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Delayed Marriage and Its consequences w.r.t Reproductive Health: An Integrated Perspective of Ayurveda and Contemporary Science

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Abstract

Delayed marriage has become increasingly common due to educational, professional, and socioeconomic factors. Although it offers personal and financial stability, it significantly affects reproductive health. From a modern medical perspective, delayed marriage is associated with infertility, pregnancy complications, and genetic risks. Ayurveda, on the other hand, has a detailed description of marriageable age for both male and female by acharyas like Carak, Sushrut & Vagbhatta as well as emphasises timely life-stage transitions (Āśrama system), proper functioning of Śukra dhātu, and maintenance of reproductive vitality through balanced lifestyle and preventive care. This paper integrates modern medical science with Ayurvedic principles to analyse the impact of delayed marriage on reproductive health and suggests holistic strategies for prevention and management.

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KEYWORDS: Delayed marriage, reproductive health, infertility, Ayurveda, Śukra dhātu, advanced parental age.

1. INTRODUCTION

In traditional societies, marriage occurred at an early age, coinciding with peak reproductive capacity. In contrast, contemporary society witnesses delayed marriage due to career goals, financial planning, urbanisation, and changing cultural values.

From a biological viewpoint, human fertility has a natural timeline, especially in women. From an Ayurvedic viewpoint, timely marriage is essential for proper expression of Šukra dhātu and maintenance of Bala (strength), Ojas, and Prajājanana śakti (reproductive power).

Thus, delayed marriage is not merely a social change but a significant public health concern affecting future generations. sushrut's quote."पञ्चविंशो ततो बर्षे पुमान् नारी तु षोडशे समत्वगतवीर्यो तौ जानीयात् कुशलो भिषक्" that means female at 16yrs and male at 25yrs are supposed to be at appropriate age of conjugation.

2. OBJECTIVES

To study delayed marriage as a modern social trend.
To evaluate its impact on reproductive health through modern medicine.
To analyse the same from an Ayurvedic perspective.
To develop an integrated model for prevention and management.

3. METHODOLOGY

This is a narrative review study based on:

Modern medical literature on infertility and advanced parental age.
Classical Ayurvedic texts: Charaka Saṁhitā, Suśruta Saṁhitā, Aṣṭāṅga Hṛdaya.
Contemporary integrative medicine approaches.
Concept of Delayed Marriage
Modern View

Delayed marriage usually refers to:

Women: marriage after 30 years
Men: marriage after 35 years
This age exceeds the biologically optimal fertility window, especially for women.
Ayurvedic View
Ayurveda recognizes life in stages (Bālyā – Yauvana – Vrddhāvasthā).
The ideal period for reproduction is Yauvana avasthā, when:
Dhātus are strong
Agni is balanced
Ojas is abundant
Šukra dhātu is fully potent
Delayed marriage corresponds to entry into Vāta-pradhāna avasthā, where degeneration (kṣaya) begins.
Impact on Female Reproductive Health
Modern Perspective
Decline in Fertility
Ovarian reserve decreases after 30 years.
Egg quality declines significantly after 35 years.
Increased Pregnancy Complications

Gestational diabetes

Hypertension

Pre-eclampsia

Preterm delivery

Higher cesarean section rate

Genetic Risks

Increased incidence of chromosomal anomalies.

Ayurvedic Perspective

In Ayurveda, infertility due to delayed marriage can be understood through:

Šukra dhātu kṣaya – depletion of reproductive tissue

Vāta prakopa – leading to:

Irregular menstruation

Anovulation

Uterine dysfunction

Charaka states:

“Šukrain hi nāma sarva-dhātu-sārain”

(Šukra is the essence of all dhātus – C.S. Chikitsā 2/4)

With advancing age:

Dhātu-puṣṭi decreases

Ojas declines

Garbha-dhāraṇa śakti weakens

Thus, delayed marriage results in Bandhyatva (infertility) or Kṛcchra-garbhatā (difficulty in conception).

Impact on Male Reproductive Health

Modern View

Decline in sperm motility and morphology

Increased DNA fragmentation

Higher risk of autism and neurodevelopmental disorders in offspring

Gradual decline in testosterone

Ayurvedic View

Male infertility in delayed marriage can be correlated with:

Šukra kṣaya

Vāta and Pitta vitiation

Dhātu-agnimāndya

According to Suśruta:

“Kṣīṇa-śukraḥ klībah”

(Depleted semen leads to impotency/infertility – S.S. Sūtra 14)

Ageing increases Rūkṣatā (dryness) and Śoṣa (degeneration)—hallmarks of Vāta—affecting semen quality and sexual vigour.

Psychological and Psychosocial Impact

Modern View

Anxiety related to fertility

Stress of assisted reproduction

Marital dissatisfaction

Depression

Ayurvedic View

Mental stress causes:

Raja-Tama vṛddhi

Manasika doṣa prakopa

which further disturbs Hormonal balance (neuro-endocrine axis).

Ayurveda clearly states:

“Cintā śoka bhaya krodhah prajānāśana-kārakāḥ”
(Anxiety, grief, fear and anger destroy reproductive potential – C.S. Śārīra)

Societal and Demographic Impact

Modern Impact

Ayurvedic Correlation

Declining fertility rate

Prajā-kṣaya

Aging population

Vṛddhāvasthā prādhānya

Increased ART use

Need for Bija-śuddhi

Higher healthcare cost

Failure of preventive approach

Integrated Preventive Strategies

1. Education & Awareness

Modern: Fertility timeline education.

Ayurveda: Awareness of Brahmacharya–Grastha dharma and timely marriage.

2. Pre-marital & Pre-conception Counseling

Modern:

Hormonal profile

Ovarian reserve testing

Semen analysis

Ayurveda:

Daśavidha parīkṣā

Doṣa-prakṛti assessment

Bija-śuddhi chikitsā

3. Lifestyle & Diet

Modern:

Exercise

Weight management

Stress control

Ayurveda:

Dinacharyā & R̥tucharyā

Rasāyana therapy

Vājīkaraṇa chikitsā

4. Fertility Preservation

Modern:

Oocyte & sperm freezing

Ayurveda supportive role:

Rasāyana before conception to improve tissue quality

Examples:

Aśvagandhā

Śatāvarī

Kapikacchu

Gokṣura

4. DISCUSSION

Delayed marriage represents a conflict between social progress and biological reality. Modern medicine highlights the physiological risks, while Ayurveda provides a deeper understanding of age-related dhātu-kṣaya and doṣa imbalance. An integrative model combining:

Medical screening

Ayurvedic rejuvenation

Psychological counseling

can effectively minimize the reproductive risks of delayed marriage.

5. CONCLUSION

Delayed marriage significantly affects reproductive health in both genders. While it brings socioeconomic advantages, it challenges natural fertility limits. Modern medicine explains the biological decline, whereas Ayurveda interprets it as Śukra dhātu kṣaya and Vāta dominance of advancing age.

A combined approach of early awareness, timely counseling, preventive healthcare, and holistic lifestyle regulation is essential to protect reproductive health in the era of late marriages.

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