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	YURVEDIC VIEW ON ERECTILE FUNCTION	KEY WORDS: klaibya, Erectile Dysfunction, Ayurveda
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Erectile dysfunction has been defined as the disorder characterized by the persistent or recurrent inability to achieve or to maintain an erection during sexual activity. The male sexual dysfunction include all sort of disturbance of coital		

to maintain an erection during sexual activity. The male sexual dysfunction include all sort of disturbance of coital performance and sexual congress in male. In Ayurveda, it can be compared to the concept of klaibya. Aforesaid area has been linked with bahu dosha avastha and particularly with vyaana, apana, sukradusti and dhatu shitilata. The problem of sexual dysfunction are getting more and more common in now a days. This review article attempts to explain ethiopathology and diagnostic approach of klaibya mentioned in Ayurveda and modern literature and its overall effect on human body.

INTRODUCTION

Erectile dysfunction is the inability to get or keep an erection firm enough to have sexual intercourse. Erectile dysfunction is not considered as a normal part of aging process. In some individuals, due to certain pathological, psychological or idiopathic reasons there is inability to achieve normal erection with sufficient rigidity for penetrative intercourse, the absence of which ends in failure and dissatisfaction. This condition has been elaborately described as "klaibya" in Ayurveda texts and as erectile dysfunction(ED) in modern science. Erectile Dysfunction is a psycho-organic disease because it affects man as a whole, as well as his partner and the couple relationship.

In the Massachusetts male aging study(MMAS), a commun itybased survey of men age 40-70, 52% of responders reported some degree of ED. Complete occur in 10% of respondents, moderate ED in 25%, and minimal ED in 17%. The incidence of moderate or severe ED more than doubled between the ages of 40 and 70. In the national health and social life survey (NHSLS),which included a sample of men and woman age 18-59, 10% of men reported being unable to maintain an erection (corresponding to the proportion of men in the MMAS reporting severer ED). Incidence was highest among men in the age group 50-59(21°o) and men who were poor (14%), divorced (14%), and less educated (13%).

The prevalence rate of ED range from as low as 2.3% in young adults in their 30 s and as high as 53.4% in elderly in their 70s. The worldwide prevalence of ED will probably increase from 152 million men in 1995 to 322 million men with ED by 2025. The incidence of Erectile Dysfunction is increasing day by day with the increase in the incidence of diabetes, hypertension, Peripheral Vascular Disease, peripheral neuropathy, anxiety, stress, depression and their medications. Erectile dysfunction is also increasing due to changes in the lifestyle and increased addictions, especially smoking.

AYURVEDA PERSPECTIVE DEFINITION OF KLAIBYA

Klaibya is defined as the sexual dysfunction characterized by the inability of a man to perform the sexual inter course or incomplete performance which leaves the female partner partially or totally dissatisfied. In other words klaibya is also defied as the inability to attain and maintain a rigid erection which is very essential during sexual inter course for his sexual needs or the needs of his female partner.

SIGNS AND SYMPTOMS OF KLAIBYA IN GENERAL ACCORDING TO ACHARYA CHARAKA

A person even on having a strong sexual desire with the
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partner who is cooperative, he becomes incapable of performing sexual act because of the lack of penile rigidity or penile erection.

- Imperfect or partial erection for a short time and subsides before the main sexual act
- His phallus becomes losse because of the lack of erection, and he does not ejaculate any semen.

TYPES OF KLAIBYA

Various types of klaibya are examined in classical texts based on their causes. Acharya charaka has explained 4 types of klaibya. Whereas Acharya susrutha has explained 6 types of klaibya, they are-

- Beejopagata klaibya
- Dhwajopaghataja klaibya
- Sukrakshayaja klaibya
- Jarasambavaja klaibya
- Sahaja klaibya
- Kshara shukra nimitajja

ETIOLOGY OF BEEJOPAGHATAJA KLAIBYA

- Intake of cold, ununctious, scanty, polluted and mutually contradictory ingredients of food
- Worry, grief and anxiety
- Affliction by black magic
- Suspicious nature
- Fasting and fatigue
- Diminution of rasadi dhatus
- · Improper administration of elimination therapies

SYMPTOMS OF BEEJOPAGATAJA KLAIBYA

 Symptoms include- paleness, weak, low in vitality, less excitement with woman, heart disease, asthma, physical exhaustion, vomiting, diarrhoea, colic pain cough and fever.

ETIOLOGY OF DHWAJABANGAJA KLAIBYA

- Intake of excessively sour, saline, alkaline, mutually antagonistic and unwholesome ingredients of food
- Intake of water in excess
- Taking meals irregularly
- Severe emaciation caused by chronic disease
- Intercourse with wife of enemies
- Cohabitation with young virgin girls
- Trauma to the phallus
- Lack of personal hygiene
- Sexual intercourse with quadruped animals
- Intercourse with women who is in menstrual cycle
- Intercourse with female who is not maintaining proper cleanliness of her sex organs
- Sexual intercourse in parts other than vagina

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SYMPTOMS OF DWAJABANGAJA KLAIBYA

- Swelling, pain and redness of the phallus
- Ulceration of phallus
- Fleshy growth in the phallus and its quick ulceration
- Circular and hard induration below glans penis
- Fever, excessive thirst, giddiness, fainting and vomiting
- Suppuration discharge resembling rice water or brownish black or pink in colour
- Appearance of maggots in the phallus
- Dropping of the glans penis or the whole penis or of the testicle

CAUSES OF SUKRA KSHAYAJA KLAIBYA

- Constant exposure to worry, grief, anger, fear, envy, anxiety, intoxication and nervousness
- Daily intake of dry food and drinks
- Fasting by a person who is weak in nature
- Suppression natural urges

Due to the above causes the rasa dhatu which is located in the heart becomes depleted. As a result of this, the subsequent tissues from rakta and mamasa till sukra will get depleted. Even after the decrease of sukra, if the person still indulges more in sexual acts in parlance with his strength without taking vajikarana preparations his sukra will quickly get exhausted and he falls prey to serious disease and even may prove fatal.

CAUSES OF JARAJA SAMBHAVA KLAIBYA

- This type of klaibya occurs naturally in old age.
- · The causes include diminution of rasadi dhatus
- Constant use of ingredients which are detrimental to the vitality of a person
- Gradual diminution of strength, energy, power of senses
 and span of life
- Inability to take nourishing food
- Physical as well as mental fatigue

SADHYASADDHYATA (PROGNOSIS) OF KLAIBYA

Acharya charaka has mentioned that klaibya occurred due to dhwajabanga, janmajat and kshaya janya klaibya are asadhya. klaibya occurred due to amputation of penis or testicles are also considered as incurable

MODERNVIEW

Erectile dysfunction is the inability of a man to achieve or maintain an erection sufficient for his sexual needs or the need of his partner. This means even though a man has a strong desire to perform sexual act with a cooperative partner, he cannot perform sexual act because of looseness of his phallus. Having erection trouble from time to time is not necessarily a cause of concern. But if erectile dysfunction is an ongoing problem, it may cause stress, frustration and may affect your self confidence.

CAUSES

Male sexual arousal is a complex process that involves the brain, hormones, emotions, nerves, muscles and the blood vessels. Erectile dysfunction can result from a problem with any of these. Likewise stress and mental health problems can cause erectile dysfunction. Some times a combination of physical and psychological issues causes erectile dysfunction.

PHYSICAL CAUSES OF ERECTILE DYSFUNCTION

THE COMMON CAUSES INCLUDE-

- High blood pressure
- High cholesterol
- Diabetes mellitus
 Atherosclerosis
- Obesity
- Obesity
- Parkinson's diseaseMultiple sclerosis
- 20

- Low testosterone
- Tobacco use
- Alcoholism
- Surgical or injuries that affects the pelvic area or spinal cord

PSYCHOLOGICAL CAUSES OF ERECTILE DYSFUNCTION

- The common psychological causes include-
- Depression
- Stress, anxiety or other mental health conditions
- Relationship problems due to stress, poor communication
 or other concern

TYPES OF ERECTILE DYSFUNCTION

1. Erectile dysfunction (primary and secondary impotence) Primary impotence refers to a man who has never been able to maintain an erection for purpose of intercourse either with a female or male, vaginally or rectally. In secondary impotence a mancannot maintain or perhaps even get an erection, but has succeeded at having either vaginal or rectal intercourse for at least one time in his life. The occasional failure to get an erection is not to be confused with secondary impotence. Familial, societal and intra physic factors contribute to primary impotence. Some more common influences are-

- Performance anxiety
- Religious beliefs in sex as a sin
- Traumatic initial failure
- Anger towards woman

2. RAPID EJACULATION

Rapid ejaculation is the most common dysfunction and is the easiest to treat. Premature ejaculation can be defined as the inability to delay ejaculation long enough for the woman for orgasm fifty percent of the time or as the inability to delay ejaculation for thirty seconds to a minute after the penis enters vagina.

3. RETARDED EJACULATION

Retarded ejaculation is the opposite of premature ejaculation and refers to the inability to ejaculate inside the vagina. Men with this difficulty may be able to maintain an erection for 30 minute to an hour, but because of psychological concern about ejaculation inside a women, are not able to achieve orgasam.

COMPLICATIONS

Complications resulting from erectile dysfunction can include-

- An unsatisfactory sex life
- Stress or anxiety
- Embarrassment or loss of self esteem
- Marital or relation ship problems

DIAGNOSTICTOOLS

- subjective tools
- International index of erectile function(IIEF)
- DSM-IV TR DIAGNOSTIC criteria for ED

OBJECTIVETOOLS

- Audio-visual reaction time(AVRT)
- Glavanic skin resistance(GSR)
- Duplex USG
- Penile nerve function
- Dynamic infusion cavernosometry

DISCUSSIONS

Sex is not a dynamic process. It is also an intimate relation bond. sex problem involves mind, body and intellect of the individual. Sex is the means by which a person achieves maximum pleasure, which no other costly thing can provide him.sexuality or sexual feeling is an innate behavior associated with in all animals, just like hunger or thirst, but is impacted by cultural, political, legal and philosophical aspect

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of life. It provides a media to express love, which is the base for all sort of creative activities. When a man suffers from inefficiency of having normal sex, the tension generated tend to increase not only in him but also in his partner.

Klaibya or male sexual dysfunction, denoting the inability of a man to achieve a satisfactory sexual relationship., may involve inadequacy of erection or problem with emission, ejaculation: retarded ejaculation and retrograde ejaculation. These a wide range of dis order pertaining to the male sexual response ultimately converts into male sterility also.

According to modern aspect, the erectile dysfunction is defined when a person has a problem to achieve and maintain a firm erection, consistently over a 6 month period and in more than 75% of his coitus attempts. Pure organic form of erectile dysfunction is uncommon and is almost associated with a psychological factor. Pointing to exact pathology of erectile dysfunction is a difficult task as multiple factors can be associated with it.

The Ayurvedic part of male sexual dysfunction are included in the domain of klaibya, dwajabanga and whose reference can be found out in all majorayurvedic classics, though scattered in different parts. Klaibya is also found as an associated condition in many diseases, which can be taken as nidanarthakara rogas for klaibya., example; grahini,arsas, halimaka etc. which will lead to problems of sexual performance and person suffers from alpa-maithuna and klaibya. Ayurveda explains clearly the role of mind in the sexual response of man. So it is naturally that the Ayurveda considers the mental factors as one prime etiologies of klaibya.

CONCLUSION

In Ayurveda the impotence is mainly discussed under the heading Klaibya with some scattered references relating to the symptoms in sukragata vata, sukra kshaya etc. bijopagata klaibya is due to abnormalities in the sperms. Dwajabanga klaibya is due to inflammatory disease of the penis. Sukrakshayaja klaibya is due to diminution of semen as a result of various Aharaja, viharaja and Manasika factors. Jaraja Klaibya is due to decreased levels of serum testosterone in old age.

General health consideration like sleep, appetite, mental tension, worry, excessive exercise and fatigue affects the sexual performance and desire of a healthy man. Lack of sexual knowledge, fear and anxiety are most common factors of klaibya, hence the best approach is to counseling the couples rather than the drug therapy. Sex education and reassurance may also be beneficial in the patient of klaibya.

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