



Role of yoga in the management of premenstrual syndrome

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Abstract

Context: The methods by which the Yogic tools like asana, pranayama, chants and meditation can be used in the management of Premenstrual syndrome. PMS are group of symptoms that arises in the second half of the menstrual cycle.

Objective: The aim is to analyze the Yogic tools available in the ancient texts for the treatment of problems related to menstrual cycle.

Methods: To study the texts of Sri Krishnamacharya, Yoga Makaranda and Yoga Rahasya to find out about the methods available for the treatment of menstrual problems in women.

Result: Various Asanas have been mentioned for the treatment of menstrual problems. Two course plans, under the guidance of a competent teacher, can be taught to women with menstrual problems.

Conclusion: Premenstrual symptoms can be reduced using yogic methods. The particular course of the treatment should be modified according to the need and capacity of the individual.

Keywords: premenstrual syndrome, PMS, Krishnamacharya, Yoga Makaranda, Yoga Rahasya, Asanas

Introduction

Premenstrual syndrome (PMS) is a group of symptoms that arises during the second half of the menstrual cycle. The symptoms that occur between ovulation and the start of the menstrual cycle become worse during the time of increased stress. These symptoms whether simple or complex can be managed using yogic tools like asana, pranayama, chants and meditation.

Objective

The aim of the study is to understand the knowledge of the yogic tools available in the ancient text to treat problems of the menstrual cycle. The methods by which these tools can be used and be helpful to the women who have severe premenstrual syndrome.

Methods

This was a study of the yogic tools available in the two important texts of Sri Krishnamacharya, Yoga Makaranda and Yoga Rahasya for the treatment of menstrual problems in women.

Result

(These techniques were not to be intended to be learned from a book. Practical instruction from a guru was always considered to be a necessary requisite before attempting them)

Yoga Makaranda

Krishnamacharya recommends the following postures for menstrual problems:

Janu Sirsasana

Description

This can be done in two different forms, one form for Hathayogin and another for the Rajayogin. The practitioner should understand the differences between them. First, extend one of the legs out, placing the heels firmly on the ground, with the toes pointing upwards. Do not slant the leg to either side. Place the lower portion of the knee firmly on the ground. Fold the other leg and place the heel of that foot near the genitals, with the thigh straight against the hip. The two legs should form the shape of an "L" and until this point the practice is same for both forms of the Asana. After this there is a difference between the two forms.

The practitioner following the form of Hathayoga must keep the heel of the leg that is folded between the anus and the perineum, and then with the help of both hands hold the sole of the extended foot. Lift the head up and do Puraka – kumbhaka. Stay in this position for a while. Then bend down the head while doing Recaka – kumbhaka, and place the face on the knee of the straight leg. At this point, do not inhale, but exhale. Lift the head and do Puraka. Repeat the same procedure on the other side.

The Rajayogin must keep the back portion of the heel of the folded leg near the perineum and genitals. The other principles are the same as of the first type.

While doing Janu – sirsasana, pull in the stomach to the extent possible. The benefits obtained will be greater. Though it is very difficult to do this, draw the stomach inside starting with the navel, keeping the focus on the Nadi-s near the rectal and genital areas, carefully pulling them upward. Asymmetrical

Asana-s, like Janu-sirsasana, should be done both on the left side, and right side. Only then will the strength of the body on both sides be in equilibrium.

Janu-sirsasana: Second krama

Instead of folding the leg and keeping the heel between the anus and genitals, keep the bent leg firmly on the thigh of the extended leg. For some people, it is difficult to place the head on the knees on the first day. One should not think it is impossible and stop practicing. If one practices diligently for one or two months, following the principles, it is definitely possible to achieve it.

For those who have excess fat around the waist and stomach, it is very difficult to practice this Asana initially. But if practiced properly, the excess fat around the waist and stomach will be reduced; eventually the head can be placed on the knees.

Janu-sirsasana should be practiced well before conception, but should not be done after conception. Women, who usually have severe pain during menstruation, should practice for one or two months. If they do so, all toxins that cause this pain are removed from the blood stream and eliminated through the urinary tract.

Upavista – Konasana

In seated position, stretch both the legs and spread them apart, as wide as possible. While the legs are apart from each other, do not lift the knees off the ground. Then, hold the big toe with the fingers, bend forward and place the head between the out-spread legs. This is called Upavista – konasana.

This will cure all the diseases of the uterus and related organs. Those who have irregular menstrual cycles must practice this along with Janu – sirsasana and Baddha – konasana. If they do so, in three months time, their cycle will become regular.

Baddha – Konasana

In the seated posture, fold both the legs in such a way; the soles of both feet face each other. In this position, hold the sole of left foot firmly with the left hand and hold the right sole firmly with the right hand. Do Recaka – kumbhaka, bend the head and place it on the floor in front of the feet. After practicing this properly for a while, place the head on the soles of the feet. It cleanses the uterus and prepares it for conception (Krishnamacharya *et al.*, 2011) [1].

Yoga Rahasya

On practicing Uddiyana bandha, the blood is purified and diseases arising out of the vitiation of the Apana vayu, including menstrual problems and bowel functions will be taken care of.

Through the Jalamdhara bandha, a man never loses his virility. The raja kosa (reproductive organs) of women are also cleaned.

For strengthening the reproductive organs, different variations of Konasana must be practiced. Konasana includes Trikonasana, Parsva konasana, Supta konasana, Viparita konasana and Urdhva konasana (Nāthamuni and Krishnamacharya, 2004) [2].

Description

Uddiyana bandha

Uddiyana bandha can be done either in sitting or standing position. Inhale air and then exhale slowly and completely. In this position of retention after exhale (kumbhaka), pull back the stomach so that navel almost touches the backbone. Remain in that position for a short duration of time. Bring back the stomach to its normal position. Inhale air slowly.

Jalamdhara Bandha

Sit erect in a vertical position. Then exhale. While exhaling, bend the neck so that the chin is brought in contact with the chest, about four inches below the collarbone. Press the chin against the chest. Remain in that position for a short while, doing normal breathing.

Trikonasana

Stand with feet together. Take a big stride sideways. On inhale raise the arms from the side to shoulder level. On exhale, twist and place the right palm on the floor, outside the left foot. Left arm extended up. On inhale come up and exhaling lower the arms. Repeat on the other side.

Parsva Konasana

Stand with feet together. Spread the legs apart. On inhale, raise the arms from the sides to shoulder level. On exhale, bend left knee, bend trunk laterally towards the left knee, and place the left palm on the floor outside the left foot. Right arm extended up. On inhale, bring the right arm over the ear. On exhale, move the right arm away from the head back to vertical position. On inhale come up and exhaling lower the arms. Repeat the same on the other side.

Urdha Konasana

Lie down on the back. On exhale lift straight legs up and move the legs beyond the head and support the lower back with palms. On inhale lift the legs vertically (sarvangasana). In this position, spread the legs apart. Then slowly bring the legs together, lower the legs towards the head, lower the palms and straighten the legs to the floor.

Yoga Therapy

Two different course plans can be given to women with pre menstrual syndrome. One course to be followed during premenstrual symptoms and the other course during times, when she does not have her symptoms.

Course 1: During premenstrual symptoms

We need to consider the following while planning the course. Due to severe symptoms like bloating, cramps, pains, mood swing, we need to focus on:

- A relaxing course.
- A meditative course.
- More focus on lying postures.
- Focus on exhale, extend the exhale breath.
- Do not contract the abdomen.
- Do not use strenuous practice.
- Sitali, Sitkari, Chandra bhedana and Nadishodhana

pranayama can be included.

Course 2: During other times (not during premenstrual symptoms)

The course should focus on:

- Extending the exhale breath.
- Using hold after exhale.
- Chant on exhale.
- Work on the Apana / lower abdomen region.
- An active course.
- Include twists and forward bends: Asanas like Uttanasana, Trikonasana, Utkatasana, Jataro Parivrtti, Parsva Uttanasana, Pascimatanasana, Prasarita Pada Uttanasana, modified Mariciyasana, modified Ardha Matsyendrasana.

Description

Nadishodana pranayama

Sit in Sukhasana/padmasana or any comfortable seated posture. Keep the eyes closed. The arms should be stretched and the palms placed on the respective knees. The elbows should not be bent and spine should be erect. Lower the head into the chin lock position. Inhale slowly through the left nostril, to enable this, the nose should be held by the fingers of the right hand in 'mrgi' mudra. Fully close the left nostril and exhale through the right nostril. Inhale slowly through the right nostril, close the right nostril and exhale through the left nostril.

Sitali Pranayama

Sit in Sukhasana/padmasana or any comfortable seated posture. Keep the eyes closed. The arms should be stretched and the palms placed on the respective knees. The elbows should not be bent and spine should be erect. The tongue is rolled into a U-channel and project about a quarter of an inch beyond the lips. Slowly and deeply inhale through the mouth so that the air is drawn in through the U-shaped tongue. Simultaneously the head is slowly tilted back till the inhalation is completed. Roll the tip of the tongue inwards, so that the tip touches the back of the soft palate. Lower the head into chin lock position, Jalamdhara Bandha, exhale through the nostrils, unroll the tongue.

Sitkari Pranyayama

Sit in Sukhasana/padmasana or any comfortable seated posture. Keep the eyes closed. The arms should be stretched and the palms placed on the respective knees. The elbows should not be bent and spine should be erect. Slightly widen the lips, leaving a thin line of space between the lips, so that air can be drawn in through the space. The teeth will also be slightly apart. The tip of the tongue should be just inside the teeth. Slowly inhale through the lips and tilt the head back. When the inhalation is complete, the chin should be lowered to Jalamdhara Bandha. The lips are closed and exhale through both the nostrils.

Chandra Bhedana

Sit in Sukhasana/padmasana or any comfortable seated posture. Keep the eyes closed. The arms should be stretched and the palms placed on the respective knees. The elbows should not be bent and spine should be erect. Lower the head

into the chin lock position. Inhale slowly through the left nostril, to enable this, the nose should be held by the fingers of the right hand in 'mrgi' mudra. Fully close the left nostril and exhale through the right nostril. Continue, inhaling through the left nostril and exhaling through the right nostril.

Uttanasana

Stand with feet together. On inhale raise the arms from the front. On exhale bend forward, place the palms by the sides of the feet. On inhale lift the arms up and come up and exhaling lower the arms.

Utkatasana

Stand with feet together. Lock fingers and turnout. On inhale raise the arms from front. On exhale squat, back as straight as possible. On inhale come up and on exhale lower the arms and unlock the fingers.

Parsva Uttanasana

Stand with feet together. Take a stride forward with left leg. On inhale raise the arms from front, on exhale bend forward and place the palms by the sides of the front foot. On inhale come up and on exhale lower the arms. Repeat the same on the other side.

Pascimatanasana

Sit with legs extended forward. On inhale raise the arms from the front, above the head. On exhale, bend forward and hold the feet. On inhale raise the arms and come up and on exhale lower the arms from the front.

Prasarita pada Uttanasana

Stand with feet together. Take a stride side ways. On inhale raise the arms from the front. On exhale, bend forward and place the palms on the floor. On inhale come up and on exhale lower the arms from the front.

Ardha Matsyendrasana

Sit with legs extended forward. Bend the left leg and place left ankle under the right thigh; bend right leg and place right foot outside left knee. Left knee on the floor and right knee vertical. Twist the trunk to the right, place elbow outside right knee and hold the right foot. From behind hold the left thigh with right arm. Turn head to the right. Bring head to the front, release right hand from left thigh and left arm from the right leg and untwist the trunk. Extend the legs forward. Repeat it on the other side.

Conclusion

During premenstrual symptoms, Krishnamacharya recommends 'ven-pongal', a dish made of rice and moong dhal. Can use jeera, but pepper should not be used. Ghee should be used liberally. Avoid the use of tamarind, curd and buttermilk. Plenty of milk may be used. Reduce salt, condiments and hot condiments (pepper and chilly) (A.G, n.d.).

Premenstrual symptoms can be reduced using yogic methods. The particular course of the treatment should be modified according to the need and capacity of the individual, hence the need of a competent teacher.

References

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