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EFFICACY OF MAJOON SALAB AND JAUHAR KHUSSIYA WITH REFERENCE TO OLIGOSPERMIA: A CASE REPORT

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Case Study

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ABSTRACT

Oligospermia is a condition where sperm count is less than 20 million/ml of semen. It is one of the main causes of male infertility. Infertility has been defined by the World Health Organization as a public health problem. The male factor contributes to infertility in approximately 50% of couples. In the present case report an oligospermic infertile man is successfully treated with Unani compound formulations Majoon Salab and Jauhar Khussiya. These medicines possess Muwallide mani (Spermatogenic), Muqawwie bah (Aphrodisiac) and Mughallize mani properties. Modern scientific studies of various ingredients of these formulations showed spermatogenic and antioxidant activities.

No. of Pages: 6 **No. of Pics: 2** **References: 19**

Keywords: Infertility, Oligospermia, Majoon Salab, Jauhar Khussiya.

INTRODUCTION

Infertility is defined as the failure of a couple to achieve conception after one year of regular unprotected intercourse. [1] It can be classified as primary and secondary infertility. Primary infertility refers to couple who has never had a child while secondary infertility means that at least one conception has been occurred, but currently couple cannot achieve a pregnancy. Infertility has been demarcated by the World Health Organization as a public health problem.[2] A large-scale epidemiological survey of the World Health Organization found that about half of couples are infertile due to simple or comprehensive male factors. [3] The male factor contributes to infertility in approximately 50% of couples. Male infertility can be caused by abnormalities of semen in terms of semen quality or quantity. Some of the most common reasons are low sperm count, abnormal sperm shape and structure, reduced sperm motility etc. Oligospermia is one of the commonest conditions responsible for male infertility. Oligospermia is a condition where sperm count is less than 20

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million/ml of semen.[2] However WHO has given a new definition for oligospermia where number of sperm count is reduced to 15 millions per ml of semen ejaculate. [4] Usually as the sperm count decreases there is corresponding decrease in chances of conception. Oligospermia can be classified as follows. [5]

1. **Mild Oligospermia:** Concentrations 10 million - 15 million sperm/ml
2. **Moderate Oligospermia:** Concentrations 5 million - 10 million sperm/ml
3. **Severe Oligospermia:** Concentrations less than 5 million sperm/ml

In the Unani System of Medicine, the semen deformities are mentioned under the caption of Qillat-e-Mani and Riqqat-e-Mani. These conditions are mainly responsible for sexual disorders like Zof-e-Bah (Sexual dysfunction), Uqr (Infertility), Surat-e-Inzal (Premature ejaculation), Kasrate Ehtelam (Nocturnal emission), Jiryan (Spermatorrhoea) etc. Decreased quantity of haiwane manwiya (Spermatozoa) in Mani (seminal fluid) is called as Qillat-e-Mani or Qillate haiwane manwiya. The modern term equivalent for Qillat-e-Mani or Qillat-e-Huwain-e-Manvia is Oligospermia. [6,7]

In classical Unani text, the general term of Muqawwi-e-Bah is used commonly in the management of semen related pathologies. There are number of single as well as compound Unani drugs which have been successfully used in the treatment of various male sexual dysfunction. [6,7] The mufrad advia (single drugs) useful in Qillate mani are Salab misri, Khurma, Singhara, Turanjabeen, Tukhme shaljam, Kharkhsak, Nakhud siyah, Todri, Funduq, Maghze chilghoza, Pyaz kham, Bahman safed etc. [8,9]

Case presentation

The treated patient is 30 years old man diagnosed with primary infertility. He visited MTC & Assayer hospital, Mansoora, Malegaon OPD where he was advised for semen analysis. He was non-smoker, non-alcoholic, average built, shop keeper by profession. He got married before 3 years but his wife did not conceive a single time. He had no history of tuberculosis, syphilis, mumps or any other significant major illness. The couple had taken conventional medicine for about one year somewhere, but did not get any benefit. At the time of commencement of treatment, the general condition of the patient was good. General physical examination and vitals were within normal limits. The systemic examination of cardiovascular, respiratory, gastrointestinal and nervous systems was recorded normal. Genitals were normal in shape and size. On palpation testes were found normal in size and consistency, there were no dilatation of testicular veins (varicocoele). No swelling or tenderness of genitals found.

Before starting treatment protocol Semen analysis of the patient was done and also he was evaluated for safety parameters like complete blood count, liver and kidney function tests. All investigations were repeated after the completion of treatment. The patient has been diagnosed on Unani principles as a case of Uqr ibtedai (Primary infertility) due to oligoaesthenospermia and treated with compound Unani formulations Majoon Salab [10,11] and Jauhar Khussiya. [12] Majoon Salab 5gm and Jauhar Khussiya 1gm were given twice a day with milk for five months. After completion of treatment all investigations along with semen analysis were repeated and a significant improvement in sperm count other parameters were observed. Safety parameters were within normal range which shows that there was no any side effect of medicine on various systems of the body.

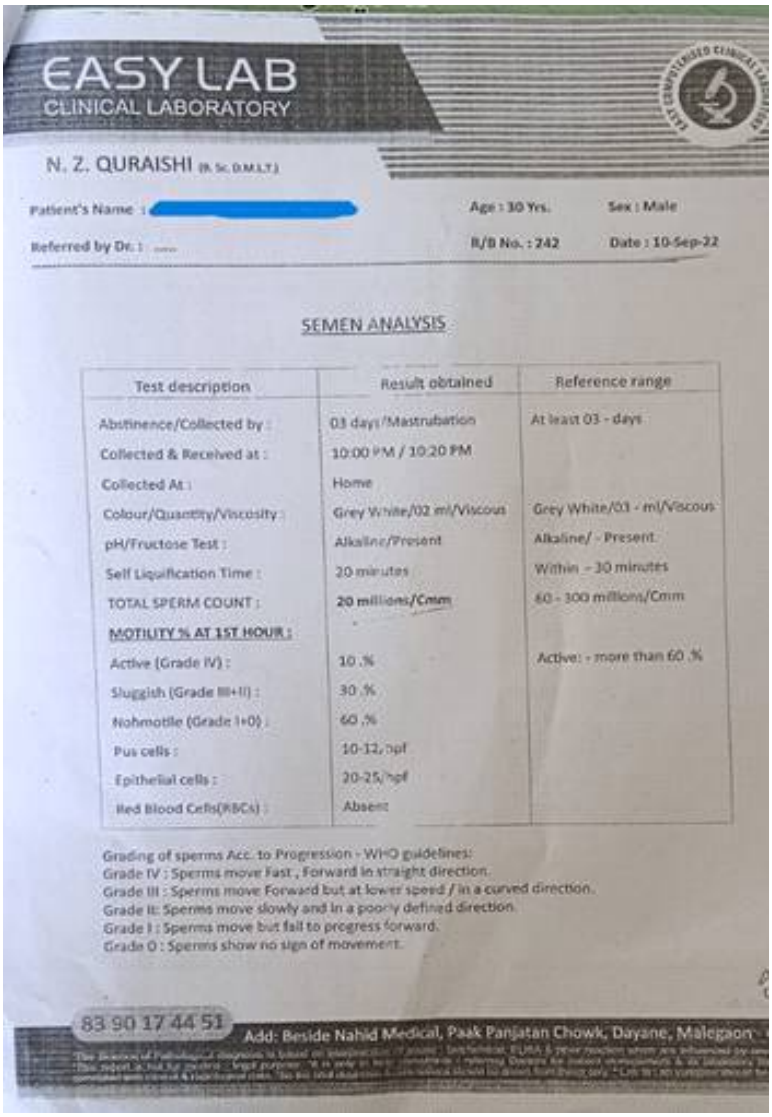
Ingredients of Majoon Salab:

Salab misri (Orchis latifolia), Mushk (Deer Musk), Jund bedastar (Castoruim), Darunaj aqrabi (Doronicum hookeri), Warqe nuqra (Silver foils), Amber (Amber), Sumbulut tib (Nardostachys jatamansi), Heele kalan (Amomum subulatum), Ood kham (Aquilaria apiculata), Kazmazaj (Tamarix gallica), Samaghe

arabi (Acacia arabica gum), Paneer maya shutre erabi (Cheese of camel milk), Bareg gaozaban (Borago officinalis), Badranjboya (Melissa offcinalis), Faranjmushk (Abelmoschus moschatur), Reg Mahi (Agama agilis), Maghz sare kunjashak (Brain of male sparrow), Maghz habbe sanobar (Colocasia esculenta), Maghz narjeel (Cocos nucifera), Maghz funduque (Sapindus emarginatus), Maghz pista (Pistacia vera), Bozidan (Tanacetum umbelliferum), Suranjan Shireen (Colchicum autumnale), Maghze pista (Pistacia vera), Todari surkh (Lepidium iberis), Todari zard (Lepidium iberis), Baheman surkh (salvia haematodes), Baheman safed (Centauria behen), Zanjabeel (Zingiber officinalis), Poodina khushk (Mentha arvensis), Khar Khasak (Tribulus terrestris), Kunjad (Sesamum indicum), Tukhm gazar (Daucus carota), Dar filfil (Piper nigrum), Zaranbad (Curcuma zedoria), Mastagi rumi (Pistacia lentiscus), Jozboa, Bisbasa (Myrustiza fragrance), Zafran (Crocus sativus), Quste Shireen (Saussurea lappa), Maghz Tukhm kharpaza (Cucumis melo), Indarjao Shireen (Wrightia tinctoria), Darchini (Cinnamomum zeylanicum), Qaranfal (Syzygium aromaticum), Heele khurd (Elettaria cardamom), Khulanjan (Ailpinia galanga), Shaqaqul Misri (Pastinaca secacul), Bazarul banj (Hyosyamus albus), Shahed (Honey) [10,11]

Ingredients of Jauhar Khussiya:

Bakrey Ke khusiye (Goat Testicles), Namak



EASY LAB
CLINICAL LABORATORY

N. Z. QURAISHI (B. Sc. D.M.L.T.)

Patient's Name : [redacted] Age : 30 Yrs. Sex : Male

Referred by Dr. : ..... R/B No. : 242 Date : 10-Sep-22

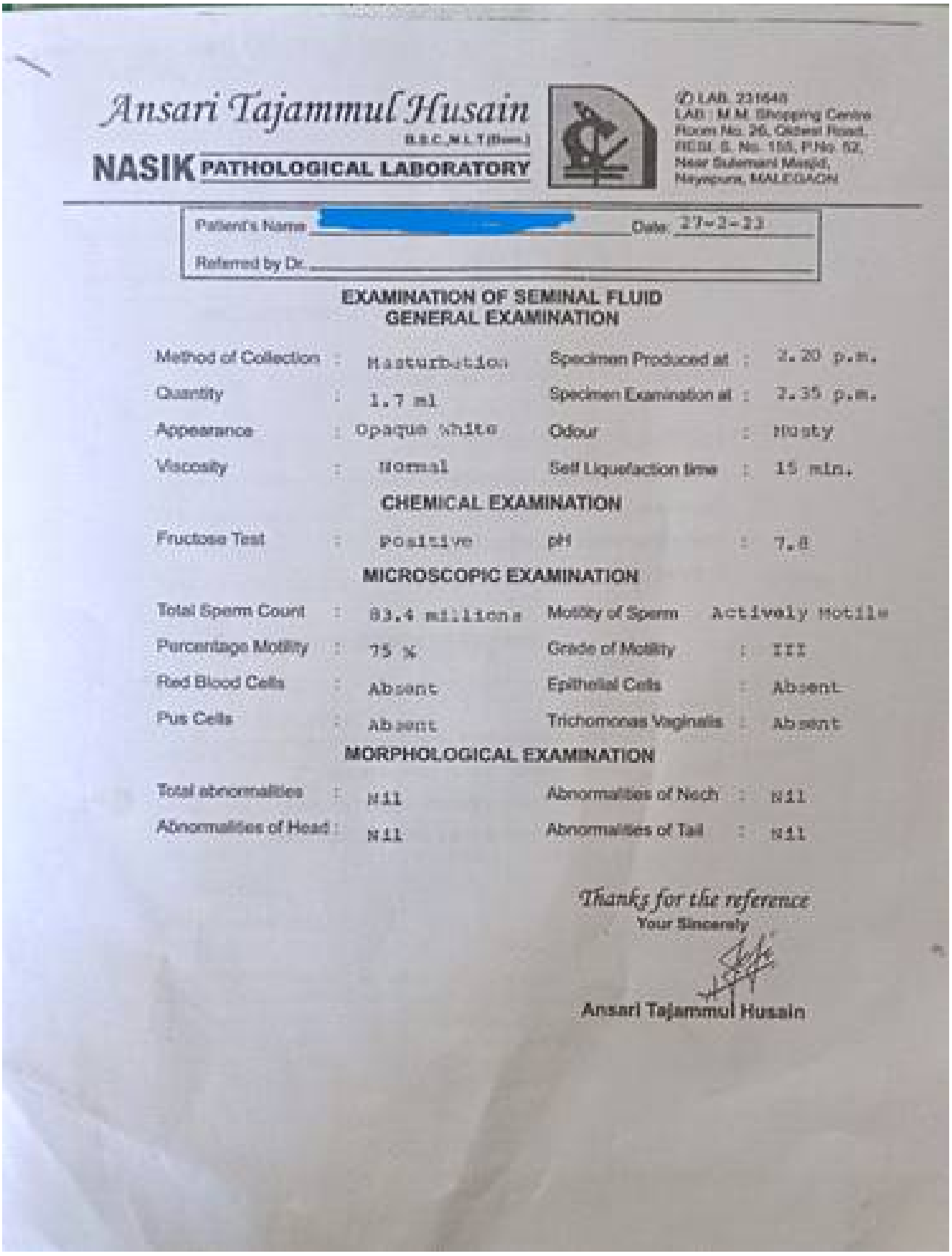
SEMEN ANALYSIS

Test description	Result obtained	Reference range
Abstinence/Collected by :	03 days/Mastrubation	At least 03 - days
Collected & Received at :	10:00 PM / 10:20 PM	
Collected At :	Home	
Colour/Quantity/Viscosity :	Grey White/02 ml/Viscous	Grey White/03 - ml/Viscous
pH/Fructose Test :	Alkaline/Present	Alkaline/ - Present
Self Liquification Time :	20 minutes	Within - 30 minutes
TOTAL SPERM COUNT :	20 millions/Cmm	60 - 300 millions/Cmm
MOTILITY % AT 1ST HOUR :		
Active (Grade IV) :	10 .%	Active: - more than 60 .%
Sluggish (Grade III+II) :	30 .%	
Nohmotile (Grade I+0) :	60 .%	
Pus cells :	10-12, hpf	
Epithelial cells :	20-25, hpf	
Red Blood Cells(RBCs) :	Absent	

Grading of sperms Acc. to Progression - WHO guidelines:
Grade IV : Sperms move Fast , Forward in straight direction.
Grade III : Sperms move Forward but at lower speed / in a curved direction.
Grade II: Sperms move slowly and in a poorly defined direction.
Grade I : Sperms move but fail to progress forward.
Grade 0 : Sperms show no sign of movement.

83 90 17 44 51 Add: Beside Nahid Medical, Paak Panjatan Chowk, Dayane, Malegaon

Pic 1: Pre -treatment Semen analysis report.



Ansari Tajammul Husain
B.S.C., M.L.T. (Bom.)
NASIK PATHOLOGICAL LABORATORY

✆ LAB. 231648
LAB : M.M. Shopping Centre
Room No. 26, Old-wet Road,
R.C.M. S. No. 155, P.No. 52,
Near Sulemani Masjid,
Nayapura, MALEGAON

Patient's Name: [redacted] Date: 27-2-23
Referred by Dr.

EXAMINATION OF SEMINAL FLUID
GENERAL EXAMINATION

Method of Collection	: Masturbation	Specimen Produced at	: 2.20 p.m.
Quantity	: 1.7 ml	Specimen Examination at	: 2.35 p.m.
Appearance	: Opaque White	Odour	: Musty
Viscosity	: Normal	Self Liquefaction time	: 15 min.

CHEMICAL EXAMINATION

Fructose Test	: Positive	pH	: 7.8

MICROSCOPIC EXAMINATION

Total Sperm Count	: 83.4 millions	Motility of Sperm	Actively Motile
Percentage Motility	: 75 %	Grade of Motility	: III
Red Blood Cells	: Absent	Epithelial Cells	: Absent
Pus Cells	: Absent	Trichomonas Vaginalis	: Absent

MORPHOLOGICAL EXAMINATION

Total abnormalities	: Nil	Abnormalities of Neck	: Nil
Abnormalities of Head	: Nil	Abnormalities of Tail	: Nil

Thanks for the reference
Your Sincerely

Ansari Tajammul Husain

Pic 2: Post treatment Semen analysis report.

Discussion:

Oligospermia is a condition where sperm count is less than 20 million/ml of semen.[2] It is one of the leading causes of male infertility. Living a healthy life is an important factor for producing healthy sperm. Living stressful life may lead to disruption of the production of healthy sperm. A couple is typically referred for evaluation in the OPD of MTC & Assayer hospital Mansoora, Malegaon after 3 years of unsuccessful attempts at conception. The male partner underwent semen analysis where he was diagnosed with oligospermia. He was given two Unani compound formulations viz Majoon Salab and Jauhar Khussiya for five months. Pre and post treatment semen analysis was done. The significant improvement in sperm count and motility were observed. Before treatment sperm count was 20 million/ml, active motility was 10% (Pic.1) while post treatment count was 83.4 million/ ml and active motility was 75% (Pic.2). These improvements would be because of Muqqawie bah (Aphrodisiac), Muwallide mani (spermatogenic), Mughallize mani and Musammine badan (nutritive) activities of most of the ingredients of test drug.

Majoon Salab is composed of forty-nine mufrad advia (single drug components) [11] many of them have Muwallide mani, Mughallize mani and Muqawwie bah properties. [13] Modern scientific clinical and experimental studies have also proved aphrodisiac and spermatogenic properties of some ingredients of test drug like Orchis latifolia, Tribulus terrestris, Centauria behen, Lepidium iberis.[14, 15, 16] Apart from this many of ingredients of Majoon Salab possess antioxidant activity. [17, 18] By virtue of these antioxidant and immunomodulatory properties test drug is found effective in improving sperm motility. [17, 18]

Second compound drug Jauhar Khussiya is composed of dried powder of goat testicle. It has properties like Muwallide mani and Muqawwie bah. [12] The principle of treatment in Unani system of medicine is based on the concept of organ protection, strengthening and maintenance of the Quwa at their equilibrium. The faculties at their equilibrium are poised inherently to maintain the normal function of that organ or system. It has been mentioned that each organ is bestowed with special Quwat for its optimal functioning. Unsiyaen (Testicles) are the azae raesa for Quwwate Tanasuliya. In case of derangement of function (zoaf) of any organ, the drugs enhancing its power (muqawwi advia) are advocated. This is the reason why in Unani system of medicine, for every organ and system, a group of tonic drugs (muqawwi advia) have been proposed, that safe guard its larger interest and bring it near to equilibrium, if some derangement in its structure or function takes place. Therefore, most of the sexual diseases are being treated on the basis of concept of Taqwiyate aaza. [19] Based on same assumption Jauhar Khussiya is advocated.

CONCLUSION

Unani system of medicine is one of the oldest traditional medicines. Unani scholars have elaborately discussed sexual diseases in their respective lexicons. They have mentioned the causes, symptoms, complications, treatment and management of various sexual diseases in their treatises under the caption of Zoafe bah. In fact, Zoafe bah is a broad term which encompasses various sexual disease entities like Istirkhae Qazeeb, Surate Inzaal and Qillate Mani etc.

In present case study Unani formulations Majoon Salab and Jauhar Khussiya showed a potent spermatogenic activity without any side effects. This can be concluded that it would be a better option for oligospermic infertile males. However, the study is at preliminary level. Therefore, it is recommended that further multicentre and large scale clinical studies and trials should be conducted for a meaningful statistical evaluation and the confirmation of results.

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