EFFECT OF CERTAIN YOGIC ASANAS ON THE PELVIC CONGESTION AND IT'S ANATOMY

SATYENDRA PRASAD MISHRA and R.H.SINGH

Institute of Medical Sciences, Banaras Hindu University, Varanasi 221 005, India.

Received: March28, 1984 Accepted: July 28, 1984

ABSTRACT: 20 patient including 6 females and 14 males, between 20 years to 30 years of age, with complaints of chronic constipation refractory to various treatments by medicines, belching, sense of heaviness in the lower abdomen or pelvic region, offensive discharge from vagina (leucorrhoea) and bleeding per rectum with discomfort in the region of perineum were observed under instructions and supervision to practice certain yogic exercises for a period of three years. Viparitakarani, Goraksa asana, Uddyana Bandha and Mula Bandha (Nauli, Perineal Shrug) when practiced, relieved these patients were asked not to take any purgatives or laxatives. It was concluded from the present study that these complaints which can be ascribed to poor hemodynamics in the region of pelvis and perineum disappeared and patients showed obvious improvement after practicing these Asanas which reduced pelvic congestion and increased blood flow to the pelvic viscera i.e rectum, anal canal, prostate, uterus, vagina and levator ani and perineal muscles.

Introduction

In the present study efforts were made to use some of the yogic Asanas and Mudras as curative measures for certain diseases which were supposed to be because of pelvic venous congestion. Such mentions are there in the Upanisads, Hathayoga pradipika, Gorakspaddhati and Siva Samhita.

Materials and methods

Six female and 14 male patients between 20 years to 30 years of age were selected for the present study. These 20 patients were

divided in three groups depending on the complaints:

Group I with

- 1) Chronic constipation.
- 2) Belching and dyspepsia.
- 3) Heaviness in lower abdomen and pelvis

Group II with

- 1) Offensive discharge from vagina.
- 2) Discomfort in perineal region.
- 3) Heaviness in lower abdomen and pelvis.

*Sri Lal Bahadur Shastri Govt. Ayurvedic College, Handia, Allahabad. U.P. (India)

Group III with

- 1) Perineal discomfort.
- 2) Bleeding per rectum

All the patients were trained to practice Viparita Karani, Goraksasana, Uddyana Bandha and Nauli or Mula Bandha. They were asked to develop a habit of practicing perineal shrug as done in Nauli or Uddyana Bandha when ever they were conscious of the exercise i.e. sitting, standing, lying on bed whether at home or out side.

They were asked not to take any purgatives or laxatives and during severe constipation they were either asked to observe fast for the day or to have light food and fruit juice, they were asked to prefer curd over milk. These patients were observed regularly for a period of three years and improvements were recorded.

Observations and Discussion

All the 6 females and 12 out of 14 males showed obvious improvement. The observations being subjective the patients were asked improvements in term of %. After practicing these Asanas for a period of one year most of the patients had 20 to 30% improvement. By the end of next six months they told of relief upto 50% and by the end of two and a half years most of them were more or less without any complaint. In a total period of 3 years recovery was complete.

The other two male patients in the beginning showed some changes but later they did not show any improvement and one of them who had bleeding per rectum was operate for hemorrhoids, the other patient was very weak both physically and had weak mental makeup.

During 3 years follow-up of these patients, various complaints of these patients could be ascribed to

- 1. Chronic pelvic venous congestion.
- 2. Weak Levator ani muscle.
- 3. Weak perineal and anal mucles.
- 4. Anxiety and mental tension.
- 5. Irregular food habits.
- 6. Poor motility of Gastro-intestinal tract muscles.

These patients had combinations of various symptoms and had already tried various medicines including antibiotics with transient improvements. Considering poor venous return from the pelvic viscera as the main cause of all these complaints the above mentioned four asanas were prescribed with an idea to make the pelvic and perineal muscles stronger and facilitate return of venous blood from the pelvic and perineal regions.

Viparita Karani in particular and other three asanas in general promoted return of venous blood pooled in the big veins and various venous plexuses in the region of pelvis and perineum which otherwise have to drain against gravity. Subsequent to this, flow of fresh blood to pelvic viscera made them healthy. Swami Muktantanada (1978) has ascribed leucorrhoea to week pelvic mescles and hormonal imbalance. Fro the present study it appeared that chronic venous congestion followed by pelvic inflammation and infection in primarily due to weak pelvic muscles and continuous discomfort in

the region leads to mental tension and thereafter hormonal imbalance. Practice of perineal shrug appeared to be most useful in such persons.

Anatomy of the region suggest that Mula Bandha, Goraksa Asana and Uddyana Bandha worked as exercise to the muscles of pelvic region especially levator ani and anal sphincters and Viparita Karani helped venous return against gravity and thus helped in curing the patients.

However effect of yogic practice on the mental status of these persons must have altered their hormonal imbalance and would have helped in co-ordination and synchronized action of various muscles.

Though number of patients in the present study was small but a very close supervision suggest positive effect of these Asanas in curing such patients and study needs further work on a large number of population.

REFERENCES

- 1. Pandit A. Mahadeva Shastri. The Yoga Upanishads, The Adyar library and research center, Adyar Madras, 1968.
- 2. A-Yoga Tattvaupanishad (122-125) page 384.
 - B- Tajbindu Upanishad (127) page 52.
 - C- Dhyana Bindu Upanisad (77) page 203.
- 3. Swami Muktananda Sarasvati, Leucorrohea. Yoga 44, 1978.
- 4. A- Brahmachari Yoga Valkya Pramiten Hatha Yoga Pradipika, Chapter III (61-69) pate 44.
- B-Chapter III (77-82) page 47.
 C- Chapter I (55) page 12.
- 6. Chamanlal Gautam Siva Samhita, Khvaja Kutub Barailly (69-710) page 88.