Yoga and menopausal transition

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ABSTRACT

With increased life expectancy, today, women spend one-third of their life after menopause. Thus more attention is needed towards peri- and post-menopausal symptoms. Estrogen replacement therapy is the most effective treatment, however, it has its own limitations. The present need is to explore new options for the management of menopausal symptoms. Yogic life style is a way of living which aims to improve the body, mind and day to day life of individuals. The most commonly performed Yoga practices are postures (asana), controlled breathing (pranayama), and meditation (dhyana). Yoga has been utilized as a therapeutic tool to achieve positive health and control and cure diseases. The exact mechanism as to how Yoga helps in various disease states is not known. There could be neuro-hormonal pathways with a selective effect in each pathological situation. There have been multiple studies that have combined the many aspects of Yoga into a general Yoga session in order to investigate its effects on menopausal symptoms. Integrated approach of Yoga therapy can improve hot flushes and night sweats. There is increasing evidence suggesting that even the short-term practice of Yoga can decrease both psychological and physiological risk factors for cardiovascular disease (CVD). Studies conclude that our age old therapy, Yoga, is fairly effective in managing menopausal symptoms

Key words: Asana, meditation, menopausal symptoms, pranayama, Yoga

INTRODUCTION

Etymologically, the origin of the word menopause lies in the Greek words, “meno” (menses, month) and “pause” (stop, cease). Clinically, natural menopause is diagnosed retrospectively after 12 consecutive months of amenorrhea. With increased life expectancy, today, women spend one-third of their life after menopause. More attention is needed towards peri- and post-menopausal symptoms, which can prove to be quite debilitating causing problems at home and the workplace.

Around 20% of the patients suffer from severe menopausal symptoms, 60% suffer from mild symptoms and 20% may have no symptoms at all.[1] Menopausal symptoms include mood changes, bloating, aches and pains, headaches, hot flushes, night sweats, tiredness, insomnia, weight gain, depression, irritability, forgetfulness, lack of concentration, urinary frequency, vaginal dryness and sexual problems. These symptoms vary in severity and character from person to person.

Health workers are searching for different ways to manage menopause to minimize discomfort and inconvenience during menopausal transition, so as to improve the quality of life of these women. Since estrogen deficiency is the cause of perimenopausal symptoms, estrogen replacement therapy (HRT) is the most effective treatment. However, HRT has been associated with an increased risk of breast cancer, uterine cancer, thromboembolic heart disease and stroke. Recent results from Women’s Health Initiative (WHI) and Heart and estrogen/progestin replacement study (HERS), demonstrated increased risk of cardiovascular disease (CVD) and breast malignancy amongst women randomized to hormone therapy. More women are becoming aware of the serious side-effects; hence the use of HRT for menopausal symptoms has decreased.

Considering the limitation of HRT, the present need
is to explore new options for the management of menopausal symptoms in the form of non-hormonal drug therapy and non-pharmacological measures. The current recommendations are:

- Change in lifestyle
- Regular exercise
- Diet
- Yoga, therapeutic massage and other stress-reducing measures.

YOGA

Yoga is an original and ancient holistic art of living that includes physical, mental, moral and spiritual spheres. The Sanskrit word Yoga means “to join or union” and the practice of Yoga brings this union to all levels of one’s self. The popular usage of the term focuses primarily on postures beneficial for physical health and many people have witnessed the same. Yoga has increasingly become an accepted practice. Yoga originated in India more than 4000 years ago.

Yoga is not a religion but rather a philosophy of living. Yogic lifestyle is a way of living, which aims to improve the body, mind and day to day life of individuals. Patanjali Muni, the founder of Yoga described eight limbs of Yoga as a practical way to evolve the mind, body and spirit to achieve balance and harmony. The eight limbs of Yoga are – Yama, Niyama, Asana, Pranayama, Pratyahara, Dharana, Dhyana, and Samadhi.

Since the last few years, Yoga has spread around the whole world and has been studied so as to help people to cope with various health conditions including menopause. The most commonly performed Yoga practices are postures (asana), controlled breathing (pranayama), and meditation (dhyana).

Asana is a Sanskrit word used to describe a position of the body. It is defined as a steady and comfortable posture. Traditionally, many asanas are practiced in Hatha Yoga primarily to achieve, better physical and mental health. There are around 84 asanas, each one has a special name, special form and a distinct way of performing. Asanas have an extraordinary capacity to overhaul, rejuvenate and bring the entire system into a state of balance. In different studies, the postures chosen are based on the effectiveness in relieving menopausal symptoms. The nature of these poses and the associated deeper and slower breathing patterns would physiologically reduce a woman’s oxygen consumption while stabilizing blood pressure and heart rate.

Pranayama is a Sanskrit word meaning “restraint of the prana or breath”, which is often translated as breath control. Several researchers have reported that pranayama techniques are beneficial in treating a wide range of stress disorders. Practitioners report that the practice of pranayama develops a steady mind, strong willpower and sound judgment. Pranayama strengthens the lungs, improves their function and enhances the lung power. It improves the defense mechanism of the body, slows down mental chatter and infuses positive thinking.

Meditation is a process whereby consciousness looks in and acts upon itself. The aim of meditation is to help still the mind and to practice some form of contemplation or introspection. Meditation has been found to be associated with increased plasma melatonin level and improved sleep quality, particularly if done in the evening before rest.

Yoga has been utilized as a therapeutic tool to achieve positive health and control and cure diseases. Interest has been shown in this direction by many workers and studies on the effect of Yoga on some ailments like bronchial asthma, hypertension, diabetes mellitus and obesity have been carried out. The exact mechanism as to how Yoga helps in various disease states is not known. It has been suggested that there could be neurohormonal pathways with a selective effect in each pathological situation. For example, it has been observed that plasma levels of cortisol increase in bronchial asthma and decrease in diabetes mellitus after practice of pranayama. It is possible that yogic exercises bring about normalization of the pathological state by control of counter-regulatory hormones or by increased receptor sites. It has also been suggested that yogic practices create a hypothermic state and an alteration in the sympa-tho-parasympathetic axis.

There have been multiple studies that have combined the many aspects of Yoga into general Yoga sessions in order to investigate its effects on menopausal symptoms. Menopausal women find it difficult to overcome the symptom of reduced self-esteem and self-image. Yoga can be used as a form of exercise to overcome this issue. Although no significant direct improvement was found in global or physical self-esteem, Yoga practices may provide a source of distraction from daily life and enhancement of self-esteem, helping women to focus on the simplicity of movement and forget about work responsibility and demands, and thus reduce anxiety, depression and thus reduce anxiety as well as depression.
The integrated approach of Yoga therapy can improve hot flushes and night sweats. It can also improve cognitive functions such as remote memory, mental balance, attention and concentration, delayed and immediate verbal retention and recognition test.[8] A pilot study of a Hatha Yoga treatment for menopausal symptoms also showed improvement in menopausal symptoms except hot flushes.[9] Even eight weeks of an intergrated approach to yoga therapy resulted in better outcome as compared to physical activity in reducing climacteric symptoms, perceived stress and neuroticism in perimenopausal women.[10]

The risk of CVD rises sharply with menopause likely due to the co-incident increase in insulin resistance and related atherogenic changes that together comprise the metabolic or insulin resistance syndrome, a cluster of metabolic and hemodynamic abnormalities strongly implicated in the pathogenesis and progression of CVD.[11]

There is increasing evidence suggesting that even the short-term practice of Yoga can decrease both psychological and physiological risk factors for CVD and may reduce signs, complications and improve the prognosis of those with clinical or underlying disease.[12,13] Yoga’s rapidly increasing popularity amongst older women in the Western industrialized world, coupled with numerous recent studies suggesting that Yoga-based programs may improve CVD risk profiles in older adults indicate that Yoga may represent a promising intervention for postmenopausal women at risk for CVD and related chronic disorders.[11]

As mentioned earlier it has been demonstrated that meditation increases plasma melatonin levels and it seems that melatonin effectively improves sleep quality. Studies have demonstrated the effectiveness of Yoga in improving sleeping patterns suggesting its effective use in a clinical setting to combat symptoms of insomnia and other sleep disorders in post-menopausal women.[14,15]

Thus from all these studies we can conclude that our age-old therapy, Yoga, a free-of-cost noninvasive method, is fairly effective and is strongly recommended to all women of menopausal age. Yoga does have the potential to provide physical, mental and emotional health benefits to those who practice it with proper guidance.

REFERENCES

1. Turnbull S. Yoga as a treatment for menopausal symptoms. J Yoga Ontogenet Andtherap Investig 2010;2:1-4-5.
2. ABC of Yoga, 2003-2008, Maxlifestyle International. Available from: http://www.abc-of-Yoga.com/Yoga-and-health/Yoga-lifestyle.asp. [cited on 2009 Oct 11].
3. Cohen BE, Kanaya AM. Feasibility and acceptability of restorative Yoga for treatment of hot flushes: A pilot trial. Maturitas 2006;56:198-204.
4. Stevens P. What is meditation. J Yoga Ontogenet Andtherap Investig 2010;2:1-6.
5. Sahay BK. Yoga in medicine. API textbook of medicine. 5th ed. 1995. p. 1444-5.
6. Elvasky S, McAuley E. Exercise and self esteem in menopausal women: A randomized controlled trial involving walking and Yoga. Am J Hlth Promotion 2007;22:83-92.
7. Daley, Strkes-Lampard AJ, MacArthur C. Exercise to reduce vasomotor and other menopausal symptoms: A review. Maturitas 2009;63:176-80.
8. Chatha R, Nagaratna R, Padmalatha V, Nagendra HR. Effect of Yoga on cognitive functions in climacteric syndrome: A randomized control study. BJOG 2008;115:991-1000.
9. Force BL, Thurston C. A pilot study of Hatha Yoga treatment for menopausal symptoms. Maturitas 2007;57:286-95.
10. Chatha R, Raghuram N. Treating the climacteric symptoms in Indian women with an integrated approach to Yoga therapy: A randomized control study. Menopause 2008;15:862-70.
11. Innes KE, Selfe TK, Taylor AG. Menopause, the metabolic syndrome and mind-body therapies. Available from: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2810543/, page1-12. [cited in 2010].
12. Innes K, Bourguignon C, Taylor A. Risk indices associated with insulin resistance syndrome, cardiovascular disease, and possible protection with Yoga: A systematic review. J Am Board Fam Pract 2005;18:491-519.
13. Innes K, Vincent H. The influence of Yoga based programmes on risk profiles in adults with type 2 diabetes mellitus: A systematic review. Evid Based Compl Altern Med 2007;4:469-8.
14. Cohen L, Wameke C. Psychological Adjustment and sleep quality: A randomized trial of the effects of a Tibetan Yoga intervention in patients with lymphoma. Cancer 2004;100:2253-60.
15. Khalsa SB. Treatment of chronic Insomnia with Yoga: A preliminary study with sleep wake diaries. Appl Psycho Physiol Biofeed Back 2004;29:269-78.

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