



Complementary Iyenger yoga Approach Releasing Lower Back Pain

Dr. Anup Lata (B.A.M.S., Msc yoga and preksha meditation, M.P.H)

Assistant professor (swasthavritta Department)

Satya Ayurvedic Medical college ,Sisar Khas ,Meham

Abstract

Low back pain is a significant and common public health issue. Low back pain (LBP) is a public health issue that has reached epidemic proportion. Most of patients suffering from back pain practice yoga. Astang yoga comprised of eight limbs Yama (rule of moral conduct),Niyama(rule of personal conduct),Asana(postures),Breath withdrawal,Dharma(concentration),Dhayana(meditation)and Samadhi(self-realization).out of many style of yoga, Iyenger Yoga has applied yoga pose emphasis on precise structural alignment and has a good result in low back pain.

Keywords: Back pain; Yoga; Stiffness and Pain

INTRODUCTION

Low back pain is a significant public health problem and one of the most commonly reported reasons for the use of Complementary Alternative Medicine and yoga. 70–85% of the population has had at least one episode of back pain sometime in their life (Andersson, 1999). Astang yoga is comprised of eight limbs including moral injunctions, rules for personal conduct, postures, breath control, sense withdrawal, concentration, meditation and self-realization (Taimini, 1986). Of the many styles of yoga taught in the US, Iyengar yoga is the most prevalent (Signet Market Research, 2000). Iyengar yoga is based on teaching of yoga master, B.K.S.IYENGER (1976) who has taught yoga for 70 years and has applied yoga with use of props. Iyengar yoga also descended from Astang yoga and incorporates all aspects of Astang yoga into practice of postures and breath control.

Complementary yoga therapy intervention in LBP (Low Back Pain)

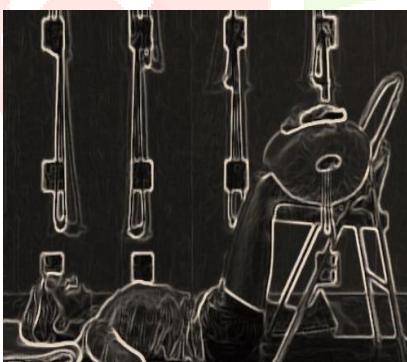
Iyenger yoga therapy is based upon teachings of B.K.S IYENGER who has taught therapeutic variation of classical yoga to various health issues. Iyenger yoga therapy would progressively rehabilitate LBP by addressing imbalances and stiffness in the musculoskeletal system that affect spinal alignment and posture. The wide range of postures and supportive props used in this methods to enhance flexibility, mobility and stability in all muscles and joints that affect blood circulation in spinal area . A

varieties of props were used including sticky mats, belts, blocks, chairs, blasters
And bench.

1. Chair vpritkarni with weight on legs and on abdomen
2. Prone Savasana with weight on buttocks
3. Prone Akunchanasana (leg bent to the side) 3-5min each side
4. Supta Pavanmuktasana—1 knee to chest, both knees to chest
5. Supta Padangusthasana I and II—bent knee and straight leg with support of the wall; with assisted traction.
6. Adho Mukha Virasana over bolster
7. Prasarita Padottanasana on bench with traction on the upper thighs (concave back)
8. Bharadvajasana (chair)
9. Supported Baddha Konasana
10. Savasan



Chair with sandbag and bolsters



Place a bolster on my shins, this will help pad the shin bone and also help disperse the weight you are setting on top of it more evenly on the shins



Chair vpritkarni with weight on legs and on abdomen

Place a weight on the frontal hip bones/lower abdomen. This can feel soothing on the low back and can calm the lower spinal muscles.



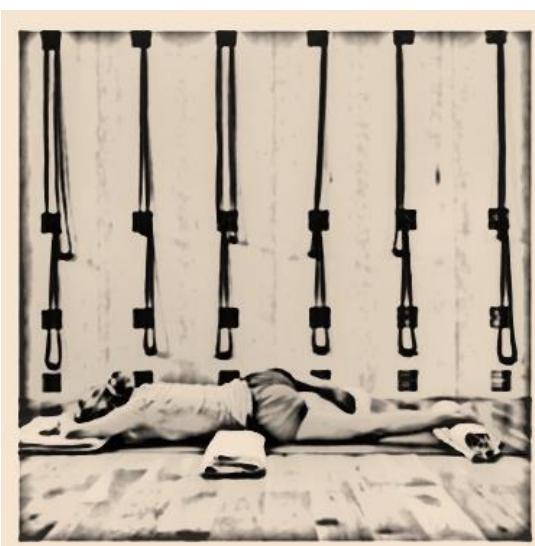
Prone Savasana with weight on buttocks

Place a rolled blanket beneath my ankles, a trifold blanket under the lower abdomen and a folded blanket for the head. The blanket that is under the abdomen should help lift gently the contents of the abdomen up and to spread the lower back muscles and sacrum. If the fold is too much it will feel hard and not soothing. If it is too small, it will not help soften the lower back. You may have to fuss a bit to find the right amount of 'loft' for under the abdomen and the right placement. What you are looking for is for the lower back muscles to soften and spread.



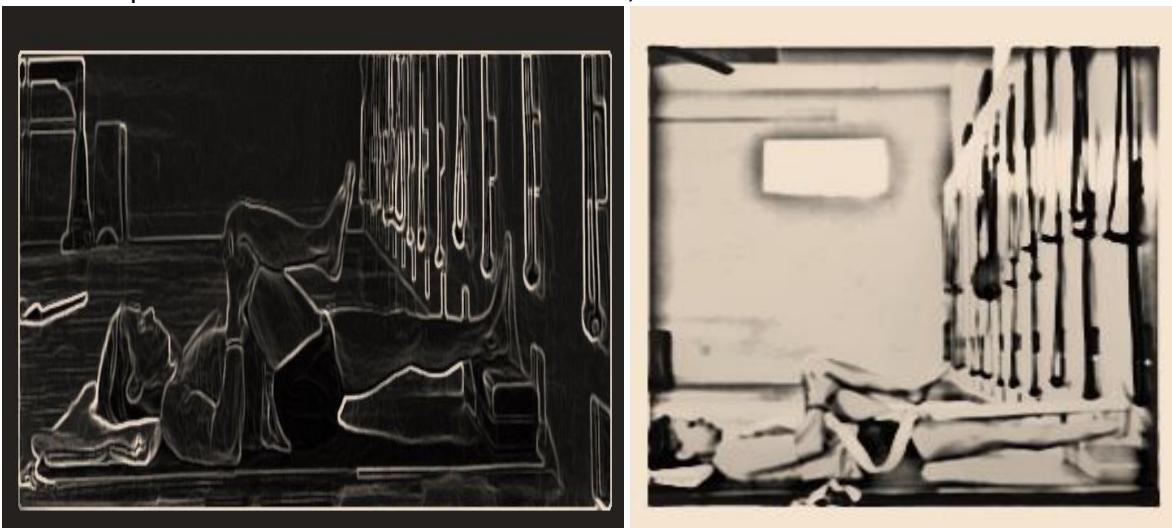
Focus, placing my ankles on the roll, feet a minimum of hips width, they can be wider, adjust the blanket under the abdomen, take time to lengthen legs. Rolling the front of the thighs in will help spread the sacrum and lower back.

Prone Akunchanasana (leg bent to the side) 3-5min each side



The abdomen should turn away from the bent leg to face the floor; you can use a small folded blanket still under the abdomen to keep lower back soft.

Supta Pavanmuktasana—1 knee to chest, both knees to chest

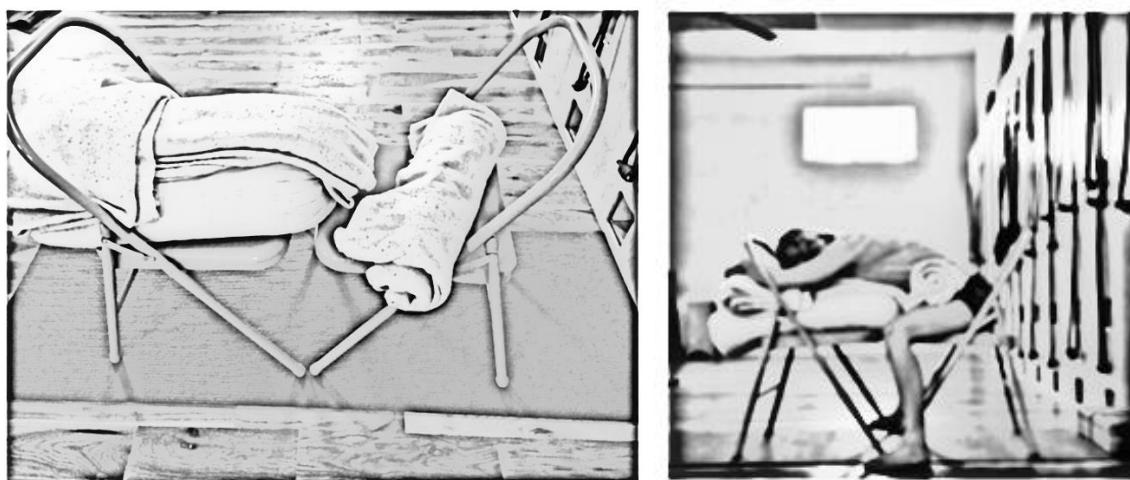


Pavanmuktasana with belt traction, this variation helps to release the femur down. It also creates more space in the hip socket and sacrum. Same Asana can be done with both knees to the chest.

Supta Padangusthasana I and II—bent knee and straight leg with support of the wall; with assisted traction.



Adho Mukha Virasana on bolster (on chairs) 3-5min



You can also do from kneeling on the floor but this variation sitting on a chair is much more soothing to the lower back.

Prasarita Padottanasana on bench with support (concave back)



Bharadvajasana (chair)



Supported Baddha Konasana



Savasan



The names of postures are in Sanskrit. Pictures of the poses with props can be found in IYENGER YOGA FOR HOLISTIC HEALTH.

THESE 13 Poses from the following categories were used: supine, seated, standing, forward bends, twists, and inversions. No back bending poses were introduced at this stage of recovery to reduce the risk of re-injury. Back bending poses require a proper progression of musculoskeletal retraining and can be harmful if done without implementation of complex musculoskeletal actions. . Initially, restorative poses were done to relieve pain and muscle tension. Then poses were introduced that lengthened muscles attaching to the spine and pelvis in positions with the spine fully supported. Next standing poses were introduced to open the hips and groins. Twists were taught to access the deeper layer of back muscles to help realign the vertebra, increase intervertebral disc space and decrease possible impingement of nerve roots. Inversions were included to reverse the compressive effects of gravity on the intervertebral disc space.

Expected outcomes after proper practice of Asana

Chronic pain disrupts performance or function of seven general areas of normal activities.

After Practice of these asana, there is reduction in back pain. These poses engage the core, reducing strain on spine and preventing future pain. Slow, mindful breathing and movements help release tension and stress related pain. The use of props allows us to modify poses safely without straining on body.

CONCLUSON

Iyengar yoga can be an effective treatment for chronic low back pain, leading to significant reductions in pain intensity, functional disability. After continue practice of Iyenger yoga, there is significance improvement in daily life activities.

References

Iyengar BKS. *Light on yoga*. New York: Schocken Books; 1976.

Iyengar BKS. *Tree of yoga*. Boston, MA: Shambala; 1989.

Iyengar National Association of United States (IYNAUS) Certification Committee, IYNAUS Certification Manual 2002.

Jacobs BP, Mehling W, Avins AL, Goldberg HA, Acree M, Lasater JH, Cole RJ, Riley DS, Maurer S. Feasibility of conducting a clinical trial on hatha yoga for chronic low back pain: methodological lessons. *Altern Ther Health Med* 2004;10:80–3.

Jensen MP, Turner JA, Romano JM, Lawler BK. Relationship of painspecific beliefs to chronic pain adjustment. *Pain* 1994;57:301–9.

Jerome A, Gross RT. Pain disability index: construct and discriminant validity. *Arch Phys Med Rehabil* 1991;72:920–2.

Kankaapa "a" M, Taimela S, Airaksinen O, Hanninen O. The efficacy of active rehabilitation in chronic low back pain. Effect on pain intensity, selfexperienced disability, and lumbar fatigability. *Spine* 1999;24:1034–42.

Kori SH, Miller RP, Todd DD. Kinisophobia: a new view of chronic pain behavior. *Pain Manag* 1990;35–43.

Lethem J, Slade PD, Troup JD, Bentley G. Outline of a fear-avoidance model of exaggerated pain perception—I. *Behav Res Ther* 1983;21:401–8.

Mayer TG, Kondraske G, Beals SB, Gatchel RJ. Spinal range of motion. Accuracy and sources of error with inclinometric measurement. *Spine* 1997;22:1976–84.

Images are taken from Nashville Yoga Studio site