Available online on http://www.ijcpr.com/

International Journal of Current Pharmaceutical Review and Research 2024; 16(4); 140-143

Original Research Article

A Hospital Based Study to Evaluate the Effects of Simple Yogic Exercises on Pulmonary Function Tests in Adults: A Case-Control Study

Rashmi Sharma¹, Abhishek Kumar², Akash Bharadwaj³, Rita Kumari⁴

¹Tutor, Department of Physiology, Nalanda Medical College, Patna, Bihar, India

²Tutor, Department of Physiology, Nalanda Medical College, Patna, Bihar, India

³Tutor, Department of Physiology, Nalanda Medical College, Patna, Bihar, India

⁴Professor and HOD, Department of Physiology, Nalanda Medical College, Patna, Bihar, India

Received: 19-02-2024 / Revised: 24-03-2024 / Accepted: 23-04-2024 Corresponding Author: Dr. Abhishek Kumar Conflict of interest: Nil

Abstract

Aim: The aim of the present study was to find the effects of simple yogic exercises on Pulmonary Function Tests in healthy adults.

Methods: The present study was conducted in the Pulmonary Function Test (PFT) Laboratory, Department of Physiology, Informed (written) consent was taken from each subject before the study. 100 healthy subjects, including both male and female of age group of 40 to 60 years, with no respiratory, cardiovascular or other medical aliments, were selected for the study.

Results: The mean age, mean weight and mean height was 64.26 + 6.34 years, 72.48 + 13.47 kgs and 166.74 + 8.32 cms. The pulmonary parameters with respect to FVC % Predicted and MVV % Predicted showed highly significant results.

Conclusion: The study revealed that after undergoing six weeks of regular yoga training in healthy individuals, definite improvement in pulmonary function parameters like FVC and MVV is seen. This may be due to regular slow and forceful inspiration and expiration during yogasanas leading to strengthening of respiratory muscles and increased release of surfactant too.

Keywords: FVC, MVV, Elderly individuals, Simple Yogic Exercises

This is an Open Access article that uses a funding model which does not charge readers or their institutions for access and distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0) and the Budapest Open Access Initiative (http://www.budapestopenaccessinitiative.org/read), which permit unrestricted use, distribution, and reproduction in any medium, provided original work is properly credited.

Introduction

Yoga is a mind and body practice with historical origins in ancient Indian philosophy. It is the science of simple living that balances all aspects of life – the physical, mental, emotional, psychic and spiritual. By the practice of asana, pranayama, mudra, bandha, shuddhi kriyas and meditation yoga, helps balance and harmonize the body, mind and emotions. [1] Classical literature on yoga indicates that it is of great value as a method of preservation of health and treatment of various diseases. Yoga practice consists of the five-principle including proper relaxation, proper exercise, proper breathing, proper diet and positive thinking and meditation. Yoga respiration consists of very slow, deep breaths with sustained breath hold after each inspiration. Practicing yoga contributes in the improvement of pulmonary ventilation and gas exchange. It also helps in the prevention, cure and rehabilitation of patients with respiratory illnesses by improving ventilatory functions. [2,3] It is a popular form of exercise in India since ancient times and yoga's effects on pulmonary function have been investigated previously.

Pulmonary function tests (PFT) serve as a tool of health assessment and also to some extent as a predictor of survival rate. PFT tend to have a relationship with life-style such as regular exercise and non-exercise. [4,5] Spirometry is pivotal to the screening, diagnosis and monitoring of respiratory diseases and is increasingly advocated in primary care practice. Due to regular yogic exercise, yoga practitioners tend to have an increase in pulmonary capacity when compared with no yoga practitioners. Pulmonary functions are generally determined by the strength of respiratory muscles, compliance of the thoracic cavity, airway resistance and elastic recoil of the lungs. [6] PFT provide qualitative and quantitative assessment of pulmonary function in patients with obstructive and restrictive lung diseases. The tests used to describe pulmonary function are the lung volumes and lung capacities. It is well-known that pulmonary functions may vary

according to the physical characteristics including age, height, body weight and altitude. The practice of yoga is accompanied by a number of beneficial physiological effects in the body. Regular practice of yoga is known to improve overall performance and working capacity. [7] Current evidence suggests that following regular practice of yoga there is an improvement in cardiovascular and pulmonary functions. [8]

The pulmonary function capacities of normal sedentary individuals have been studied extensively in India [9-11] but less in the context of comparison with yogic population practicing yoga. Furthermore, such comparative studies have not been done in this part of the country.

The aim of the present study was to find the effects of simple yogic exercises on Pulmonary Function Tests in healthy adults.

Materials and Methods

The present study was conducted in the Pulmonary Function Test (PFT) Laboratory, Department of Physiology, Nalanda Medical College, Patna, Bihar, India. Informed (written) consent was taken from each subject before the study. 100 healthy subjects, including both male and female of age group of 40 to 60 years, with no respiratory, cardiovascular or other medical aliments, were selected for the study. Pulmonary function test was performed on all the subjects before the beginning of yogic exercises. Then they were made to perform yogic exercises for 6 weeks. Again at the end of 6 weeks, pulmonary function parameters were recorded again. Subject with past history of major respiratory illness like Tuberculosis, pleural effusion, COPD, Asthama and Smokers were excluded from the study.

• Spirometry parameters like Forced Vital Capacity (FVC) and Maximum Voluntary Ventilation (MVV) were recorded in sitting position using spiroexcel machine (Medicaid).

• The standard protocol and precautions for the spirometry procedure were followed as per American Thoracic Society guidelines.

• Three recordings were taken and the best effort was included in the results

• All the recordings were done between 9 am to 11 am to eliminate any effect of diurnal variations.

• Percent (%) predicted values for all the parameters were taken into consideration for statistical analysis to eliminate the effect of confounding factors like Age, Sex, Height and Weight on different lung parameters.

• Paired 't' test was applied for comparison between the two groups.

The Yogic exercises allotted to the participants were12

1. Bhastika Pranayam – duration 3 minutes

2. KapalBhati Pranayam – duration 1 min to 5 mins

3. Anulom Vilom Pranayam – duration at least 10 mins.

Results

Table 1: Baseline Characteristics		
Parameters	Cases	
Age (Years)	48.26 + 6.34	
Weight (Kilogram)	72.48 + 13.47	
Height (Centimeters)	166.74 + 8.32	

The mean age, mean weight and mean height was 48.26 + 6.34 years, 72.48 + 13.47 kgs and 166.74 + 8.32 cms.

Table 2: Comparison of percent (%) predicted values of Pulmonary functions

Pulmonary parameters	Cases	Controls	P Value
	Mean±SD	Mean±SD	
FVC % Predicted	56 <u>+</u> 8.6	79.8 <u>+</u> 7.5	0.0001
MVV % Predicted	72.8 + 15.5	88.8 + 12.4	0.0001

The pulmonary parameters with respect to FVC % Predicted and MVV % Predicted showed highly significant results.

Discussion

Yoga originated in ancient India and denotes union between the individual self and the transcendental self. Prāṇāyāma is an important aspect of yoga that mainly deals with the relationship between breathing pattern and emotional states. [12] As the fourth limb of Astānga yoga, it is very effective and important component of yoga training. It can assume more complex forms of breathing, but the essence of its practice remains slow and fast breathing. [13] Nādi śodhana, Kapālabhāti, Bhastrikā, Śītalī and Bhrāmarī are the important and most practiced types of prāņāyāma among practitioners. Regular practice of prāņāyāma improves cardiovascular and respiratory functions, improves cognitive function, decreases the effect of stress and strain on the body and hence improves the physical and mental health of an individual. [14-16]

The mean age, mean weight and mean height was 48.26 + 6.34 years, 72.48 + 13.47 kgs and 166.74 + 8.32 cms. The pulmonary parameters with respect to FVC % Predicted and MVV % Predicted showed highly significant results. A compromised respiratory efficiency reduces the individuals stress tolerance which affects the quality of life in total. Yoga, specially Pranayam has beneficial effects on respiratory efficiency. It includes various respiratory exercises which involve forceful inspiration to total lung capacity (TLC) and forceful exhalation to residual volume (RV) and all manoeuvres are done through nostrils, which offer resistance by means of decreased cross sectional area and turbulences. Breathing through one nostril in Anulom - Vilom Pranayam further increases the resistance. The respiratory apparatus is emptied and filled more completely and efficiently by Yoga practice, which is recorded in terms of increased forced vital capacity (FVC). [17,18] Yogic breathing creates more negative pressures in both abdominal and thoracic cavity during inspiration and moves the diaphragm more than its normal excursions and helps in efficient movement of diaphragm, intercostals and abdominal muscles. Thus, the improvement in vital capacity is due in part to increased development of respiratory musculature incidental to regular practice of Yoga. [19]

Removal of undue tension from the skeletal muscles in vogasanas helps the thorax to relax better them before. All these practices seem to increase expiratory reserve volume (ERV) thereby increasing the vital capacity. [20] Skeletal muscles control many crucial elements of aerobic, conditioning including lung ventilation. Repeated inspirations to TLC and breath holdings as done during pranayam can lead to increase in the maximal shortening of the inspiratory muscles which has been shown to improve the lung function parameters. [21] Increase in maximum voluntary ventilation (MVV) may be due to improvement in the respiratory mechanism and strengthening of respiratory muscles due to regular practice of yogasanas and yogic breathing exercises.

Conclusion

The study revealed that after undergoing six weeks of regular yoga training in healthy individuals, definite improvement in pulmonary function parameters like FVC and MVV is seen. This may be due to regular slow and forceful inspiration and expiration during yogasanas leading to strengthening of respiratory muscles and increased release of surfactant too.

References

- Saraswati SS, Hiti JK. Asana pranayama mudra bandha. Bihar, India: Yoga Publications Trust; 1996.
- Yadav RK, Das S. Effect of yogic practice on pulmonary functions in young females. Indian J Physiol Pharmacol. 2001 Oct;45(4):493-6.
- 3. Madanmohan, Udupa K, Bhavanani AB, Vijayalakshmi P, Surendiran A. Effect of slow and fast pranayams on reaction time and cardiorespiratory variables. Indian J Physiol Pharmacol. 2005 Jul-Sep;49(3):313-8.
- 4. Wassermann K, Gitt A, Weyde J, Eckel HE. Lung function changes and exercise-induced ventilatory responses to external resistive loads in normal subjects. Respiration. 1995;62(4): 177-84.
- Twisk JW, Staal BJ, Brinkman MN, Kemper HC, van Mechelen W. Tracking of lung function parameters and the longitudinal relationship with lifestyle. Eur Respir J. 1998 Sep;12(3):627-34.
- 6. Cotes JE. Lung Function Assessment and Applications in Medicine. 4th edn Blackwell Scientific Publications.
- Madanmohan, Udupa K, Bhavanani AB, Shatapathy CC, Sahai A. Modulation of cardiovascular response to exercise by yoga training. Indian J Physiol Pharmacol. 2004 Oct ;48(4):461-5.
- Bera TK, Rajapurkar MV. Body composition, cardiovascular endurance and anaerobic power of yogic practitioner. Indian J Physiol Pharmacol. 1993 Jul;37(3):225-8.
- Jain SK, Ramiah TJ. Normal standards of pulmonary function tests for healthy Indian men 15-40 years old: comparison of different regression equations (prediction formulae). Indian J Med Res. 1969 Aug;57(8):1453-66.
- Aggarwal AN, Gupta D, Chaganti S, Jindal SK. Diurnal variation in peak expiratory flow in healthy young adults. Indian J Chest Dis Allied Sci. 2000 Jan-Mar;42(1):15-9.
- 11. Gupta P, Gupta S, Ajmera RL. Lung function tests in Rajasthani subjects. Indian J Physiol Pharmacol. 1979 Jan-Mar;23(1):8-14.
- Fried R. The psychology and physiology of breathing: In behavioral medicine, clinical psychology, and psychiatry. Springer Science & Business Media; 1993 Aug 31.
- Bijlani RL, Manjunatha S. Understanding medical physiology: a textbook for medical students. Jaypee Brothers Publishers; 2010 Nov 26.
- Bhargava R, Gogate MG, Mascarenhas JF. Autonomic responses to breath holding and its variations following pranayama. Indian J Physiol Pharmacol. 1988 Oct-Dec;32(4):257-64.

- 15. Bal BS. Effect of anulom vilom and bhastrika pranayama on the vital capacity and maximal ventilatory volume. Journal of Physical Education and Sport Management. 2010 Jul; 1(1):11-5.
- 16. Kuppusamy M, Kamaldeen D, Pitani R, Amaldas J. Immediate Effects of Bhramari Pranayama on Resting Cardiovascular Parameters in Healthy Adolescents. J Clin Diagn Res. 2016 May;10(5):CC17-9.
- Yadav RK, Das S. Effect of yogic practice on pulmonary functions in young females. Indian journal of physiology and pharmacology. 2001 Oct 1;45(4):493-6.
- Birkel DA, Edgren L. Hatha yoga: improved vital capacity of college students. Alternative therapies in health and medicine. 2000 Nov 1; 6(6):55.
- 19. Bhole MV. Treatment of bronchial asthama. Yoga Mimansa1967;9:33.
- 20. Makwana K, Khirwadkar N, Gupta HC. Effect of short term yoga practice on ventilatory function tests. Indian J Physiol Pharmacol. 1988 Jul 1;32(3):202-8.
- 21. Mehrotra PK, Varma N, Tiwari S, Kumar P. Pulmonary functions in Indian sportsmen playing different sports. Indian journal of physiology and pharmacology. 1998 Jul 1;42: 412-6.