

This article is based on excerpts from the book on Yoga and Ayurveda by A. G. Mohan and Indra Mohan (Shambhala Publications, summer 2004). The case studies have been selected from a number of case studies in that book and are reproduced here with their kind permission.

## Abstract

*According to Yoga and Ayurveda, the purpose of therapy is to act against illness or disease so that the human system is restored to balance. There is no doubt that the human system is a complex one, and thus, by its nature, the subject of therapy is often complex. As humans, our inner balance is influenced by six variable factors—diet, lifestyle, environment, body work, breathing techniques, and our thought processes. These factors are interdependent and the connections between them have been analyzed and discussed in the classical texts on Yoga and Ayurveda. Although they place a slightly different emphasis on each of these factors in terms of their relevance to maintaining or restoring health, Yoga and Ayurveda both recognize that we can only alter our state of health or restore our balance by addressing these six factors and the connections between them. Therefore, to approach any therapeutic situation effectively, both Yoga and Ayurveda must be considered. Depending on the nature of the imbalance being treated, one of them will often play a primary role in the treatment and the other will act as a support.*

## What Is Therapy?

We use the word *therapy* in place of what Yoga and Ayurveda call *cikitsâ*. This is a Sanskrit word that means “to oppose or act against disease.” Caraka, the author of the most respected treatise on Ayurveda, defines disease as *duhkha*.<sup>1</sup> *Duhkha* is a feeling of not being at ease. The word “dis-ease” itself implies this. It is a feeling of mental constriction, of circumstances being unfavorable to us. It could manifest in many ways, from anger to depression. The opposite is the feeling of mental expansion, of lightness and freedom (*sukha*) that we feel when circumstances are, in our judgment, favorable to us. We continually alternate between these two states throughout our lives. All our experiences, past or present, have the potential to bring about these feelings of expansion or constriction of our mental space, though the intensity varies depending on the experience.

We are all constantly trying to minimize the *duhkha* in our lives. Our ultimate goal is to remove all *duhkha*— so that we can always feel at ease regardless of the external circumstances, including those of our bodies. Patanjali's *Yoga-Sûtra* makes the point that being at ease is a state of the mind, not the body. According to the *Yoga-Sûtra*, all of us, even those we would regard as being "healthy," are in need of *cikitsa* or therapy because most of us are never completely free from *duhkha* or disease. The *Yoga-Sûtra* says that it is possible to always be without any *duhkha*,<sup>2</sup> and it describes the steps we can take to move toward this goal.<sup>3</sup>

The state of our mind is inextricably linked to that of our body. Any disturbance of our physical structure or function is reflected as a lack of ease in our mind. In fact, with the exception of a few extraordinary human beings, most of us are incapable of being mentally at ease in the face of physical illness. As our mental well-being is tied in with our physical well-being, any approach to relieve dis-ease must take into account this connection. That is why Ayurveda first deals with the prevention and treatment of physical illness and then moves to the consideration of mental well-being. On the other hand, to practice Yoga to achieve mental freedom, it is profoundly helpful to be physically healthy. Therefore, the *Yoga-Sûtra* tells us that the practice of the various disciplines comprising the eight limbs of Yoga must not be at the expense of the body: It must not disturb our physical health.<sup>4</sup> This means we must make sure our body and mind function in as balanced a manner as possible before we look toward higher goals.

Just like any other object in this world, our body has various qualities and functions. *At the physical level, health is merely the balanced expression of the qualities and functions of the body.*<sup>5</sup> Therapy consists of restoring balance to these qualities and functions. In other words, therapy involves taking steps to resolve any disruption in function or return the expression of body qualities to their normal, balanced level.

### **Constitution (prakriti)**

What then constitutes "balance" of qualities and functions in our body? What is imbalance or abnormality? Objectively, the characteristics or qualities that most people display are considered as coming within the normal range. For example, most healthy people of a certain height fall within a particular range in weight. This is the normal range of weight for them. However, balance and imbalance are, to some extent, individualistic. People vary within this range of normalcy (which is

why normalcy is always expressed as a range), and it is common to find healthy people outside this range of weight by a few pounds. Ayurveda expresses such individual variations in healthy people as their *prakriti* or constitution.<sup>6</sup> In other words, a variation in any characteristic, if not large enough to be a cause or manifestation of ill health, is simply a part of your individual constitution. It can help to indicate inherent tendencies toward ill health. The reason for “assessing your constitution” is so that you can determine where these tendencies toward imbalance are greatest in you. Knowing this, you can be careful not to aggravate the imbalances already in your body.

### **The Tools of Therapy**

There is no doubt that the human system is a complex one so that, by its nature, the subject of therapy is often not simple. There are six factors that affect the qualities and functions in our body and mind, and they can be used to restore balance. They are diet, environment, lifestyle, body work (in the form of *âsana*), breathing techniques (in the form of *prânâyâma*), and our thought processes. (*Prakriti* is another important factor that affects our health, but unlike these six, it cannot be modified.)

These six factors are interdependent and the connections between them have been analyzed and discussed in the classical texts on Yoga and Ayurveda. Although they place a slightly different emphasis on each of these factors in terms of their relevance to maintaining or restoring health, Yoga and Ayurveda both recognize that we can only alter our state of health or restore our balance by addressing these factors and the connections between them. Therefore, to approach any therapeutic situation effectively, both Yoga and Ayurveda must be considered. Depending on the nature of the imbalance being treated, one of them will often play a primary role in the treatment and the other will act as a support.

In the following sections, we consider the connections between Yoga and Ayurveda. A proper understanding of these connections is essential for the effective treatment of imbalances. Generally, imbalances can be divided into two broad categories: structural imbalances and functional imbalances.

### **Structural Imbalances**

Essentially, *âsanas* are movements of the body, or moving into and remaining in specific positions, practiced with appropriate breathing. They play the major role in the treatment of structural imbalances. We The state of our mind is inextricably linked to that of our body. To approach any therapeutic situation effectively, both Yoga and Ayurveda must be considered. We use the phrase “structural imbalances” to refer to imbalances in the body’s structure, such as muscular strength or flexibility, skeletal alignment or neuromuscular coordination, or other mechanical problems of the musculoskeletal system. It follows from the nature of such imbalances that bodily movements are most important for restoring balance. Specifically regulated breathing supports the movements we make. Depending on the particular problem, we decide the type of movements to be made. As the different components of the breathing cycle complement different types of movement, we then decide which of those components is necessary to enhance the effect of the movements, or decrease any unwanted effects that some of the movements might have. The four components of the breathing cycle are inhalation, hold after inhalation (retention), exhalation, and hold after exhalation (suspension). For example, when we bend forward from *samasthiti* into *uttanâsana*, we do it on exhalation. This is because the upward movement of the diaphragm and contraction of the abdominal area that naturally occur on exhalation complement the contraction of the front surfaces of our body that occurs when we bend forward.

### **Functional Imbalances**

Diet, breathing, and the mind are more important in dealing with functional and psychological imbalances. Broadly speaking, functional imbalances are those that involve a disruption to the normal operation of body systems other than the neuro-musculoskeletal systems. Imbalances in the functioning of these other body systems require primary consideration be given to the diet of the person to see if there is a contributing or causative factor that we can remove, or at least minimize.

The external world influences our body in many ways, and food is the most important one. We cannot ignore food because it has a direct influence on the qualities and functions of our body, and to some extent on the mind. We take it in from outside and it becomes part of our body through a process of transformation. Therefore, appropriate food is indispensable for both health and illness. It is difficult to make significant progress in reducing disease, or maintaining good health, unless we have a balanced, appropriate diet. In many cases, inappropriate food may be supporting or

aggravating the disease, so changing a person's food habits will be a large part of their treatment. That is why Ayurveda suggests that, in many ways, food is medicine.

Though both movements, or moving into and remaining in positions, and breathing are integral to the practice of *âsanas*, breathing is more important than movement in treating functional imbalances like high blood pressure or diabetes, or psychological disorders like depression and anxiety. Therefore, we need to choose a body position in which the person is able to breathe freely, emphasizing the appropriate component of the breathing cycle. Take the example of high blood pressure, a condition for which it is generally necessary to emphasize extended exhalation. In designing an *âsana* practice for someone with high blood pressure, we may include *pashcimottânâsana* in the case of an otherwise fit young woman. However, in the case of an elderly man it may be preferable to bend forward seated on a chair. In both cases, since the emphasis should be on extended and complete exhalation, these movements and body positions are chosen to make such breathing possible. They should also have the maximum effect for the person, considering his or her capabilities or limitations.

Nowadays, it is well known that the mind affects various aspects of body function. The most direct way to deal with problems in the mind is, of course, to change the thought process itself. The breath is a powerful tool for influencing the mind (in *prânâyâma* and *âsana*). Bodily movements also can be of help, but, again, they are secondary to breathing and meditation.

### **Diet, Breathing, and the Doshas**

Diet and breathing have a direct connection with the three *doshas* (*vâta*, *pitta*, and *kapha*). The classical texts on Ayurveda explain in detail how food affects the *doshas* and various other body qualities and functions. Classical Yoga texts explain the connection between the various types of *prânâyâma* and the three *doshas*.<sup>7</sup> Specific types of *prânâyâma* can be used to reduce the qualities of particular *doshas* when they are out of balance in the body. These texts also relate breathing to the qualities of heat and cold in the body. They classify the various types of *prânâyâma* as heating and cooling, and also suggest that inhalation through the right nostril is heating, while inhalation through the left nostril is cooling.

The specific connection of diet and breathing with body qualities and functions is an important reason why they play a more important role than body positions and movements in dealing with functional imbalances.

### **Âsanas and the Doshas**

Generally, Yoga and Ayurveda do not directly connect body positions with the *doshas*. Ayurveda does not deal with *âsanas* in detail. It restricts itself to recommending exercise as a component of several types of treatment. Classical texts on Yoga, like the *Hatha-Yoga-Pradîpikâ*, list several *âsanas* and also list their benefits in terms of Ayurveda (using the concept of the *doshas*, the same terminology for diseases, and the same list of body qualities and functions).<sup>8</sup> However, they generally only state that an *âsana* can help restore balance among all three *doshas*, or list some diseases that are explained in Ayurveda.

The important question is, does the form of the *âsana* alone confer the therapeutic benefits, or is it the breathing that is more important? In some of the classical Yoga texts, sometimes statements are made to the effect that a particular *âsana* will cure a particular disease. This *asana*-disease correlation is usually based on the simple anatomical grounds that disorders of organ systems located in the areas worked upon by the *âsana* are sometimes cured by the *âsana*. While this may be true to some extent, simple physical stimulation of parts of the body is not the focus of *âsana* as a therapy and oversimplifies the role that *âsanas* play in addressing many disorders. Further, it is questionable whether a person suffering from the diseases mentioned in the texts would be able to do the *âsanas* listed if their classical form were rigidly adhered to. Even more doubtful is whether a sick person would benefit from such strenuous practices. It is important to note that commentaries on these texts generally explain that these *âsanas* should be learned under the guidance of a teacher.

In addition, the recommendations made by the texts are mostly worded so as to inspire practitioners of Yoga to practice with greater effort—they are not directed to a sick person. Much of their value is preventative. It is also worth remembering that the texts that list these connections are in a poetic form and often highly exaggerated. You will find that they claim that several *âsanas* will “cure all diseases.”<sup>9</sup> This has more to do with the style of their composition than their content, so they should not be taken literally.

## **Agni Connects Âsanas, Prânâyâma, and Diet**

The importance of *agni* (fire element) is universally acknowledged by both Yoga and Ayurveda. The primary purpose of all treatment, and an important goal of the practice of *âsanas*,<sup>10</sup> is to keep the *agni* functioning well. Here again, breathing is directly related to *agni* rather than specific types of movement. Inhalation helps to increase *agni* and activates metabolism, rather like fanning the flames of a fire. Exhalation, being a natural process of removal, helps to eliminate the toxins and wastes that dull the *agni*, and thus makes it possible for the *agni* to function better. For many functional imbalances, it is important to ensure that exhalation is proper, even if inhalation is the component of breathing to be emphasized. This is because the components of the breathing cycle are interdependent and modification of one component has an effect on the others.

### **Case Studies**

The case studies that follow have been included to illustrate how the principles discussed in this article can be applied in a practical way. The first case study deals with a structural imbalance (frozen shoulder) and the second case study deals with a functional imbalance (constipation). Before each case study, we have included some more specific explanation of the principles forming the basis of the approach taken for each of the conditions.

#### **1. Frozen Shoulder**

While the six variable factors mentioned above are relevant in maintaining or restoring health, movement, and therefore *âsana*, plays the major role in treating structural imbalances like frozen shoulder. In deciding what to include in developing an *âsana* program as therapy for a specific condition, there are a number of important steps. They are:

Case Study 1 - Frozen shoulder	
<b>1</b>	<p style="text-align: center;">Repeat 6 times</p>
<b>2</b>	<p style="text-align: center;">Repeat 6 times</p>
<b>3</b>	<p style="text-align: center;">Repeat 6 times</p>
<b>4</b>	<p style="text-align: center;">Repeat 6 times</p>

- Knowing which movements and breathing will be useful for that condition
- Knowing the progression to be followed in relation to movement and breathing
- Observing and assessing the characteristics of the person
- Determining the intensity of the problem for that person
- Deciding the starting point, broad outline of the *âsana* sequence, and the required personalization
- Deciding what modifications to the sequence or program are necessary as a result of observation and assessment as the person continues to practice

Vanessa was 48 years old when she came to see A. G. Mohan (Mohan). She was a physician at a leading hospital, with a busy private practice as well. The range of movement of her left

shoulder had gradually decreased over a period of six months to the point where she found herself unable to lift her arm more than a few inches above shoulder level. She was healthy in all other respects. She described herself as a classical case of frozen shoulder and she wanted to see if Yoga could help her.

In such cases, we have to restrict the range of arm movement to what the person is comfortable with. Later, as the condition improves, progressively greater ranges of movement can be introduced. In fact, it is usually possible to increase the range of movement to some extent within each session. The improvement, however, may not last for long after a single session; the benefit accrues over a period of time. Vanessa found raising her left arm from the front much easier than raising it from the side. Mohan suggested a practice which incorporated gradually increasing movement of her left arm. Her back was quite strong, but her upper back was stiff. So, he also suggested some simple arching movements to work on her upper back. The importance of staying focused on her breathing and deep extended breathing were two other vital components of her practice.

Ayurveda views this condition as arising from a block in movement, a characteristic of *vâta*, caused by cold, attributed to *kapha*. Therefore, Mohan recommended that she massage the affected area with warm oil and have a warm shower afterward.

Vanessa was slightly surprised that the *âsana* practice he gave her was so short and that his other suggestions were so simple. She originally came to Mohan with a very different idea about Yoga. She practiced regularly and sincerely, however, and was pleasantly surprised by the improvement in her shoulder.

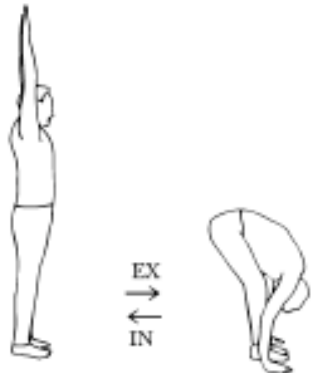
## **2. Constipation**

In Ayurveda, movement is regarded as a quality of *vâta*, and thus most body functions involving movements are categorized under *vâta*. The function of bowel movement is, therefore, attributed to one of the divisions of *vâta*, called *apâna-vâta*. *Apâna-vâta* is responsible for those functions involving expulsion of matter from the lower part of the body—for example, excretion and menstruation.

Regularizing the diet forms an important part of the approach to relieving constipation. Without a balanced, regular diet, other measures may afford only temporary relief. Consideration of the *agni* of the person is also important in deciding the appropriate diet changes. The presence of associated symptoms, like headache, may indicate specific imbalances of the *agni*. In such cases, the use of appropriate medicinal herbs can also be beneficial.

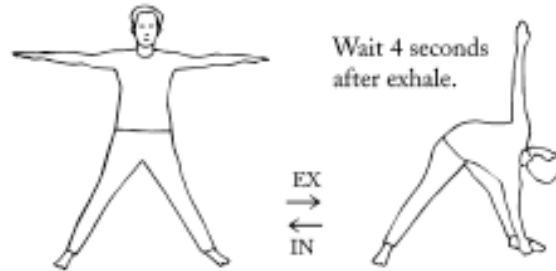
## Case Study 2 - Constipation

**1**



Exhale 8 seconds. Repeat 8 times.

**2**



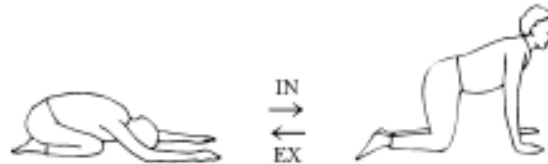
Exhale 8 seconds. Repeat 8 times each side.

**3**



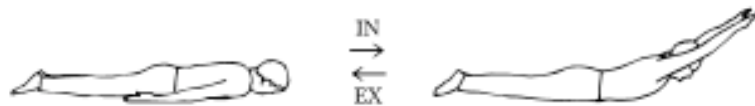
Rest

**4**



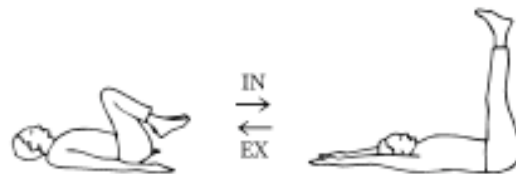
Repeat 8 times

**5**



Repeat 8 times

**6**



Repeat 8 times

**7**



Rest

**8**



Nadisodhana Pranayama. 12 breaths. Ratio 6:0:12:6.

In the practice of *âsana* and *prânâyâma*, we aim to improve the functioning of the *apâna-vâta* by movements and breathing. Exhalation works on the lower abdominal area and is also, by its nature, a process of removal. Therefore, in the case of constipation, we generally emphasize deep and long exhalation in *âsana* and *prânâyâma*. The use of exhalation also relaxes the person and helps in mentally letting go.

Rajan, 44 years old, was a senior executive. He told Mohan he had constipation that was associated with a feeling of discomfort and mild stomach pain at times. The discomfort and pain were relieved following a bowel movement, but gradually returned later. He was of average height, with a slight paunch. He was not used to regular exercise, although recently he had been going for a walk three or four times a week. He said that he was fond of hot and spicy food, especially pickles.

Rajan was a classical example of how diet can cause constipation. As he talked about his diet, it became apparent that he was eating very spicy food in all of his meals. This excess of heating food in his diet was disturbing his *agni*. Reducing this dietary imbalance was the cornerstone of the changes Mohan suggested in his lifestyle. Rajan was open to changes, and with his active participation it was possible to work out a suitable diet for him.

His new diet contained fewer spices and more bitter and astringent foods. He also had to remember to make sure that his food was fairly light and easy to digest. He was consuming a lot of yogurt and Mohan suggested that he should have buttermilk (Ayurveda, not commercial) instead. He also had to avoid potatoes and pickles and include more cooked, green vegetables in his diet. Instead of the deep-fried snacks he was used to having, he began to eat some fruit.

In Rajan's case, the practice of *âsanas* and *prânâyâma* played a supporting role (see the Case Study 2 figure). Ayurveda was the key to correcting his problem. He noticed significant improvement in a little over a month. His stomachache and discomfort virtually disappeared and his bowel movement was much easier and more frequent. However, he found that when he was careless with his diet the problem sometimes recurred.

*Vina and Giles would like to express their gratitude to the Mohans and Shambhala Publications, Inc., for granting them permission to use the material from the book.*

## Endnotes

1. Sharma, Ram Karan, and Vaidya Bhagwan Dash. *Agnivesa's Caraka Samhitâ*, Vol. 2. Varanasi, India: Chowkhamba Sanskrit Series, 1977, *nidânasthâna* I.5. Also refer to the commentary of Cakrapâni Datta on these verses.
2. Leggett, Trevor. *Sankara on the Yogasûtrâ-s*. New Delhi, India: Motilal Banarsiddas, 1992, *sûtra* II.25.
3. Ibid., *sûtra* II.26.
4. Ibid., *sûtra* II.1, commentary of Vyâsa.
5. Bhisagratna, K. K. *The Susruta Samhitâ*, Varanasi, India: Chowkhamba Sanskrit Series, 1963, *sûtrasthâna* XV.41.
6. Murthy, R. Srikantha. *Vâgbhata's Ashtângahrdyam*. Vol. 1. 5th ed. Varanasi, India: Krishnadas Academy, 2001, *sûtrasthâna* I.9–10. Also refer to the commentary of Arunadatta on these verses.
7. The Adyar Library and Research Centre. *The Hathayogapradîpikâ of Svâtmârâma*. Chennai: The Theosophical Society, 1972, II.35–77. Refer to the commentary of Brahmânanda on these verses for further explanation of the link between *prânâyâma* and Ayurveda.
8. Ibid., I.18–54. Rai Bahadur Srisa Chandra Vasu, *The Gheranda Samhitâ* (New Delhi: Munshiram Manoharlal Publishers, 1996), chapter II. Rai Bahadur Srisa Chandra Vasu, *The Siva Samhitâ* (New Delhi: Munshiram Manoharlal Publishers, 1996), chapter III.
9. *The Hathayogapradîpikâ of Svâtmârâma*, op. cit., description of *mayurâsana*, *padmâsana*, and *gorakshâsana*. *The Gheranda Samhitâ*, op. cit., description of *padmâsana*, *bhadrâsana*, *simhâsana*, *matsyâsana*, *mayûrasana*, and *bhujângâsana*. *The Siva-Samhitâ*, op. cit., description of *padmâsana* and *svastikâsana*.
10. *The Hathayogapradîpikâ of Svâtmârâma*, op. cit., II.78.

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