

# A Health Professional's Guide to Yoga

*Your basic understanding of yoga may help your patients*

Yoga has been practised for many centuries by many people, but only in the past 40 years has it begun its entry into contemporary culture in the Western world. It has attracted an upsurge in interest during the last decade. Between 1997 and 2002, yoga utilization increased almost 40 per cent in the United States.<sup>(1)</sup>

Chances are that some of your patients have been to a yoga class. This article will serve to shed light on some of the many questions you may have about yoga.

In a 1998 study on complementary and alternative medicine usage in the United States, two-thirds of respondents who practised yoga used it for wellness or prevention of disease, and one-half utilized it for specific health conditions.<sup>(1)</sup> Back and neck pain was the most common condition treated with yoga. In addition, it was revealed that those who practised yoga accessed other complementary and alternative therapies, including chiropractic, to a greater degree than non-practitioners of yoga.

## YOGA DEFINED

Yoga involves more than just physical postures, or asana, and encompasses ethical guidelines, meditation, breathing exercises, and more. Here in the West, however, we are usually referring to just the physical practice. Within the physical practice of yoga there are many different styles. In North America, the term hatha yoga is usually reserved for a more gentle, traditional form. Poses are moved into gradually, and held for long periods of time. This type of yoga is beneficial for most, particularly older patients, or people who are seeking stress relief or just beginning an exercise program. In ashtanga or "power" yoga, which is more vigorous and athletic, the poses flow into one another in a set sequence, with an emphasis on breath. It is best suited to younger or more athletic individuals. Bikram yoga, or "hot" yoga, is a set series of postures practised in a room heated to 38 degrees Celsius or higher. The increased physiological demands of a hot room and dehydrating conditions make it only appropriate for those patients with a high level of cardiovascular fitness. Iyengar yoga relies on props such as belts, blocks, chairs, pillows, and sandbags, and is suited particularly to those with special physical needs. As yoga's popularity increases, so do its new styles and variations. But, whatever the style, a typical yoga class will contain a component of breath work, or pranayama, physical postures, and meditation/relaxation.

## A YOGA ENDORSEMENT?

Yoga is an excellent activity for our patients to participate in. Yoga is not just about flexibility. Although flexibility is one component of a yoga class, many poses also build strength, balance, and proprioception. While current research has taught us the importance of the transversus abdominis muscles in lumbo-pelvic stability, and potential pelvic floor involvement in sacroiliac joint closure,<sup>(2)</sup> yoga teachers have long been teaching their students to activate these muscles via bhandhas, or energy locks, in order to contain the flow of pranic energy through the body.

There has been some positive research in the field of yoga. A large systematic review of the literature from 1985 to 2002 related to yoga's relationship to musculoskeletal and cardiopulmonary conditions found 120 studies, excluding anecdotal reports and case studies.<sup>(2)</sup> Many of the studies were published in international medical journals (e.g., British Medical Journal, Journal of the American Medical

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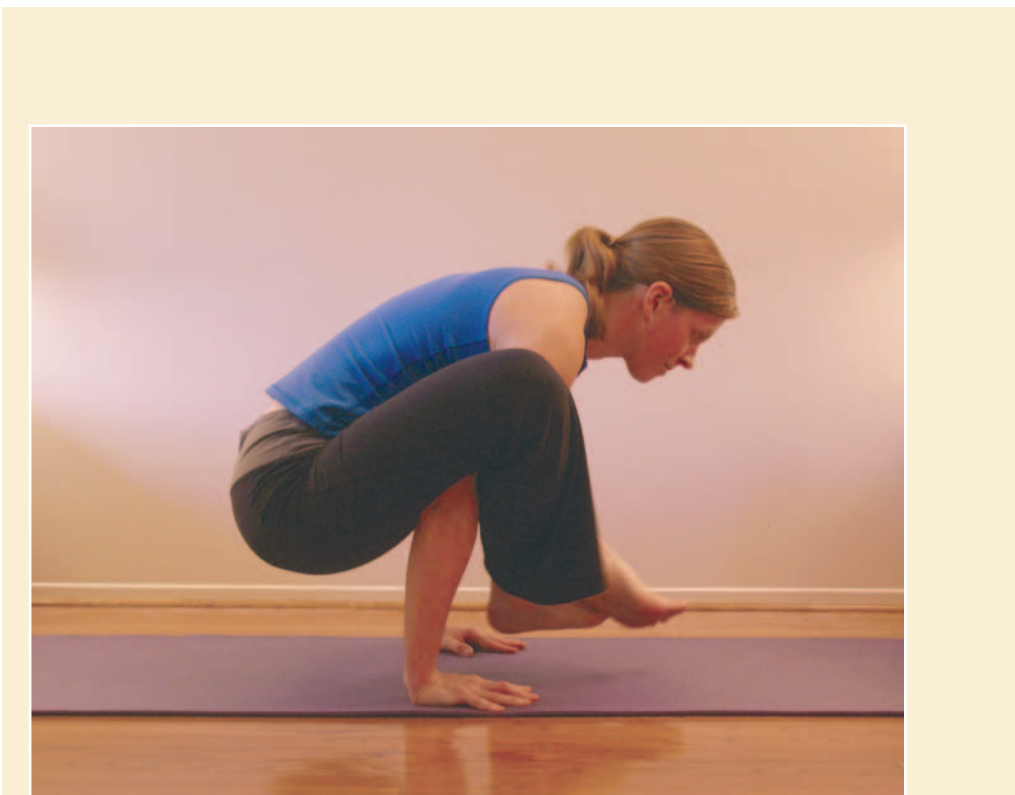
Association, The Lancet), and the remainder (approximately half) appeared in the Indian medical literature that conformed to international standards.

A 1994 study of yoga for treatment of osteoarthritis of the hands(2) compared no treatment to a once-per-week, eight-week program of specific yoga postures. The yoga intervention group showed a decrease in pain during activity, a decrease in tenderness, and an increase in finger range of motion. A preliminary 1998 randomized controlled trial of a yoga-based intervention for carpal tunnel syndrome(2) compared those who practised a series of specific postures for 1.5 hours twice a week for eight weeks to a control group (wrist splint). The yoga group demonstrated increased grip strength and decreased pain. An interesting pilot study examining the effect of hatha yoga on women with hyperkyphosis (>40 degrees kyphosis)(3) found improvements in timed sitting-to-standing from a chair, and picking up a penny from the floor, as well as longer reach. In addition, subjects reported improved postural awareness and wellbeing, and an increase in perceived physical functioning.

A recent study investigating the use of yoga for chronic low-back pain(3) compared a 16-week yoga regimen to an educational program. The yoga group demonstrated significant reductions in pain intensity, functional disability, and pain medication usage at the three- and four-month follow-up assessments.

### THE YOGA TEACHER

The yoga community is working very hard to establish standards for yoga teachers. In North America, the Yoga Alliance(3) has set standards for hours of instruction for teachers in not only yoga techniques and methodology but also anatomy and physiology. Still, these requirements are minimal: 20 hours of anatomy and physiology for a 200-hour certification, and 35 hours for a 500-hour certification. The list of teachers and studios posted on the Yoga Alliance website is far from comprehensive, and is not a guarantee of quality. The Iyengar yoga tradition has even stricter requirements for teacher training, spanning a three- to five-year



*Bhujipidasana is an arm balancing pose.*



*Urdhva dhanurasana, a yoga pose that obviously increases flexibility.*

period.

Recommend that your patients seek out teachers who have undergone at least the amount of recommended training set out by the Yoga Alliance, and that they avoid teachers who became certified after a one-week or weekend seminar.

### PREPARING PATIENTS FOR YOGA

It is important for us as health professionals to be able to advise our patients

on contraindications to certain poses, and to urge them to disclose health concerns and injuries to their yoga teachers. In a yoga studio or health club setting, participants often attend drop-in classes. The teacher may not know the student, or the student may be in a class that is too advanced. Beginners should therefore sign up for pre-registered classes. In any one class, a student may be required to flex, extend, internally rotate, externally rotate, and

turn upside down many parts of their bodies. By educating your patients on specific movements they should avoid, you will be saved from learning all the hundreds of possible yoga poses. This includes cautioning that they not bear their full body weight on their head, such as by doing a headstand, or on their hands alone, such as in a handstand or various arm balancing poses.

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If you do want to find out more about yoga poses, an excellent resource is [www.yogajournal.com](http://www.yogajournal.com) where you can search by either the English or Sanskrit name, by contraindication, or for relief and rehabilitation of certain conditions.

When considering bikram, also known as hot yoga, be aware of the potential effects of your patients' medications on temperature regulation and hydration.

Yoga has gained tremendous popularity in the West. It is on our televisions, in our gyms, and in our patients' workplaces. Yoga offers many health benefits, ranging from relaxation, to increased strength and flexibility, to the possible alleviation of certain musculoskeletal conditions.

When we have a clearer understanding of what it is our patients are doing after they leave our office – and that might be going off to a yoga class – we are better able to be a more fully participating partner in their health. •

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*Utkatasana aims to strengthen.*



*Both strength and flexibility are targeted in the virabhadrasana pose.*