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## Effect of yoga and exercise benefits of health

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### Abstract

Yoga is an ancient discipline designed to bring balance and health to the physical, mental, emotional, and spiritual dimensions of the individual. Yoga is often depicted metaphorically as a tree and comprises eight aspects, or “limbs:” yama (universal ethics), niyama (individual ethics), asana (physical postures), pranayama (breath control), pratyahara (control of the senses), dharana (concentration), dyana (meditation), and samadhi (bliss).<sup>1</sup> Long a popular practice in India, yoga has become increasingly more common in Western society.

**Keywords:** yoga, exercise benefits, health

### Introduction

Yoga (Sanskrit yug, “union”), one of the six classic systems of Hindu philosophy, distinguished from the others by the marvels of bodily control and the magical powers ascribed to its advanced devotees. Yoga affirms the doctrine that through the practice of certain disciplines one may achieve liberation from the limitations of flesh, the delusions of sense, and the pitfalls of thought and thus attain union with the object of knowledge. Such union, according to the doctrine, is the only true way of knowing. For most yogi (those who practice yoga), the object of knowledge is the universal spirit Brahma. A minority of atheistic Yogi seek perfect self-knowledge instead of knowledge of God. In any case, it is knowledge and not, as is commonly supposed, feats of asceticism, clairvoyance, or the working of miracles, that is the ideal goal of all yoga practices. Indeed, yoga doctrine does not approve of painful asceticism; it insists that physical and mental training is not to be used for display but only as a means to spiritual ends.

All of us have potential, which is beyond even our wildest dream, (Saraswasti 1981) but most of this potential remains untapped. Each person has the capacity to experience different planes of consciousness, yet most of us live in the lower planes, without experiencing higher levels of existence or even believing that they exist.

Many people are unhappy in the world, dissatisfied and yet not sure what is lacking in their lives. The basic reason for this unhappiness is our attachment to the material plane of existence. Once we gain a glimpse of higher spheres of consciousness, then our unhappiness and discontent automatically fades away.

Man has made tremendous progress in almost every walk of the life. Modern scientists and researchers have absolutely changed the life-style. Stress and strain are the cause of physical as well as mental distraction. Yoga has the surest remedies for man's physical as well as psychological ailment. It makes the organs of the body active in their functioning of human body.

According to Rama (His Holiness Swami Rama 1976), “Yoga is a Sanskrit word. It is derived from the root 'yuj' which means union. In yoga, the embodied spirit is made to become one with atman by certain methods. The methods vary but the goal is one. Yoga means union with the universal spirit.

Yogasananas not only work to bring fitness and vigor to physical body, but also harness our will and emotions to improve our power of analysis, insight and vision. They calm the mind and steady the emotions, still not losing the sharpness of intellect, which is the key to human progress. The science of yoga is dedicated to helping people to change their personalities and life styles.

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Yoga has been a part and parcel of Indian Culture for thousands of years it is rather difficult to mention a specific year as the year of commencement. It was known with different names like Raj Yoga, Gyan Yoga, Bhakti Yoga, but these were different ways of reaching the final target, which was salvation (Moksha). The followers could practice as per their choice.

### Material and Method

A comprehensive search for research articles focusing on yoga interventions was completed from September until December 2019. The articles were identified using PubMed, the online database of biomedical journal citations produced by the United States National Library of Medicine (NLM). Using the key word “yoga” and limiting the search to core clinical and nursing journals published in English, 183 articles published after 1970 were identified. Although meditation, one of the eight limbs of yoga, and yoga interventions such as cleansing exercises arguably could be included in a scholarly review of yoga literature, studies solely focusing on these modalities were excluded. Articles were eliminated if they were editorials, anecdotal or single case studies, or of extremely poor quality.

### Result and Discussion

In research involving the health benefits of yoga, exercise is the single most common intervention used as a comparison. Twelve studies were found comparing the effects of yoga and exercise. Of these, nine focused on adults and three on seniors. Excluding studies with no information regarding gender or those involving exclusively one sex (menopausal subjects), 597 (68.4%) of the 873 subjects who participated in the 12 studies were women. Most of the studies involved some form of aerobic exercise: walking, running, dancing, or stationary bicycling, plus some form of stretching. Two (2) studies compared yoga with gentle, nonaerobic exercises and stretching.

Yoga appears to be equal or superior to exercise in relieving certain symptoms associated with diabetes, multiple sclerosis, menopause, kidney disease, and schizophrenia. Exercise has been recognized as having insulin-like effects on blood glucose levels. Yoga has recently been found to have beneficial effects on blood glucose levels in individuals with diabetes and other chronic health conditions. In a blinded, randomized controlled trial involving 186 type 2 diabetics, Gordon *et al.* (2008) compared the effects of 6 months of weekly classes plus home practice of yoga with aerobic exercise plus stretching. Compared to baseline measures and a control group, both yoga and exercise led to significant reductions at 3 and 6 months in fasting blood glucose (29.48% and 27.43%, respectively,  $p < 0.0001$ ). Both the exercise and yoga groups exhibited improvements in serum total cholesterol ( $p < 0.0001$ ), and very low density lipoprotein ( $p > 0.036$ ) compared with controls. One indicator of oxidative stress-malondialdehyde-significantly decreased in the yoga and exercise groups (19.9% and 18.1%, respectively,  $p < 0.0001$  for both), and superoxide dismutase, a measure of oxidative status, increased by 24.08% in the yoga group and 20.18% in the exercise group, ( $p < 0.05$  for both). Yoga has been shown to be effective in relieving symptoms of mental illness including depression, anxiety, obsessive-compulsive disorder, and schizophrenia. Duraiswamy *et al.* compared the effects of 4 months of daily yoga asana and pranayama with exercise on symptoms of psychosis in 61 schizophrenic patients receiving antipsychotic treatment. The exercise

intervention involved walking, jogging, seated and standing exercises, and relaxation—activities that closely approximate yoga. Both the yoga and exercise groups exhibited significant reductions in psychotic symptom, but the yoga group improved significantly better ( $F = 5.0$ ,  $p = 0.03$ ). The yoga group scored significantly better than the exercise group in social and occupational functioning ( $F = 7.98$ ,  $p < 0.01$ ) and on psychologic, social, and environmental subscales of quality of life as measured on the World Health Organization Quality of Life BREF form (all  $p < 0.01$ ).

These findings seem to indicate that both interventions made subjects feel better, but yoga seemed to do better at relieving physical symptoms and perceptions of stress.

In the 12 studies that compared the effects of yoga and exercise, yoga interventions yielded positive results in both healthy and diseased populations. However, with the exception of the studies by Oken *et al.*, no group of researchers has sought to compare the effects of yoga and exercise in a systematic fashion with variety of patient populations. Nevertheless, the evidence presented in the suggests that yoga interventions appear to be equal or superior to exercise in nearly every outcome measured except those involving physical fitness.

Nearly every study reviewed utilized a combination of different yoga therapies including vigorous physical asanas, gentle restorative poses, breath work, and meditation. This raises an important question that has not been adequately addressed in the literature. Just as there are different specialties in the practice of medicine, there are several different styles of yoga, each with distinctive challenges and varying levels of difficulty. Some types of yoga may be gentle and meditative (Integral, Svaroop), vigorous (Ashtanga, Power Yoga), or both (Iyengar, Kundalini). Some forms involve changes in the environment such as using heaters and humidifiers (Bikram).

Iyengar yoga frequently is used for therapeutics and incorporates the use of props such as ropes, straps, and chairs to enable students to achieve poses that might not be accessible otherwise. Each style of yoga differs in the emphasis placed on the various components of yoga such as asana, pranayama, or meditation. The relative effects of these different types of yoga on the HPA axis and SNS in response to acute and chronic stress have not been adequately examined.

### Conclusion

Overall, the studies comparing the effects of yoga and exercise seem to indicate that, in both healthy and diseased populations, yoga may be as effective or better than exercise at improving a variety of health-related outcome measures including HRV, blood glucose, blood lipids, salivary cortisol, and oxidative stress. Furthermore, yoga appears to improve subjective measures of fatigue, pain, and sleep in healthy and ill populations. However, future clinical trials are needed to further examine the distinctions between exercise and yoga, particularly how the two modalities may differ in their effects on the SNS=HPA axis. Additional studies are needed to distinguish between the different types of yoga and their various techniques. All of these studies need to use rigorous study methodologies, including the use of larger sample sizes, randomized samples, and blinding of researchers. These studies need to be replicated in a variety of populations, both sick and well, as the effects may vary depending upon the health status of the population.

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