



Case Study

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A successful clinical case study of Oligoasthenoteratozoospermia - Oat (*Sukkila thathunattam*) in Siddha medicine

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Abstract

Siddha medicine, which has always been India's pride. An ancient, Indigenous medical system framed by siddhars. Amidst all other medical systems siddha remains unique, since it gave equal importance to the external body and the internal soul. To Generate new knowledge on Siddha Andrology to fertility regulation and Endocrine disorders ancient Siddha literatures describes many safe and effective drugs identified by Siddhars for thousands of years. Oligospermia is one of the major leading causes of infertility. The patient having, premature ejaculation and lack of sexual desire is administered with *Salamisiri Ilagam* in a dose of 5 gram along with *Thanga Uram Mathirai* 500mg and *Thamarai Magaranth Chooranam* 3gm The sperm count was increased from 6mil/ml to 90 mil/ml after 16 weeks treatment along with increased sperm motility and morphology. *Salamisiri Ilagam* along with *Thanga Uram Mathirai* and *Thamarai Magaranth Chooranam* shows significant improvement in the sperm count, motility and morphology. As Apana Vayu is responsible for the proper expulsion of Shukkilam. So medicines are given at *Salamisiri Ilagam* along with *Thanga Uram Mathirai* and *Thamarai Magaranth Chooranam* has shown significant increase sperm count, improvement in erection dysfunction and sexual desire.

Keywords: Siddha medicine, Oligospermia, *Thathunattam*, *Shukkilanattam*, OAT syndrome capula, glenoid cavity, morphology, shoulder arthroplasty.

Introduction

Nature always doing better for all living being; but very due to present life style, there has been a drastic change in day to day activities including life style, food habits, sexual life, medication, environmental pollution, industrial and occupational hazards and these changes have adverse effect on *Shukkila Dhathu* (Vindhu) which leads to infertility. According to Siddha medicine, *Shukkilam* is the terminal 7th tissue element of the body. It is considered as the Saram of all other Dhatu. It is composed of Vayu, Agni, Appu and Prithvibhutam. In the state of their excellence. Oligospermia or synonymously oilgozoospermia highly resembles *Thathu Nattam*, is a condition in which sperm count is get reduced. WHO (1992) describes the condition as the one in which total sperm count will be less than 20 million / ml. However *Thathu Nattam* is a condition in which *Shukkila Dhathu* is reduced both quantitatively and qualitatively. Disturbed daily routine, food habits, mental stress and busyness on account of fast life are affecting *Shukkila Dhathu* adversely.

Case Report

A 28yrs old male with normal BMI was presented with premature ejaculation, Primary Male infertility since two years. Personal history revealed that he is A/C mechanic by occupation and without any addiction, got married 3yrs. ago. His wife failed to conceive in spite of frequent intercourse (average not less than twice a week) even during 12-16th day of menstruation. The only measure of contraception adopted was condoms which were used less frequently and it wasn't used since 1 year. He got his semen analysis done from approved medical pathology laboratory, as per advice of General Physician. He came Our Clinic Tambaram Sanatorium Chennai. With report of semen analysis for consultation and further treatment. Report of Semen analysis revealed oligoasthenoteratozoospermia with other pathologies like reduced motility, non-motile sperms and abnormal forms (Table 1). His personal history revealed no major stress. But long time two wheeler rider 50-70km/per day. He was not having past medical history of Mumbs,

Tuberculosis, Orchitis, Hydrocele, Diabetes, fever (in last 2 years), Systemic arterial Hypertension, trauma to gonadal parts, or history of any other long term debilitating disorder or life threatening emergency. He was not having history of previous surgical interventions like Hydrocele, herniorrhaphy, varicocele, vasectomy reconstruction and no history of consumption of gonadotoxic agents (Cyclophosphamide, Sulphasalazine, Ranitidine/ Cimetidine, Androgenic steroids) or use of any medication for prolonged period. He wasn't on any other concomitant treatment/ drugs. Obstetric History of wife revealed that she was nullipara, no misabortions/ miscarriages, regular and normal menstrual history, no history of surgical interventions, no significant past medical illness and no history of consumption of long term drug treatment. There was no tenderness or signs of inflammation or enlargement of scrotum/ gonadal parts (epididymis) and no palpable and tender inguinal lymphadenopathy in local examination. There was no significant psychological disorder affecting daily routine or social behavior/ family or social relationship. Systemic examination didn't reveal any significant abnormality. His occupation, daily routine, lifestyle was similar as that of in last 2 years till the follow up period. He was diagnosed as case of oligoasthenoteratozoospermia and was prescribed with *Salamisiri Ilagam, Thanga Urammathirai and Thamarai Magarantham Chooranam* Sperm count increased from 6mil/ml to 90mil/ml after above treatment. Percentage of Actively Motile and Non- motile sperms increased and Decreased respectively by 10% and abnormal forms decreased by 1% after treatment of three months. (Table-1) There was also an improvement in, premature ejaculation, sexual desire.

Results and Discussion

Of the 123 scapula included, 64 belonged to right and 59 to left side. The shape of the GC was found as inverted comma, pear, triangular and oval. The most common shape observed was of pear shaped GC in 69 (56.09%) of 123 scapula. 43 (34.95%) were of inverted comma shape, 8 (6.5%) of oval shape and 3 (2.4%) were triangular.

Siddha treatment:

Salamisiri Ilagam -5gm BD with cow's milk after food

Thanga Urammathirai -500mg BD after food

Thamarai Magarantham Chooranam -3gm OD with equal amount of nattu sarkarai and honey before food morning only.

Duration of Treatment 4months.

Drug administration time (Half hour after Breakfast and lunch, dinner).

Adjuvant Cow's milk

Preparation and quality control of *Salamisiri Ilagam* and *Thanga Urammathirai*

Medicines are purchased from GMP certified pharmaceuticals, Sivasakthi pharmaceuticals Coimbatore and our preparation *Salamisiri Ilagam* and *Thamarai Magarantham Chooranam*

Table 1: Examination of Seminal Fluid (*Shukkilathervu*)

Test	Before Treatment	After Treatment
Method	Masturbation	Masturbation
Abstinence	5 days	5 days
Collected At	09:40 A.M	10:10A.M
Examined At	10.00 A.M	10:25 A.M
Physical Examination		
Quantity	1.50 ml	3 ml
Colour (<i>Niram</i>)	Grey White	Grey White
Odour (<i>Manam</i>)	Normal	Normal
Viscosity (<i>Thanmai</i>)	Viscid	Viscid
Liquefaction	Within 30 min.	Within 20 min.
Reaction (pH)	Alkaline	Alkaline
Microscopic Examination		
Total Sperm Count	06 mil/ml	90 mil/ml
Sperm Motility		
Actively Motile	12%	60%
Sluggishly Motile	30%	15%
Non-Motile	40%	10%
Abnormal Forms	18%	15%
Other Abnormalities		
Pus Cells	Absent	Absent
R.B.C Cells	Absent	Absent
Epithelial Cells	Absent	Absent

Conclusion

Changing life style has very bad impact on human life including Male sexual health. Male impotency, premature ejaculation, erectile dysfunction becomes the burning issues of today's era. Siddha Medicine formulations have potential to overcome the health issues. *Salamisiri Ilagam*, *Thanga Uram Mathirai* and *Thamarai Magarantha Chooranam* has given excellent

result in *Sukkila Thathu Nattam* (Oligoasthenoteratospermia OAT. After treatment there is significant improvement was observed in sperm count, motility as well as morphology. That is qualitative as well as quantitative improvement in the sperm.

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