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**ANALYSIS OF SHUKRA IN DIFFERENT PRAKRITI – AN OBSERVATIONAL  
STUDY**

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## CLINICAL OBSERVATIONAL STUDY

### ANALYSIS OF SHUKRA IN DIFFERENT PRAKRITI – AN OBSERVATIONAL STUDY

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#### ABSTRACT:

*Prakriti is the expression of one's body constitution. It is the state of intensified Dosha in a non pathogenic state formed at the time of conception. These intensified Dosha are present in different proportion in different individual forming the Dehaprakriti which shows the psychosomatic expressions of individual. The Prakriti shows its effect on the various psychological and somatic features of the individual. This is the cause for the state of health or illness of the individual throughout the life. These Prakriti influences the sexual life of an individual in form of number of children's and Shukra. This study was under taken to check the status of Shukra in different Prakriti people.*

**Key word:** Prakriti, Shukra. Semen analysis

#### INTRODUCTION

The word Prakriti means original or primary substance, nature character or constitution. It refers to one's own constitution, which is individual specific, means it is controlled by its own physiology. During the development of fetus, due to its own reason Dosha becomes intensified. This non pathogenic intensified status of Dosha which remains from birth till death is called as Prakriti <sup>1</sup>. This Dosha is present in different proportions in the people. Due to its

dominance, it shows various psychosomatic expressions called Deha Prakriti <sup>2</sup>.

Prakriti is an expression of one's own constitution <sup>3</sup>. Deha Prakriti enumerates the body features internal and external. One of the important features explained in the context of Prakriti is regarding the Shukra <sup>4</sup>.

Shukra is one of the basic factors required for initiation of life. Shukra required for formation of Garbha should

have specific qualities. Such as Sphatikabha, Drava, Snigdha, Madhura and Madhu Gandhi, Taila kshoudranibha<sup>5</sup>.

Persons of Kapha Prakriti will be having Praboota Shukra, Vyavaya, Apatya and more fertile & sexually more active than persons of other two Pradana Prakritis. Whereas Pitta Pradana Prakriti people are having Alpa Shukra, Alpa Vyavaya and Alpa Apatya & Vata Pradana Prakriti person is having Alpa Bala as well as Alpa Apatya.

The present study was aimed with conceptual concept of Shukra with keen concentration related to Prakriti.

### AIMS AND OBJECTIVE

1. To compare quality of Shukra in relation to different Prakriti.

### MATERIALS AND METHODS

**Place of collection of data:** SDM College of Ayurveda and Hospital, Hassan. Apparently healthy students of different prakriti were selected for the study.

#### Assessment Criteria:

I. Prakriti assessment of the individual was done using Self prepared Prakriti Assessment format. After proper interrogation for the assessment of Prakriti the total score was calculated in the format and the final prakriti was assessed. The dosha with maximum percentage was considered to be the Sharirika Prakriti

of that individual, for the secondary and tertiary Sharirika Prakriti a difference in the score by 10 was considered. Eg: If the percentage of Vata Prakriti was 60% and Pitta Prakriti 54% and Kapha Prakriti was 49%, the Prakriti was Vata-pitta and if Pitta was 70% and Vata and Kapha is 59% then Prakriti was Kevala Pitta.

II. Semen Analysis was done as per WHO standards<sup>6</sup> and all the parameters were examined according

to WHO Manual of semen analysis. Table 1 shows the parameters

#### Inclusion Criteria

1. An apparently healthy male volunteers of age group of 20-30 years will be included
2. Prakriti was assessed and subjective were grouped into 3 groups

Group A – Vata Pradhana Prakriti

Group B – Pitta Pradhana Prakriti

Group C – Kapha Pradhana Prakriti

#### Exclusion criteria

1. Persons consuming tobacco, having habit of alcohol drinking are excluded.
2. Those having past history of major illness and illness related with reproductive system are excluded
3. Persons with history of vasectomy are excluded.

#### Conduction of test

Selected and consented thirty volunteers were explained about the study and their role in the study was clearly informed. Each volunteer was then provided Prakriti Assessment format to fill the demographic details. Every volunteer was interrogated separately by an Ayurvedic expert for the presence of each character of Prakriti. As per the total score

### OBSERVATION

#### Incidence of age:

Group A: In this study maximum number (34 %) of patients were belonging to 21 – 23 years age group, 30% to 24 – 26 years age group, 25% to 27 – 29 years age group and 11 % to 30 – 32 years age group.

Group B: In this study maximum number (38 %) of patients were belonging to 21 – 23 years age group, 28% to 24 – 26 years age group, 20% to 27 – 29 years age group and 14 % to 30 – 32 years age group.

Group C: In this study maximum number (38 %) of patients were belonging to 21 – 23 years age group, 28% to 24 – 26 years age group, 20% to 27 – 29 years age group and 14 % to 30 – 32 years age group.

#### Incidence of occupation:

Group A, Group B and Group C consisted of subjects who were students of SDM college of *Ayurveda* and hospital, Hassan.

#### Incidence of Marital Status:

Group A: Out of 30 subjects 84% were married and only 16 % were unmarried.

obtained against each Prakriti the dominance of Prakriti in an individual was decided. A difference of less than 10% of score between the highest and the second highest score of Prakriti was considered for the dominance of Prakriti. Semen sample was collected and detailed semen analysis was done according to WHO manual.

Group B: Out of 30 subjects 58% were married and 42% were unmarried.

Group C: out of 30 subjects 90% were married and 10 % were unmarried.

#### OBJECTIVE PARAMETERS:

##### Liquefaction Time:

Group A: Out of 30 subjects, the Liquefaction time of 24 subjects was 20-30min, 5 subjects liquefaction time was 30-40min and 1 subject's was 40-50min.

Group B: Out of 30 subjects, the Liquefaction time of 18 subjects was 20-30min, 4 subjects Liquefaction time was

30-40min and 8 subjects liquefaction time was 40-50min. Group C: Out of 30

subjects the Liquefaction time of 10 subjects was 20-30min, 4 subjects

Liquefaction time was 30-40min and 16 subjects was 40-50min was noted. Table 1

shows the relation between group and average liquefaction time of semen.

**Table 1 showing relation between group & average liquefaction time of semen**

Liquefaction Time				
		Group A	Group B	Group C
	20-30min	24	18	10
	30-40min	5	4	4
40-50min	1	8	16	
Total		30	30	30

**Volume:**

Group A: Out of 30 subjects, the Volume of Semen in 10 subjects was 1-3ml, in 12 subjects were 3-6ml and 8 subjects volume of semen was 6-9ml. Group B: Out of 30 subjects, the Volume of Semen in 10 subjects was 1-3ml, 7 subjects was 3-6ml

and in 13 subjects the Volume of semen was 6-9ml. Group C: Out of 30 subjects the Volume of semen in 5 subjects was 1-3ml, 10 subjects Volume of semen was 3-6ml and 15 subjects volume of semen was 6-9ml. Table 2 shows the relation between group and volume of semen.

**Table 2 showing relation between group & volume of semen**

Volume				
		Group A	Group B	Group C
	1-3	10	10	5
	3-6	12	7	10
6-9	8	13	15	
Total		30	30	30

**Viscosity:**

Group A: Out of 30 subjects, the Viscosity of Semen was decreased in 1 subject, normal in 26 subjects and increased in 3 subjects. Group B: Out of 30 subjects, the Viscosity of Semen was normal in 27

subjects and increased in 3 subjects. Group C: Out of 30 subjects the Viscosity of semen was Normal in 14 subjects and was increased in 16 subjects. Table 3 shows the relation between group and volume of semen.

**Table 3 showing relation between group & Viscosity of Semen**

Viscosity				
		Group A	Group B	Group C
	Decreased	1	0	0
	Normal	26	27	14
Increased	3	3	16	
Total		30	30	30

**Motility: Rapid Linear Progressive:**

Group A: Out of 30 subjects the Rapid Linear Progressive Motility was 0-10% in 3 subjects, 10-20% in 4 subjects, 20-30% in 9 subjects and 30-40% in 16 subjects. Group B: Out of 30 subjects the Rapid

Linear Progressive Motility was 0-10% in 5 subjects, 10- 20% in 15 subjects, 20-30% in 10 subjects. Group C: Out of 30 subjects the Rapid Linear Progressive Motility was 0-10% in 5 subjects, 10- 20% in 22 subjects, 20-30% in 3 subjects. Table 4

shows the relation between group and RLP of sperm.

**Table 4 showing relation between group & Motility - Rapid Linear Progressive**

	In percentage	Group A	Group B	Group C
Rapid Linear Progressive	0-10	3	5	5
	10-20	4	15	22
	20-30	9	10	3
	30-40	16		
Total		30	30	30

**Slow Linear Progressive:**

Group A: Out of 30 subjects the Slow Linear Progressive Motility was 0-10% in 4 subjects, 10-20% in 12 subjects, 20-30% in 4 subjects and 30-40% in 10 subjects.

Group B: Out of 30 subjects the Slow Linear Progressive Motility was 0-10% in 8 subjects, 10-20% in 2 subjects, 20-30% in 20 subjects and 30-40% in 16 subjects.

Group C: Out of 30 subjects the Slow Linear Progressive Motility was 0-10% in 6 subjects, 10-20% in 8 subjects, 20-30% in 16 subjects. Table 5 shows the relation between group and SLP of sperm.

**Table 5 showing relation between group & Motility - Slow Linear Progressive**

	In percentage	Group A	Group B	Group C
Slow Linear Progressive	0-10	4	8	6
	10-20	12	2	8
	20-30	4	20	16
	30-40	10	--	---
Total		30	30	30

**Nil Progressive:**

Group A: Out of 30 subjects the Nil Progressive Motility was 0-10% in 6 subjects, 10-20% in 10 subjects and 20-30% in 14 subjects.

Group B: Out of 30 subjects the Nil Progressive Motility was 0-10% in 10 subjects, 10-20% in 8 subjects, 20-30% in 12 subjects.

Group C: Out of 30 subjects the Nil Progressive Motility was 0-10% in 8 subjects, 10-20% in 10 subjects and 20-30% in 12 subjects.

Table 6 shows the relation between group and NP of sperm.

**Table 6 showing relation between Group & Nil Progressive**

	In percentage	Group A	Group B	Group C
Nil Progressive	0-10	6	10	8
	10-20	10	8	10
	20-30	14	12	12
	30-40	-	-	-
Total		30	30	30

**Non Motile:**

Group A: Out of 30 subjects the Non motility was 0-10% in 9 subjects, 10-20% in 11 subjects and 20-30% in 10 subjects.

Group B: Out of 30 subjects the Non motility was 0-10% in 8 subjects, 10-20% in 8 subjects, 20-30% in 4 subjects and 30-40% in 10 subjects.

Group C: Out of 30 subjects the Non motility was 0-10% in 4 subjects, 10-20% in 8 subjects, 20-30% in 12 subjects.

10 subjects and 30-40% in 8 subjects. and IMM of sperm.

Table 7 shows the relation between group

**Table 7 showing relation between Group & Motility - Im Motility**

	In percentage	Group A	Group B	Group C
Non Motile	0-10	9	8	4
	10-20	11	8	8
	20-30	10	4	10
	30-40	-	10	8
Total		30	30	30

**Morphology:**

Head Defect:

Group A: Out of 30 subjects 6 subjects has 0-10% Head defect in sperm, 24 had 10-20%, 8 had 20-30% and 12 subjects had 30-40%. Group B: Out of 30 subjects 10 subjects had 0-12% Head defect, 8

subjects had 10- 20% and 12 subjects had 20-30%. Group C: Out of 30 subjects 14 subjects had 0-10% Head defects, 8 had 10- 20% and 8 subjects had 20-30%. Table 8 shows the relation between group and Head defects.

**Table 8 showing relation between Group & Head Defect Sperm**

	In percentage	Group A	Group B	Group C
Head Defect	0-10	6	10	14
	10-20	4	8	8
	20-30	8	12	8
	30-40	12	-	-
Total		30	30	30

**Mid Piece Defect:**

Group A: Out of 30 subjects 8 subjects had Rate of Mid piece defect of 0-10%, 10 subjects had 10-20%, and 6 subjects had 20-30% and 30-40%. Group B: Out of 30 subjects 7 subjects had mid piece defect of 0-10%, 3 subjects had 10- 20%, 10

subjects had 20-30% and 30-40% mid piece defects. Group C: Out of 30 subjects 10 subjects had the mid piece defect of 0-10%, 12 subjects had 10- 20%, 2 subjects had 20-30% and 6 subjects had 30-40 %. Table 9 shows the relation between group and Mid Piece defects.

**Table 9 showing relation between Group & Mid piece defect in Sperm.**

	In percentage	Group A	Group B	Group C
Mid Piece Defect	0-10	8	7	10
	10-20	10	3	12
	20-30	6	10	2
	30-40	6	10	6
Total		30	30	30

**Tail Defect:** Group A: Out of 30 subjects the 10 subjects had Tail defect of 0-10%, 8

subjects had 10-20%, 6 subjects had 20-30% and 30-40% tail defects. Group B:

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Out of 30 subjects 10 subjects had Tail defect of 0-10%, 3 subjects had 10- 20%, 10 subjects had 20-30% and 7 subjects had 30-40%. Group C: Out of 30 subjects 10 subjects had Tail defect of 0-10%, 6

subjects had 10- 20%, 8 subjects had 20-30% and 6 subjects had 30-40 %. Table 10 shows the relation between group and Tail defects.

**Table 10 showing relation between Group & Tail defect in Sperm**

Tail Defect	In percentage	Group A	Group B	Group C
	0-10	10	10	10
	10-20	8	3	6
	20-30	6	10	8
	30-40	6	7	6
Total		30	30	30

**Total Defect:**

Group A: Out of 30 subjects 1 subject had Total defect if 0-10% in 1 subject, 8 subjects had 10-20%, 12 subjects had 20-30% and 9 subjects had 30-40%. Group B: Out of 30 subjects 10 subjects had Total defect of 0-10%, 2 subjects had 10- 20%,

10 subjects had 20-30% and 8 subjects had 30-40%. Group C: Out of 30 subjects 10 subjects had Total defect of 0-10%, 10 subjects had 10- 20%, 6 subjects had 20-30% and 4 subjects had 30-40 %. Table 11 shows relation between Group & Total defects in Sperm

**Table 11 showing relation between Group & Total defect in Sperm**

Total Defect	In percentage	Group A	Group B	Group C
	0-10	1	10	10
	10-20	8	2	10
	20-30	12	10	6
	30-40	9	8	4
Total		30	30	30

**Normal Forms:**

Group A: Out of 30 subjects 10 subjects had Normal forms of 0-10%, 6 subjects had 10-20%, 12 subjects had 20-30% and 2 subjects had 30-40%. Group B: Out of 30 subjects 8 subjects had Normal forms of 0-10%, 10 subjects had 10- 20% and

20-30% and 2 subjects had 30-40%. Group C: Out of 30 subjects 1 subject had Normal forms of 0-10%, 4 subjects had 10- 20%, 16 subjects had 20-30% and 9 subjects had 30-40%. Table 12 shows relation between Group & Normal forms in Sperm.



**Table 12 showing relation between Group & Normal forms in Sperm.**

Normal Forms	In percentage	Group A	Group B	Group C
	0-10		10	8
10-20		6	10	4
20-30		12	10	16
30-40		2	2	9
Total		30	30	30

**Sperm count:**

Group A: Out of 30 subjects 1 subject had Total count between 0-10million, 16 subjects between 10-20 millions, 7 subjects between 20-30 millions and 6 subjects had sperm count between 30-40 millions. Group B: Out of 30 subjects 3 subjects had Total count between 0-10 million, 22 subjects had sperm count between 10- 20millions, 3 subjects

between 20-30millions and 2 subjects between 30-40. Group C: Out of 30 subjects 7 subjects had Total count between 0-10 millions, 2 subjects between 10- 20 millions, 11 subjects between 20-30 millions and 10 subjects between 30-40millions. Table 13 shows relation between Group & Total count of Sperm in millions

**Table 13 showing relation between Group & Total count of Sperm in millions**

Sperm Count	In Millions	Group A	Group B	Group C
	0-20		1	3
20-40		16	22	2
40-60		7	3	11
60-80		6	2	10
Total		30	30	30

**DISCUSSION**

In this study most volunteers were found to be of *Dvandvaja Prakriti*. This was because of multiple *Gunas* and *Lakshanas* seen in the subjects who were taken for the study. This also shows the current trend in the population where the prevalence of *Ekadoshaja Prakritis* is less and *Dvandwaja Prakritis* are more prevalent.

The descriptions about *Shukra* in *Ayurvedic* classics are given with respect

to the *Ekadoshaja prakritis*. Since classical descriptions on *Shukra* are not available with respect to *Dwandwaja Prakritis* persons showing comparatively more characters of particular *Dosha* than in others were taken as *Pradhana Prakritis* based on the *Tara Tama Bhavas*.

The observations of semen seen in these *Vatapradhana, Pitta Pradhana* and *Kapha Pradhana Prakritis* are analysed as follows:

*Vata Prakriti* people were having

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lesser diameter of drop of semen in *Ghana* state. This may be due to lesser volume of drop of *Vata Prakriti* as *Tanutva* is the property of *Vata Dosha*.

Volume of semen was observed slightly higher in *Kapha Prakriti*. Here period of abstinence was same in case of all the cases. Therefore this correlates with the description regarding *Kapha Prakriti* as *Kapha Prakriti* has characteristics of *Prabhoota Shukra*.

Viscosity in case of *Kapha Prakriti* was higher than *Pitta* and *Vata Prakriti*. Viscosity can be correlated with *Pichhulata* as increased quantity of it is observed along with there is dominance of *Prithvi Mahabhuta* in *Kapha Dosha*.

Sperm count was higher in Group C person. This increased sperm count can be attributed to the *Prabhoota Shukrata* of *Kapha* and the similarity of *Gunas* between *Kapha* and *Shukra*.

Abnormal sperm morphology was higher in *Vata Prakriti* than in *Kapha* and *Pitta*. We can find significant difference in sperm morphology in different human populations. The increased abnormal sperm morphology seen in *Vata Prakriti*

### CONCLUSION

The characteristics of semen vary significantly from person to person. *Prakriti* of a person plays a clear role in determining the features of *Shukra* and semen in a person. The semen in *Kapha*

can be compared to the classical feature of *Alpa Shukrata*. Where the quality of *Shukra* in *Vata Prakriti* is said to be inferior in comparison to other *Prakritis*.

Motility was higher in *Vata Prakriti* than in *Kapha* and *Pitta Prakriti*. This correlates with the classical literature and this can be attributed to the *Chalatva* feature associated with *Vata Dosha*. Amongst the individual parameters associated with the motility slow linear progressive found equal in both *Vata* and *Pitta* and rapid linear progressive found more in *Vata Prakriti*.

Sperm count was found to be significantly high in Group C people. The count was found to be less in *Vata Prakriti* and *Pitta Prakriti* people. *Alpa Shukrata*, *Apla Apatya*, *Alpa Vyavaya* said in *Vata Prakriti* can be contributory factor for this. From the observations of the semen analysis it can be clearly said that the

semen belonging to different *Prakritis* can be clearly distinguished from each other based on their characteristics. The different characteristics of semen are due to the *Gunas* belonging to the *Dosha* of that particular *Prakriti*.

*Prakriti* showed significantly raised count, volume than that of other two *Prakritis*. The motility of sperms was relatively higher in *Vata Prakriti* people, but the count was less and morphological defects

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too were more in *Vata Prakriti* individuals. Liquefaction time is significantly delayed in people of *Kapha Prakriti* in comparison to other *Prakritis*. The conceptual study reveals that the characters relating to *Shukra* will be comparatively better in a *Kapha Prakriti* individual due to similarities of *Gunas* regarding *Kapha* and *Shukra*. The semen examination is an effective tool in understanding the concept of *Shukra* and is a useful tool in analyzing the *Prakriti* of a person.

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