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Yoga Therapy: Efficacy, Mechanisms and Implementation

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Yoga is deeply rooted in Indian philosophy and has been a part of traditional Indian spiritual practice for millennia [1]. In his iconic yoga sutras, the Indian sage Patañjali described yoga as the “silencing of the modifications of the mind”, as a way to unite body, mind and soul, this is as a spiritual path. But is this still the case today? The role
of yoga has shifted in the past decades; with yoga mainly becoming a means to health and wellbeing instead [2]. In fact, yoga has become one of the most popular preventive and therapeutic practices in Western societies, with prevalence rates doubling in the past 10 years [3].

This also means, that health-care providers are increasingly faced with patients using, or interested in trying, yoga for the management of their health conditions [4]. This development moved the spotlight of research onto the therapeutic efficacy of yoga, but also on ways to implement yoga within the health care system. Moreover, the potential mechanisms of action of yoga when used as a therapeutic modality are increasingly researched.

The aim of this special issue is to address these points and to investigate where (and how) yoga could be a valuable addition to health care. A number of clinical research papers in this issue address the efficacy of yoga as a therapeutic means for a variety of health conditions. Meta-analyses, evidence maps and umbrella reviews demonstrate evidence supporting the use of yoga for low back pain, type II diabetes mellitus and menopausal symptoms. Moreover, innovative clinical trials investigated yoga’s effectiveness for Parkinson’s disease, pregnancy-related issues, depression, balance, falls and arterial stiffness in older adults, painting a broader picture of the potential usage of this therapeutic approach – and also highlighting further research gaps to be addressed in future research.

Potential mechanisms of yoga were assessed in quantitative and qualitative studies demonstrating that yoga might be most effective when integrated in patients’ daily routine, when practiced mindfully and when it becomes a part of the patients’ worldview, i.e. when users are deeply involved in their practice.
Another strong research focus within this special issue is implementation. In a survey among members of the International Association of Yoga Therapists, the characteristics and attitudes of North American yoga therapists were assessed. Perhaps most importantly, the results demonstrate a general openness of yoga therapists to evidence-based practice. This is crucial when yoga is intended to be accepted by health care decision makers. Qualitative studies in this special issue further assessed potential barriers and facilitating factors for yoga use in special patient groups, minorities living with arthritis or low back pain or persistently depressed individuals. They found that there is no “one size fits all approach” to yoga; instead yoga interventions need to be adapted to a specific population’s needs, preferences and possibilities – an approach clearly in line with evidence-based practice in its original meaning [5]. This clearly indicates that there is nothing like a generally “best” approach to yoga: in a comprehensive systematic reviews, the equipotence of the different yoga styles in yoga therapy is shown – there seems to be no “best” yoga style; all yoga styles researched so far have their value. Finally, an innovative approach combining yoga and group occupational therapy in post-stroke falls prevention demonstrates the feasibility of implementing yoga even in patient populations not typically considered the yogi prototype.

We are confident that this special issue, covering a broad spectrum of yoga therapy research, contributes to the evidence base in this emerging field and brings forward ideas on how yoga can be integrated, and become integral part of mainstream clinical practice.
References