

**UNDERSTANDING OF KLAIBYA AND IT'S CHIKITSA PRINCIPLES****Dr. SANTOSH N. BELAVADI.**

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**ABSTRACT**

The disease klaibya is one of the most common conditions in day to day practice. This is due to various causes and patients approaching different systems of medicine with different investigations for the cure and become exhausted with no beneficial results. In Ayurveda treatment modalities in terms of Shodhana, Shamana chikitsa and life style modification by appropriate following of Pathya will definitely yield encouraging result.

**Key words:** Klaibya, Shukra, Napumsaka, Chikitsa, Vajeekara,

**Introduction:**

Klaibya is the most common problem in the present era. Because of change in life style, sedentary life, change in food habits etc and some of the Psychological causes like Chinta, Shoka, Bhaya, Krodha etc has paved way for the disya. Klaibya is such a Malady where patient hesitates to approach the doctor for the remedies. To understand the disease concept, acharya have highlighted the disease Nidana, Bedha, Lakshana and Chikitsa principles elaborately in different

Samhitas and for this different treatment modalities have been explained by the Acharyas.

Before going to the disease proper it is also necessary to know the fundamental aspects of Shukra which will be highlighting in the next. Vajeekarana Chikitsa is the ultimate treatment for the disease where different Vajeekara yogas in the form of Panchakarma as well as Vajeekarana formulations will be more beneficial.

**Klaibya Nirukti/ Paribasha** <sup>1,2,3</sup>:

The person who is having maithuna ashaktata is said to be as Klaibya. The kleeba bhava is known as

Klaibya (Napumsakata) this is said to be of 7 types.

**Classification of Klaibya/Bheda <sup>4, 5</sup> :**

SL.NO	BEDHA
	<b>Cha.Chi.30/154, Ma.Ni. Parasishta</b>
1	Beejopaghata
2	Dwajopaghata ( Vataja, Pittaja, Kaphaja, Raktaja & Sannipataja)
3	Vrudhavasthajanya
4	Adhika Shukrakshaya

**Napumsaka Lakshana <sup>6</sup>:**

Even there will be strong desire for Maithuna and even with presence of manoanukula and ishta Stree and because of Linga Shithilata the person may not go to Stree for Maithuna or even after engaged with Stree the person may get adhika swasa, adhika sweda utpatti and fails to perform maithunakarma because of his Linga shithilata and Veeryaheenata. This is said to be samanya lakshana of Napumsaka. Here for the term Sankalpadi Chakrapani quoted sankalpadou lingashaithilyadou linga anuthanat.

**Beejopaghatajanya**

**Napumsakata karana & Lakshana<sup>7</sup> :**

Sheetala, Ruksha, alpa Sanklistha, Viruddha and in Ajeerna avastha (stage of indigestion) the person who consumes food, Shoka, Chinta, Bhaya and Trasa the person who perform maithuna in excess with Stree, Abhichara and Vishvasa heena with Stree and because of Rasa Raktadi Dhatu kshaya, because of vitiation in the Vatadidosha, Abhojana, Adikashrama, not having affection and love with Stree, Vamanadi Panchakarma apacharaja leads to Shukrakshaya. Then produces lakshanas like Panduvarna,

Durbalata, Alpaprana and alpaharshayukta, he will suffer with Hrudroga, Panduroga, Tamakaswasa, Kamala, Shramapeedita, Atisara, Udarashoola and Jwara. This is called Beejopaghataja or Shukrakshayaja Napumsakata.

### **Dwajopaghataja Napumsakata karana & Lakshana** <sup>8, 9</sup> :

Atyadhika amla, lavana, kshara, viruddha, asatmyabhojana, athyadikajalapana, vishamabhojana, pishtanna and gurubhojana, dadhi ksheera and anupamamsa sevana, vyadhikarshita, performing maithuna with kanya, ayonigamana, Yonirogapeedita Stree, Rajaswala stree, durghandhasrava, vikritayoni, niranarayonisrava, with this Stree the person who performs maithuna, pashumaithuna, abhigata to mutrendriya the person not interested in indriya prakshalana the mutrendriya becomes kshata with danta, nakha, shastra etc. abhigata with kaashta adika prayoga of lingavardhaka aushadhis and because of Shukravega dharana

Dwajabhanga roga will be manifested.

**Lakshana:** Lingashotha, vedana, raga, teevra sphota utpanna , paka then there will growth of mamsa over linga and shweta varnayukta srava from the vrana, linga becomes vakrata and katorata, Jwara, adika pipasa, bhrama, murcha, vamanautpatti vivila varnayukta srava from the vrana, agnidagdha samana teevra vedana along with daha, this vedana and daha visheshata will be present in mutrashaya, andakosha, sevanipradesha and vankshapradesha, sometimes there will be pichila srava from the linga. shoola,shotha and shithilata in linga and sheegra paka then krimi then linga is always kledayukta and durgandhayukta. There will be fall in lingamani, mutrendriya and andakosha. Chakrapani said 5 types of Dwajabhanga they are vata, pitta, kapha, sannipata and raktaja Dwajabhanga. Here shotha and vedanayukta in vataja, sphotadi in pittaja, mamsavrudhi adi kaphaja, jwaratrishnadi in raktaja and

agnineadi sannipataja.

**Cha.Chi.30/162-175** (Vataja, Pittaja, Kaphaja, Raktaja and Sannipataja)

### **Vrudhavasthajanya**

**Napumsakata karana & Lakshana** <sup>10, 11</sup>:

The Klaibya which manifests because of vrudhavastha or jara avastha or vaya are said to be Jaganya, Madhya and Pravara in which in vrudhavastha there will kshaya in Shukra. In vrudhavastha because of dhatukshya and avrushyadravya sevana there will be kshaya in bala, veerya and indriya respectively and because of ayuksheena and not consuming complete and proper food and adhika parishrama these nidanas produce Vrudhaavsthajanya Napumsakata. The person becomes Atyanta ksheena and durbala, shareeravaivarnyata and deenata and prone for many diseases. Chakrapani said pravaram vayah it Vardhakyam.

**Kshayaja Napumsakata karana & Lakshana** <sup>12,13</sup>:

Atyadikachinta, Shoka, Krodha, Bhaya and Irsha Mada and Udvega

peedita and continuous consumption of ruksha anna pana and aushadha in krisha avastha, Asamyak and Asatmya sada ahara sevana the Rasadhatu will get kshaya which is present in Hridaya –all these lead to Rasadi dhatu kshaya in the person later Shukranasha then by atyadhika kama performing maithuna further there will Shukradhatu kshaya which leads to bhayanaka roga and death. That's why the person who desires for good health does the rakshana of Shukradhatu.

**Sadhyasadhayata** <sup>14,15</sup>:

Dwajabhanga and Kshayajanya these 2 Napumsakata are said to be asadhya and Mutrendriya and Andakosha chedhana are also said to be asadhya.

**Janmajatha Napumsakata** <sup>16</sup>:

Because of Beejadosha in Mata and Pita and because of ashubhakarma the prakupita doshas enter the Shukravahinisiras of Balaka does the shoshana then Shukravahinisiras become shoshita and leads to shilanasha immediately and the person become asamartha in

performing maithuna. Even he is said to be purusha he become apurusha.

**Types of Napumsakata According to Yogaratnakara are 17,18;**

Manasa Napumsakata

Pittaja

Aveerya ahara and aushadha

Upadamshajanya

Sirachedhanajanya

Bharamacharyajanya

Swabhavika

SL.NO	BEDHA
	<b>Y.R.Klaibhyanidana, Baishyaratnavalli, Ma.Ni.Parishista</b>
1	Manasa Napumsakata
2	Pittaja
3	Aveerya ahara and aushadha
4	Upadamshajanya
5	Sirachedhanajanya
6	Bharamacharyajanya
7	Swabhavika

**Klaibya Nidana** <sup>18,20</sup>: The person is having desire for maithuna with Stree but because of many reasons he is not performing maithuna by this there will be kshobha and Ling become shithilata and produces Napumsakata. Or the person who is having dwesha with Stree or without having any affection with stree (Abhichara) if performed maithuna leads to Klaibya/Napumsakata. This

is said to be as Manasa Napumsakata.

**Pittaja Kalibhya** <sup>21</sup>: Atyanta Katurasa, Amlarasayukta and atyanta Lavanarasayukta padartha adika sevana will produce Pitta prakopa leads to Shukranasha which will manifest Napumsakata.

The person who is performing adhika maithuna and not taking Vajeekarana dravya or Veeryavardhaka dravyas leads to

Veerya kshaya manifest from others then only chetana Napumsakata. prapti takes place in Linga. This is

And because of Mahanlingaroga (Upadamsha) there will be Klaibya. also called as Mukhayoni because he

And because of veeryavahini sira conducts Mukhamaithuna from others after Shukrapana chedhana there will not be Ling Dwajautthana takes place.

uttejana with this Napumsakata. **Sougandhika:** The one who takes birth in Doshita yoni that is called Sougandhika Napumsaka. Because of Sugandha from Yoni and Linga balaprapti in Maithuna. It is also called Nasayoni.

In balavaan purusha because of maithuna iccha and because of his Bramhacharya he is having fear in mind he is avoiding maithuna and with this there will be veerya avarodha and manifest Napumsakata.

Because of Janmaprabriti or Swabhavika there will be Swabhavika Napumsakata. **Kumbhika:** The person who does maithuna or Stree sevana after performing Gudamaithuna to him from others. It is also called Gudamaithuna.

**According to Sushruta the Irshaka:** The person who perform Maithuna by seeing others maithunakriya. It is also called Drigyoni.

- Napumsakas** are further classified as follows <sup>22</sup>.
1. **Asekya - Mukhayoni Purusha**
  2. **Saugandhika- Nasayoni**
  3. **Kumbhika- Gudhayoni**
  4. **Irshaka - Drugyoni Su.Sha.2/47**

**Asekya:** Because of Mata Pitas atyalpa Shukra Asekya type of Napumsakata utpatti takes place. When he does the pana of Shukra

from others then only chetana prapti takes place in Linga. This is also called as Mukhayoni because he conducts Mukhamaithuna from others after Shukrapana Dwajautthana takes place.

**Sougandhika:** The one who takes birth in Doshita yoni that is called Sougandhika Napumsaka. Because of Sugandha from Yoni and Linga balaprapti in Maithuna. It is also called Nasayoni.

**Kumbhika:** The person who does maithuna or Stree sevana after performing Gudamaithuna to him from others. It is also called Gudamaithuna.

**Irshaka:** The person who perform Maithuna by seeing others maithunakriya. It is also called Drigyoni.

**Shanda Lakshana:** During Rutukala the person who performs maithuna by sleeping below the Stree and does the maithuna in case of Putaprapti he behaves like Stree and if it is Stree she behaves like Purusha. This is called Shanda. Shanda is of two types- Narashanda and Narishanda.

**Narishanda:** If Stree does the maithuna as purushasamana, with this if Kanya or Stree prapti takes place she will also perform maithuna as that of purusha samana where Stree will be above and purusha will be below is called Narishanda.

**Su.Sha 2/46, Ma.Ni.Parishista**

**Asadhya Klaibya Lakshana** <sup>23</sup>:

Sahaja, Marmachadha are said to be asadhya and rest other 5 types of Klaibya are said to be sadhya. Here Vajeekarana chikitsa is followed.

**Chikitsa sutra** <sup>24</sup> :

Nidanaparivarjana chikitsa is the first line of treatment.

Depending upon Deha, Dosha, Agni, Bala and for Shukra doshanashanartha Bastis, Ksheera, Ghritas, Vrushya yogas and Rasayana prayoga and in Abhichara utpanna Napumsakata Daivavyapashraya Chikitsa.

**Shodhana in Klaibya:**

Snehana, Swedana, Snehayukta Virechana then Asthapanabasti next Auvasanabasti then Palasha, Erandamula Mustadi yoga siddha asthapanabasti is given.

**Vajeekarana Chikitsa:**

Different Vajeekarana yogas are administered in Beejopaghataja Klaibya.

Vajeekarana Yogas which are explained in Vajeekarana pada are indicated.

**Dwajabhanga Napumsakata chikitsa:**

Pradeha and Pariseka kriyas or Raktamokshana, Snehapana and Snehayukta Virechana then Anuvasanabasti or Asthapanabasti prayoga and vrunavat chikitsa are followed.

**Jarajanya and Kshayaja Napumsakata:**

Snehana, Swedana and Snehayukta Shodhana.

**Rasayanokta aushadhi prayoga:**

In case of Vrudhavasthajanya and Kshayajanya Napumsakata Ksheerasarpi, Vrushya yoga, Yapanabasti, Rasayanaprayoga.

In sadhya Napumsakata the person should follow nidanaviruddha karya that is nidana parivarjana is the first line of treatment which will eliminate Napumsakata. Vamanadi shodhana karma is done then given with

Vajeekarana yogas it is followed after 16years and up to 70years.

**Vrushyabasti:**

Ksheera Mamsarasa pradhana abhyasa, purana Ghrita, Taila, Mamsarasa, Sharkara and Madhusiddha Basti prayoga.

**The following treatments are also followed** <sup>25, 26</sup>

**Sneha**-Abhyantara sneha Shamana, Brumhana sneha and alpamatra acts as Vrushyarasayana.

- Madhyama matra.....vrushya.....**Su.Chi.13/34**
- Hraswa matra...vrushyabalya....**Ch.Su.13/40**
- Abhyangadi ...Vrushyarasayana
- Basti- Vajikarabasti Be.Sa.Si. 8/72
- Kridabasti Be.Sa.Si. 8/79
- Govrushyabasti - Ch.Sa.Si.
- Tittaradyayapanabasti...sukrajanan **Ch.Si.12/18**
- Go-rushyadiyapanabasti **Ch.Si.12/18**
- Vrushyabasti.....vrushamnaram **As.Sa.Ka.5**
- Bastamuskadisidda vrushyabasti...vrushyatam **As.Sa.Ka.5/13**
- Kaleeramamsadyo vrushyabasti **As.Sa.Ka.5/12**
- Kukudandarasadyo shukrakritbasti **As.Sa.Ka.5/11**
- Sahacharadirasyanabasti **As.Sa.Ka.5/20**
- Yapanabasti.....sukraprada **Ch.Sa.Si.12/49**
- Mustakadi Niruhabasti.....vrushya **Su.Sa.Chi.38/106**

**Uttarabasti**

All these modalities are helpful in improving the Shukra qualitatively and quantitatively, nourishes Dhatus, gives strength and enhances

Maithuna shakti as that of Ashva, Hastibala etc.

**Discussion:**

Klaibya, of different origin by Vajeekaranachikitsa corrects the Alpashukrata, Dushtaretas,



Ksheenashukra, Shushkaretas, nourishes Shukra and enhances maithuna samarthyata. In total, Vajeekarana treatment acts as both qualitative and quantitatively and corrects different components of Shukra.

### Conclusion:

- Different modalities like Panchakarma chikitsa, Vrushya, Rasayana yogas, Vrushyabastis, Vrushya aharakalpas and other bahya and abhyantara chikitsa have been explained by the acharyas in this disease.
- Before the administration of Vajeekara yoga it is very much necessary to do Shodhana. Here according to rogibala and rogabala or avastha of patient or yukti of a vaidya suitable Shodhana is followed to get desired effect.
- The ideal treatments are Amapachana, any suitable Shodhanachikitsa or Anulomana, Vajeekarana chikitsa in the form of Vrushyabastis which are more effective, Vajeekarana yogas, routinely following of Vrushya aharakalpas, following pathya

apathya, yogya manoanukulakara vatavarana.

- Good environment plays very important role in achieving maximum benefits in this malady.

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