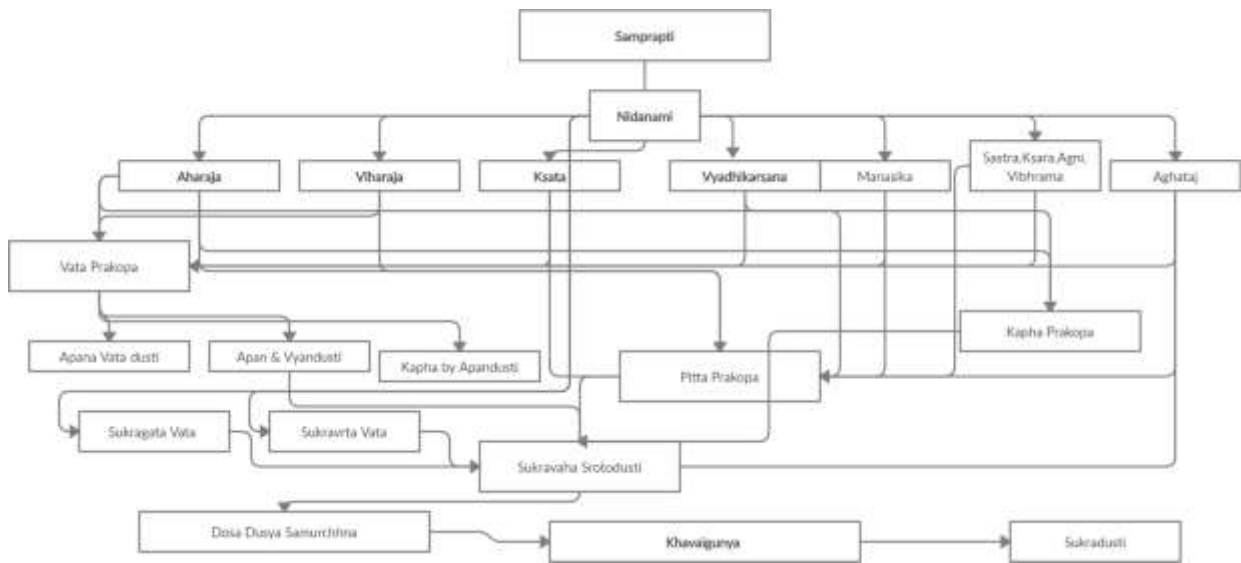
**Diagnostic Approach**

For the diagnosis of Vataj shinasukra following steps are carried out in course of treatment.

- Counselling
- Clinical History Physical Examination
- Laboratory Examination

**Modern Etiological factors Responsible for Vandhyatava**

- Early or late marriage
- Nutrition less and fat rich food, excessive intake outside food, stale food, junk food, incompatible food
- Over use of antibiotics and excess use of chemotherapy agents
- Excess use of painkillers
- Excess use of cosmetics
- Tight clothing and constant use of electronic gadgets like mobile, Computer i.e. overheating of treaties leads to low sperm count
- Mental stress and anxiety, sedentary lifestyle are some factors responsible for infertility



**Material and Methods**

Case study- A 29Yrs old patient visited OPD of Panchkarma LRP Ayurveda College and PG Research Institute Islampur and presented with chief complain of failure to conceive in spite of 5Yrs of their active married life. The associated complaints were decreased appetite and fatigue since last 6 months. His semen analysis report suggests Oligoasthanozoospermia as less number of sperms and lower motility were found, so patient was diagnosed with Oligoasthanozoospermia (kshina sukra) and admitted in IPD of Panchkarma LRP Ayurveda College and PG Research Institute for treatment. Baladiyapan Basti was advised to patient as the treatment modality of choice.

observed. samsarjana karma was advised for 7 days.

- Basti: Baladiyapan Basti-450ml given for 15 days
- Shaman Chikista
  1. Chandra Prabha vati500mgbd before meal
  2. Shatavari ghruit 15 at night after food for -2 months
  3. Kauncha Pak 5 GM BD before meal with milk for- 1 month
  4. Sweatamusali churna 3 GM BD before meal with milk-1 month
- Pathya: During Nityasevneeeya Ahara are rich in antioxidants and nutrients like hashtishali, Godhuma, Mudga, Saindhava, Amalaki, yava, Ksheera, Sarpi, Madhu, Dadima, Mrudvika, Patola were included in daily diet
- Vihara: To reduce stress and anxiety yoga, pranayam is advised. Proper following of Achar Rasayan,

**Treatment Protocol**

- Pachan: Amapachak vati500mg×2Bd × 3 days with warm water after meal
- Virechana: Snehapana with goghruit× 5 days Sarvang abhangya ×3 days Virechan-virechana was given with Triphala+Danti+Nishottar 200ml kashaya was given-16 veg

sadvrutt, Dinacharya, timely voiding of Vegas helps to overcome mental stress.

- Mode of Action of virechana: It acts on vitiated pitta dosha, decrease ushna Gina of pitta and increas sheeta guns required for formation of Shukradhatu impaired Agni by vikrit pitta also corrected by virechana. Agni is required for Prakrit nirmiti of Shukradhatu.
- Mode of Action Baladiyapan Basti: mode of action better understand based on the following, Route of administration
- Nature of medicine, Active principal and properties of medicine.

Steps followed poorvakarma and paschatkarma.

Abhangya, mridu swedana Acts dilatation of blood vessels there by enhancing blood circulation and provides nutrition thereby nourishment of Dhatus
Dhatuwardhak Rasyanaand immune Boosting Baladiyapan Basti
Balya, Bruhana, Dhatuwardhak, Pushtikara, karshyata, acts as vrushya and Rasyana nourishment of Dhatus.
Offering more nutritional value consist of higher level of iron helps in nourishment, Calcium, iron, magnesium, phosphorus sodium, zinc, supplement's higher nutrition to the body nourishment of Dhatus. Sadhyobaljananam, Indriyabalparam
Improving memory acts as Rasayan Acts as shukral, Balyakara, enhances maithunasamarthy.

**Result**

SEMEN ANALYSIS			Normal Range
<b>MICROSCOPIC EXAMINATION</b>			
SPERM COUNT	: 38	Million/ml	50 - 150
<b>SPERM MOTILITY (%)</b>			
ACTIVELY MOTILE	: 27	%	MORE THAN 60
SLUGGISHLY MOTILE	: 37	%	
NONMOTILE	: 40	%	
<b>MORPHOLOGY</b>			
NORMAL SPERMS	: 83	%	MORE THAN 70
ABNORMAL SPERMS	: 47	%	UP TO 30
<b>SPERM MOTILITY AFTER (S)</b>			
60 MIN	: 34	%	60
90 MIN	: 21	%	30
120 MIN	: 18	%	40
<b>OTHER FINDINGS</b>			
PUS CELLS	: 4-5		0-1
EPITHELIAL CELLS	: ABSENT	Hgt	ABSENT
R.B.Cs	: ABSENT		
TRICHOMONAS	: ABSENT		

Figure 1: Before Treatment

SEMEN ANALYSIS			Normal Range
<b>PHYSICAL EXAMINATION</b>			
PLACE OF COLLECTION	: INSIDE THE LAB		
METHOD OF COLLECTION	: BY MASTURBATION		
ABSTINENCE	: 3 DAYS		
<b>PHYSICAL EXAMINATION</b>			
VOLUME	: 5	ml	2 - 5
COLOUR	: OPAQUE GRAY		
VISCOSITY	: NORMAL		
LIQUIFICATION TIME	: 30	mins.	20 - 30
<b>CHEMICAL EXAMINATION (FINDINGS /HPF)</b>			
REACTION (PH)	: ALKALINE		ALKALINE
FRUCTOSE TEST	: PRESENT		

Figure 2: After Treatment

SEMEN ANALYSIS			Normal Range
<b>MICROSCOPIC EXAMINATION</b>			
SPERM COUNT	: 80	Million/ml	50 - 150
<b>SPERM MOTILITY (%)</b>			
ACTIVELY MOTILE	: 78	%	MORE THAN 60
SLUGGISHLY MOTILE	: 12	%	
NONMOTILE	: 08	%	
<b>MORPHOLOGY</b>			
NORMAL SPERMS	: 83	%	MORE THAN 70
ABNORMAL SPERMS	: 17	%	UP TO 30
<b>SPERM MOTILITY AFTER (S)</b>			
60 MIN	: 73	%	60
90 MIN	: 66	%	50
120 MIN	: 55	%	40
<b>OTHER FINDINGS</b>			
PUS CELLS	: 1-2		0-1
EPITHELIAL CELLS	: ABSENT	Hgt	ABSENT
R.B.Cs	: ABSENT		
TRICHOMONAS	: ABSENT		

Figure 3: After Treatment

Sperm count increased at significant level.

**Discussion:** important cause of infertility is adoption of modern lifestyle. Ayurveda can treat infertility by various methods of panchkarma procedures like Baladiyapan Basti, virechana and using different

formulations. Proper selection of drug and time of administration is very essential for getting the desired results.

### Conclusion

The present study tried to make a noble trial in evaluation of different characteristics of sukhra for its applied aspects. Baldiyapan Basti plays vital role to treat male infertility. From review of Ayurvedic text and case study results it is clear that Panchkarma can treat infertility successful.

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