

# Premature Ejaculation – What *Ayurveda* & *Yoga* can Offer?

## Abstract

Premature Ejaculation (PE) is defined as ejaculation before the completion of satisfactory sexual activity for both partners. '*Shukragatavata*' is a pathological entity of *Ayurveda* similar to premature ejaculation. The present article is aimed to find out various formulations or practices available in ancient Indian erotic literature, *Ayurveda* and in *Yoga*. *Ayurvedic* management of premature ejaculation consists of, various herbal and herbo-mineral formulations, external applications over lower abdomen or all over the body, wearing different amulets made by herbs, psychotropic herbal drugs for reducing performance anxiety, various techniques elaborated in ancient Indian erotic literature to fasten the orgasm in female partner and also use of *shukra stambhaka* drugs to improve control over ejaculation. *Vasti* is an important *panchakarma* procedure and an ideal choice in the management of premature ejaculation. Various *yoga* practices are also described to get control over ejaculation and among them '*vajroli mudra*' is an important one.

**Keywords:** Premature ejaculation; *Ayurveda*; *Yoga*; *Vajroli mudra*; *Panchakarma*; *Vasti*

## Review Article

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## Introduction

Premature Ejaculation (PE) is defined as ejaculation before the completion of satisfactory sexual activity for both partners. In severe cases, it is characterized by ejaculation either before penetration or soon after that. The causes can be biological (relatively uncommon) or psychological (performance anxiety) [1]. PE is generally regarded as one of the most common male sexual dysfunctions. It is affecting on average 40% of men worldwide. PE is a psychosomatic disturbance due to a psychologically overanxious personality and it is classified in to primary (lifelong) or secondary (acquired) [2]. The essential feature of PE is the persistent or recurrent onset of orgasm and ejaculation with minimal sexual stimulation before, on or shortly after penetration and before the person wishes it. Various other factors such as age, novelty of the sexual partner or situation and recent frequency of sexual activity etc should be considered while diagnosing PE [3]. *Vajikarana* (sexual medicine/sexology/aphrodisiac therapy) is one of the eight branches of *Ayurveda* which deals with the preservation and amplification of the sexual potency of a man, conception of healthy progeny as well as management of infertility & sexual dysfunctions. *Vajikarana* improves sexual capacity and also physical, psychological and social health of an individual [4]. The diagnosis and management of infertility and various sexual dysfunctions are dealt in detail in *Ayurvedic* classics. The male sexual dysfunctions have been elaborately described as '*Klaibya*' in *Ayurvedic* classics [5]. '*Shukragata vata*' is a pathological entity described in *Ayurveda* which is similar to PE [2]. The present article deals with the concepts and management of PE in *Ayurveda* and *Yoga*.

## Review Methodology

*Ayurvedic* material related to '*Shukragata vata*'/ '*Vajikarana*' was collected from major *Ayurvedic* texts with their commentaries

like, *Charaka samhita*, *Sushruta samhita*, *Ashtanga sangraha*, *Ashtanga hridaya*, *Bhaishajya ratnavali* and *Yogaratanakara*. Materials pertaining to *Yoga* were collected from '*Hatha yoga pradipika*' & '*Asana, Pranayama, Mudra & Bandha*'. Electronic databases 'Google scholar search' and 'Google search' were searched for relevant studies and reviews published/appeared from 2010 to December 2016. The key words used for search were, 'Premature ejaculation & *Ayurveda*'. Abstracts and full text articles which are freely downloadable and in English language were only included.

## Concept of PE in *Ayurvedic* Classics

The rich heritage of Indian culture considered '*kama*' (desire/sex) as one among the *purusharthas*, the objectives of life. The concept of '*kama*' reveals that the recreational aspects like enjoyment and it is also equally important for procreation. As an art as well as science the ancient Indian erotic literature deals various aspects of '*kama*' along with its social, cultural and medicinal importance.

'*Anangaranga*' is a sexual treatise written by '*Kalyana malla*' which deals with various aspects of achieving optimum sexual pleasure in intercourse and also provides sexual education [6]. Various concepts like, class of women who should be avoided for sexual relation, prohibited places for sex [7] and also description of various body parts of women to be stimulated during foreplay for better gratification according to the lunar cycle of progression and regression is available in *Anangaranga*. Three types of sexual unions are described- short timed, (*seeghrasambhava*) moderate timed (*madhyama sambhava*) and long timed (*chirasambhava*). Degree of arousal which varies from person to person according to the stimulation (*kriya*) is described (which is of three types - *laghu* (easily aroused), *madhyama* (moderately aroused), and *chirodaya* (late aroused) [8]. A number of recipes for hastening

the orgasm of the female partner (*dravana yogas*) are described [9]. *Kalyanamalla* prescribed a number of recipes to delay ejaculation (*sukrastambana*) in men. The residing place of “*Kama deva*” (lord of desire) is human mind and its manifestation occurs by *smarana* (fantasy). It signifies the importance of mind in sexual function. [8] Various measures were used to distract the mind during sexual act [10].

*Ayurveda* enumerates eight factors responsible for ejaculation. They are *harsha* (excitement, sexual fantasy), *tarsha* (strong desire for sex), *saratwat* (fluidity of semen), *paicchilya* (sliminess of semen), *gaurava* (heaviness of semen) and *anutva* (atomicity of semen), *pravanabhava* (tendency to flow out), *drutatvatmarutasya* (due to *vata*). Dysfunction of either one or all of these eight factors leads to ejaculatory impairment out of which ‘*drutatvat marutasya*’ is most important. The physiology of ejaculation is under control of *vata dosha*. Vitiating of *vata* (especially *apana vata*) leads to PE [11]. Previous scholars compared PE with an *Ayurvedic* pathological entity called, “*shukragata vata*” [12]. *Shukragata vata* is a distinct pathological entity characterized by a group of clinical presentations either related with the impairment of ejaculation or with the impairment of seminal properties. ‘*Kshipram munchati*’, [12] ‘*shukrasya sheeghram utsargam*’, [13] ‘*pravritti/Atiseeghra pravritti*’ [14] are the classical features of ‘*shukragata vata*’ which denotes early / fast ejaculation / PE.

### Ayurvedic Management of PE

*Ayurveda* has given importance to *shukra* (semen / reproductive system) as the supreme body tissue because of its generative property. *Vajikarana* is the branch of *Ayurveda*, which deals with various types of physical, psychological, sexual problems like impotence, libido, poor erection, and early ejaculation in the males as well as sterility and frigidity in females. The *vajikarana* drugs are helpful in providing strength and vigor to the person along with improvement of reproductive potentiality [15]. Scanty research has been done on role of *Ayurvedic* drugs/procedures in the management of PE. *Praharsha anna* (exhilarating food items), *balya* (tonics), *shukrakara* drugs (aphrodisiacs) and *vajikarana vasti*’s (various enemas with medicated oils & decoctions) are useful in the management of *shukragata vata*.

Individual herbs like, *Erandamoola* (*Ricinus communis* Linn.), *Brahmi* (*Bacopa monnieri* Linn), *Mandukaparni* (*Centella asiatica* Linn), *Amlaki* (*Emblica officinalis* Garten), *Jatiphala* (*Myristica fragrans* Houtt); compound formulations like, *Akarakarabhadi yoga*, *Rasayana vati*, *Manasamitra vataka*, *Katphaladi kwatha*; mineral compounds like, *Swarna bhasma* (gold), *Rasa sindhura* (mercury based formulations) etc; proved effective in the management of PE. Few studies have evaluated the efficacy of *panchakarma* procedures (*Ayurvedic* five major body cleansing procedures) like *vasti* (various medicated oil or decoction enemas) and *shirodhara* (continuous oil drip on forehead) were also proved effective in PE [2].

*Akarakarabhadi yoga* has improved the time taken for ejaculation and satisfaction to female partner. *Narasimha choorna*, *Bhallataka phala majjadi avaleha*, *Musalyadi choorna* have provided better results in improving the duration of sexual act and frequency of coitus. *Atmagupta* (*Mucuna prurita* Hook)

and *Ashwagandha* (*Withania somnifera* Linn) has improved the duration of sexual act [2]. *Brahmi* (*Bacopa monnieri*), *Mandukaparni* (*Centella asiatica*) are having anti-anxiety, adaptogenic and stress relieving properties. *Putranjeevaka* (*Drypetes roxburghii*) is beneficial in increasing the ejaculation time. *Kapikacchu* (*Mucuna pruriens*) is an aphrodisiac and also effective in improving the performance in men [16]. *Ashwagandha* is a *vajikarana* drug and also it is having properties like, anxiolytic, anti-depressant, anti-stress adaptogen and uplifts mood [17]. *Shukra stambhana yapana vasti* (medicated enema) is also found beneficial in PE [18]. *Shukrastambhakara yoga* (an *Ayurvedic* formulation) proved as psychotropic, improves the duration of the sexual act, reduces performance anxiety and found effective in PE [4].

In ‘*Bhaishjya ratnavali*’ (an *Ayurvedic* text), a chapter named ‘*veerya stambhana adbhikara*’ (chapter which contains various formulations which are useful to control ejaculation) is mentioned. Various single drugs (herbal), herbo-mineral formulations, various external applications (a paste containing various herbs) over feet and lower abdomen to withhold ejaculation, different amulets (wearing amulets prepared by various herbs) and various other practices are mentioned in *Bhaishajya ratnavali* [19].

One more *Ayurvedic* text called, ‘*Yoga ratnakara*’ has described various *Ayurvedic* formulations which are useful in loss of erections and early ejaculation. A formulation called, ‘*Vanari gutika*’ which contains *Atmagupta* (*Mucuna pruriens*) as one of the main ingredients is indicated in early ejaculation and also in loss of erection. Various medicated oils like, *Chandanadi tailam* and *Maha sugandhi tailam* are mentioned for application all over the body in early ejaculation. *Abdhishoshadi yoga* (an *Ayurvedic* formulation) is useful to get control over ejaculation. *Veeryastambhaka vati* (an *Ayurvedic* formulation) which contains *Ahiphena* (*Papaver somniferum*) as one of the main ingredient is also indicated in PE [20].

*Ayurvedic* line of treatment for early ejaculation/*sukragatavata* should consist of *vrihya* (aphrodisiacs), *balya* (tonics), *vatahara* (drugs/procedures which pacifies *vata dosha*), *medhya* (psychotropic drugs) and *sukrastambhaka* (drugs helpful to delay ejaculation) properties. *Vasti* is the best available treatment / an ideal choice for *vata vikara*’s or *shukragata vata*, as it controls *vata* at its own site [21].

By considering the above facts it seems that PE is managed by, different herbal drugs/herbo-mineral formulations (which are useful to delay ejaculation, to improve performance or works as tonics), various external applications over lower abdomen/all over the body (to regulate *vata dosha* which is the main pathological factor in PE according to *Ayurveda*), wearing different herbs as amulets (which may divert the mind during sexual act or may increase confidence and decrease performance anxiety during sexual act), *medhya* drugs (may reduce anxiety or uplifts mood), *dravana vidhi* or other techniques elaborated in ancient Indian erotic literature (different techniques to accelerate orgasm in female partner) and *shukra stambhaka* drugs/formulations (may improve control over ejaculation). Further clinical trials are required to substantiate these claims.

## Role of Yoga in PE

'Hatha yoga' gives utmost importance related to conservation of semen and controlling ejaculation. Identification with the body ceases and consciousness becomes free from physical identification, if a *yogi* (the one who practices yoga) controls the *bindu* (semen) and prevents its release from the body even during *maithuna* (sexual intercourse), according to '*Hatha yoga pradipika*'. The knower of *yoga* conquers death by preserving the *bindu* (semen). Release of the *bindu* is equal to death and conservation of semen is life. There are some practices explained in *hatha yoga* texts to preserve the semen (to stop / to control/ to withhold ejaculation). The *bindu* which is about to fall in to the woman's vagina should be made to move upwards with continuous practice. The ejaculated semen along with the secretions of women's vagina should be drawn up through urethra by muscular contractions. The flow of *bindu* can be reversed by continuous practices of various mudra's like, vipareeta karani mudra, khechari mudra, vajroli mudra etc [22];

### Vajroli mudra

The word '*Vajra*' refers to '*Vajra nadi*', which governs the urogenital system. *Vajra nadi* is the energy flow within the spine which governs the sexual functions of the body. There are seven practices of *Vajroli* and these practices takes years of preparation which starts with the simple contraction of uro-genital muscles and later sucking up of liquids through urethra. The seventh practice is '*Yogic intercourse*' (doing intercourse by withholding ejaculation or sucking up of ejaculated semen after ejaculation in women's vagina through urethra by muscular contractions). By practicing gradual upward contractions during ejaculation in intercourse, man can achieve perfection in *vajroli*. Perfection of *vajroli* means, being able to withdraw the seminal fluid during the height of climax and this involves the practice of contracting and controlling the muscles of the uro-genital complex [22].

The semen is not supposed to be ejaculated and it must be drawn up through the generative organ by *Vajroli*. According to '*Shiva samhita*', 'the wise should first absorb the vaginal secretions through penis by muscular contractions of the urethra and there after perform coitus without ejaculating the seminal fluid'. Ejaculation should be restrained by *yonni mudra* or *vajroli*. Before practicing *vajroli*, *uddiyana bandha*, *navli* and *moola bandha* has to be perfected. Later *vajroli* should be practiced by muscular contractions of the urethra and then by using a tube or catheter [22].

## Role of Mind in Ejaculation According to Yoga

A man's semen can be controlled by the mind and control of semen is life giving. Therefore, the semen and mind should be controlled and conserved. *Yogis* (people who practices yoga) have always claimed that autonomic body functions can be consciously controlled with time and effort. Functions of the reproductive organs can also be influenced and controlled by *yoga* practices over a sustained period of time. By practicing *vajroli*, one can learn to control the physical mechanism, but along with the mental control also can be developed [22].

### Yoga Practices Useful in P

Various asana's like, pawanamuktasana, surya namaskara, sarvangasana, halasana, shashankasana, marjari asana,

ushtrasana, vyaghrasana, kati-chakrasana, tadasana, meruprishtasana, utthanasana, trikonasana, yogamudrasana, matsyasana and all backward bending asana's; pranayama's like nadi shodhana pranayama, bhastrika and ujjayi; mudra's like, ashwini mudra, vajroli mudra, vipareetakarani mudra, maha mudra and maha bheda mudra; bandha's like moola bandha and maha bandha; shatkarma procedures like, navli, agnisara kriya; other practices like, yoga nidra and meditation are useful for general toning of male and female reproductive organs and also to calm the mind [23]. In a pilot study, yoga protocol which consists of various yoga practices has provided encouraging results in improving IELT in PE patients [24].

## Conclusion

'*Shukragatavata*' is a pathological entity of *Ayurveda* similar to premature ejaculation. For *Ayurvedic* management of PE, various herbal or herbo-mineral formulations, external applications over lower abdomen or all over the body, wearing different amulets made by herbs, psychotropic herbal drugs for reducing performance anxiety, various techniques elaborated in ancient Indian erotic literature to fasten the orgasm in female partner and use of *shukra stambhaka* drugs/formulations to improve control over ejaculation are mentioned. Various *yoga* practices are also described to get control over ejaculation and among them '*vajroli mudra*' is an important one. Further clinical trials are required to substantiate these claims.

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## Conflict of interest

The authors declare that there is no conflict of interest regarding the publication of this article.

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