Prakriti and Quantity of Semen: An Observational Clinical Study

V.G. Huddar*, B.S. Prasad**

Abstract

Prakriti is the genomic configuration of an individual by birth. Seven no of *Prakritis* are explained where every individual *Prakriti* have specific *laxanas* (characters). *Kapha Prakriti* person will have more quantity of semen compared to *Pitta* and *Vata Prakriti* person. Hence in this study, *Prakriti* was assessed in 33 apparently healthy individuals concerned to semen quality by using a special questionnaire and correlated with their semen quantity. Statistical analysis shown *Kapha prakriti* persons will have more quantity of semen. *Vata prakriti* will have less semen quantity and *Pitta prakriti* will hav moderate quantity of semen as compared to *Kapha prakriti*.

Key words: Prakriti; Types of Prakriti; Prabhuta shukra; Semen analysis; Quantity of semen.

Introduction

Literally *Prakriti* means the original, natural form, primary substance, character, constitution, temper, unalterably fundamental form (1). An individual's *Prakriti* is decided at the time of conception in accordance to the *doshic* dominance. This predominance of *Dosha* may be with *Sukrasonita Prakriti*, *Kalagarbhasaya Prakriti*, *Maturaharavihara Prakriti*, *Mahabhutavikara Prakriti*. The *Prakriti* thus resulted may be *Vatala*, *Pittala*, *Sleshmala* or combination of *doshas* and *samadhatu Prakriti* (2).

Carakacharya enlisted *Prakrities* as *Sleshmala*, *Pittala*, *Vatala* and *Samadhatu*. *Tridoshas* are called as *Dhatus* in a state of normalcy and *Doshas* in pathological state. *Samadhatu* is certainly indicative of *Doshas* within the physiological range and the other *doshic* varieties are as pathological conditions.

E-mail: sidkam83@rediffmail.com

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However, these *doshic* varieties though pathological, may be considered as *prakrita* for the respective individual, as they are present since birth. On the basis of the above explanations *Prakriti* may broadly classified as *Doshaja* and *samadhatu*; *Doshaja* again divided into *ekadoshaja* and *samsrista*. Except *samadhatu Prakriti* remaining all other types of individuals can be considered as *aturas* (3).

Kapha Prakriti person is 'Prabhootashukravyavayapathya', Pitta Prakriti person is having 'Alpashukravyavayapathya' and Vataja person is 'Alpapathya' (4) and even Alpa shukra. Accordingly here an effort is made to analyse quantity of the semen based on individual Prakriti and the results are statistically analysed. A special questionnaire was used for assessing the Prakriti (5).

Materials and methods

Objectives of the study

To make evidence based document representing the relation between the *Prakriti* and the quantity of semen in different individuals as told by *Charka* in *Vi*. 8th Chap.

Author's Affiliation: *MD (KC), (PhD), Lecturer, Department of Kayachikitsa, KLEUBMK Ayurveda Mahavidyalaya, Shahapur, Belgaum. **MD (KC), PhD, Principal, KLEUBMK Ayurveda Mahavidyalaya, Shahapur, Belgaum.

Reprint's request: Dr. V.G. Huddar, MD (KC), (PhD), Lecturer, Department of Kayachikitsa, KLEUBMK Ayurveda Mahavidyalaya, Shahapur, Belgaum. Mob: 9986697942, Email: drvghuddar@gmail.com

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Source of data

The sexual health awareness education was given to the students of different colleges before starting the study. All apparently healthy individuals concerned about semen quality, attending the *Srishti* fertility centre OPD, KLEU Ayurveda Hospital, and KLE Ayurveda city clinic, Belgaum were selected for the study.

Inclusion criteria

1. Apparently healthy male individuals willing to undergo semen analysis concerned to semen quality were selected for the study.

2. Aged between 18 to 30 years

Exclusion criteria

1. Diagnosed cases of infertility

2. Abstinence period more than 5 days and less than 3 days.

3. Individuals suffering from severe systemic illness

4. Individuals with bacterial and viral infections

5. Chronic alcoholics and tobacco chewers

Study Design

It was a clinical observational study. All apparently healthy individuals who are willing to undergo semen analysis concerned to their semen quality were selected for the study. The semen analysis of 33 individuals was carried out as per the WHO guidelines for semen analysis (6). Volunteers' samples were collected for the study after three to five days of abstinence. The Prakriti assessment of individuals was done by special selfassessment questionnaire (5). The dominance of Prakriti was considered based on the percentage given by the participant himself. The quantity of the semen is measured and the results are statistically analysed using correlation regression technique. Total duration of the study was six months.

Result

Analysis of results

Considering the individual *Prakritis* as independent variables and the semen quantity as the dependent variable the statistical analysis was carried out using the correlation and regression technique. By this the relation existing between these independent variables and the dependent variable is established.

Using SPSS software (7)

Considering the variables as C1=semen quantity, C2=*Vata*, C3 =*Pitta*, C4=*Kapha*

Correlations: C1, C4

1. a) Pearson correlation coefficient between C1 and C4 = 0.400

b) $H_1: \tilde{n} = 0$ against $H_1''' 0$,

Calculated value, |t| = 2.427

Tabulated value, $t_{0.05,31} = 1.96$

c) P-Value = 0.021

Here correlation coefficient (r) is 0.400 which lies between 0 and +1. Hence C1 and C4 are having moderately positive correlation, which was significant at the level of 0.05. Thus it can be said that, as the percentage of *Kapha Prakriti* increases the quantity of the semen also increases.

Here correlation coefficient (r) is -0.211 which lies between 0 and -1. Hence C1 and C2 are having moderately negative correlation indicates, as the percentage of *Vata Prakriti* increases the quantity of the semen decreases. P-Value = 0.238 which is > 0.05, indicates statistically not significant. We can say that the *Vata Prakriti* persons are having less semen quantity.

Here correlation coefficient (r) is 0.302 which lies between 0 and +1. Hence C1 and C3 are having moderately positive correlation indicates, as the percentage of *Pitta Prakriti* increases the quantity of the semen increases. P-Value = 0.088 which is > 0.05, indicates statistically not significant. Thus it can be said that *PittaPrakriti* individuals will have less

C1	DNID			Prakriti			Somon
51. No.	No.	Vata(%)	Pitta(%)	Kapha(%)	Ekadoshaja Prakriti	Dwandwaja Prakriti	Quantity (ml)
01	02	80	40	73	V	VK	2.5
02	04	12	70	81	Κ	KP	3
03	05	8	29	37	Κ	KP	2.2
04	07	73	63	69	V	VK	3
05	21	54	69	47	Р	PV	1.7
06	22	58	98	85	Р	PK	5
07	23	07	37	65	Κ	KP	2
08	24	17	58	68	Κ	KP	3
09	25	16	75	76	К	KP	3
10	26	60	40	65	К	KV	3.5
11	27	20	31	75	К	KP	3.5
12	28	28	41	55	К	KP	3
13	29	79	43	40	V	VP	1.5
14	30	04	75	83	К	KP	3
15	01	85	60	42	V	VP	0.5
16	03	61	50	25	V	VP	1.5
17	06	55	22	81	К	KV	4.5
18	08	85	68	39	V	VP	1.2
19	09	81	32	86	К	KV	4.5
20	10	21	84	92	Κ	KP	3.3
21	32	19	70	83	К	KP	4.2
22	11	71	80	20	Р	\mathbf{PV}	2.8
23	12	73	40	83	Κ	KV	3.5
24	33	88	25	69	V	VK	2
25	13	23	78	61	Р	РК	3.5
26	14	24	23	39	К	KV	3
27	15	76	90	19	Р	PV	5.2
28	16	31	71	86	К	KP	5.1
29	17	58	33	78	Κ	KV	2
30	18	65	55	50	V	VP	2
31	20	50	65	45	Р	PV	2.5
32	31	81	90	26	Р	PV	4.2
33	32	19	70	83	К	KP	6.1

Table 1

Note: * V=Vata, P=Pitta, K=Kapha, VP=Vata Pitta, VK=Vata Kapha, KV=Kapha Vata, KP=Kapha Pitta, PV=Pitta Vata, PK=Pitta Kapha. First highest percentage among the three observations of individual participants is considered as the *Ekadoshaja Prakriti*. First highest and second highest percentages together are taken as *dwandwaja Prakriti*. Ex: In patient PNR no 2, the 3 observations are V=80%, P=40%, K=74%. Here the patient is considered *Vata Prakriti* (80%) – *Ekadoshaja* and *VataKapha Prakriti* (80%, 73%) – *Dwandwaja Prakriti*.

semen quantity compared to *KaphaPrakriti* individuals.

Discussion

According to present era many facts told by our acharyas are not well supported by the evidence based medicine. Here is an effort to see the relation between the semen quantity and the individuals *Prakriti*. *Charakacharya* says the *Kaphaja Prakriti* person has *Prabhootashukravyavayapathya'* and *PittaPrakriti* person has '*Alpashukravyavayapathya'*. ⁴ Though the

Ekadoshaja (No of indiv	viduals)	Dwandwaja (No of individuals	s & % of Prakriti)
Kapha	18	Kapha – Pitta	12
		Kapha – Vata	06
Pitta	07	Pitta – Kapha	02
		Pitta – Vata	05
Vata	08	Vata – Kapha	03
		Vata – Pitta	05





Correlations: C1, C2

2. a) Pearson correlation coefficient between C1 and C2 = -0.211

- b) H_0 : $\tilde{n} = 0$ against H_1 " 0,
- Calculated value, |t| = 1.204

Tabulated value, $t_{0.05, 31} = 1.96$

c) P-Value = .238





Correlations: C1, C3

3. a)Pearson correlation coefficient between C1 and C3 = 0.302

b) H_0 : \tilde{n} =0 against H_1 "" 0, Calculated value, | t | = 1.76 Tabulated value, $t_{0.05.31}$ = 1.96

c) P-Value = .088

Figure 3: Regression line is shown below

Regression Analysis: C1 versus C2, C3, C4

The regression equation is

C1 = 0.59 - 0.00209 C2 + 0.0197 C3 + 0.0239 C4



Predictor	Coef	SE Coef	Т	Р
Constant	0.591	1.046	0.57	0.576
C2	-0.002090	0.007678	-0.27	0.787
C3	0.019688	0.009337	2.11	0.044
C4	0.023880	0.009882	2.42	0.022

Table 3

S = 1.13956 R-Sq = 27.6% R-Sq (adj) = 20.1%

R-Sq = 27.6% indicates the semen quantity and the *Prakriti* of an individual are correlated at the extent of 27.6% and the quantity of semen also depends on the many other parameters other than *Prakriti* about 72.4%.

Acharya has not directly commented on the quantity of the semen in Vata Prakriti person, rather only told 'Alpapathyah', logically it can be understood that the Vata Prakriti individuals have less semen quantity compared to Kapha and Pitta Prakriti and the present study also supported the same. By analysing the data it is observed that the Kpaha Prakriti and the quantity of the semen are having moderately positive correlation indicating the the Kapha *Prakriti* individuals have more quantity of semen. Pitta Prakriti is also has moderately positive correlation which indicates the *Pitta* Prakriti persons has moderate quantity of semen as compared to Kapha Prakriti. Vata *Prakriti* has moderately negative correlation which indicates they are inversely proportional. Hence Vata Prakriti individuals have less quantity of semen.

Changes in seminal parameters depend on many factors apart from *Prakriti* like *Kala*. In *Adaana kala* the sperm count and percentage of actively mobile sperms will be more as compared to *Visarga kala* (8). Apart from the present proforma of assessing the *Prakriti*, many other methods are also mentioned by different authors. One openion is rather than considering the characters in assessing individual *Prakriti*, one has to consider the Gunas which will be more suitable and precise because the Guna covers almost all the characters mentioned in the text about individual *Prakriti* (9). The seminal parameters change even according to *Desha*. A survey

Table 4: Analysis of Variance

Source	DF	SS	MS	F	Р
Regression	3	14.341	4.780	3.68	0.023
Residual Error	29	37.659	1.299		
Total	32	52.001			

The effect of treatment is statistically significant since p<.05.

($t = \frac{r}{\sqrt{1-r^2}}\sqrt{n-2}$), r is the correlation coefficient and n is the number of observation.)

study carried out in gold mine and non gold mine area showed that the semen volume, sperm count and motility were better in goldmine area in comparison to non goldmine area. This observation certainly indicates towards some action gold of in spermatogenesis (10). The vikrita conditions like Varicocele also depend on Prakriti of an individual. Study shown that the highest number of patients (34.5%) found belong to PittaPrakriti. Pitta Vata Prakriti by 24.1% - Pitta Prakriti individuals with mrudu predominance may have shithilangata (11). Hence these individuals have moderate semen quantity as in Pitta prakriti individuals.

Conclusion

The quantity of semen is found to be more in *Kapha Prakriti* Persons, and will increase as the percentage/Intensity of *Kapha prakriti* increases. *Pitta Prakriti* persons have moderate semen quantity as compared to *Kapha Prakriti*. *Vata Prakriti* persons have less semen quantity compared to *Kapha* and *Pitta Prakriti*. There are many factors other than *Prakriti* which influence on the quantity of the semen like, *Kala, Desha* etc. There are different methods of assessing *Prakriti* are mentioned by different authors and needs to be standardised. Study on larger samples is the further scope of the study with standard *Prakriti* assessment proforma.

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