

The Role of Indigenous Drugs in the Management of Male Sexual Disorders

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ABSTRACT

In this well documented write-up, the use of various male sex remedies like Tentex forte, Himcolin, Speman and Speman forte has been reviewed in male sex disorders. Their successful employment in conditions like impotence, male infertility, premature ejaculation, nocturnal emissions etc has been emphasised.

INTRODUCTION

“East is east and West is west” is an age old saying, but in the present ‘jet’ age, this is no longer true. It has been realised that the closer we come to each other, the more we appreciate our common aims, aspirations and problems.

Medicine, whether Eastern or Western, is as old as mankind. “Ayurveda”, a treasure of indigenous drugs, describes the knowledge of life and how life can be made more comfortable and prolonged. Ayurvedic teaching, though passive, is taught from generation to generation. By using indigenous drugs, millions of patients in India and abroad are being treated. A system that has survived through the centuries cannot be unscientific, since our ancient researchers had the spirit of inquiry, acuity of observation and good clinical acumen. All the things in this world are products of nature or “Prakriti”. Both in India and in the technically advanced countries, there is a call for a “return to nature’ in drugs, foods and even cosmetics¹. There is a definite increase in demand for herbal drugs because they are of natural origin and with the least side effects.

Sex is a powerful driving force that helps and guides most individuals. Normal sex life is an integral part of physical and mental health. But sexuality is influenced by complex psychic and physiological factors. It is a sensitive entity and may be disturbed by many causes. This may lead to various sexual disorders like sexual apathy, frigidity, psychogenic or functional impotence and premature ejaculation. Modern scientific medicines may either not be available or useful to treat these sexual disorders. But Ayurveda has some promising remedies. Hence one has to turn to indigenous drugs to treat these maladies. The present article reviews the role of some such remedies in various sexual disorders.

(A) Impotence

Masters and Johnson have defined impotence as an inability to perform the sexual act, because of either a failure to initiate or sustain an erection or a failure to ejaculate intravaginally. The incidence of impotence is around 5% in men around 30-35 years and it gradually increases as age advances. Its exact aetiology and pathogenesis being unknown, modern medicine has no effective drug for this condition. But many indigenous drugs are claimed to be effective and some of these claims have been well-documented in scientific literature. Many of them are classified as aphrodisiacs. Some of these include Abhrak bhasma, Bhangra and Suvarnavanga bhasmas, Orchis mascula, Asparagus racemosus, root extracts of Bombax malabaricum (Savari) and Amaranthus adscendens, Phalagrita, Ashwagandha, powdered root of Albizzia lebbek, Saffron, Shilajeet, nutmeg extract, Trivanga, pepper, clove and gandhak. Most of these agents are used in combinations^{2,3}. Local application of Jaiphal, Lavanga, Pista and Nirgundi on the penis has been claimed to increase vascularity and contractility. Tentex forte, a commonly used indigenous drug formulation, consists of many of the

above mentioned ingredients. Animal experimentations with Tentex forte have shown its marked androgen-like activity, with an increase in the number of matings, but without any hormonal content (Jadhav, S.S., 1971, 1972)^{4,5}. As it is devoid of any hormones it appears to be a safe preparation. It has been reported to improve sex desire and performance, restore satisfactory sexual functioning and provide a salutary response (Sahu, K.C. *et al.*, 1962; Bhargava, N.C., 1970)^{6,7}. It has been used in treating sexual disturbances following vasectomy (Nigam, P. *et al.*, 1977)⁸, and psychoneurotic and psychosomatic sex disturbances (Sinha, A.P., 1973; Rajasekharan, A., 1979)^{9,10}. In a placebo-controlled, cross-over study, Tentex forte provided satisfactory sexual performance in comparison with a placebo (Kumar, Shailendra, 1974)¹¹.

Another commonly used preparation in impotence is Himcolin cream which consists of locally-acting, mild irritants. This has been shown to initiate and sustain erectile responses when applied on the penis (Bhargava, N.C., 1970)⁷. This preparation could be definitely of use in impotence due to senility or in functional impotence (Hasan, M., 1974)¹².

Various drugs such as barbiturates, diazepam, imipramine, chlomidpramine, chlorpromazine, methyl dopa, metoclopramide, alcohol and propranolol are known to induce impotence in some individuals¹³. Whether indigenous preparations are beneficial in treating drug-induced impotence remains to be evaluated.

(B) Sterility

The incidence of sterility is seen in around 5% of marriages. Infertility and sterility are major problems encountered in clinical practice. According to some experts about half the childless marriages are due to abnormalities in the male partners though women are traditionally blamed for sterility. For a very long time various indigenous preparations have been used in treating sterility and infertility. Some of these are Asparagus racemosus (Shatavari), Phalagrita, Manjistha, root and bark of Ficus religiosa (Pimpala), Mimusops elengi (Bakul), Pandanus odoratissimus (Kevda), Ashwagandha, Saraswati grita, Hydrophila spinosa, Abroma augusta, Saraca indica, Suvarnavang etc¹⁴. Speman, an indigenous drug remedy, has been well investigated in the treatment of male infertility. Administration of Speman alone or in combination with other preparations, causes hypertrophy of the seminal tubules and increases the number of spermatozoa in the tubules (Jadhav, S.S., 1971)⁴. In castrated mice, Speman shows a distinct androgen-like activity and testicular regeneration in comparison with placebo therapy in animals (Jayatilak, P.G. *et al.*, 1976)¹⁵.

Speman is a nonsteroidal compound without any side effects of an androgen. It is claimed that it improves the functions of the testes (spermatogenesis), prostate and seminal vesicles (Pardanani, D.S., *et al.*, 1976; Sethi, N.C. *et al.*, 1980)^{16,17}. The effectiveness of Speman in male infertility has been confirmed in a number of clinical trials in patients diagnosed with oligospermia and azoospermia (Nigam, P. *et al.*, 1977; Limaye, H.R. *et al.*, 1984)^{8,18}. It acts by restoring a fertile semen profile by improving semen viscosity, sperm motility and spermatogenesis (Talaulikar, V.R. *et al.*, 1976).

(C) Other Sexual Disorders

Premature ejaculation is a common problem in clinical practice. Its incidence is around 2-3%. Some of these cases could be psychosomatic in nature and may respond to psychotherapy, antianxiety drugs and tricyclic antidepressants. Many indigenous drugs have been found to be useful in this condition. One such formulation in Speman forte which consists of Orchis mascula, Hygrophila spinosa, Rauwolfia serpentina etc. This formulation does not have any general sedative action. Speman forte seems to act by controlling the spinal regulation of ejaculation and/or by breaking the vicious circle of expected failure inducing anxiety, which leads to failure, in turn. Various studies have indicated its usefulness in premature ejaculation, nocturnal emission, spermatorrhoea and

masturbation (Gour, K.N., 1959; Sahu, K.C., 1954)^{20,21}. This preparation may give better results if used along with desensitisation methods such as “squeeze” or “stop-start” technique.

In general, although indigenous remedies are used clinically in sexual disorders with success, their exact mechanism of action remains to be confirmed. However, just because their rationality has not been established, the patients should not be denied the benefits of their therapy. After all, the aim of treatment in any disease is to bring about the best benefits to the patients and ensure their well being.

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