

# To Evaluate and Compare the Efficacy of Vidarikanda Churna and Kataka Churna in the Management of Male Sexual Function and Visual Acuity

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## Abstract

**Background:** Eye is an important sense organ. It is very important to protect vision. Acharya Sushruta described Atimathuna (excessive sexual activity), in etiological factors causing Netraroga. Excessive sex-induced stress hormones – epinephrine and nor-epinephrine – may damage retinal endothelial cells, inflame eye balls and dilate pupils, over sensitivity to light in the retina and adverse effect on power of vision.

**Need of study:** Most ophthalmologists can effectively diagnose and treat blurred vision caused by glaucoma, cataracts, presbyopia, diabetes, macular degeneration or retinal detachment. But for sexually exhausted people with blurred vision, the problem goes undiagnosed and treated.

**Aim:** To evaluate and compare the efficacy of *Vidarikanda churna* and *Kataka churna* in the management of male sexual function and poor vision.

**Materials and Methods:** 110 patients who had *Timira* (refractive errors) with associated symptoms of male sexual dysfunction (MSD) were selected for randomized control trial on the basis of prepared inclusion and exclusion criteria; out of them 50 patients each were divided in two groups (excluding drop outs) named Group A and Group B.

**Results:** The trial drug *Kataka churna* showed statistically significant results in subjective parameters of visual disturbances (*Timira roga*) and visual acuity. *Vidarikanda churna* significantly improved the quality of vision and MSD.

**Conclusion:** The study overall concluded that *Shukravradhaka* drugs like *Vidarikanda* significantly improve the quality of vision.

**Keywords:** *Timira*, MSD, *Kataka churna*, *Vidarikanda churna*

## Introduction

Eye is an important sense organ. Life without eyesight is miserable and valueless. Hence, it is very important to protect vision at any cost. Many studies have found that 'normal' vision is being able to see a certain size line on the eye chart

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(the Snellen chart) from 6 meters away; a normal eye has a near point of 25 cm to clear vision. The diseases of eye were classified by Sushruta, according to the site of lesion. One group of eye diseases, known as 'Drishtigata Roga' are responsible for visual impairment, both partial and complete. *Timira* comes under this group of diseases. Sushruta considers *Timira*, *Kacha* and *Linganasha* as the progressive clinical stages of the disease *Linganasha*;<sup>1</sup> many of the clinical features described for *Timira* are having similarities with the refractive errors. Acharya Sushruta also described *Atimaithun* (excessive sexual activity), in etiological factors causing *Netraroga*.<sup>2</sup> Acharya Sushruta described separate etiological factors of *Drishtiroga*, there for all the etiological factors of *Netraroga* also causing *Dristigataroga*. *Timira* is the main *Dristigataroga*. Excessive sex-induced stress hormones – epinephrine and nor-epinephrine may damage retinal endothelial cells, inflame eye balls and dilate pupils, light over sensitivity in the retina and adverse effect on power of vision. Blurred vision is a common side effect. Most ophthalmologists can effectively diagnose and treat blurred vision caused by glaucoma, cataracts, presbyopia, diabetes, macular degeneration or retinal detachment. But for sexually exhausted people with blurred vision, the problem goes undiagnosed and untreated.

## Aims and Objectives

To evaluate and compare the efficacy of *Vidarikanda churna* and *Kataka churna* in the management of male sexual function and poor vision.

## Medicinal Parts to be Used

S. No.	Drug	Latin Name	Part Used	Form
1.	<i>Vidarikanda</i>	<i>Peuraria tuberosa</i>	Tuber	<i>Churna</i>
2	<i>Kataka</i>	<i>Strychnos potatorum</i>	Seed	<i>Churna</i>

Duration of trial: 2 months

Follow up: 15<sup>th</sup>, 30<sup>th</sup>, 45<sup>th</sup> and 60<sup>th</sup> days

Non-drug follows up at the interval of one month for the period of 3 months.

## Selection Criteria

### 1. Inclusion Criteria

- Male patients presenting with complaints of decreased visual acuity
- Patient with classical features of *Timira* mentioned under the methods of collection of data included
- Age between 20 and 50 years.

### 2. Exclusion Criteria

- Female patients

## Materials and Methods

Total 110 patients of *Timira* (refractive errors) with the associated complaints of male sexual dysfunction (MSD) were registered for the clinical study from O.P.D. and I.P.D. of *Roga Nidāna Evam Vikṛti Vijñāna* and *Shalkya* department of NIA Hospital. Selection was carried out on the basis of relevant history, signs, symptoms and laboratory investigations suggestive of the disease *Timira* (refractive errors). A written information and consent form was given to the selected patients. The patients were explained about the purpose, procedures and possible side-effects of the trial drugs. Out of 110 patients, 100 patients completed the trial.

## Drugs

The trial drugs *Vidarikanda churna*<sup>3</sup> (Acharya Bhavamishara has described as a representative drug of *Jivaka* and *Rishabhaka* who are *shukrajanana* according to *Charaka*) and *Kataka churna*<sup>4</sup> were taken for this trial which is given below:

### Group: A

*Vidarikanda churna* in dose of 5 gm BD with lukewarm water.

### Group: B

*Kataka churna* in dose of 3 gm BD with lukewarm water.

- Age-related eye diseases – as macular degeneration and cataracts
- Patients suffering from major illness and trauma
- Patients suffering from eye diseases like glaucoma, corneal ulcers and trachoma
- Patients suffering from high B.P., cardiac diseases, AIDS and diabetes

## Withdrawal Criteria

During the course of the clinical trial, some patients could not follow the instructions given; they were withdrawn from the trial.

## Assessment Criteria

### Subjective Parameters

Patients selected for relief symptoms like *Avyakta Rupa Darshan/Duram na Pashyate* (indistinct distance vision),

Vihwala Darshana (blurred vision) and Makshikadi Abhuta Dravya Darshan (floaters), Dwidha/Bahavidha Darshan (diplopia/polypia), Shirobhitapa (headache), Klabiya (erectile dysfunction), Dorbalya (general weakness), and Methunaharsa (loss of libido), which were classified into grades. The improvement in grade was recorded at different levels.

completed the trial are presented in this section. Subjective parameters, i.e., Avyakta Rupa Darshan/Duram na Pashyate (indistinct distance vision), Vihwala Darshana (blurred vision) and Makshikadi Abhuta Dravya Darshan (floaters), Dwidha/Bahavidha Darshan (diplopia/polypia), Shirobhitapa (headache), Klabiya (erectile dysfunction), Dorbalya (general weakness), and Methunaharsa (loss of libido) improvement were assessed by Wilcoxon matched-pairs signed-ranks test for one group therapeutic effect and for the assessment of therapeutic effect.

**Observations and Results**

The effects of the therapy on 100 patients who had

**Table 1. Comparative Effect of Vidharikanda Churna and Kataka Churna on Avyakta Rupa Darshan (Indistinct Distance Vision) in Group A and Group B**

Groups	N	Mean±SD			% Change	T+	T-	S.E.	W	P	Result
		BT	AT	Diff							
Group A	50	1.76	1.58±0.595	0.18	10.22	140.0	50.0	0.084	90.0	0.0728	IN.S
Group B	50	1.76	1.52±0.555	0.24	13.64	142.5	28.5	0.078	114.0	0.0104	S

**Table 2. Comparative Effect of Vidharikanda Churna and Kataka Churna on Blurred Vision in Group A and Group B**

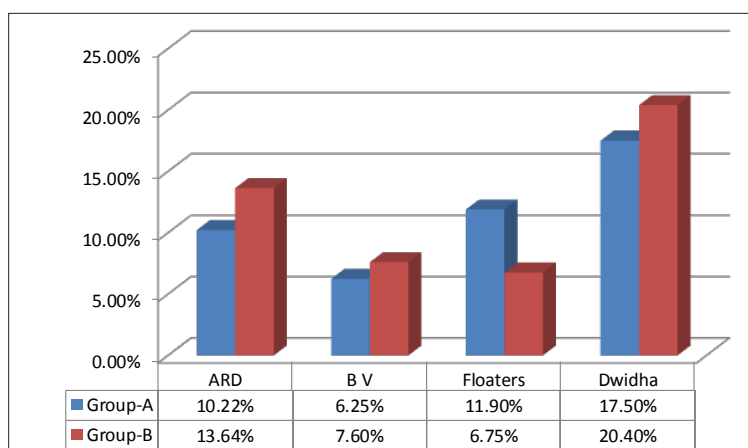
Groups	N	Mean±SD			% Change	T+	T-	S.E.	W	P	Result
		BT	AT	Diff.							
Group A	50	1.70	1.60±0.421	0.10	6.25	49.5	0.42	0.0482	52	0.0425	S
Group B	50	1.84	1.70±0.609	0.14	7.60	28.0	0.00	0.0495	28	0.0156	S

**Table 3. Comparative Effect of Vidharikanda Churna and Kataka Churna on Floaters in Group A and Group B**

Groups	N	Mean±SD			% Change	T+	T-	S.E.	W	P	Result
		BT	AT	Diff.							
Group A	50	1.68	1.48±0.495	0.200	11.9%	90.0	15.0	0.069	75.0	0.0166	S
Group B	50	1.78	1.66±0.385	0.120	6.75%	31.5	4.5	0.054	27	0.0547	IN .S

**Table 4. Comparative effect of Vidharikanda Churna and Kataka Churna on Dwidha/Bahavidha Darshan (Diplopia/Polypia) in Group A and Group B**

Groups	N	Mean±SD			% Change	T+	T-	S.E.	W	P	Result
		BT	AT	Diff.							
Group A	50	1.14	0.94±0.535	0.20	17.5	110.0	25.5	0.075	85.0	0.0250	S
Group B	50	0.98	0.78±0.519	0.20	20.4	111.5	24.5	0.074	87.0	0.0547	S



Symptoms-ARD=Avyakta Rupa Darshan, BV=Blurred Vision

**Figure 1. (Diplopia/Polypia) in Group A and Group B**

**Table 5. Comparative Effect of Vidharikanda Churna and Kataka Churna on Shirobhitapa (Headache) in Group A and Group B**

Groups	N	Mean±SD			% Change	T+	T-	S.E.	W	P	Result
		BT	AT	Diff.							
Group A	50	1.50	1.34±0.534	0.16	10.67	125.0	25.0	0.075	85.0	0.0250	S
Group B	50	1.84	1.70±0.350	0.14	7.61	28.00	0.00	0.054	28.00	0.0156	S

**Table 6. Comparative Effect of Vidharikanda Churna and Kataka Churna on Dorbalya (General Weakness) in Group A and Group B**

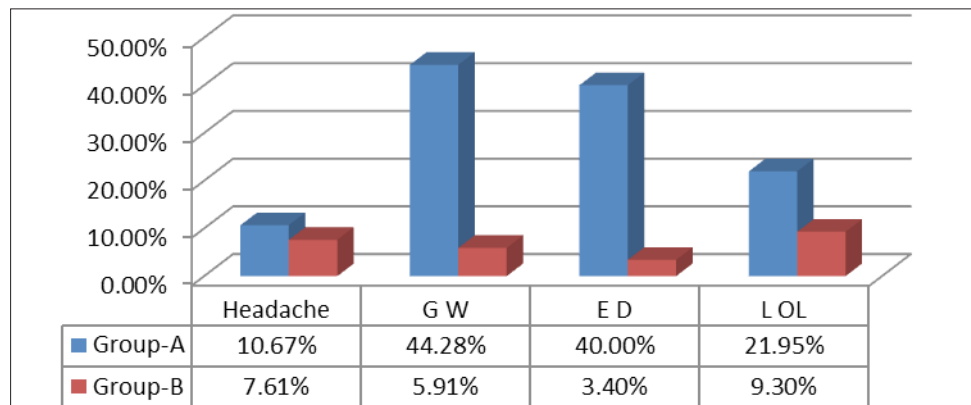
Groups	N	Mean±SD			% Change	T+	T-	S.E.	W	P	Result
		BT	AT	Diff.							
Group A	50	1.40	0.78±0.49	0.62	44.28	496.0	0.00	0.69	496.0	0.0001	E.S.
Group B	50	1.34	1.26±0.39	0.08	5.97	27.0	9.00	0.05	18.0	0.0156	IN S.

**Table 7. Comparative Effect of Vidharikanda Churna and Kataka Churna on Erectile Dysfunction in Group A and Group B**

Groups	N	Mean Score±SD			% Change	T+	T-	S.E.	W	P	Result
		BT	AT	Diff.							
Group A	50	1.20	0.94±0.48	0.26	40.0	108	4.0	0.068	104	0.0015	V.S.
Group B	50	1.16	1.12±0.44	0.04	3.4	33	22	0.063	11	0.6214	IN S.

**Table 8. Comparative Effect of Vidharikanda Churna and Kataka Churna on Loss of Libido in Group A and Group B**

Groups	N	Mean Score±SD			% Change	T+	T-	S.E.	W	P	Result
		BT	AT	Diff.							
Group A	50	0.82	0.64±0.38	0.18	21.95	45.0	00	0.054	45.0	0.0039	V.S.
Group B	50	0.86	0.78±0.48	0.08	9.30	52.0	26	0.069	26.0	0.3394	IN S.



(Symptoms – GM=General weakness, ED=Erectile dysfunction, LOL=Loss of libido)

**Figure 2**

**Discussion on Results**

**Effect on Avyakta Darshana (Indistinct distance vision)**

Vidharikanda is one among the best Rasayana and Sukrajanana drug and Kataka is one among the best Chakshushya<sup>5</sup> drug, thus a drug having base Chakshushya and Rasayana Sukrajanana properties might be helpful for treating the disease Timira (refractive error) with associated symptoms of male sexual dysfunction. Relief in the symptom of Avyakta Darshana was observed 10.22% in Group A (p<0.07), and 13.64% in Group B (p<0.01). Group B was

statistically significant while Group A was not significant. Group B showed 3.42% more relief than Group A.

**Comparative Effect on Blurred Vision**

Majority of Rasayana drugs work on multiple areas and help in achievement of Vyadhikshamatwa through their Dipana, Pachana, Medhya and non-specific immune booster properties. Chakshushya term indicates restoration of eye sight because Chakshushya<sup>6</sup> class of medicines have a targeted action on the eye and visual apparatus. Vidharikanda is one among the best Rasayana and

*Sukrajanana* drug and *Kataka* is one among the best *Chakshushya* drugs, thus a drug having base *Chakshushya* and *Rasayana Sukrajanana* properties might be helpful for treating the disease *Timira* (refractive error) with associated symptoms of male sexual dysfunction. Relief in the symptom of blurred vision was observed 6.25% in Group A ( $p<0.04$ ), and 7.60% in Group B ( $p<0.01$ ). All these values were statistically significant. Group B showed 1.35% more relief than Group A.

### Comparative Effect on Floaters

Relief in the symptom of floaters was observed 11.9% in Group A ( $p<0.01$ ), and 6.75% in Group B ( $p<0.005$ ). Group A was statistically significant while Group B was not significant. Group A showed 5.15% more relief than Group B due to *Rasayana* property of *Vidharikanda*

### Comparative Effect on *Dwidha/Bahuvidha Darshan* (Diplopia/Polypia)

Relief in the symptom of *Dwidha/Bahuvidha Darshan* (Diplopia/Polypia) was observed 17.5% in Group A ( $p<0.02$ ), and 20.4% in Group B ( $p<0.05$ ). All these values were statistically significant. Group B showed 2.9% more relief than Group A because *Kataka* is one among the best *Chakshushya* drugs; thus a drug having base *Chakshushya* might be helpful for treating the disease *Timira*.

### Comparative Effect on *Shirobhitapa* (Headache)

Relief in the symptom of *Shirobhitapa* (headache) was observed 10.67% in Group A ( $p<0.02$ ), and 7.61% in Group B ( $p<0.01$ ). All these values show both groups were statistically significant. But Group B showed 3.06% more relief than Group A because in the present study headache mainly occurred due to eye disease and *Kataka* is one among the best *Chakshushya* drugs; thus a drug having base *Chakshushya* might be helpful for treating the disease *Timira*.

### *Dorbalya* (General Weakness)

Relief in the symptom of *Dorbalya* (general weakness) was observed 44.28% in Group A ( $p<0.0001$ ), and 5.97% in Group B ( $p<0.01$ ). Group A was statistically extremely significant while Group B was not significant. Group A showed 38.31% more relief than Group B due to *Rasayana*<sup>7</sup> property of *Vidharikanda*

### Comparative Effect on Erectile Dysfunction

Relief in the symptom of erectile dysfunction was observed 40.0% in Group A ( $p<0.001$ ), and 3.44% in Group B ( $p<0.62$ ). Group A was statistically very significant while Group-B was not significant. Group A showed 36.56% more relief than Group B because *Vidharikanda* is one among the best *Rasayanas*<sup>8</sup> and *Sukrajanana* drugs.

### Comparative Effect on *Methunaharsa* (Loss of Libido)

Relief in the symptom of (*Methunaharsa*) Loss of libido was observed 21.95% in Group A ( $p<0.003$ ), and 9.30% in Group B ( $p<0.33$ ). Group A was statistically very significant while Group B was not significant. Group A showed 12.65% more relief than Group B because *Vidharikanda* is one among the best *Rasayanas*<sup>9</sup> and *Sukrajanana* drugs. A previous study on contraceptive efficacy of *strychnos potatorum* seed extract in male albino rats shows that *strychnos potatorum* seed possesses suppressive effect on male fertility and could be useful in development of male contraceptive agent.<sup>10</sup>

### Conclusion

*Kataka Churna* showed significant results on the symptoms *Avyakta Darshana* (indistinct distance vision), blurred vision, *Dwidha/Bahuvidha Darshan* (diplopia/polypia) various *Acharyas* described *kataka* is *Chakshuya*. The study has overall concluded that *Shukravradhaka* drugs like *Vidharikanda* significantly improve the quality of vision. So, more and more *Shukral* drugs should be prescribed in the treatment of low visual acuity. *Vidharikanda* offers good promise for the patients of low visual acuity and the research will pave the path for further research in this field.

**Conflict of Interest:** None

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