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A CASE STUDY ON THE SUCCESSFUL AYURVEDIC MANAGEMENT OF MALE INFERTILITY DUE TO AZOOSPERMIA

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ABSTRACT

Male infertility, a significant contributor to reproductive challenges, is commonly linked to abnormalities in semen parameters such as sperm count, motility, and morphology.[1] Modern medicine often addresses these issues with hormonal therapies, antioxidants, and lifestyle interventions.[2] In contrast, Ayurveda offers alternative treatments, emphasizing natural remedies with holistic benefits.[3] *Beehj*, an Ayurvedic proprietary formulation, is recognized for its spermatogenic properties, aimed at enhancing semen quality through its antioxidant and adaptogenic effects. This case study focuses on a 36-year-old male patient diagnosed with azoospermia, characterized by 0% sperm count, motility, and morphology in his initial semen analysis in 2023. After ruling out other potential causes of infertility, the patient was administered Beehj tablets (1 gram twice daily) for three months. Beehj, known for its *Vrushya (aphrodisiac)*, *Balya (strength-promoting)*, and *Shukra dhatu vardhaka (enhancing male reproductive tissue)* properties, significantly improved semen quality and stimulated spermatogenesis. Post-treatment, the semen analysis revealed a sperm count of 17 million/mL, motility of 48%, and morphology of 52% and the couple conceived. The patient reported no adverse effects, highlighting the safety and efficacy of the medicine in male fertility management.

KEYWORDS: Male infertility, Azoospermia, Beehj, Sperm motility, Spermatogenesis.

INTRODUCTION

Male infertility, a condition that causes emotional and psychological stress for individuals and couples trying to conceive, has seen a significant rise. It has been less diagnosed compared to female infertility due to societal stigmas, underreporting, and a historical focus on female reproductive health. Additionally, the male reproductive system is less understood, complicating diagnosis.[4,5] In 2019, the global prevalence was estimated at 56,530.4 thousand, a 76.9% increase since 1990 depicting the significant rise.[6] Key factors impacting male fertility include poor diet, unhealthy lifestyles, smoking, alcohol consumption, and exposure to environmental toxins leading to low sperm count, motility, and morphology, reducing the chances of conception.[1,7] While treatments such as hormonal therapies and assisted reproductive techniques are available, they often come with high costs and inconsistent results.[2]

In Ayurveda, male infertility is addressed through the holistic lens of Shukra dhatu (Reproductive tissue) health. Disorders impacting sperm production and quality are attributed to imbalances in *Tridoshas* or the depletion of *Shukra dhatu.*[3] Ayurvedic formulations such as *Beehj* are traditionally recognized for their potential to restore balance and promote spermatogenesis. *Beehj* is believed to enhance male fertility through its *Vrushya (Aphrodisiac)*, *Balya (Strength-promoting)*, and *Shukra dhatu vardhaka (Rejuvenating reproductive tissue)* properties.

This case study explores the efficacy of *Beehj* in improving semen parameters in a patient diagnosed with azoospermia. Following a three-month course of treatment with tablet *Beehj*, the patient experienced a significant improvement in sperm count, motility, and morphology, and the couple was able to conceive. The therapeutic approach, patient outcomes, and implications for future research are discussed in detail.

CASE REPORT

A 32-year-old female and her 36-year-old male partner visited the clinic with a case of primary infertility. The couple had been attempting to conceive for four years without success. The male patient reported no significant medical, surgical, or family history apart from

occasionally experiencing mild indigestion and bloating. Investigations included semen analysis to confirm azoospermia, and transrectal ultrasound to assess for potential blockages in the ejaculatory ducts or seminal vesicles were conducted to rule out obstructive pathology.

Family history: No relevant findings.
Past medical History and Treatment: No significant findings, except mild indigestion and bloating.
Surgical history: None reported.
Fertility treatment history: None

Male patient's general health
Table 1: Patient vital signs.

Vitals	Values
Pulse	75/min
BP (Blood Pressure)	124/82
RR (Respiratory Rate)	14/min
SPO2 (Oxygen Saturation)	98%

Table 2: Other examinations.

Parameter	Observation
Naadi Pariksha	Pitta
Appetite	Normal
Bowel	Normal
Sleep	Normal
Energy Levels	Normal

Personal history
Table 3: Personal history of patient.

Alcohol consumption	No
Smoking	No
Junk Food	Once in a day
Stress	Moderate

Semen Analysis Report (Initial): Done in the year 2023
Table 4: Semen analysis report of patient.

Parameter	Value
Sperm Count	0 million/ml
Motility	0%
Morphology	0%
Fructose	Present
Pus Cells	0
Liquefaction time	Normal

Ayurvedic management
The prescription included- Beehj (Ayurvedic proprietary medicine) for improving the semen analysis parameters- sperm count, motility and morphology.

Table 5: Ayurvedic Medicines, Ingredients and Dosage for Treatment.

Medicine given	Ingredients/Contents	Dosage
Tablet Beehj (500mg)	*Shweta Musali, Shuddha Kaucha, Gokshur, Ashwagandha, Guduchi, Vriddhadaru, Shatavari, Bala, Amalaki, Varahi Kanda, Kokilaksha, Vidarikanda, Jivanti, Akkalgaru, Jayphal, Swarnamakshik bhasma, Swarna Bang, Shuddha Shilajit, Salab Mishri Churna*	2 pills after breakfast and 2 pills after dinner

Advice

The patient was advised to adopt a balanced diet and a healthy lifestyle to enhance overall well-being and support fertility. Key recommendations included maintaining a consistent sleep schedule, avoiding late nights, and engaging in at least 45 minutes of daily exercise to improve physical and mental health. Stress management strategies were emphasized, along with reducing the intake of junk and processed foods. The patient was also encouraged to incorporate nutrient-rich foods and establish a routine of consuming warm milk regularly to support vitality and reproductive health.

Follow-Up

The patient consistently adhered to the treatment, the diet, lifestyle recommendations, and practised 45-minute exercise daily. Semen analysis was again done after 3 months of regular medicine intake.

Semen Analysis Report (Post 3 months of treatment)

Table 6: Semen analysis of patient post-treatment.

Parameter	Value
Sperm Count	17 million/ml
Motility	48%
Morphology	52%
Fructose	Present
Pus cells	0
Liquefaction time	Normal

The post-treatment semen analysis shows notable improvement: sperm count of 17 million/mL, motility at 48%, and morphology at 52%. Fructose is present, and pus cells are absent, with normal liquefaction time. The patient and his partner have successfully conceived, highlighting the treatment's effectiveness in restoring fertility.

DISCUSSION

Male infertility, a significant yet often overlooked factor in reproductive challenges, is commonly linked to abnormalities in semen parameters such as sperm count, motility, and morphology. While modern treatments like hormonal therapies and assisted reproductive techniques address these issues symptomatically, they often fail to tackle the root causes holistically. Ayurveda, with its integrative and personalized approach, provides a promising alternative by focusing on natural remedies, lifestyle adjustments, and dietary interventions to address infertility at its source.

In this case, the Ayurvedic formulation *Beehj* was employed to manage severe male infertility, specifically azoospermia (complete absence of sperm count, motility, and morphology). Azoospermia arises from various causes, including hormonal imbalances (pre-testicular), testicular dysfunction (e.g., genetic disorders, trauma, or infections), or obstructions in the reproductive tract (post-testicular). Ayurvedic medicines, such as *Beehj*, can play a crucial role in supporting spermatogenesis, particularly in cases stemming from hormonal or mild testicular dysfunction. *Beehj*, rich in *Vrushya* (aphrodisiac), *Balya* (strength-promoting), and *Shukra dhatu vardhaka* (reproductive tissue-enhancing) properties, nourishes and rejuvenates the reproductive system by reducing oxidative stress, enhancing the quality of reproductive tissues, and improving overall reproductive health with its key ingredients, including herbs with antioxidant and adaptogenic properties. *Swarna Makshika* and *Suvarnavanga* help improve sperm vitality and increase *shukra dhatu* (sperm). *Shilajit* enhances sperm motility and morphology, while *Salab Misri* provides nutritive support, improving overall sexual health. *Musali* and *Kapikachhu* boost sperm production, vitality, and stamina, while reducing vata dosha, which can affect fertility. *Gokshura* and *Ashwagandha* improve blood flow and energy levels, promoting healthy sperm production and motility. *Guduchi* and *Vriddhadaru* support hormonal balance and rejuvenation, contributing to better sperm health. *Shatavari, Bala, and Amalaki* nourish the reproductive system, improve potency, and support sperm vitality. *Varahikand, Kokilaksha,* and *Vidari* help enhance sperm quality, quantity, and sexual vitality. Jeevanti supports overall reproductive health, promoting sperm longevity and vitality.[8,9]

The patient was also advised dietary and lifestyle modifications to complement the therapeutic effects of *Beehj*. Recommendations included a balanced, nutrient-dense diet, avoidance of junk food, regular physical activity (45 minutes daily), and stress management techniques. These measures collectively addressed contributing factors such as oxidative damage, metabolic imbalances, and stress, which are known to negatively impact male fertility.

In this case, after three months of Ayurvedic treatment and lifestyle changes, the patient’s semen analysis showed significant improvement, indicating spermatogenesis, with sperm count at 17 million/mL, motility at 48%, and morphology at 52%. The couple successfully conceived, validating the efficacy of the treatment in restoring fertility. This case emphasizes Ayurveda's ability to address underlying imbalances and improve male reproductive health, ultimately leading to sustained fertility outcomes.

CONCLUSION

Following a three-month regimen of *Beehj* treatment, along with dietary and lifestyle modifications, the medicine facilitated spermatogenesis, leading to significant improvements in sperm count, motility, and morphology in the male patient. This led to a successful conception and a healthy pregnancy, culminating in a full-term delivery without complications.

Conflict of interest

The authors declare no conflicts of interest relevant to this article.

REFERENCES

1. Nallella KP, Sharma RK, Aziz N, Agarwal A. Significance of sperm characteristics in the evaluation of male infertility. Fertil Steril [Internet], 2006; 85(3): 629–34. Available from: https://linkinghub.elsevier.com/retrieve/pii/S0015028205039385
2. Dabaja AA, Schlegel PN. Medical treatment of male infertility. Transl Androl Urol [Internet], 2014; 3(1): 9–16. Available from: http://dx.doi.org/10.3978/j.issn.2223-4683.2014.01.06
3. Rathi I, Mavi A, Shannawaz M, Saeed S, Yadav A, Hasan S. Effectiveness of Ayurveda intervention in the management of infertility: A systematic review. Cureus [Internet], 2024; 16(4): e57730. Available from: http://dx.doi.org/10.7759/cureus.57730
4. Pandruvada S, Royfman R, Shah TA, Sindhwani P, Dupree JM, Schon S, et al. Lack of trusted diagnostic tools for undetermined male infertility. J Assist Reprod Genet [Internet], 2021; 38(2): 265–76. Available from: http://dx.doi.org/10.1007/s10815-020-02037-5
5. Oup.com, 2024; 17. Available from: https://academic.oup.com/humupd/article/23/6/660/3979420
6. Huang B, Wang Z, Kong Y, Jin M, Ma L. Global, regional and national burden of male infertility in 204 countries and territories between 1990 and 2019: an analysis of global burden of disease study. BMC Public Health [Internet], 2023; 23(1). Available from: http://dx.doi.org/10.1186/s12889-023-16793-3
7. Danielewicz A, Przybyłowicz KE, Przybyłowicz M. Dietary patterns and poor semen quality risk in men: A cross-sectional study. Nutrients [Internet], 2018, [2024; 17], 10(9): 1162. Available from: https://www.mdpi.com/2072-6643/10/9/1162
8. Vijnyan part I Ii Dr DAP, Deshpande DR. SUBHASH RANADE |Proficient Publishing House
9. Ayurvediya Aushadhi Nirmana Vigyan), 2: 1.