

SEXOLOGICAL PERSPECTIVES IN AYURVEDAVd. Ashish S. Agrawal¹ and Vd. Sheetal O. Sureka²¹Asso. Professor and HOD, Sharir Kriya Dept. Smt. Vimladevi Ayurved Medical College, Chandrapur.²MD Scholar, Rasashastra & Bhaishajya Kalpana Department, Bhausaheb Mulak Ayurved College, Nandanwan, Nagpur.***Corresponding Author: Vd. Ashish S. Agrawal**

Asso. Professor and HOD, Sharir Kriya Dept. Smt. Vimladevi Ayurved Medical College, Chandrapur.

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ABSTRACT

Vajikarana directly enhances semen and reproductive potency. Of the two facets of vajikarana procreation and enjoyment one or the other has been getting focus from time to time according to sociological situation. Manu stresses the former further while Vatsyayana adds more importance to the latter. That's why he's including this subject in his letter. But the job of the physician was to look at both and to maintain a balance between on the one hand, impotence is an illness, and on the other hand, excess sex causes dhatus failure and causes other effects, such as consumption, etc as Moon did by his excessive indulgence with Rohini. Similarly, excess progeny is problematic, but at the same time, infertility is not a problem. The present analysis explains in depth the sexological viewpoint of Ayurveda, with a focus on study areas to support the concept of Vajikarana.

KEYWORDS: Vajikarana, Vrsya, Shukra dusti, Vajikaradravya.**INTRODUCTION**

Even in the distant past, there is an instinctive impulse to expand the clan or the race. Putraisana (desire of progeny) is one of the primary desires of the human race listed in the Upanishads. In comparison, to make it more appealing, the gratification obtained from sex clings to it. What is said in Rigveda in a sophisticated manner was articulated in such a vulgar one in the Atharvaveda, where man wanted to make his phallus as big as that of an ass, a horse or a donkey. The word 'Vaja' is both pace and semen. Thus, this branch of Ayurveda, built to foster virility as well as strength, was crystallized, in the post-Atharvan era, by the name of 'Vajikaran.' The bull (vr̥sa) is another species that discharged semen copiously and as such is also known as 'vrsya.' By comparing the small bird sparrow and the giant animal elephant in terms of sexual strength or sustenance, it has been seen that it does not rely on much of the body, but rather on will and energy. Human nature plays an important role here; some are activated by time influences, some by practice, some by other means (drugs, etc.) while some are potent by nature.

Sex in one of the fundamental instincts-Vyavaya, Gramayadharma, Maithuna, Strisanga, Strigamana etc are the synonyms used to describe hetero-sexual activity between committed sex partners in the classics. Knowledge on sexuality is available from the Vedic hymns. The Ayurvedic philosophy also narrates sex according to the fundamental principles of Ayurveda. 'Kama' is perceived to be the third trinity of human

expectations. Kama is described as one of the Manovicaras based on the concepts of Rajas and Tamas of Manas.

It was a routine practice in ancient times to take any aphrodisiac before sexual intercourse. The idea was to encourage, in this manner, the quantity and consistency of semen and sexual gratification.

Vajikarana: The branch of Ayurveda, which deals with the control of faulty semen and spermatogenesis along with sexual potentiation, is called Vajikaran Tantra. Procreation and leisure are the two merits of Vajikaran Viz., satisfaction, good sound fitness, offspring and immediate enjoyment. Vajikaran encourages sexual ability and performance; on the other hand, it also increases the physical and psychological wellbeing of the individual and thereby helps to preserve and encourage the good health of a stable person. Vajikarana provides more control and sustenance to females at sex congresses and strengthens muscle resilience, tissue nutrition and OAS. By way of Vajikaran not only the person undergoing the therapy is benefited, but also his descendants are empowered with the capacity of safe procreation and generation. Vajikarana is therefore a must for all those partners who are going to start their sexual life and who want to pursue their sexual life in a better way.

Shukra: Shukra is the thing that belongs to an individual, the product of four proto-elements (Ap, Agni,

Prithvi and Vayu), consisting of all six tastes, while deposited in the womb of a mother, which gives birth to pregnancy. Pumstva, Paurusha, Bala, Virya are functional synonyms of Shukra (complete testicular secretions i.e. semen + androgen) which is pervaded throughout the body are defects which lead to loss of virility, masculinity and potency Retas, ejaculate (Rupadravya) comes out during extreme coital pleasure. Praharsa (Excitement Erotic), Dhairya (Daring Activity), Priti (Love), Cyavana (To Come Out), Bala (Energy) and Garbhapatti (Fertilization) are sexually linked functions of Shukra. Any deficiency in Shukra leads to infertility and sexual dysfunction. In man, thus, Shukra is responsible for all reproductive phenomena and relative neuroendocrine psychosex dysfunctions.

Age: Persons under 16 years of age and over 70 years of age are unfit for sexual intercourse. Pre-adolescent male copulating with a female elder would lose strength and vigor as male sexual glands and neuro-endocrines are not yet fully mature at this age. A middle-aged individual (between 16 and 60 years of age) is governed by Pitta Dosha, hence he is endowed with Bala (strength), Virya (power) and Paurusha (manliness) etc which makes him fit for sexual copulation. Sexual practice is usually contraindicated after 70 years of age due to the superiority of Vata Dosha, which leads to a lack of normal fertility and strength; and if sex is performed in this age, there will be several crises in the body. According to Acharya Sushruta, a male should not marry up to 25 years of age (while learning about sex) and should then marry a female older than 16 years of age. Female is said to be fertile between 12 and 45 years of age. **Seasons:** Sexual practice should be focused on health status, personal power and seasonal patterns. Continuous and unrestricted sex is not recommended for all days of the year. During the cold seasons (Hemanta and Shishira Ritu) normally strength will be fine and one can have sex as much as he likes, while in the autumn (Vasanta Ritu) sex is recommended every third day in the Rainy season (Varsha Ritu) sex is preferred every fortnight, and in the hot season (Grishma Ritu) sex can be exercised according to individual strength.

Prakriti: Sexuality and potency are also determined by the somatic and psycho-behavioral personality of the woman, and the observations made are as follows: (1) Shleshmala prakriti is endowed with a fair amount of Shukra/Retas, possesses more sexual potency and enjoys a great deal of sexual satisfaction, and also has more offspring. (2) Pittala prakriti person has Les Shukra, is less strong in sexual congress and has less offspring, and finally (3) Vatala prakriti person is poor in sexuality and has less offspring.

Sara-Satmya: If the two metabolic derivatives – Majja (Bone Marrow) and Shukra (Semen + Androgen) are well nourished and the essence of a human, either by inheritance or by acquisition, is endowed with healthy offspring, good sexual strength and valued by the females.

One who consumes more milk and milk products (especially Ghee), mutton soups and other preparations will tolerate all food. In sexual experience, he will be dominant, tolerant and nice.

Psyche (manas): Psyche and Vata are linked to each other. Vata governs, oversees, initiates and retains Manas. Sexual gestures and ejaculation are under Vata's power. The underlying initiation of sexual instinct is under the control of psychological honesty. Apana and Vyana vata, in conjunction with Sadhaka Pitta and Manas, affect a person's natural sexuality and any abnormality in this AVSM axis leads to Shukravaha Sritodushti and hence to Shukradushti's infertility or sexual dysfunction. A person's determination (Samkalpa) to have sex starts to have sex. Harsha, Praharsa (excitement) priti (affection, love), Bala (ability to have sex) and Shukra's psycho-sex endocrinal merits. The whole body is the seat of Manas and Shukra; and Hridaya is the pivotal organ for the control of Rasa, Shukra, Ojas, Manas and Vayu, thus all endocrine psycho-sex roles are interdependent. Harsha – sexual excitement depends on Dehabala (physical strength) and Sattvabala (psychological integrity) as well as Vrushattva – sexual ability depends on this excitement and this triangular HDSV axis is not constant.

Sexophysiology: Sexual attraction, curiosity and pleasure are psycho-sexual emotions. Touch, Voice, Vision, Taste and Scent on Sexuality are erotic probes and satisfaction concepts of sexology. Human sexual excitement is directly proportional to physical and emotional dignity and health. Young beautiful, willing, erotic, well-dressed and well-behaved female (wife) is considered to be an erotic ultimatum. Sexual intercourse in that period can only be effective if the mindset of both partners is equal, young, fit, eager without fear and made up of their minds to have copulation.

Sexual copulation begins with a sensational focus process in which a person is resolved to have sex (Samkalpa) and begins pleasurable conversations, contact and sensations. The next step is foreplay-Ceshta-Samkalpa-Pidana-Samsparshana. There should be no strict order for this sequence of practices to be carried out in order to initiate sexual emotions and thereby achieve arousal erections. This varies from person to person in time, appearance and manner. The next step is for full arousal, ejaculation and orgasm. Here Harsha, Dhavaja uccharaya and Shukra pravartana take place. Samkalpa, Ceshta, Pidana (kissing, vaginal fondling, etc are all prepared for the real coitus. Vata (vyana) being the chief performer, activates Manas and Shukra in the body. Shukra, by means of Sarattva, Picchilattva, Guruttva and Anupranavabhava, continues to dislodge from the whole body and Shukravaha Srotomula. The concepts of Vayu and Akasha make it possible to ooze through Majjavaha channels from the breadth of the sneha portion of Majja, the precursive metabolic derivative of Shukradhatu. Continued sexual pleasures mediated by Apana-

Vyanavata axis brings Shukra to ejaculation. In climax, the rupadravya (Retas, the full ejaculatory material) is ejaculated from Shephat Shukravaha Srotomula and the kale gonadal counterpart. Acharya Sushruta also narrates this sex physiology, beginning with sensual perception, thinking, words, nice mind, and physical contact leading to ejaculation, which is very close to the mechanism of breastfeeding and milking in females – mothers. Thus, ejaculation and orgasm are nuanced and under the control of psycho-sex endocrine axis rhythms called Vata, Manas, Shukra, Rasa, etc. in Ayurvedic doctrines.

Sexo pathology: Shukra is a forum to explain the symptomatology of sexual dysfunction. Any disruption in the Manas-Vata-Shukra axis due to any cause leads to Shukravaha Srotodushti and Shukradushti manifests either as infertility or sexual dysfunction. Supporting causes include Agni, morbidity of precursor metabolic derivatives, Trayopasthambhas, Prakriti, Vayu, Bala, Sara, Ahara, Vihara, Manas, Agantu factors, and finally Daiva or Karma.

Sexopathogenesis in general: The Sahaja (Adibala, Janmabala, Su. Ci. 26/11) hetu, parental beeja dosha or faulty acts of self-mediation of the mind may trigger a tridoshic imbalance. At the same time, the diet and behaviour would also carry the same equation to vitiate Agni and as a result, the root toxic sexopathophysiological target is created. Either Vatadosha or Ama vitiates Shukravaha srotas separately. Vyana-Apana vatadushti, Shukragatavata and Shukravrutavata, Apanavruta Vyana are Vata manifest platforms. Second, Amadosha, which is directly involved in Shukravaha srotodushti process causes Shukradushti to create sexual dysfunction as a result of the supremacy of causative mechanics. As a result, external causes of Jatottara (Doshabala), secondary to other disorders, direct damage to Shukravahasrotomula (as a result of error during surgery near gonads, e.g. Hydrocele, Herniorrhaphy, Lithotripsy, etc will result in direct symptomatology of Srotodushti and Shukradushti.

Kriyakala Specific to Sexo pathogenesis: Due to the various triggers, Tridosha Vitiations and Agnidushti contributes to Ama (Sancaya, Prakopa) and in essence, hinders the control of seven dhatus (Prasara) so that the Retovahasira, Shukravaha Srotas and Shukravaha Srotomula are permanently or specifically affected by pathological conditions (Sthanasamshraya) in which the underlying external influences are Marma Cheda, etc. The Shukradushti manifested as this is the origin mechanism for the manifestation of multiple reproductive and sexual issues (Vyakti) viz. Kshayaja, Jaraja, Bijopaghataja, Dhvajabhangaja Klaibya. If not tested at this point, the complicated manifestations will be seen (Bheda) viz., Hrudroga, Shvasa, Krumi, Mani-Shepha-Mushka Vidirana.

Vyadhi

Grahani roga (IBS Sprue, Malabsorption Syndrome, etc

the patient will experience Strishu Aharsha – disinterest and aversion of women and sex.

Pandu and Kamala (Haematological and Hepatobiliary discoveries): the advanced stage of the exacerbated Pitta and Vata contribute to Halimaka, where the loss of vital power (Balakshaya), the drop of excitement (Utsahani) and also the lack of confidence in women and sex.

Arsha (hemorrhoids): The secondary effects of Shleshmaja Arsha arise in Klaibyata and the ano-rectal conditions face problems linked to reproduction viz. Apraharsha, Khina retas, Alpapraja, etc. Upadhmsha (STDs): Consequences impair the sexuality of the sufferer.

Shukradhatugata jvara: Jvara will cause Shepha Stabdhatta in general (Erectile Dysfunctions). Shukra-Moksha (Ejaculatory dysfunctions).

Obesity: Abnormal medas (fat) deposition in the body has a detrimental effect on sexual behavior and the individual suffers from Alpamaithuna, Klaibya, etc. The effects of Prameha and Madhumeha on the body and sexuality are rather severe, such as decreased sexual copulation ability, Mushkavidirana (Genital wounds, etc and lack of strength (Bala) etc.

Sexopharmacology: Various single drugs and compound preparations have been promoted in all classical triplets and almost all Ayurveda literature.

1. **Single drugs:** Atmagupta, Shatavari, Ashvagandha, Masha, Yashtimadhu, Ikshuaraka, Vidari, Bala, Ashtavarga, Shunthi, Gokshura, Bhallatak, Musali, Jatiphala, Akarkarbha etc.
2. **Compound materials:** Vrsya gutika, Vrsya ghruta, Vajikarna Ghrutam, Vrsya mamsa rasas, Apatyakara ghruta, Vanari gutika, Amruta Bhallatak leha, Kameshvaramodaka, Pugapaka, Kaminividravana rasa, Makardhvaja vati, Makaramushtiyoga etc.
3. **Diet material:** masha, godhuma, ghruta, dshira, madhu, sharkara, shali, ikshu, guda, mamsa rasa, bastanda, nakraretas, cataka mamsa, mahisharasa etc.
4. **Psycho sexopharmacology:** Psychological well-being, Priti, Dainya, Bala, Sthairya, Akrodha, Harsha, Samkalpa, etc are the psychological influences that would encourage better sexuality. Kedhya Rasayana drugs viz., Brahmi, Jyotishmati, Jatamamsi, etc are also be beneficial to the enhancement of sexual function.

CONCLUSION

Vajikarana tantra is a division of Ayurvedic medicine dedicated to the treatment of sexual and reproductive issues with relationship therapy, sex-pharmacology, and sex-package- diet counseling. Various Vajikaran Yogas have been described in Ayurvedic texts for internal and external use. All yogas are not in existence and hence there is still space for more study into these yogas. This

literary review research is an attempt to establish a philosophy of Vajikarna therapy and to support the individual and his grandchildren, empowered with the capacity of safe procreation and generation.

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