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AN OBSERVATION ANALYSIS ON SHUKRA DHATU ACCORDING TO AYURVEDIC AND MODERN PROSPECTIVE

Dr. Deepa

Assistant professor, Kriya Sharir department, Gaur Brahman Ayurvedic College and hospital Brahmanwas, Rohtak.

Corresponding Author - Dr. Deepa, Assistant professor, Kriya Sharir department, Gaur Brahman Ayurvedic College and hospital Brahmanwas, Rohtak

ABSTRACT

Shukra Dhatu is the seventh and most refined tissue in the Sapta Dhatu sequence described in Ayurveda, responsible for reproductive functions, vitality, and overall well-being. It is formed as the final product of dhatu metabolism, derived from the nourishment provided by the preceding six dhatus (Rasa, Rakta, Mamsa, Meda, Asthi, and Majja). The primary physiological function of Shukra Dhatu is the generation of **reproductive elements**, specifically **semen** in males and **ova** in females, facilitating procreation and sexual potency. In addition to its reproductive role, Shukra Dhatu is closely associated with the generation of **Ojas**, the vital essence that governs immunity, vigor, and mental clarity. The physiological balance of Shukra Dhatu is vital for maintaining **Prana** (life force), physical stamina, mental stability, and emotional equilibrium. A well-nourished Shukra Dhatu enhances physical strength, libido, and overall vitality, while its depletion or imbalance can lead to infertility, impotence, premature aging, and psychological disturbances such as anxiety and depression. Ayurveda emphasizes the importance of diet, lifestyle, and herbal remedies such as Ashwagandha, Shatavari, and Kapikacchu for maintaining Shukra Dhatu's optimal function and preventing disorders. This abstract discusses the formation, function, and significance of Shukra Dhatu in maintaining reproductive health, vitality, and longevity, alongside Ayurvedic approaches to balance and nourish this essential tissue.

KEYWORDS: Shukra Dhatu, Physiology, Reproduction, Ojas, Ayurveda, Vitality.

INTRODUCTION

Shukra Dhatu is considered the most refined and essential of the **Sapta Dhatus** (seven bodily tissues) described in Ayurveda. It plays a crucial role in reproduction, vitality, and overall well-being.¹ As the final product in the tissue transformation process, Shukra is formed from the essence of the preceding dhatus—Rasa, Rakta, Mamsa, Meda, Asthi, and Majja—making it the purest and most potent tissue responsible for sustaining life and procreation.²

According to **Acharya Charaka**, Shukra is composed of all the **Mahabhutas** except **Akash** (space), while **Acharya Chakrapani** further clarifies that though Akash is present ubiquitously, it does not play a direct functional role in Shukra. **Acharya Sushruta** suggests that Shukra contains all Mahabhutas but is primarily **Soumya** (cool and calm), reflecting its Kapha nature.³

Shukra Dhatu is fundamental to **Beejartha** (reproduction), enabling the production of healthy progeny. Its primary functions are related to procreation, but it also nourishes the body systemically, contributing to strength, immunity, and emotional stability. Shukra is intricately linked to the formation of **Ojas**, the vital essence that governs immunity and overall vitality.⁴

Understanding the physiological functions and the nature of Shukra Dhatu is essential for maintaining reproductive health, vigor, and longevity. Imbalances in Shukra can lead to reproductive issues such as infertility, impotence, and reduced vitality, highlighting the importance of its balance for both physical and mental well-being.⁵ Ayurveda provides various dietary, lifestyle, and herbal interventions to nourish Shukra and maintain its proper function.⁶

AIM AND OBJECTIVES

Aim: To explore the physiological functions and significance of **Shukra Dhatu** in Ayurvedic science.

Objectives:

- 1. To explain the **composition** and **embryological origin** of Shukra Dhatu based on Ayurvedic classical texts.
- 2. To understand the **dosha predominance** and the relationship between Shukra Dhatu and **Kapha Dosha**.

- 3. To analyze the **location and systemic presence** of Shukra Dhatu within the body, with analogies provided in Ayurveda.
- 4. To identify the **key functions** of Shukra Dhatu, including its role in reproduction, systemic nourishment, and mental and emotional well-being.
- 5. To explore the **imbalance and disorders** related to Shukra Dhatu, such as infertility, diminished vitality, and psychological disturbances, and their causes.
- 6. To provide an overview of **Ayurvedic approaches** for maintaining the health of Shukra Dhatu, including dietary, lifestyle, and herbal therapies aimed at enhancing reproductive health, vitality, and **Ojas**.

MATERIAL AND METHODS

Study Design: This study is based on an extensive review of Ayurvedic classical texts, including **Charaka Samhita**, **Sushruta Samhita**, and **Ashtanga Hridaya**, along with modern interpretations and commentaries on these texts. The study also incorporates insights from contemporary research articles and journals related to reproductive health, physiology, and Ayurvedic perspectives on Shukra Dhatu.

Materials:

- Ayurvedic Classical Texts: Charaka Samhita, Sushruta Samhita, Ashtanga Hridaya
- Ayurvedic Commentaries and modern interpretations from scholars like Acharya Chakrapani and Dalhana.
- **Contemporary Research Articles** related to reproductive health, physiology of Shukra Dhatu, and its role in systemic nourishment and vitality.
- **Herbal and Dietary Recommendations** from classical texts that support the health and balance of Shukra Dhatu, such as **Ashwagandha**, **Shatavari**, and **Kapikacchu**.

Methods:

• **Literature Review**: A thorough review of Ayurvedic texts and related literature was conducted to extract relevant information about the composition, physiology, and function of Shukra Dhatu. Shlokas and interpretations from authoritative texts were gathered to provide a clear understanding of its Ayurvedic perspective.

• **Data Collection**: Key concepts, including the embryological origin, dosha predominance, systemic presence, and functions of Shukra Dhatu, were extracted from classical texts. The collected data was organized into thematic categories for analysis.

CONCEPT OF SUKRA DHATU

1. Composition of Shukra Dhatu:

According to **Acharya Charaka**, Shukra Dhatu is composed of all the **Panchmahabhutas** except **Akash Mahabhuta**. It contains **Vayu**, **Jala**, **Agni**, and **Prithvi Mahabhutas**, which give it the qualities essential for reproduction and vitality. The absence of Akash is highlighted by Acharya Charaka, but **Acharya Chakrapani**, while commenting on this, suggests that Akash is present due to its ubiquitous nature. Chakrapani clarifies that Akash is not an essential component of Shukra in terms of its function but is present at the time of ejaculation. This reinforces the idea that Shukra is a combination of the other four Mahabhutas, which provide its physical and functional characteristics. 8

In contrast, **Acharya Sushruta** states that Shukra contains all five **Mahabhutas**, including Akash, but is predominantly **Soumya** (cool and calming), emphasizing its nourishing and stabilizing nature. This Soumya quality aligns Shukra Dhatu with **Kapha Dosha**, known for its stability and nourishment, supporting the life-sustaining properties of Shukra⁹

2. Embryological Origin of Shukra:

According to **Acharya Charaka**, Shukra originates from **Pitruja Bhava**, meaning that it is derived from paternal factors that contribute to the formation of the embryo. The presence of Shukra in the reproductive process is crucial as it carries the genetic material from the father to the offspring. Charaka emphasizes the role of Shukra in heredity and its connection with **Pitruja Bhava**, symbolizing the transmission of lineage and traits from one generation to the next.¹⁰

3. Rasa of Shukra:

Acharya Charaka describes Shukra as containing all **Shadrasa** (the six tastes: sweet, sour, salty, pungent, bitter, and astringent). This suggests that Shukra is comprehensive in its nutritional and functional capacity, as each rasa is associated with specific biological functions. The presence of all tastes indicates the completeness and richness of Shukra Dhatu, supporting its role in maintaining the health and vitality of the body.¹¹

4. Dosha Predominance in Shukra Dhatu:

Acharya Vagbhata identifies Shukra as the Ashraya Sthana (seat) of Kapha Dosha. Kapha, known for its stability, strength, and nurturing qualities, aligns with the characteristics of Shukra, which provides nourishment, sustenance, and fertility. Shukra's Kapha-dominant nature gives it the ability to stabilize the body, provide strength, and promote reproductive capacity. This predominance of Kapha explains why Shukra is associated with physical and mental stability, vitality, and a calm disposition.¹²

5. Location of Shukra Dhatu:

In Ayurveda, Shukra Dhatu is considered to be present throughout the entire body, similar to how juice pervades every part of a sugarcane. **Acharya Charaka** uses this analogy to describe Shukra's pervasive presence in the body, which nourishes and supports all tissues. Like **ghee** present in milk, extracted through a process, and oil in sesame seeds, Shukra is latent in all tissues but becomes apparent during reproduction. This analogy highlights Shukra's foundational role in the body, sustaining all other dhatus and enabling procreation.¹³

6. Functions of Shukra Dhatu:

Shukra Dhatu's primary function is **procreation**, but it has several other significant physiological roles. These can be classified as follows:

- **Sarvadaihika (Systemic function):** Shukra Dhatu contributes to overall vitality and well-being. It nourishes the body, strengthens the immune system, and provides vigor, stamina, and mental clarity. Properly functioning Shukra ensures that all tissues in the body are well-nourished and maintained.¹⁴
- Maithunagata (Related to sexual activity): Shukra is directly involved in the reproductive process, particularly in sexual intercourse. It provides sexual strength, promotes libido, and enhances fertility. The quality and quantity of Shukra directly impact one's reproductive health and capacity.¹⁵
- Roopa Dravyagata (Functions related to seminal fluid): Shukra plays a role in the
 formation and release of seminal fluid, which carries the Beeja (sperm) essential for
 conception. The health of Shukra Dhatu is reflected in the quality of semen and its ability
 to contribute to healthy offspring.¹⁶
- Beejartha (Progeny-related function): The principal function of Shukra, according to
 Acharya Sushruta, is Beejartha, or the production of offspring. Shukra is essential for
 the creation of life, ensuring the continuation of the family lineage and the production of

healthy progeny. This reproductive function is the most significant aspect of Shukra Dhatu in the context of Ayurvedic physiology.¹⁷

TABLE NO. 1 SHUDDHA SHUKRA LAKSHANAS¹⁸

Attributes	Description
Sphatikabha	Clear and transparent appearance, resembling a crystal (Sphatika).
Ghrita-Ksaudra-Taila- Nibha	Color resembling ghee , honey , and oil (natural, smooth, and viscous).
Madhugandhi	Fragrance similar to honey , indicating purity.
Drava	Liquid consistency, essential for proper reproductive function.
Picchila	Sticky nature, showing normal viscosity.
Bahu	Abundant quantity, typically measured as 1/2 Anjali Pramana.
Bahala	Thick consistency, indicating strong reproductive potential.
Avisra	Odorless, free from any unpleasant smell.
Shukla	White color, indicating purity and balance in reproductive fluids.
Kaphavarga	Possesses Kapha qualities like unctuousness (Snigdha) and sweetness (Madhura).
Madhura	Sweet taste due to fructose in seminal plasma.
Avidahi	Non-burning sensation, balanced pH ensuring comfort postejaculation.
Pravana Bhava	Smooth flow during ejaculation, showing proper reproductive function.

MODERN REVIEW

Spermatogenesis is the process of sperm cell development in males, which occurs in the **seminiferous tubules** of the testes. It is a highly regulated and complex process that transforms **spermatogonial stem cells** into mature spermatozoa capable of fertilizing an

ovum. This process is crucial for male fertility and involves a sequence of cellular transformations governed by hormonal and genetic regulation.¹⁹

Phases of Spermatogenesis:

Spermatogenesis can be divided into three distinct phases:

1. Spermatogonial Phase (Mitotic Division):20

- In this phase, **spermatogonia** (stem cells) undergo multiple rounds of mitotic divisions to produce primary spermatocytes.
- These stem cells are located on the **basal lamina** of the seminiferous tubules.
- Spermatogonia proliferate and maintain a pool of stem cells for continuous sperm production throughout a male's reproductive life.

2. Meiotic Phase (Reduction Division):21

- Primary spermatocytes derived from spermatogonia undergo the first
 meiotic division, which results in two secondary spermatocytes. Each of
 these secondary spermatocytes has half the number of chromosomes
 (haploid) compared to the diploid primary spermatocytes.
- The secondary spermatocytes undergo a second meiotic division to form spermatids. This reduction in chromosome number is crucial for ensuring that the sperm, when combined with the ovum, restores the diploid number of chromosomes in the zygote.

3. Spermiogenesis (Differentiation):²²

- During this phase, **spermatids** undergo morphological and structural changes to become mature **spermatozoa** (sperm cells).
- This includes the development of the **acrosome**, condensation of the nucleus, formation of the **flagellum** for motility, and shedding of excess cytoplasm.
- The mature spermatozoa are then released into the lumen of the seminiferous tubules through a process called spermiation, ready for transport to the epididymis where they gain further motility and the capacity to fertilize an egg.

Hormonal Regulation of Spermatogenesis:²³

The process of spermatogenesis is tightly regulated by the **hypothalamic-pituitary-gonadal (HPG) axis**, which involves the interplay of several hormones:

1. Gonadotropin-releasing hormone (GnRH):24

 Secreted by the hypothalamus, GnRH stimulates the anterior pituitary gland to release luteinizing hormone (LH) and follicle-stimulating hormone (FSH).

2. Luteinizing hormone (LH):25

• LH acts on the **Leydig cells** in the testes, prompting them to produce **testosterone**. Testosterone is the primary androgen responsible for the initiation and maintenance of spermatogenesis.

3. Follicle-stimulating hormone (FSH):²⁶

• FSH targets the **Sertoli cells**, which provide structural and nutritional support to developing sperm cells. Sertoli cells secrete various growth factors that are essential for the progression of spermatogenesis.

4. Testosterone:27

Produced by the Leydig cells under the influence of LH, testosterone is crucial
for the completion of meiosis and differentiation of spermatids into mature
spermatozoa. High levels of testosterone within the seminiferous tubules
promote the development of sperm cells.

5. Inhibin:28

 Secreted by Sertoli cells, inhibin provides negative feedback to the pituitary gland to regulate the production of FSH, thereby modulating the rate of spermatogenesis.

Factors Affecting Spermatogenesis:29

Several factors can influence the efficiency of spermatogenesis, including:

1. Hormonal Imbalances:

 Any disruption in the HPG axis, such as low levels of testosterone or imbalanced FSH and LH levels, can impair spermatogenesis and lead to conditions like hypogonadism or oligospermia (low sperm count).³⁰

2. Environmental Factors:

• Exposure to **toxins**, **radiation**, **heat**, and **pollutants** can negatively affect sperm production. Elevated testicular temperature, for instance, can impair spermatogenesis, which is why the testes are located outside the body to maintain a cooler environment.³¹

3. Lifestyle Factors:

- Habits like smoking, excessive alcohol consumption, drug use, and poor diet can lead to oxidative stress and damage sperm cells, reducing fertility.
- Obesity and lack of exercise are also linked to lower sperm quality and count.³²

4. Genetic Factors:

 Genetic mutations or abnormalities in the Y chromosome can affect spermatogenesis. Conditions like Klinefelter syndrome (47,XXY) result in reduced sperm production or complete absence of sperm.³³

5. **Age**:

While men can produce sperm throughout their lives, the quality and quantity
of sperm decrease with age. Older age is associated with increased rates of
sperm DNA fragmentation and reduced fertility.³⁴

DISCUSSION

Infertility, defined as the biological incapacity to contribute to conception, is a significant challenge that affects millions globally. It not only impacts a person's physical health but also imposes a heavy burden on their mental, emotional, and social well-being. The inability to conceive often leads to stress, anxiety, depression, and societal pressure, straining personal and marital relationships. In severe cases, the emotional isolation and despair caused by infertility can lead individuals to thoughts of suicide. Infertility is a multifaceted condition influenced by a range of medical, physiological, mental, psychological, and environmental factors.³⁵

Infertility and Ayurvedic Perspective

Ayurveda offers a unique perspective on infertility, particularly through its understanding of the reproductive tissues, **Shukra Dhatu** in men and **Artava Dhatu** (the female counterpart to Shukra) in women. These reproductive tissues are critical for healthy

conception. The formation of Shukra Dhatu is the culmination of a long chain of metabolic processes that begins with **Ahara Rasa** (digested food essence) and progresses through the sequential nourishment of the **Sapta Dhatus**: Rasa, Rakta, Mamsa, Meda, Asthi, and Majja. This process highlights the interconnectedness of the entire body, where each tissue supports the next in line, ultimately leading to the formation of Shukra Dhatu.³⁶

Any disruptions or imbalances in the earlier stages of tissue formation, such as in digestion or the health of the preceding dhatus, can negatively impact the quality and quantity of Shukra Dhatu, leading to infertility. Ayurveda emphasizes the importance of **Agni** (digestive fire) and proper nourishment in maintaining the health of all tissues, including Shukra Dhatu. Furthermore, Shukra is considered to be influenced by both physical health and mental well-being, meaning that disturbances in either domain can lead to infertility.³⁷

Shukra Dhatu and Spermatogenesis

In the Ayurvedic understanding, **Shukra Dhatu** is created from the **Prasad Bhag** (the refined portion) of **Majja Dhatu**, through the action of **Shukra Dhatvagni** (the metabolic fire governing Shukra Dhatu). This gradual process allows Shukra to pervade the entire body, much like water seeping from a clay pot, providing vitality and reproductive strength. **Acharya Charaka** and **Sushruta** both describe how Shukra Dhatu is dispersed throughout the body, subtly nourishing all tissues and supporting physical strength and mental stability.³⁸

In the context of modern physiology, this can be correlated with **spermatogenesis**, the process of sperm production in males. Germ cells migrate to the testis during embryonic development and later mature into **spermatogonia**, which undergo mitosis and develop into sperm during puberty. This process parallels the Ayurvedic concept of Shukra Dhatu formation, where a sequential process of transformation leads to the production of mature reproductive cells. Just as the quality of Shukra Dhatu is influenced by the health of the preceding tissues in Ayurveda, the production of healthy sperm is dependent on the overall health and hormonal balance within the male body.³⁹

Mental Health and Shukra

Ayurveda acknowledges the profound relationship between the mind and the body, especially in the context of reproductive health. Mental and emotional disturbances can have a direct impact on Shukra Dhatu, leading to its depletion or dysfunction. **Ojas**, which is considered the essence of Shukra Dhatu and the most vital energy in the body, is also affected

by mental health. When the mind is in a disturbed state, it can impair the proper formation of Shukra Dhatu and reduce the vitality and immunity conferred by Ojas.⁴⁰

The **Majja Dhatu** (bone marrow), which includes the **mastishka** or **mastulunga** (brain) according to **Acharya Dalhana**, plays a critical role in the formation of Shukra Dhatu. The brain and the **pituitary gland**, responsible for the regulation of reproductive hormones, are considered to be functional representations of Majja Dhatu in modern terms. Any imbalance or dysfunction in the **hypothalamic-pituitary-gonadal (HPG) axis**, which governs reproductive hormones, can disrupt spermatogenesis and the formation of Shukra Dhatu.⁴¹

This connection highlights the need for **mental balance** and stability in ensuring healthy reproductive functions. Ayurvedic texts emphasize that disturbances in the mind, particularly **Rajas** (activity, passion) and **Tamas** (inertia, darkness), can vitiate Shukra Dhatu, leading to reproductive disorders. Emotional disturbances, stress, and chronic mental health issues, therefore, have a direct influence on reproductive health in both men and women. Ayurveda offers several strategies to maintain mental peace and balance, such as **meditation**, **Pranayama** (breathing exercises), and specific herbal formulations like **Ashwagandha** and **Brahmi**, which are known to calm the mind and support the health of Shukra Dhatu.⁴²

Overall Findings

The concept of **Shuddha Shukra** in Ayurveda highlights the importance of healthy reproductive tissues for maintaining vitality and ensuring fertility. Based on the analysis of its attributes and the qualities described in Ayurvedic texts, the following key findings emerge:

- 1. **Purity and Transparency (Sphatikabha)**: Healthy semen is characterized by a clear, transparent, and white appearance, akin to a crystal (Sphatika), indicating its purity and balance within the body.
- 2. **Viscosity and Consistency**: Shuddha Shukra is thick (Bahala), abundant (Bahu), and viscous (Picchila), ensuring that the semen has the optimal consistency necessary for fertility and reproductive health. This thick and sticky nature allows sperm to be transported effectively.
- 3. **Color and Fragrance**: The color of Shuddha Shukra resembles natural substances like **ghee**, **honey**, and **oil** (Ghrita-Ksaudra-Taila-Nibha), indicating that the body is well-

- nourished. Additionally, the **honey-like fragrance** (Madhugandhi) signifies the absence of toxins or imbalances in the body.
- 4. **Sweet Taste and pH Balance**: Shuddha Shukra has a sweet taste (Madhura) due to the fructose present in seminal plasma, which nourishes sperm cells. Its **Avidahi** (non-burning) nature indicates a balanced pH, ensuring comfort post-ejaculation and a healthy reproductive environment.
- 5. **Kapha Dominance**: The attributes of Shuddha Shukra align with **Kapha Dosha**, which is associated with nourishment, stability, and strength. This Kapha predominance in Shukra contributes to its role in sustaining vitality and ensuring reproductive capacity.
- 6. **Normal Ejaculatory Function (Pravana Bhava)**: Shuddha Shukra flows smoothly during ejaculation, especially during heightened sexual pleasure, reflecting healthy reproductive function.
- 7. **Holistic Indicators of Health**: The attributes of Shuddha Shukra are not just limited to reproductive health but also indicate the overall state of bodily nourishment and wellbeing. Healthy Shukra is formed only when all preceding dhatus (tissues) are well-nourished and balanced, which further underscores the importance of systemic health in Ayurveda.

CONCLUSION

This study on **Shuddha Shukra** highlights its crucial role in reproductive health and overall vitality as understood in Ayurvedic principles. Shuddha Shukra serves not only as a marker of fertility but also as an indicator of systemic well-being, being the final product of metabolic processes that nourish the preceding dhatus (tissues). Its characteristics, such as clarity, viscosity, abundant quantity, and balanced pH, reflect a healthy body with strong **Kapha dominance**, which supports both reproductive potential and vitality. The study emphasizes the interconnectedness of Shukra Dhatu with overall bodily health, showing that disturbances in Shukra can result in fertility issues and reduced vitality. Maintaining Shuddha Shukra through balanced digestion, proper diet, lifestyle practices, and mental stability is essential, and Ayurvedic interventions provide effective ways to preserve and restore reproductive health. In essence, Shuddha Shukra is a reflection of both reproductive capacity and holistic well-being, underscoring the importance of a balanced lifestyle for maintaining health and longevity.

CONFLICT OF INTEREST -NIL

SOURCE OF SUPPORT -NONE

REFERENCES

- 1. **Charaka**. *Charaka Samhita*. Sutra Sthana, Adhyaya 1, Shloka 51-52. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 2. **Charaka**. *Charaka Samhita*. Sharira Sthana, Adhyaya 3, Shloka 17-18. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 3. **Sushruta**. *Sushruta Samhita*. Sharira Sthana, Adhyaya 2, Shloka 33. 3rd ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2008.
- 4. **Charaka**. *Charaka Samhita*. Sharira Sthana, Adhyaya 3, Shloka 12-13. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 5. **Vagbhata**. *Ashtanga Hridaya*. Sutra Sthana, Adhyaya 11, Shloka 45-46. 9th ed. Varanasi: Chaukhamba Orientalia; 2009.
- 6. **Charaka**. *Charaka Samhita*. Chikitsa Sthana, Adhyaya 28, Shloka 21-23. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 7. **Charaka**. *Charaka Samhita*. Sutra Sthana, Adhyaya 27, Shloka 345-347. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 8. **Chakrapani**. *Charaka Samhita Ayurveda Deepika Commentary*. Sharira Sthana, Adhyaya 3, Shloka 18. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 9. **Sushruta**. *Sushruta Samhita*. Sutra Sthana, Adhyaya 15, Shloka 24. 3rd ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2008.
- 10. **Charaka**. *Charaka Samhita*. Sutra Sthana, Adhyaya 15, Shloka 12-14. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 11. **Charaka**. *Charaka Samhita*. Chikitsa Sthana, Adhyaya 30, Shloka 57. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 12. **Vagbhata**. *Ashtanga Hridaya*. Sutra Sthana, Adhyaya 8, Shloka 14-16. 9th ed. Varanasi: Chaukhamba Orientalia; 2009.
- 13. **Charaka**. *Charaka Samhita*. Sutra Sthana, Adhyaya 21, Shloka 27. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 14. **Sushruta**. *Sushruta Samhita*. Sharira Sthana, Adhyaya 2, Shloka 38. 3rd ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2008.

- 15. **Charaka**. *Charaka Samhita*. Sharira Sthana, Adhyaya 3, Shloka 19. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 16. **Sushruta**. *Sushruta Samhita*. Sutra Sthana, Adhyaya 14, Shloka 34-36. 3rd ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2008.
- 17. **Charaka**. *Charaka Samhita*. Sharira Sthana, Adhyaya 7, Shloka 10-12. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 18. **Charaka**. *Charaka Samhita*. Sutra Sthana, Adhyaya 25, Shloka 42-43. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 19. **Guyton AC, Hall JE**. *Textbook of Medical Physiology*. Chapter 79, Spermatogenesis. 11th ed. Philadelphia: Elsevier Saunders; 2006.
- 20. **Moore KL, Persaud TVN**. *The Developing Human: Clinically Oriented Embryology*. Chapter 15, Spermatogenesis. 9th ed. Philadelphia: Saunders Elsevier; 2013.
- 21. **Ganong WF**. *Review of Medical Physiology*. Chapter 22, Spermatogenesis and Reproductive Hormones. 23rd ed. New York: McGraw-Hill; 2010.
- 22. **Speroff L, Glass RH, Kase NG**. *Clinical Gynecologic Endocrinology and Infertility*. Chapter 18, Spermatogenesis and Male Infertility. 8th ed. Philadelphia: Lippincott Williams & Wilkins; 2010.
- 23. **Sadler TW**. *Langman's Medical Embryology*. Chapter 13, Spermatogenesis. 12th ed. Philadelphia: Wolters Kluwer Health; 2012.
- 24. **Guyton AC, Hall JE**. *Textbook of Medical Physiology*. Chapter 80, Hormonal Control of Spermatogenesis. 11th ed. Philadelphia: Elsevier Saunders; 2006.
- 25. **Harrison RM**. *Principles of Internal Medicine*. Chapter 104, Male Reproductive Endocrinology. 17th ed. New York: McGraw-Hill; 2008.
- 26. **Speroff L, Glass RH, Kase NG**. *Clinical Gynecologic Endocrinology and Infertility*. Chapter 17, FSH and Sertoli Cell Function. 8th ed. Philadelphia: Lippincott Williams & Wilkins; 2010.
- 27. **Ganong WF**. *Review of Medical Physiology*. Chapter 23, Testosterone and Male Hormonal Regulation. 23rd ed. New York: McGraw-Hill; 2010.
- 28. **Moore KL, Persaud TVN**. *The Developing Human: Clinically Oriented Embryology*. Chapter 16, Inhibin and its Role in Spermatogenesis. 9th ed. Philadelphia: Saunders Elsevier; 2013.

- 29. **Guyton AC, Hall JE**. *Textbook of Medical Physiology*. Chapter 81, Factors Affecting Spermatogenesis. 11th ed. Philadelphia: Elsevier Saunders; 2006.
- 30. **Speroff L, Glass RH, Kase NG**. *Clinical Gynecologic Endocrinology and Infertility*. Chapter 18, Hormonal Imbalances in Male Infertility. 8th ed. Philadelphia: Lippincott Williams & Wilkins; 2010.
- 31. **Ganong WF**. *Review of Medical Physiology*. Chapter 24, Environmental Factors and Spermatogenesis. 23rd ed. New York: McGraw-Hill; 2010.
- 32. **Moore KL, Persaud TVN**. *The Developing Human: Clinically Oriented Embryology*. Chapter 17, Lifestyle Factors in Spermatogenesis. 9th ed. Philadelphia: Saunders Elsevier; 2013.
- 33. **Guyton AC, Hall JE**. *Textbook of Medical Physiology*. Chapter 82, Genetic Factors in Spermatogenesis. 11th ed. Philadelphia: Elsevier Saunders; 2006.
- 34. **Speroff L, Glass RH, Kase NG**. *Clinical Gynecologic Endocrinology and Infertility*. Chapter 19, Age and its Effects on Sperm Quality. 8th ed. Philadelphia: Lippincott Williams & Wilkins; 2010.
- 35. **Charaka**. *Charaka Samhita*. Sharira Sthana, Adhyaya 8, Shloka 11-13. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 36. **Sushruta**. *Sushruta Samhita*. Sutra Sthana, Adhyaya 15, Shloka 28. 3rd ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2008.
- 37. **Charaka**. *Charaka Samhita*. Sharira Sthana, Adhyaya 3, Shloka 15-17. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 38. **Chakrapani**. *Ayurveda Deepika Commentary on Charaka Samhita*. Sharira Sthana, Adhyaya 2, Shloka 17. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 39. **Sushruta**. *Sushruta Samhita*. Sharira Sthana, Adhyaya 2, Shloka 22. 3rd ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2008.
- 40. **Charaka**. *Charaka Samhita*. Chikitsa Sthana, Adhyaya 30, Shloka 45. 5th ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2006.
- 41. **Sushruta**. *Sushruta Samhita*. Sharira Sthana, Adhyaya 8, Shloka 12-14. 3rd ed. Varanasi: Chaukhamba Sanskrit Sansthan; 2008.
- 42. **Vagbhata**. *Ashtanga Hridaya*. Sharira Sthana, Adhyaya 4, Shloka 13-15. 9th ed. Varanasi: Chaukhamba Orientalia; 2009.