CHAPTER 4

Discussion and Conclusion
Ancient scholars of India considered Shukra as a dynamic force. It is converted to oja which is shakti (vital power). Shukra is the seed of virility in men. It contributes to consciousness, intelligence, thought, strength, complexion and nourishment in men and women. It has been considered as the essence of body system as well as the best support of life. Indian spiritual literatures have described it as vital energy, it is dynamic will, Atma bala (soul force), which supports our life, which is the prana of pranas, which shines in our sparkling eyes, which beams in our shining checks, is a great treasure for us. It is the quintessence of blood. Great sages of our country have advised to preserve Shukra carefully as it is the master-key for us, opens the door of elysian bliss and for all sorts of higher achievements of life. India is proud for her ancient culture and civilization. Reputed personalities like Swami Shankaracharya, Sri Ramkrishna, Swami Vivekananda, Rishi Arabinda, of India taught celibacy (Brahmacarya) to preserve shukra for their happiness, peace, strength, vigour and prosperity.

Prevalency of the disease spermatorrhea was low or absent in classical period as the description of this disease is absent in the Ayurvedic classics. This fact reveals that the aetiology for producing this disease was absent at that time. That absence simply due to the then social, economical and political condition of the society. Monumentous advancement of inert sciences have brought abrupt change in our civilization. Modern civilization is based on chiefly, industrial thoughts. Spiritual idea is mostly neglected. But spirituality is the remote control of human beings. Modern industrial mind of man devoided with spirituality is one of the most important aetiological factors for genesis of the newer diseases. Spermatorrhea is one of the such ailments.
Ancient India obviously focused on importance of Shukra. She considered this subject with higher magnitude. Kama and Rati are indispensable factors in the context of Shukra. In Rig Veda Kama is the **God of desire**. For this reason He is said to be the prime factor of creation. Also in Greek mythology Eros has been considered as the **God of love** as well as **creator of this Universe**. It is observed that next to the need for food, water and sleep, the sexual urges, one of the essential part of Kama, is identified as the most powerful biological drive. Hindu spiritual literature says:

> आक्षाम तत्तत्त्वं यथा गच्छति सागरमुः।
> सम्बद्धं नमस्कृतं माधवं प्रतिगच्छति।।

Water comes from sky, goes to ocean and respect to any God and Goddess ultimately goes to Madhab, the Lord of Gods. Similarly food substances are ultimately converted to shukra which is the essence of life. Shukra in its turn gives sexual stability, valour, courageousness, happiness, strength, pleasure, good memory, intelligence, longivity, health, nourishment, acuity of sense organs, reputation, slow ageing etc. Better progeny is the most important desire of the person. So, pure reproductive elements are indispensable for better progeny. In reality shukra is not only the means of producing children but also essential to regulate endocrine functions of the body for its nourishment and development.

In connection of shukra we have come across some Ayurvedic concepts which are surprising in the field of modern medicine. Some of them are: fecundation in the womb of a woman by dream of sexual intercourse at night after her purificatory bath. According to Ayurveda local vayu carries the dislodged ovum into the uterus and manifests the features of pregnancy which develop month after month till full period of gestation. Such products is
known as *Kalala* - a boneless jelly like substance. In modern Gynaecology we also find the term *pseudocyesis* or spurious pregnancy. In this condition amenorrhoea, morning sickness, changes in breast etc. are exhibited. It is also known as Phantom tumour. Caraka stated *Shukra pervades entire the body*. Shukra has an integral relation with reproduction and sexual embracement. *Skin is also indispensable in sexual embracement*. So, in this context there is no wonder that the ancient scholar could also have confused about the *Twak* (skin) and *Shukra. Shukra remains in childhood in concealed stage*. It is closely related with sex characters. It is fact that *secondary sex characters remain in rudimentary condition* from beginning of life to puberty. According to Ayurveda reproductive power of *Kapha prakriti* persons is higher. Interpretation of this concept of Ayurveda is strongly supported by the modern concept. *Cholesterol* of the body is grouped under the intringic factor *Kapha*. Cholesterol is converted to pregnenolone and it is converted to testosterone through a series of changes by the action of a group of enzymes. Change of cholesterol to testosterone as represented by Griffin JE, Wilson JD. The testis. In : Bondy PK, Rosenberg LE, eds. Metabolic control and Disease. 8th ed. Philadelphia : W.B. Saunders, 1980 : 1535 - 1578 is as follows :

![Chemical diagram of cholesterol conversion](image-url)
Ayurvedic classics mentioned that \textit{Shukra is present in the body of both male and female subjects}. In modern physiology gonadotrophin is produced both in male and female gonads. It is noteworthy that actions of \textit{shukra} co-relates that of gonadotrophin in different ways. Caraka as well as Sushruta stated that \textit{Shukra pervades all over the body}. Now we find that different cells i.e., nerve cells, kidney cells and all other \textit{somatic cells contain more or less same cell component but their manifestations are different due to their various locations}. So the statement of Caraka and Sushruta are correct though in different parlance.

I observed from this study that \textit{Ignorant, intemperate and psychologically weak persons} become the victims of the disease spermatorrhea. Impaired intellect (\textit{dhi}), will (\textit{dhriti}) and memory (\textit{Smriti}) lead the subject for \textit{masturbation and other animadverted ways of discharging semen}; the most valuable body element of the organism which is mentioned as single aetiology in the disease review.

Mind has three qualities \textit{Sattva, Raja, Tama}. \textit{Sattva} signified by goodness, virtue, excellence, wisdom and good sense. \textit{Raja} signified by foulness, passion, emotion, moral and mental darkness as well as restlessness. \textit{Tama} signified by mental darkness, illusion, error and inertia. On physical plane the \textit{raja} is expressed by emotion and energy. \textit{Tama} is expressed by inertia and mass. \textit{Raja} and \textit{Tama} oppose each other. But \textit{sattva} is responsible for equilibrium. When equilibrium of Sattva, Raja and Tama is disturbed by the influence of self the intellect evolves out of the nature. It is fundamental of the intelligence of every individual. It is the first-evolute in the process of evolution. \textit{Intellect} means \textit{Prajna}. Misuse of intellect is known as \textit{prajnaparad}. According to Ayurveda intellect has three basic qualities, viz. \textit{Dhi, Dhriti} and \textit{Smriti}. ‘Dhi’ represents as the capability of intellect to preserve knowledge. It causes rational thinking and ability to take decision.
For it true understanding always perceives rightly. 'Dhriti' means courage required to act or behave as decided by Dhi. 'Smriti' has been defined as the capacity of intellect to recollect rightly the decision taken with the aid of dhi as well as its capability to behave without hindrance according to dhriti. According to Ayurveda when raja or/and tama are predominant dhi, dhriti, Smriti will be deranged.

Aforesaid discussion supports that the ignorant, intemperate and psychologically weak subjects become the victims of this disease.

Due to the impairment of intellect masturbation and other animadverted ways of discharging semen adopted by the subject are prone to this disease.

As a result a subject can not understand rightly eternity and non-eternity, good and bad, right and wrong etc. He is unable to restrain from undesirable objects and his mind become clouded with passion and delusion. His mind can not retained the actual knowledge.

Among all aetiological factors of the diseases, Prajnaparad (volitional transgression) plays the major role for genesis of the disease spermatorrhea.

It is also found in this study that Persons with weak sense organ are prone to this disease.

Sushruta stated: 76

Svādārsanaṇādībh: shukrā kāmaśrīdaśālikā śāvetu।
prāyaśchaṁkaratānu deśanu sāhassāsṛgāhāvānuṣṇaṁ ॥

Soumya 96/97

Secretion and emission of shukra may take place by simple sight of a woman etc. giving rise to all the distressing features, which are consequent upon an act of actual coitus.

Loss of body elements are one of the causative factors of spermatorrhea. According to Ayurveda food after digestion is converted to
Rasa (chyle), Rasa is transformed into Rakta (Blood), Rakta into Mamsa (Muscle), Mamsa into Meda (Adipose tissue), Meda into Asthi (Bones), Asthi into Majja (Bone marrow) and Majja into Shukra (Semen). The concept of transformation of one element into another is a succession involves the continuous existence of all the seven dhatus in altered proportion and intimate interaction between them. It is mentioned in Ayurveda due to suppression of natural urges and visamansa anuloma kshaya takes place. Here shukra will be decreased due to the destruction of any preceding element. Vayu and pitta remain predominant in anuloma kshaya. In this context Agnibesh mentioned obstructions of the channels is one of the chief causes of loss of elements.

Persons with Lack of Social well being are prone to Spermatorrhea. Social well being signifies hermony as well as integrity in the individual, between different individuals as well as other members of the society and between individuals and the world in which they reside. Man becomes superior or inferior according to his quantity and quality of interpersonalities. He is also evaluated with the extent of his involvement with the community. Every man is the part of a family and of wider Community and focuses on social condition and well-being of the ‘Whole Person’. Social dimension of health comprises the levels of social skills one possesses, social functioning above all ability to see oneself as a member of the larger society. Lack of social well being makes a man mentally abnormal which in its turn causes different psychosomatic diseases like Spermatorrhea.

Man with Lack of Spiritual well being are also susceptible to the disease Spermatorrhea. We believe the importance of spiritual dimension in health and disease. Spirituality includes integration, principles, ethics and the purpose of life etc. They say "Man is the epitome of the Whole
Universe”. Some individuals manifests the Characteristics of lower animals. On the other hand some show noble qualities whom we honour, respect and worship as Devine Being. Human natures is the wonderful mixture of animal and devine characters. On this platform whole structure of ethic has been built in all nations.

In India, from the vedic period down to the present time attainment of spiritual perfection has been considered as the highest aspiration and loftiest aim of humanity. When a man reaches this state does not want anything from outside himself. From ancient times the attainment of spiritual perfection has been the theme of rich and poor, of kings and beggars, of saints and sinners. But now-a-days such Godconsciousness are lacking in our society which lead the individual to proceed with animadverted ways.

Debilitated diseases like Diabetes Mellitus, Tuberculosis etc. are the causes of the disease spermatorrhea. Vagbhatta mentioned that dhatukshaya - depletion/ loss of tissue elements takes place due to aggravation of vata in Madhumeha (Diabetes Mellitus).

Also loss of tissue elements takes place by Anulomaja Kshaya and Belomaja Kshaya in Tuberculosis (RajaYakshma). Obviously dhatukshaya cause the disease spermatorrhea.

Clinical study shows persons with excessive labour are easily victimized by this disease. In Ayurveda it is mentioned that excessive labour causes thirst, emaciation, destruction of dhatus including shukra etc. So as a rule shukra dhatu qualitatively and quantitatively will be diminished. As a result so many diseases may be developed.

Sudanta Sen Commented on Caraka in the context of properties and function of vata that Shushirata i.e, unsubstantiality and Swapabishleshabhanga or disturb sleep with full of dream as the characteristics of excited vata. That excited vata causes diminution of Shukra.
It is also found that *Starvation* leads to originate this disease. According to modern physiology body weight less than 25% that of a standard person in relation to age and sex are known as starvation due to any cause. Literally starvation means without food. Food yields rasa and subsequent body elements. Obviously without food formation of rasa and shukra is impossible. Hence Caraka mentioned Starvation as one of the aetiologcal factor of Shukra kshaya.

This study shows that *excessive coitus* is one of the important aetiological factors of spermatorrhea. In ancient literatures we find that the reproductive organs are one of the main channels by which energy is wasted. It drains the vital power enormously by excessive coitus. Once sexual act completely shatters the brain and nervous system. Ancient people of India believe that the loss due to the sexual act can not be recovered by taking nutritive food like milk, almonds etc. Excessive coitus brings nervous weakness, exhaustion and pre-mature death. Sexual act destroys vigour and vitality, annihilates memory, realisation and intellect. According to Indian Rishis careful preservation of Shukra sharps as master - key to open the door of realms of elysian bliss and for all sorts of higher achievement of life.

It is observed that *mental and Physical stress and strain* predisposes this disease. In Ayurveda we frequently come across the term *Abhighata* which means *Stress*. In veda we find the ways and means to mitigate the stressfull conditions. *Vayu, pitta* and *kapha* are the intrinsic causes of somatic diseases, similarly *Raja* and *Tama* are the causative factors of psychic ailments. Absolute equilibrium maintain somatic and psychic healthy conditions. Stress disorders are caused due to some aetiological factors like stressful contact with sense objects and volitional transgression. However man is the part of the society. He will have to comply his own
shortcomings by his sensitive equipments. Surrounding threats and conflicts contribute a major portion of the stress in the life of an individual. Incidence of stress disorders is greater in developed countries than developing one. Civilization will increase the weight of stress day by day. Disease caused by stress often resolved spontaneously with time, but persistent stress conditions may lead different types of ailments. Mental stress or physical stress both aggravate vayu. This aggravated vayu in its turn causes spermatorrhea.

It is also observed that **Loss of Self control** causes this disease. The work which gives elevation, joy and peace to the mind is known as right but which gives depression, pain and restlessness to the mind is wrong. Right, ought to be done and wrong not to be done. But when a person is mentally deranged, he loses his self control and can not identify right or wrong. He moves only towards his pleasure.

Our sense organs are always desirous for new objects of pleasure. Mind wants enjoyment by a particular pleasure. It tries to overcome the obstacle. If stronger is the opposite power, greater mental struggle is essential to subdue it. When desire is stronger and we are unable to succeed in gratify it by common way we get anger and adopt more violent measures. In this way the state of mental equilibrium is disturbed. General desire of enjoyment gets the form of ruling passion, agitates the total mind and expressed in the way of anger and unrest. At this state of mind we loss the sense of good and bad. Desire is the first stage then comes passion and then appears anger.

In this study I observed that by the aforesaid aetiological factors vayu becomes aggravated and propagated all over the body. The aggravated Apan Vayu vitiates Shukrabaha srota including Shukrasaya disturbing the normalcy of ejaculation leading to the manifestation of Spermatorrhea.

I find from this study that **diminution of mental concentration** in 75% of cases, 29% cases suffered from **disturb sleep** and 50% cases from **anxiety, worries, resentment and disappointment** before completely
manifestation of clinical features. Therefore I may infer that these features appear in the patients at the stage of Sthansamsraya or prodromal stage. So, these features may be considered as prodromal features of the disease.

Clinical features except disturb sleep mentioned in the disease review were collected by literary review. Here I have recorded in 29% cases the feature - disturb sleep. So, for a complete picture of the disease this feature should be included in the clinical feature (Rupa) of the disease. It is noteworthy that clinical features play major role in diagnosis of the disease spermatorrhea.

In this work I observed that the disease is ameliorated (upasaya) by cheerfulness, contentment, peace and almost all the sacred ways of mental satisfactions which nourish the mind as body is nourished by nutritious food. Besides, righteous thinking, spiritual thoughts improve the condition.

In this series it is observe that besides, the complication mentioned in the Ayurvedic literatures sexual inadequacy, mental abnormality, infertility and susceptibility to diseases also appear as complications (Upadrava) of Spermatorrhea.

Jatamansi (Nardostachys jatamansi DC) is bitter, astringent, cooling, laxative, nerve tonic, intellect promoter, resuscitative, aphrodisiac, intellect, will and memory promoting, spermatogenic and restorative of consciousness. It acts best on Shukrabaha and manobaha srota. This dual action makes this drug suitable for this disease.

The above therapeutic action of Jatamansi has been verified through the present research work. The present result has unequivocally proved that Jatamansi brings about corrections of the factors responsible for the disease Spermatorrhea. Besides, looking into the problem through the spectacle of Ayurvedic science the value of Jatamansi (Nardostachys jatamansi DC) have
also been appreciated in the western pharmacopoea. The western pharmacopoea narrates that compounds in Jatamansi effect the brain receptors for a nerve chemical (neurotransmitter) called γ-aminobutyric acid. Its through the interaction that Jatamansi (Valerian) promotes sleep and eases anxiety, so to say stress. Besides this Jatamansi (Valerian) helps to relax the smooth muscle and remove the stiffness of the muscle. All this again confirm that Jatamansi (Nardostachys Jatamansi DC) in the name of valerian serves as nerve tonic, intellect promoter, resuscitative, aphrodisiac, intellect, will and memory promoting, spermatogenic and restorative of consciousness (Duke, 1997).

Brahmi (Bacopa monnieri Linn.) is bitter, astringent, cooling, intellect promoting, tonic, antiamentia, anti-sterility, anti-debility, tridoshanasak, aphrodisiac and rejuvenative. It acts on rasavaha and shukravaha srota. So, it is undoubtedly an unique drug for the treatment of the disease spermatorrhea.

The research result as obtained through the clinical study presented earlier have shown the corrective and endowment effect as hypothesised in Ayurvedic literature have render curative measure of above mentioned debilities and deficiencies as being factors of spermatorrhea. The major causes of spermatorrhea emanates from high level of mental stress, physical debilities, irregular nerve action, sleeplessness and all this factors particularly stress keeps a patient out of the sexual erana and makes him less motivated or apathetic to become aphrodisiac and hence Brahmi (Bacopa monnieri Linn.) has all this properties as postulated in Ayurveda causing remedy of Spermatorrhea. It thus confirms that in Ayurvedic literatures the causes for spermatorrhea and its remedy through Brahmi though not suggested that the Brahmi is the remedy for spermatorrhea but taking clues of the properties of Brahmi it was administered to the patients having presumption that treatment of Brahmi might bring relief from spermatorrhea and adoption of Brahmi as a remedy of spermatorrhea has proved to be an appropriate choice of drug. It is also
recorded that Brahmi (*Bacopa monnieri* Linn.) contains ascorbic acid in Western medicine is considered as a sperm elixir of youth. Studies indicated administration of ascorbic acid can perk up sperm giving their new life and agility. Vitamin C (ascorbic acid) intake restores male fertility and reduce sperm agglutination. So, the ascorbic acid also contributed towards promoting of fertility as envisaged in Western medicine (Fraga, 1991)\(^7\). The Western Pharmacopoea had to lay similar important on Brahmi (*Bacopa monnieri* Linn.) as remedial herbs and there is a parallelism between what were postulated in Ayurvedic literature has also got confirmed through western pharmacopoea. Brahmi (*Bacopa monnieri* Linn) contains bacosides, that saponin in nature and their acidic forms are often called brahminic acids which strengthen the memory capacity by increasing the memorization and retrieval of memory. The bacosides present in Brahmi (*Bacopa monnieri* Linn.) are responsible for improvement of memory. Also act as sedative and potentiate the hypnosis effect of barbiturate that also induces sleep (Basak, 2003). So, it can be infered that Brahmi (*Bacopa monnieri* Linn.) being sedative relief the patient effected highly with stress condition that retards aphrodisiac in attitude. Due to the retrieval of memory and endowment of active memory make a patient psychologically and physiologically active removing the spermatorrhea. Spermatorrhea is considered a disease generated due to those deficiencies and Brahmi (*Bacopa monnieri* Linn.) has become a potential drug in removing such spermatorrhea including all its facets i.e., all the criteria.

In this series I observed that patients 20-30 years of age are maximum.

In this study it is revealed that the patients suffering from spermatorrhea are desirous to take Katu (Pungent) rasa which obviously aggravates vayu leading to produce the disease.
Concept of Prakriti (constitution) is very important in Ayurveda. Ayurveda has laid great stress on "What type of patient is suffering" than from "what type of disease". In this study it appears that Vataja Prakriti subjects are more susceptible but Kapha Prakriti subjects are more immune to this disease.

Involuntary discharge of semen without orgasm, loss of concentration, disturb sleep, low serum testosterone level and abnormal picture of semen were the selective criteria of the patients for this study. Jatamansi (Nardostachys jatamansi DC) 2 gms twice daily before meal was administered to the patients for 6 month. 66.66%, 50%, 100% patients were relieved from involuntary discharge of semen without orgasm, loss of concentration and disturb sleep respectively. Brahmi (Bacopa monnieri Linn.) were administered in a dose of 2 gms twice daily before meal for 6 month. 50%, 62.5% and 75% patients were relieved from involuntary discharge of semen without orgasm, loss of concentration and disturb sleep respectively. Mixture of Jatamansi (Nardostachys jatamansi DC) and Brahmi (Bacopa monnieri Linn.) powder in a ratio (1 : 1) administered to the patients in a dose of 2 gms twice daily before meal for 6 month. 90%, 93.75% and 100% patients were relieved involuntary discharge of semen without orgasm, loss of concentration and disturb sleep respectively. No response of the symptoms were observed by the administration of placebo (rice powder). Mean differences which are positive in serum testosterone level, volume of semen, Sperm count, sperm morphology and sperm motility by the treatment of Jatamansi (Nardostachys jatamansi DC) powder are 0.63, 0.79, 7.92, 16.86 and 15.68 respectively (Shown in table 42). Administration of Brahmi (Bacopa monnieri Linn) powder shows mean differences 0.56, 0.56, 6.25, 16.13 and 16.13 in serum testosterone level, volume of semen, sperm count, sperm morphology and sperm motility respectively (shown in table 43). The mixture of both the drugs
shows mean differences 1.11, 1.28, 10.75, 19.90 and 19.13 in serum testosterone level, volume of semen, sperm count, sperm morphology and sperm motility respectively (shown in table 44). placebo could not show any change in the objective parameters also (shown in table 45). However, in the proportion (P) of success of treatment Jatamansi and Brahmi independently produced a remedy to the tune of P 0.63 and P 0.58 respectively of the symptoms. Combination of Jatamansi and Brahmi exhibited increased remedy P 0.93 of the symptoms of the disease. This increment appears to be synergistic leading to additional effect over Jatamansi or Brahmi when treated lonely (shown in table 46). Effect of Jatamansi on the level of serum testosterone shows the result : \( \bar{md} = 0.63; 't' = 6.001; P < 0.001 \) at 11 degrees of freedom. Effect of Brahmi on the level of serum testosterone shows the result : \( \bar{md} = 0.56; 't' = 3.554; P < 0.01 \) at 11 degrees of freedom. Effect of the mixture of Jatamansi and Brahmi on serum testosterone level gives the result : \( \bar{md} = 1.11; 't' = 6.387; P < 0.001 \) at 19 degrees of freedom. But control shows no effect on serum testosterone level. The patients treated with Jatamansi powder shows significant difference as regards increasing of volume of semen from their corresponding control : \( \bar{md} = 0.79; 't' = 2.515; P < 0.05 \) at 11 degrees of freedom. Jatamansi shows the significantly high mean difference as regards to the sperm count : \( \bar{md} = 7.92; 't' = 3.75; P < 0.01 \) at 11 degrees of freedom. Similarly in respect of sperm morphology Jatamansi shows the result : \( \bar{md} = 16.86; 't' = 4.418; P < 0.001 \) at 11 degrees of freedom. In respect of sperm motility Jatamansi shows the result : \( \bar{md} = 15.68; 't' = 5.448; P < 0.001 \) at 11 degrees of freedom. The patients fed with Brahmi powder shows significant difference as regards increasing of volume of semen from their corresponding control : \( \bar{md} = 0.56; 't' = 2.458; P < 0.05 \) at 11 degrees of freedom. Brahmi shows the significantly high mean difference as regards to the sperm count : \( \bar{md} = 6.25; 't' = 2.765; P < 0.02 \) at 11 degrees of freedom. Similarly in respect of sperm morphology
Brahmi shows the result: $\bar{md} = 16.13$, $t = 5.686$, $P < 0.001$ at 11 degrees of freedom. In respect of sperm motility Brahmi shows the result: $\bar{md} = 16.13$, $t = 5.686$, $P < 0.001$ at 11 degrees of freedom. Patients fed with the mixture of Jatamansi and Brahmi powder shows very high significant difference from their corresponding control in effecting greater volume of semen: $\bar{md} = 1.28$, $t = 3.20$, $P < 0.01$ at 19 degrees of freedom. From the mean difference ($\bar{md}$) values it will be quite apparent that mean difference of Jatamansi, Brahmi and Jatamansi Plus Brahmi were 0.79, 0.56 and 1.28 respectively. It clearly indicates that the mean difference increase when the mixture of Jatamansi and Brahmi fed together was larger than when Jatamansi and Brahmi fed singularly. The mixture of Jatamansi and Brahmi powder fed patients shows a very high mean difference as regards to the sperm count: $\bar{md} = 10.75$, $t = 2.80$, $P < 0.02$ at 19 degrees of freedom. In respect of sperm morphology the mixture of Jatamansi and Brahmi shows the result: $\bar{md} = 19.90$, $t = 7.350$, $P < 0.001$ at 19 degrees of freedom. Similarly in respect of sperm motility the mixture of Jatamansi and Brahmi shows significant rate of motility from corresponding control: $\bar{md} = 19.13$, $t = 5.696$, $P < 0.001$ at 19 degrees of freedom. (Shown in table 47). This study shows that Jatamansi and Brahmi alone or their arithmetic mean for serum testosterone level, volume of semen, sperm count, sperm morphology and sperm motility are much less than when the mixture of Jatamansi and Brahmi given together. The result convincingly proves that there is an added effect of Jatamansi and Brahmi than either Jatamansi or Brahmi alone. This proves the synergistic effect of Jatamansi and Brahmi. The synergism here means that Jatamansi and Brahmi together Concurrently shows additional corrective improvement (shown in table 48, 49). Thus it can be concluded that Jatamansi and Brahmi in combination exert improvement more than Jatamansi and Brahmi alone. It is noteworthy that the herbal drug positively interact in human being towards remedying the clinical features.
CONCLUSION

1. Spermatorrhea is a newer but prevalent disease in this materialistic civilization.

2. In Ayurveda all literatures deal Shukra with higher impression. Shukra is responsible for good memory, intelligence, longivity, positive health, nourishment, acuity of sense organs, reputation, strength, reproduction and slow ageing.

3. Spermatorrhea is a disease which is directly involved with the action of Shukra.

4. For better progeny and for prevention of disease, decay and death Shukra is indispensable.

5. Shukra pervades the entire body. Cell components are same but manifestations are different according to their locations, e.g. cells of liver, testis etc. Besides, endoplasmic reticulum is very abundant in Leydig cells of the testis and in cells of corpus luteum, this endoplasmic reticulum is concerned with the synthesis of steroid hormones. This type of reticulum in the parietal cells of the gastric mucosa is concerned with secretion of HCL. In the liver cells endoplasmic reticulum is concerned with the synthesis of protein and carbohydrate.

6. Reproductive power of a Kapha prakriti person is higher. Cholesterol should be included under the Kapha system. It is the precursor of testosterone.

7. Vata prakriti person with raja guna is more susceptible to spermatorrhea.

8. Many of the phenomenon attributed by Ayurveda to the Shukra are those which modern physiologist includes under the activities of psychiatric, anabolic, reproductive and immunological system etc.

9. Only masterbation and other animadverted ways of discharging semen has been recorded in the literature as the aetiology of the disease. Ignorant and intemperates, psychologically weak persons, persons with
weak sense organ, loss of body elements, lack of social and spiritual well being, debilitated diseases like diabetes mellitus, tuberculosis etc., excessive labour, starvation, excessive coitus, mental and physical stress and loss of self control recorded as the causes of disease by this work.

10. Purbarupa or prodroma has not been available anywhere. This study recorded diminution of mental concentration, disturb sleep, anxiety, worries, resentment and disappointment as the prodromal features of the disease.

11. It is found cheerfulness, contentment, peace and sacred ways of mental satisfaction ameliorate the disease.

12. This series of works reveal that sexual inadequacy, mental abnormality and infertility appear in the patient as complications of this disease besides, written complications in the existing literatures.

13. Spermatorrhea is a psychosomatic disorder best treated by acara (conduct), sadvritta (socio-behavioural conducts), mantra (incantation), mani (precious gems), mangala (propitiatory rites), Samadhi and Shukra janak (Spermatogenic), Sangasthapak (restorative of consciousness), prajasthapak (fertility promoter) medhya (intellect promoting) dravya.

14. Jatamansi (Nardostachys jatamansi DC) being sukrajanak (Spermatogenic) and sangasthapak (restorative of consciousness) acts nicely in the management of spermatorrhea.

15. Brahmi (Bacopa monnieri Linn.) being Prajasthapak (fertility promoter) and medhya (intellect promoting) is also a good drug in the management of spermatorrhea.

16. From this study it is crystal clear that the combination of Jatamansi (Nardostachys jatamansi DC) and Brahmi (Bacopa monnieri Linn.) gives more satisfactory results not only for their synergistic activity but also their inherent properties of acting both on psychic and somatic part of the disease.

Last but not the least that the aforesaid drugs being innocent, cheap and easily available will pave the path towards management of the patients suffering from Spermatorrhea in the globe.