



# The Role of Yoga in Cancer Care

WACOG Integrative Oncology Symposium:  
Pathways to Wellness and Survivorship

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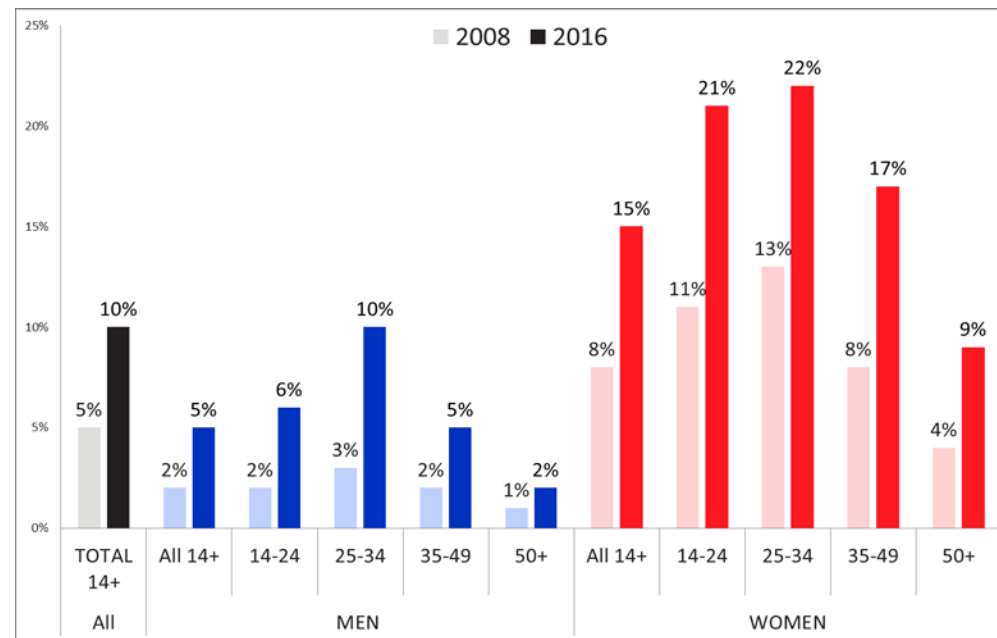
# Yoga Defined

- Sanskrit – to yoke, union, connection



# Participation in yoga has doubled since 2008

- According to Roy Morgan Research 2016, yoga is Australia's fastest growing sporting or fitness activity. Over 2 million Australians say they participate, around 1/10 men and 1/5 women practice yoga.



# Why do people practice yoga?

- 1/5 practice yoga for a specific health or medical reason.
- More people used yoga for stress management and anxiety than for back, shoulder or neck problems. (S.Penman 2012 survey of 3000+)



# Why yoga in cancer care?

- Low risk mind body complementary therapy
- Physical activity is widely accepted as beneficial for cancer survivors during and after treatment, and forms part of a healthy lifestyle for prevention.
- Psychosocial needs are often unmet for cancer patients. Issues affect quality of life in survivorship (Adler et al, 2008;Israel et al 2016)

# Physical Activity

- However most people generally, and in the cancer affected population do not meet minimum recommendations for physical activity.
- 53- 70% of cancer survivors do not meet the recommended 150 minutes/week physical activity.

(Blanchard et al. Journal of Clinical Oncology, 2008)

# Obstacles to physical activity

- Psychological barriers (lack of motivation, fears, dislike of gym, not being the 'sporty type')
- Physical barriers (the ageing process, cancer treatment and other physical co-morbidities, fatigue and weight gain)



# Obstacles to physical activity

- Contextual and environmental barriers (employment, traditional female care-giving roles, proximity/access to facilities, seasonal weather)

(Hefferon et al, 2013)





# Yoga v Exercise

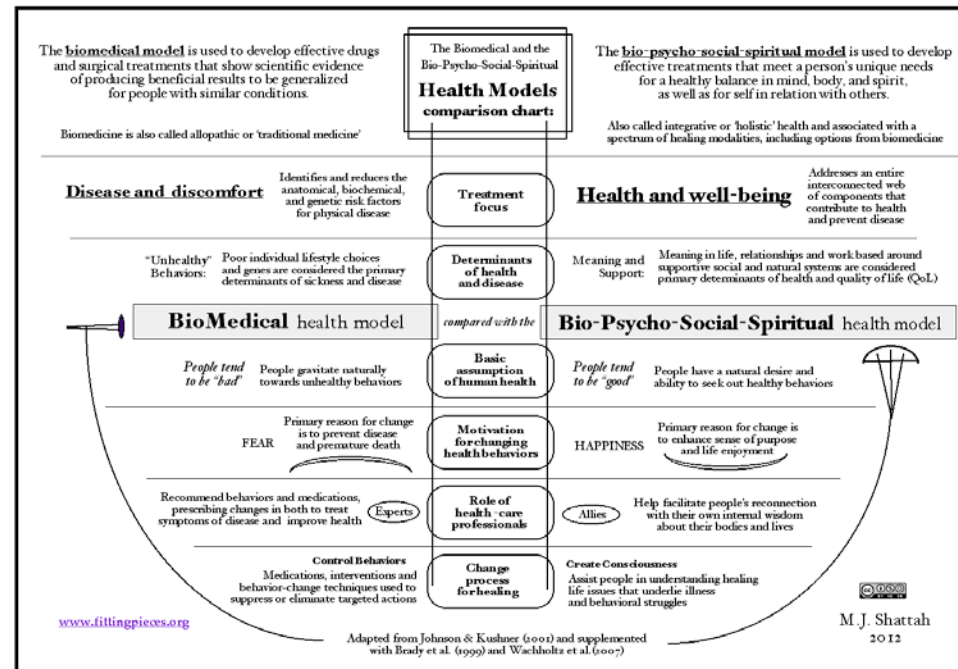
- In a review of exercise and yoga, it was found that yoga is as beneficial as more traditional types of physical activity at improving many health related outcome measures in both healthy individuals and those with health conditions such as cancer.

(Ross & Thomas, 2010)



# Yoga in Integrative Oncology

- Yoga potentially addresses many of the physical, psychosocial and psychospiritual needs of cancer patients and survivors. Yoga is an evidence based complementary and integrative medicine (CIM) modality.



# Evidence for yoga in cancer care

- In 2012 there were over 2000 journal articles online in yoga therapy
- 46 were systematic reviews of RCTs.
- Positive effects of yoga reported in conditions such as pain management, lymphoedema management, anxiety, quality of life, depression and CVD.

# Who has been studied?

In a meta-analysis of 10 RCTs,

- 7 studies assessed the effects of yoga for patients with breast cancer,
- 1 for lymphoma
- and 2 for mixed cancer populations.

(Buffart et al, 2012)

# What sort of yoga?

- The style of yoga, duration of program, frequency of practice and intensity varied however it appears likely there is a dose-response relationship.
- Programs ran from 4 – 12 weeks with many encouraging daily home practice.

# Types of yoga

Studies used;

- general hatha yoga involving *asana*, *pranayama*, relaxation and meditation;
- restorative yoga using chairs, bolsters and the wall
- Tibetan style yoga
- Yin yoga
- Iyengar style yoga



# Outcomes include fatigue, depression and inflammation

Wait list controlled study showed significant decreases in fatigue, depression and inflammation in breast cancer survivors after 12 weeks of 90 minutes hatha yoga twice per week.

(Kiecolt-Glaser et al, Yoga's impact on inflammation, mood and fatigue in breast cancer survivors: a randomised, controlled trial, 2014, *Journal of Clinical Oncology*)

# Pain management

- In 2 separate studies of women with breast cancer related pain who undertook mindful yoga, there was a significant reduction in pain reported.

(Carson et al, 2009; Cohen et al, 2004)



# Practices for pain management

- Yoga nidra/ iRest
- Body scan
- Body breathing
- Restorative yoga
- MBSR Mindfulness based stress reduction



# Lymphoedema management



- Yoga has been shown to:
- Tissue density in affected upper arm
- Pain esp. pain which limits activity



- Pelvic stability for lateral flexion of the spine
- ROM for non-affected arm in flexion and abduction
- Symmetry in these actions (Loudon et al 2012, 2014)

# Depression

- In a 2009 RCT yoga was compared with a support group.
- While both interventions significantly decreased depression, the yoga group experienced less depression. (Vadiraja et al, 2009)



# Anxiety

- Mixed results, some studies did not find any reduction in anxiety
- The greatest reduction in anxiety was in post chemotherapy breast cancer survivors. The group was relatively young, though it's unclear if the intensity of practice was greater than in other studies. (Ulger & Yagli, 2010)

# Digestion

- Culos-Reed and colleagues found decreased cancer related diarrhoea in their 7 week Thrive program (Culos-Reed et al, 2006).
- Cancer related nausea and vomiting decreased in a breast cancer group (uncontrolled) (Raghavendra et al, 2007).



# Red Flags

- Disorientation, dizziness, blurred vision or fainting
- Sudden onset of nausea, vomiting
- Unusual or sudden shortness of breath
- Irregular heartbeat, palpitations, chest pain
- Muscle cramps or sudden onset weakness/fatigue

# Special Considerations

- Watch for changes in arm or shoulder mobility or swelling especially following breast cancer or upper body surgery and treatments
- Hernia especially following bowel cancer treatment
- Changes in swelling or inflammation of the abdomen, groin, or legs especially following gynaecological cancer treatment.

# Adapting yoga for people with cancer

- Use wall or chair for balances
- Restorative and yin for fatigue
- Pay attention to anaemia – encourage *ujjayi pranayama* to improve oxygenation rate
- Encourage *bandhas* for core stability, prostate health/continence





# Yoga for cancer care

- Rest between active postures
- Avoid prone postures due to possible post-mastectomy discomfort, obesity or central lines
- Emphasise breath awareness, mindfulness, not pushing or forcing

# Yoga for cancer care

- Consider using blankets or mats for kneeling postures
- Adapt inversions eg 'dolphin' rather than headstand (helpful for re-engaging latissimus dorsi if severed surgically)
- In nausea, forward folding may be limited to 90 degrees
- Feet hip distance or wider in obesity for forward bends

# For yoga teachers to consider

- Clients are often but not always debilitated
- Clients on treatment may be limited by muscle weakness and/or pain from a tumour, surgery or therapy.
- *Create an atmosphere governed by tapas, svadhyaya and ahimsa.*



# The trouble with yoga therapy

- Heterogenous – the question of lineage
- Unregulated – anyone can call themselves yoga teacher/therapist
- Some evidence, lots of theory, unclear mechanisms
- Low level of training required (relative to rest of MDT who are minimum bachelor's degree trained)
- Look for Yoga Australia registration
- Level 1 – 350 hrs
- Level 2 – 500 hrs
- Senior – 1000+ hrs + 10 years experience



# The future of yoga in integrative oncology

- Survivorship clinics
- Wellness clinics
- Research projects
- Higher standards of training
- Professional bodies and their role

# For further information

- Yoga Australia [www.yogaaustralia.org.au](http://www.yogaaustralia.org.au)
- International Association of Yoga Therapists [www.iayt.org](http://www.iayt.org)

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