RHEUMATOID ARTHRITIS

STRUCTURAL YOGA THERAPY COURSE
June, 2008
Integral Yoga Institute, NYC

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1. Case Study
A. Initial Intake 3/18/08: LM is 50 years old, 5’2”, and 201 lbs. She lives with her best friend in her home. LM is a full-time licensed guide and outing coordinator for a guide service she owns and has operated since February 2002. She prefers to "live simply" and spends her time showing others how to seek a more peaceful existence in the outdoors. LM has a wealth of experience on hiking, backpacking, camping, snowshoeing, cross-country skiing, winter camping, paddling and trip leading, throughout the Adirondacks and White Mountains. Prior to this business venture, LM taught Physical Education and was a coach for 20 years. She was a national level athlete in her early teens and trained seriously for x-c and downhill ski racing. She was extremely active up until about 7 years ago, doing regular strength training along with a variety of cardio sports. Once she started her guide service, her activity level dropped due to the time she needed to be at her desk running the business. She began learning yoga postures 2 years ago but, hasn’t been consistent in her practice during the months of nice weather. She said, "I found it hard to find time and I didn’t want to be inside."

LM has had two major losses recently, her dog passed on in December 2006 and her husband suddenly passed October 2007. These losses have been very traumatic, such that she turned within a lot and has spent much time in prayer. She has acknowledged the importance of prioritizing her family and friends over her work. Some things she realized she could just let go of so not to have so much on her plate. These losses have deepened her spirituality. When she is not leading a trip, she spends 3 hours each morning in prayer, studying the bible and journaling before sitting down to work at her computer.

LM was diagnosed with arthritis as a toddler and for the 2nd time in her early 30’s when she had gone to the doctor because of severe knee pain and inflammation. The pain was shooting at times and she thought maybe she had cartilage damage. She ended up wearing knee braces so she could continue the activities of her job. She was so uncomfortable she finally went to an orthopedic surgeon in Burlington. Neither x-rays nor an MRI showed any tissue damage. However, fluid drawn from the joint indicated rheumatoid arthritis and that her joints were that of a 70 year old. Her doctor told her that she wouldn’t live past 40 without being in a wheelchair. She said, “I thought I was invincible so I did not follow up on the diagnosis.” She resolved that she was not going to be in a wheel chair. A stress test done on her knees at that time made her aware that she had looseness in the joints. She began strength training the muscles around the joints.

LM’s biggest complaint seems to be in her knees with flare ups from time to time when she over exerts herself, resulting in inflamed, swollen and red hot knees. During her busy season when she is hiking for full days and weekends the condition in her knees is the worst. Her left wrist has enlarged the past couple of years, causing her some pain and weakness. She has a finger on her left hand and her right great toe that are showing signs of arthritic twisting. There is also a spot on the outside top of her left foot that seems to her to be calcified. She has noticed weakness and pain when moving her wrists in radial and ulnar deviation. Recently her left wrist has become achy at times around the thumb.

LM has not taken any prescription medications for the Rheumatoid Arthritis. She will, however, take Ibuprofen when the inflammation causes pain. She is going to see a doctor soon as she feels she needs to go back onto medications for hypothyroidism. She was diagnosed with this thyroid condition in June of 1992, took medication for it from 1992 until June 2001. She stopped taking the medications for financial reasons as she lost her prescription coverage.
LM is also concerned about her weight and has always been aware of it. She was 135 - 140 lbs. in her high school years and into her 20’s. Her coaches told her she needed to lose weight. Throughout the next 30 years her weight fluctuated up and down. She said she became aware that she is an emotional eater. Significant losses and financial worries causing stress, frustration, anxiety and depression has her eating more than she should. She is very discouraged, depressed, embarrassed and feels so out of control. She knows what she is doing which results in weight gain, yet she can’t seem to help herself. She’s lost her self discipline. With the loss of her husband and the resulting grief, she didn’t care if she gained weight. She said, “She is ready to make the changes she needs to get fit and healthy again, and I now know I can’t do this on my own. I feel I need to be accountable to someone besides myself at this point – it seems I don’t actually care enough about myself to do it on my own!”

LM says she is prone to depression with very deep lows and very high highs. She’s been treated for depression and stress with the latest being 1999-2000. She was on medication then but stopped the meds in 2001 when she decided to try to handle the depression by natural means. She experiences fatigue by late afternoon and said, “I have always fatigued” much more than those around me, but have just accepted it. I asked LM if she had childhood illnesses. She said, “I often experienced anemia and I have hypothyroidism otherwise, I have and am relatively healthy outside of the seasonal cold.” She was sickly through the later years as a Physical Education teacher with respiratory and throat issues, which have been attributed to allergies from having an office inside the girl’s locker room (molds, bacteria, etc. resulting from improperly maintained facility). She has had sinus issues at times due to allergens.

LM is very passionate about her work and she needs a strong healthy body in order to do it and to feel peace again with her body. She hopes that as a SY case study client she can learn to be more disciplined with a regular exercise and relaxation program that is suited to her specific needs.

LM appears to have pitta tendencies when it comes to her work. She is highly organized, a leader and over achiever, with a tendency towards working too much with not enough personal and play time with family and friends. With her family and friends kapha attributes show, as she has a soft good heart. She’s highly sensitive and shows her emotions easily. It appears that she has been giving much of her energy away and with her recent losses she’s accumulated much grief and stagnation – kapha imbalance.

LM’s Goals:
- to deter and maybe lessen the debilitating affects of her diagnosis
- to be more disciplined in taking care of herself – making the time for self and play with good friends and family
- to eat better and lose 50 lbs. … this not necessarily part of the SY but, a commitment she is making as well

B. Physical Assessment: Session II, 3/26/08
The initial intake was done on March 18, 2008. The physical assessment was done during a second session on March 26, 2008. During the physical assessment I did the postural analysis, SI test, MT and ROM testing on the lower body followed by teaching the Joint Freeing Sequence.

Body reading:
- Stands erect
- Forward Head may indicate Tight SCM and/or weak upper trapezius
- Shoulders even
- Hips even
- SI moved well both sides
- Spine straight – no visible signs of scoliosis
- Leg length even in supine position
- Dry skin

### Muscle Testing Assessments

<table>
<thead>
<tr>
<th>Joint Action</th>
<th>1&lt;sup&gt;st&lt;/sup&gt; Date 3/26/08</th>
<th>1&lt;sup&gt;st&lt;/sup&gt; Date 3/26/08</th>
<th>2&lt;sup&gt;nd&lt;/sup&gt; Date 5/19/08</th>
<th>2&lt;sup&gt;nd&lt;/sup&gt; Date 5/19/08</th>
<th>3&lt;sup&gt;rd&lt;/sup&gt; Date 7/10/08</th>
<th>3&lt;sup&gt;rd&lt;/sup&gt; Date 7/10/08</th>
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<tr>
<td>Flexion</td>
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<tr>
<td>Hip Flexors – Bent Knee (Supine)</td>
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<td>Iliopsoas Isolation (Supine)</td>
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<td>Hamstring Cramping</td>
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### Range of Motion Assessments

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</tr>
<tr>
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<td>HIP</td>
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</tr>
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<td>Flexion (Bent Knee)</td>
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<td>110</td>
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<tr>
<td>Flexors -quad/psoas restriction</td>
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<td>NSS</td>
<td>Both Tight</td>
<td>Right More</td>
<td>Still tight but, a</td>
<td>Better still.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>little better</td>
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C. Summary of Findings:
First Test - 3/26/08
The MTs for gluteus maximus isolation, knee flexion and sartorius all exhibited cramping in the lower hamstrings and gastrocnemius which is indicative of weakness in those muscles. The gluteus maximus isolation test showed minimal and no movement of the knee lifting which indicates weakness. The sartorius needs strengthening. The hip flexors proved tight during the quad/psoas restriction test; when taking the knee to the chest on each side, the opposite knee lifts significantly from the table and the lower leg straightens.

Second Test - 5/19/08
The practice to date has resulted in increased ROM and strength in the hip flexors and external rotators. Knee flexion strength increased and there was less cramping but, the ROM decreased as her quadriceps are tight, especially rectus femoris as is indicated from the quad/psoas restriction test. The Gluteus Maximus isolation tested “0” and “1” - LM can not get the left knee to lift off the table and barely can lift the right knee – there is still cramping in the hamstrings. Sartorius strength has increased.

Third Test – 7/11/08
The practice has increased strength in LM in all the muscles noted to strengthen in the chart below. Even though I couldn’t get a good read on the psoas and sartorius isolation tests, both LM and I felt they were stronger. The summer months are most strenuous for LM due to her guiding clients on hikes. As a result, although we have seen strength increase, her ROM has decreased in knee flexion due to really tight quadriceps and all other muscle’s ROM showed no significant change compared to the 2nd test. There was substantially less cramping in her hamstrings.

<table>
<thead>
<tr>
<th>Strengthen</th>
<th>Stretch</th>
<th>Release</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psoas</td>
<td>Quadriceps / Rectus Femoris</td>
<td></td>
</tr>
<tr>
<td>Sartorius</td>
<td>Iliopsoas</td>
<td></td>
</tr>
<tr>
<td>External Hip Rotators</td>
<td>Internal Rotators</td>
<td></td>
</tr>
<tr>
<td>Gluteus Maximus</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hamstrings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gastrocnemius</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

D. Recommendations – Session II – 3/26/08
- Perform the JFS to soothe vata, improve prana and cultivate sattva – serenity. Focus to isolate and open each joint and feel the muscles work – both strengthening (the muscles contracting) and stretching (the muscles releasing) – to improve freedom of movement. LM has a lot of body awareness due to her years as an athlete and her study and work as a physical education teacher and coach. If there is a day she can’t perform all the exercises, I directed LM to do just the first side of the JFS sheet, exercises 1 – 8. These exercises will work on the muscle groups most needing strengthening at this time i.e. Hip external rotators, hip flexors, knee flexors.
- Synchronize the movements with breath awareness. Stay present and take a full 30 – 35 minutes to do the exercises. Include at least 5 minutes of relaxation (Savasana) to integrate the experience, check in and see what’s present physically and emotionally. Let go … relax. Practice Kripalu Yoga’s hallmark, “The practice of being present” … Breath, Relax, Feel, Watch and Allow.
- Cultivate body sensitivity – what are you feeling? This awareness will ultimately develop more desire for self care, so you’ll feel better, both physically and psychologically. LM is
aware that losing weight will help take pressure off her knees and, she will be able to perform the functions of her job with more ease.

- Drink more water! LM was cramping during some of the muscle tests, such that it will be interesting when we retest as some of the scores could have been off.
- Take breaks during the days when there is a lot of office work. Do a few stretches, go for a walk, do something to center yourself back in your body – even a few long deep breaths.
- Have an I CAN, I WILL attitude – empower yourself (3rd chakra). LM shared her need for motivational support, someone to be accountable too, and to help her work through her issues. LM is very focused in her work life and now she sees the importance to funnel some of that energy towards herself.

Session III – 4/23/08

E. Results of Session II Recommendations:
A month has lapsed since meeting due to a fall LM took on the ice and concrete sidewalk, one week after starting the program and then both of us had gone away on vacations. During this time we did talk by phone and communicated by e-mail.

LM wanted to share right away that she already noticed some improvement:
- “I lost 7 lbs!” was the first thing she shared.
- She did all the recommendations the first and forth weeks; doing the exercises daily for at least 30 minutes. The two weeks following her fall, she did the exercises on and off as she felt she could and knowing that light exercise aids healing as blood flow is increased to the injured areas. Within a week she was doing all of the exercises and noticed the pain was nearly gone by the end of the second week. Trunk flexion and rotation were most uncomfortable during those weeks. Some tenderness remains but is not limiting her now.
- She found herself breathing into the rib pain from the fall.
- She controlled the movements and felt more at ease as she progressed.
- Her joints are making less noise.
- Her posture has improved especially in Dandasana – stick pose.
- No notable RA pain during the exercises.

During daily activity:
- She’s feeling less worry, more focused, and more productive throughout the day.
- She feels more energized, calm and less need for sleep. Sign of vata balance.
- She found herself asking questions, “Who am I and what do I want to be? What are the priorities I want to be part of my life. How can I bring what I am learning from this program already so it is part of my lifestyle?”

LM’s awareness and sensitivity is developing wonderfully in spite of her fall she showed great will to move forth. The insight that is naturally arising shows she’s working through Koshas one (the physical body), two (energy body), three (the mind) and tapping into Kosha 4. Her pitta is down, she’s experiencing sattva - so vata is rising and there is a shift in kapha with regards to the weight loss.

D. Session III Recommendations 4/23/08:
- Continue with recommendations from Session I
- Since there is still some residual pain in the ribs continue with the JFS as best as you can and show caution on exercises 6 b. Spinal Flexion 7 b. Hip Flexion, 16 Scapular Abduction and Adduction,17 Spinal Lateral flexion and 18 Spinal Rotation.
- No new added exercises.
• LM wanted to learn how to meditate, to keep centered and to understand the difference between meditation and prayer, which she does each morning. In a comfortable seated position, I guided a meditation using the wave breath to improve the movement of prana and focus the mind on a single point. This practice is to cultivate sattva and quiet the mind (manomaya kosha). LM will continue with her prayer and bible study as she likes and work into the pranayama (wave breath) and meditation for an amount of time that works for her. The wave breath can be let go after a few minutes settling on a single point of the breath as a focal point. Her spirituality is deep. The new practices of pranayama and meditation can open LM to a high level of consciousness and connection to spirit, Koshas four and five.

• Practice Yoni Mudra as a relaxation when retiring at night. Touch the tips of your thumbs and index fingers together forming a downward facing triangle. Place the thumbs at the navel. Don’t use a pillow under your head, lie flat as in Savasana. Let the neck and spine align and direct the breath below the belly button into the triangle. This allows vata to return to its’ seat at the pelvic floor.

Session IV – 4/29/08
E. Results of Session III Recommendations:
LM practiced the JFS and relaxation daily this past week 30 mins./session, plus meditation 15 minutes 4 times. The wave breath has deepened LM’s awareness of moving with breath, she said, “it feels natural”. Her sensitivity is building as she feels improved ease in her movements, she feels when secondary muscles are working to help her, and she feels her ROM has increased all over. There is no pain when doing the exercises but, sometimes she cramps in what appears to be rectus femoris and gluteus medius when performing exercise #5.

LM had an injury on Sunday when out on a walk in the woods. Accidents are a sign of vata imbalance. A piece of wood punctured the side of her left calf muscle. She had to have a tetanus shot and she is taking antibiotics.

D. Session IV Recommendations:
• Continue with all previous recommendations. Regular practice is needed to increase and maintain ROM, muscle strength, energy flow and relieve stiffness.
• Add JFS #7 adaptation: Sunbird with external hip rotation and abduction to strengthen the deeper external hip rotators and gluteus medius. Work up to 6 repetitions on each side.
• Add Pelvic Tilt and Thrust from a supine position with the knees bent aligned over the ankles to help release tightness in the hip flexors and increase flow of prana to the pelvic region.
• Add SI Stabilizer to increase mobility in the pelvis, strengthen and stretch the iliopsoas and to stretch the quadriceps. Use a cushion to elevate the hips so you feel more level and so there is no discomfort in the knee.
• Persevere with the meditation practice as its normal at first to feel that you can not quiet your mind. Keep coming back to the wave breath over and over again. Remember to cultivate presence in the moment: Breath, relax, feel, watch and allow.
• Should your injury pose any difficulty when doing your practice, back off as needed. Do less repetitions of each exercise or focus primarily on JFS exercises 1 – 8 plus, the new exercises, relaxation and meditation.

Session V – 5/6/08
E. Results of Session IV Recommendations:
LM’s injury last week did not hinder her from doing her practice. She practiced six days, 35-40 minutes. LM is committed to the program and she said with a big smile on her face, “I really feel it is working”.

LM is noticing other changes – signs of vata and pitta balancing. She’s accepting more that in her daily tasks everything doesn’t have to be perfect and everything on the “to do” list does not have to get done ‘now’. She is eating better, and not making excuses any more for not taking care of herself. She adopted an “I can” and “I will” attitude, third chakra empowerment. She is less anxious and less restless when she goes to bed at night. She’s more settled and feels thoughts are not keeping her from falling asleep nor is she waking with anxiety about all she has to do.

I retested both ROM and MT (see chart results above).

D. Session V Recommendations 5/6/08.

- Add JFS #5 adaptation: Begin with the leg lifted 3-6” from the floor with feet together. As you rotate you leg outward you will increase strength in the major muscle of external hip rotation in the front of the body, the psoas, when the leg is as wide open as possible, bend your knee, heel comes towards the groin – this movement will strengthen the sartorius muscle. Finish by extending the leg back out, with external hip rotation and then swing the leg back, knee and toes pointing upwards. If time is limited, replace this #5 exercise with the other one and alternate every other day. Don’t completely replace the #5 exercise with this adaptation, as there is still need to work on ROM for internal and external hip rotation.

- Add Vinyasa as a slow flow to your practice – see below

Note: LM asked to begin strength training with weights in preparation for her busy summer season. She has a scheduled 14 mile guided mountain hiking trip - 8 – 12 hr. in a month. I asked that she not weight train as it could skew the results of this case study. So, instead I decided to give the following Vinyasa to help with her strength and stamina concerns. I am acknowledging that I would have waited two weeks or more before adding an asana practice. Given LM’s background, her good body awareness and the results of her ROM and MT tests I didn’t think it inappropriate. I did express concern that she not push herself and that she listen to her body.

This asana practice is one that can help balance kapha dosha. It should be done with the purpose to strengthen the body which generates stamina and to purify their physical tissues. Postures are to be held long enough to challenge, but not too long as to strain. When done well, she should gain the feeling of vitality and joy.

1. **Mountain Pose**: Take 3-6 breaths rooting your feet, setting an intention, centering your body, stilling the mind.
2. **Upward Namaste**: Inhale bring hands overhead, touch palms and look up – open to your higher power.
3. **Forward Bend**: Exhale extend the spine, hinge at the hips, lead with your heart and forward bend. Strengthens: Hip Flexors. Inhale, lengthen the spine, bend the knees …
4. **Runner’s Stretch**: Exhale step back with the right leg and place the knee on the floor - sliding it back to a position that is comfortable, place hands on both sides of the left foot and align the front knee directly over the ankle, perpendicular to the floor. Hold for 3 – 6 breaths. To strengthen: Hamstrings and gastrocnemius (front leg). To
stretch: Quadriceps and hip flexors, including the psoas muscle and the adductors which are often neglected. This pose contributes to good mobility in the lower back and hip joints, cultivating a good lower lumbar pelvic relationship.

5. **Warrior I with heel down**: Exhale lift the back knee, put the hands on the hips and use leg strength rooting down strongly, turn the back foot out a little and place the heel on the floor, raise the arms shoulder’s height or overhead. To strengthen: Hip external rotators including gluteus maximus (back leg), hamstrings, hip flexors and gastrocnemius (front leg). To stretch: Psoas (back leg).

6. **Warrior II**: Exhale open the right hip, turning to square the hips and shoulders with the wide side of your mat, adjust the feet – aligning your left heel with the heel of the back foot and the distance between your legs being about the length of one of your legs. Your chest is lifted, shoulders are back and the shoulder blades are down, the arms are shoulder’s height. Gaze to your left thumb and hold the pose up to 6 breaths. To strengthen: external hip rotators (back leg) including gluteus maximus. To stretch: Hip flexors - psoas and rectus femoris (back leg), quadriceps (back leg), hamstrings and gastrocnemius.

7. **Warrior I with the back heel lifted**: Inhale bring your arms overhead shoulder distance apart, exhale turn your hips square back to the front of the mat, readjust your feet so there is a sturdy foundation – hips width apart, come onto the ball of the back foot and engage your inner thighs (adductors). Hold for 3 breaths. Same benefits as in #4.

8. **Standing Squat**: Inhale, place your hands on the floor on each side of the foot – lunge pose. Exhale, bend the back knee and step the foot forward, drop your hips up to parallel to the floor. Inhale, bring the arms shoulder height and rise up very slowly, leading with the heart, and with a little upper back bend. To strengthen: Hamstrings, gluteus maximus and gastrocnemius. Stretches: Quadriceps.

9. **Mountain Pose**: Exhale, bring your hands to Angeli Mudra at the heart and breath into an uplifted open heart space. Take a breath in and out and ...

10. Repeat on the other side.

*Functional Anatomy references (see below).

Session VI – 5/13/08 by phone.

E. **Session V Results of Recommendations**:

Practice was done each day this past week for about an hour/session. She didn’t meditate as time was limited, but she did do the relaxation. There were no flare ups of RA but, she had muscle soreness around the hips and below Gluteus Medius. The vinyasa had her working such that she sweats. She really enjoyed the muscular challenge and focus the vinyasa required. When she wakes up at night, she uses the wave breath and it gets her back to sleep. She is noticing she has the capacity to sit and focus more when she works.

D. **Session VI Recommendations – 5/13/08**:

- To reduce and ultimately eliminate soreness in the hips, alternate every other day as follows: One day do regular JFS #5, and do #7 adaptation. The next day do the adapted #5, and regular #7 (see 4/29 and 5/6 notes).
- Do the Vinyasa every other day rather than daily.
- Since seated meditation is not comfortable at this time, see if you can lengthen your relaxation practice.
- Continue Yoni Mudra but, prop the elbows so the hands stay in place.

Session VII 5/19/08 by phone.
E. Session VI Results of Recommendations:
LM feels she is getting a lot out of the program which she performed each day this past week 1 hour/day. LM also takes 20 minutes each morning for prayer and bible study which she reports she is settling into more easily now and with praise and reflection, “it’s very peaceful”, she said.

LM’s physical body awareness is deepening as she is noticing more subtle changes and improvement in her posture, strength and flexibility. Doing JFS #5 and 7 as recommended last week, is working well as she isn’t feeling the muscle strain/soreness. LM mentioned she is relaxing more in the JFS exercises so she retains energy for the strength required in the vinyasa – good discernment, a sign of balancing pitta. She is flowing more in the vinyasa, holding each pose for 3 breaths and she seeks and is finding ease in the poses. She is feeling more self confident and insights are arising. She commented, “I realize I put way too much pressure on myself and that I need to accept myself right now and that everything will be okay – as I’m not happy with myself physically. I’m committed to taking care of myself and doing what I have to do – I want to be happy and feel good!”

LM is going to the lab this week for blood work to check the status of a past diagnosis of hypothyroidism. If she still has this condition, and since she isn’t being medicated for it at this time, it can be contributing to what she feels is a sluggish metabolism, weight concerns, fatigue and much more.

D. Session VII Recommendations – 5/19/08:
No new recommendations this week.

Session VIII – 5/27/08
E. Session VII Results:
LM did her practice 6 days this week for 1 hour a session. LM went on short hikes this week in preparation of her guiding the 14 mile hike on June 13. She didn’t take her hiking poles with her one day, which she said she needs for coming down hill, as it takes pressure off the knees. She is noticing some swelling has set in.

Since our previous two visits were by phone, and she had not done her practice today, I asked her to go through the JFS and one round of the vinyasa so we could polish the practice. At the end of the practice I guided a meditation in the restorative supportive bridge pose to help stretch her hip flexors and to encourage deep relaxation. At first her legs were shaking and then she was able to let go; she felt she could soften her effort to be steady and comfortable.

D. Session VIII Recommendations – 5/27/08:
- Continue with the JFS.
- Do 2 rounds of the vinyasa only if there isn’t swelling in the knees – otherwise increase your relaxation time.
- Do savasana for 5 minutes after spending 5-10 minutes in the restorative supportive bridge pose to help stretch the hip flexors and ultimately release any held tension.
- Consider what your symptoms are telling you, when the ‘dis-ease’ flares (swelling and inflammation) what is the cause? Know that when you over exert yourself, that it can have life debilitating affects. At what point are you going to be willing to acknowledge that you need to say “no” to jobs that may be too strenuous for your condition? Please stop telling yourself that you may be one of the lucky ones and listen to your body. Remember back when you were 30 and your doctor told you, “You won’t be able to walk in 10 years”. Don’t let the job you created and love kill you. Since it has been 21 years
since you have seen a doctor for the RA, I would suggest a follow-up with a RA specialist.

Session VIII 6/6/08
E. Session VIIII Results:
Lynn practiced 4 times this week and the other days unexpected family obligations arose which disturbed her morning practice routine. As she shared what went on this past week, insights regarding family issues, her need for family support, especially surrounding the grief from losing her husband arose.

More ease is coming with continued practice and from the polish we added to the JFS last session. During the restorative bridge pose kriya expressed as legs shaking went on all week some days more than others. More insight seems to be arising during her bible study, prayer time and relaxation.

D. Session VIIII Recommendations 6/6/08
• No changes to the physical practice – continue with mindfulness and cultivating more awareness to the varying sensations that arise as well as synchronizing movement with breath. This balances prana/vata.
• Continue the restorative bridge pose and be present with any shaking as its deep tension letting go.
• Continue to be open to what you need to take care of your self. Set boundaries with loved ones so you have time to do your sadhana (spiritual practice) without interruption and regarding when you do and don’t have time to help them with work. Let them know how important this is to you. The higher your stress levels the likelihood your RA symptoms will flare too. To help resolve emotional family wounds consider counseling alone and/or with your parents. Diane Bryjak is a very experienced individual and family counselor right here at Inner Quest Yoga & Wellness Center.
• Diet and lifestyle recommendations … see 2c.

Session X 6/10/08
E. Session VIII Results:
LM practiced the full program 3 of the 5 days since our last visit and the restorative bridge pose the other days as much inflammation/pain was present in all her joints. During the restorative pose, shaking in her legs was gone, however, “weird quivering” deep in her pelvis was present. Such shaking is a result of tension departing the body from yoga deep effectiveness.

I see the shift in LM as she is working through the koshas. Insights are allowing her to see more clearly what she needs and how this practice needs to be part of her lifestyle; she appeared serene and content in this knowing. Discernment is resulting in her job and diet.

D. Session X Recommendations – 6/10/08:
• Add Restorative Bound Angle and Legs Up the Wall with breath directed below the navel. The restorative practice is to help balance prana/vata and reduce pitta symptoms of inflammation and swelling: Use the Restorative Bound Angle for deep rest and relaxation any time and the Legs Up the Wall pose to help with swelling, fluid retention in the legs, fatigue and difficulty getting to sleep.
• Try to rest and restore in any of the three restorative poses alone or in a sequence 2 x a day - the minimum 15 minutes you have been doing is good. Direct your attention and
breath to your pelvis and invite prana/vata to return home. Allow letting go and eliminating anything that might come to mind that doesn’t serve your well-being.

- Before each practice session, make a resolution, a firm intention directed toward a specific outcome. Be clear and use your will to make it happen. In Yogic terms this is called a Sankalpa. Don’t underestimate the power of intention, “when there is will, there is a way.”
- Consider Yoga Sutra II, I: The practical means for preparing the desired state of higher consciousness consists of three components: self-discipline and purification, self study, and living your life as service to the Lord.¹

E-mail correspondence 6/14/08, from LM.
LM wrote, “Just a quick note to let you know I survived the hike yesterday (11 miles instead of 14). I was fine on the flats and downhill and gradual climbs but tired on the steeper climbs. (This was only a about a mile total.) So it seems my hamstrings are still much weaker than my quads. My quads are somewhat tight this morning but the rest of me feels fine. I did the restorative pose with my legs up the wall last night. I have no swelling in my knees this morning. I did use ibuprofen throughout the day yesterday.

My abdominals and back muscles cramped quite a bit when I was sitting on the last summit and on the way home. I’ve never had that happen before. I now realize it’s from a lack of strength in those areas. I didn’t think much of it at first. As it continued I realized I carry a hefty day pack and have always conditioned for such prior to my season. That's all part of my spring strength training usually.

The areas that are weakest now are my hamstrings, abs & lower back.”

Session XI 6/22/08
E. Results from Session X 6/10/08
LM is doing some or all the practice daily based on the physical demands of her job each day. She’s finding a balance between prayer/meditation time/rest and doing the physical practice described. LM is recognizing that what has been prescribed as SYT is a spiritual practice (sadhana) that must be incorporated into her daily lifestyle. She found that splitting up the practices works well – some in the morning to get her going and some in the evening to relax and let go.

D. Session XI Recommendations – 6/22/08:
To address LM’s need for practices that would strengthen her hamstrings, abs and lower back, the following was given.

- During JFS Sunbird exercise incorporate knee flexion when in hip extension. Inhale raise one leg up and back (hip extension), hold then exhale bend the knee - feel the contraction of the hamstrings and gastrocnemius, inhale back to hip extension, exhale knee to nose. After six repetitions, and if you feel up to it, do one more sunbird hold and do 6 more reps of knee flexion. Relax in Child’s pose before switching to the other leg.
- Cobra to increase lower back strength specifically working the erector spinae muscles. Use minimal or no support of the hands, but work to lengthen the spine forward and up when you raise the upper body. Do not come up to your maximum — rather rise slowly using your back muscles to a point that is comfortable and steady, pause at the top of the inhale and lower slowly with the exhale. Do 4-6 repetitions and as your strength increases hold the last one, placing your hands on the floor, and come up just a little
higher; this will increase strength of lattisimus dorsi. This will help with needed strength for carrying your back-pack.

- Locust pose to strengthen erector spinea. Do up to 6 repetitions on each leg. You may alternate between this exercise and Sunbird to do the hamstring strengthening as indicated above i.e. bending the knee when the leg is in hip extension.

- Boat pose to strengthen rectus abdominus – hold initially for up to six breaths, you will be eventually working towards 12 full deep breaths. Warm – up seated with knees bent and feet on the floor, arms extended straight in front of shoulders and do pelvic tilt and thrust 6 times. Inhale lengthen the spine, pelvic tilt (feel the natural curve of your lower back), exhale curl the lower back and pelvic thrust.

- I loaned LM the book Ayurveda: A Life of Balance, by Maya Tiwari to help LM understand more of the Ayurveda principals of food and how she can incorporate foods into her diet that are Pitta balancing and ultimately reduces inflammation. The book has many good recipes and food charts.

**SESSION XII 7/10/08**

**E. Results from Session XI 6/22/08**

LM practiced JFS and asana 3-4x each of the weeks since our last visit, but did her prayer, relaxation and yoni mudra before bed daily. She indicated that she has to find how she will incorporate her asana practice more when she has overnight trips, it just didn’t work in a tent. She reported that she felt the new poses really helped strengthen her hamstrings, abdominals and back muscles. She was able to carry her 25 lb. pack without the soreness she was experiencing before our last visit. She found she is able to keep her muscle and joint soreness under control on the trails and on over-night trips with dietary choices, minimal IBuprofen and sitting in cold brooks. She had no swelling in the knees, just a little in the feet, but the summer heat and hiking itself can contribute to swelling there.

Overall, this program has increased LM’s awareness and sensitivity greatly. She feels more content that she is doing something for the issues she’s been concerned about versus avoiding them. She feels she was shown and experienced what she needs to do to live a healthful lifestyle. The program has showed her that the practice of Yoga Sutra II, I is key to handling her “dis-ease” with grace: discipline, self-study and surrender.

LM’s spirit shines with vitality, she said she is excited with the summer season upon her and feels the program helped reduce fatigue, anxiety and depression.

LM has met with her doctor as recommended and was retested for both hypothyroidism and RA. The hypothyroid test indicated a small amount of medication would be appropriate at this time. The RA tests should be back this coming week. The doctor was not convinced that she has RA based on her history, symptoms and how they tested 20 years ago. There is a good chance she has a different form of arthritis.

LM found the Ayurvedic book I recommended last session had a lot of good information, diet ideas and recipes. She is purchasing the book. She is making it a point to understand the signs of dosha imbalance and that the anti pitta diet should be beneficial for reducing her arthritis symptoms.

**D. Session XII Recommendations – 7/10/08:**

Continue the program as is ultimately during these busy times 4 x a week. During strenuous days, do the JFS only, no vinyasa but, definitely taking the time for the relaxation time, meditation and prayer everyday. Stay keen to the dietary choices and keeping sattvic. Live,
love, laugh and enjoy life as it seems you are. Stay in contact with me and consider meeting in a few weeks.

2. Name and Description of Condition
   a. Rheumatoid Arthritis (RA) is an autoimmune disease characterized by chronic inflammation of the joints that can also involve inflammation of tissues in other areas of the body, such as the lungs, heart, and eyes. Because it can affect multiple organs of the body, RA is referred to as a systemic illness. While RA is a chronic illness, meaning it can last for years, patients may experience long periods without symptoms. Typically, however, RA is a progressive illness that has the potential to cause joint destruction and functional disability. Your immune system protects your body against foreign invaders such as bacteria, fungi, and viruses. But, with RA, the immune system loses its ability to tell the difference between these foreign invaders and the body's normal cells. It begins to attack those normal cells too.

   The damage starts when your immune system begins to weaken your joints. Unlike minor injuries that heal over time, the deterioration of bones and cartilage within the joints caused by moderate to severe RA does not go away. Even without serious symptoms, RA could irreversibly destroy your joints. So, if unchecked RA progresses in 3 stages: 1) inflammation in the synovial lining of the affected joints, 2) destruction of bone and cartilage, and 3) irreversible joint destruction and deformity.

   RA is a common rheumatic disease. *Rheumatic diseases are clinical problems involving joints, soft tissues and allied conditions of connective tissues.*

   More than 2 million people in the United States have RA. Generally, it affects more women than men. RA typically develops between the ages of 25 and 50. While RA itself is not inherited, what can be inherited are the genes that may make someone more likely to develop the disease. Although scientists believe it is unlikely that genes alone bring about RA, research continues to discover what role genes may play in the development of the condition.

   ![Normal Joint, Osteoarthritis, Rheumatoid Arthritis](Pictures from: www.medicinenet.com/rheumatoid_arthritis/article.htm)
In rheumatoid arthritis, multiple joints are usually inflamed in a symmetrical pattern (both sides of the body affected). Occasionally, only one joint is inflamed. When only one joint is involved, the arthritis can mimic the joint inflammation caused by other forms of arthritis, such as gout or joint infection. Damage to the joints can occur early in the disease and be progressive. Moreover, studies have shown that the progressive damage to the joints does not necessarily correlate with the degree of pain, stiffness, or swelling present in the joints.

The cause of RA is unknown. Even though infectious agents such as viruses, bacteria, and fungi have long been suspected, none has been proven as the cause. The cause of RA is a very active area of worldwide research. Some scientists believe that the tendency to develop RA may be genetically inherited. It is suspected that certain infections or factors in the environment might trigger the immune system to attack the body's own tissues, resulting in inflammation in various organs of the body such as the lungs or eyes.

b. Gross and Subtle Body Common Symptom

The signs and symptoms of rheumatoid arthritis may come and go over time. They include:

- Fatigue, which can be severe during a flare-up
- Depression
- Lack of appetite
- Pain and swelling in the joints, especially in the smaller joints of the hands and feet
- Generalized aching or stiffness of the joints and muscles, especially after sleep or after periods of inactivity
- Loss of motion of the affected joints
- Loss of strength in muscles attached to the affected joints
- Low-grade fever
- Chronic inflammation can cause damage to body tissues, cartilage and bone. This leads to a loss of cartilage and erosion and weakness of the bones as well as the muscles, resulting in joint deformity, destruction, and loss of function.
- During flares, joints frequently become red, swollen, painful, and tender. This occurs because the lining tissue of the joint (synovium) becomes inflamed, resulting in the production of excessive joint fluid (synovial fluid). The synovium also thickens with inflammation (synovitis).
- General sense of not feeling well (malaise)

2c. Related challenges (Lifestyle, diet, limitations on activities):

Since RA can be so debilitating in advanced stages of the disease it is key to healthy living that good conscious effort be put forth in eating for wellness, exercising and relaxing. Good healthy habits can in turn help with pain management and symptom reduction which is a primary target for RA sufferers.

Exercise and Relaxation

Although it may be challenging for many RA clients, depending on the stage of the disease, the Arthritis Foundation recommends three areas of work: range of motion exercises, which help relieve stiffness and add to flexibility; strengthening, such as weight lifting, because good strong solid muscles better support the joints; and conditioning or endurance exercises, such as power
walking, for overall strength. Maintaining optimal weight is important so not to add undue stress on the joints. Clients should do enough that they maintain a good level of fitness but, not overexert themselves as it can lead to inflammatory symptoms. There should be a good balance between exercise and relaxation. For an exercise program, seek the advice of a qualified professional who know how to adapt to the individual needs and limitations.

The Joint Freeing Sequence exercises and Structural Yoga asanas as described in the book *Structural Yoga Therapy*, by Mukunda Stiles are good for people with RA for its range of motion, strengthening and toning benefits. The Joint Freeing Sequence can be adapted to each individuals needs and may be done on the floor, in a chair or standing. Relaxation in Corpse Pose and other Restorative Yoga poses along with breathing techniques, such as the wave breath and the five pranayamas for healing and pain, can be helpful for keeping centered, reducing stress, inducing healing through the deep relaxation that comes with practice. Such restorative yoga poses can potentially release stuck energy and reducing RA flare up symptoms such as inflammation and fatigue. RA sufferers can search the website www.yogatherapycenter.org for a certified Structural Yoga Therapist that can design a safe yoga program that would adapt to particular client’s needs.

Many RA sufferers have a high tolerance for pain and so on days they feel better, there may be a tendency to over exert them selves. It should be emphasized that rest should be a regular part of the program no matter if he/she feels energetic.

As the disease progresses many RA clients find their physically disabling symptoms also affect them emotionally. Depression, an inability to perform simple tasks easily, decreased social activity, hopelessness, reduced desire to exercise, decreased libido and such are common. Seek the help of qualified professionals that can help manage symptoms: Counseling, working with a RA specialist and other holistic practitioners.

Diet

Diet suggestions are made to help decrease inflammation and it’s furthering debilitating affects. There were varied recommendations so it would be wise to get advise from a RA specialist, but the following seem to be general guidelines.

Many practitioners suggest that arthritis sufferers should eliminate night shade plants (potatoes, tomatoes, bell peppers and eggplant), dairy, alcohol, caffeine, shellfish, soda, refined sugar, many of these are suggested for good dietary practice for anyone. See explanation for why night shade plants should be eliminated below in Yoga Forums Q & A.

The website, *The World’s Healthiest Foods* suggests the following for reduction of RA symptoms:

Eat More:

- Omega 3 fatty acids from good food sources should be included for the reduction of inflammation, fatigue, obesity and joint pain. Cold water fish such salmon, tuna, herring, mackerel and halibut, cod, cod liver oil, flax seeds and walnuts are good sources of omega 3 fatty acids.
• Vitamin-D: Salmon, tuna, shrimp, sunflower seeds, eggs and (provided no dairy allergy is present) vitamin-D fortified milk products for their vitamin D to enhanced immune function.
• Organically grown fruits and vegetables contain essential nutrients to protect health.
• Extra virgin olive oil has high content of monounsaturated fatty acids and its high content of anti-oxidative substances.

Eat Less:

• Dairy, if allergy is suspected or confirmed
• Wheat, if allergy is suspected or confirmed
• Meat, particularly high-fat cuts
• Saturated fat, including partially hydrogenated oils

As a yoga practitioner, most notably I’m drawn to the Science of Anna Yoga (Food Yoga) and the ancient science of Ayurveda, both place great emphasis on the relationship between food and health. The concept of a balanced whole foods diet has basically come down from extremely scientific diet patterns found in these ancient sciences. A pitta pacifying diet can help to keep fiery symptoms at bay. Maharishi Ayurveda Newletter Archives suggest such a diet would be especially beneficial during the summer months for it’s cooling affects. A pitta pacifying diet favors juicy, cooling foods with high water content while avoiding hot spices alcohol, vinegar, fried foods, tomatoes, yogurt and cheese. Foods should be fresh and organic, if possible. Avoid leftovers, packaged, canned or bottled foods, processed foods, preservatives, artificial ingredients and salty foods. You can Google the web for a pitta pacifying diet and Anna Yoga and seek the advice of an Ayurvedic Practitioner.

Limitations on Activities

The Arthritis Foundation suggests - modify job tasks. Repeated use of joints in jobs that require bending and lifting is associated with joint inflammation as well as with an increased risk of developing osteoarthritis. RA sufferers must seek ways to reduce strain on the joints.

Limitations would be based on the individual and the phase of the disease. In general, those that can move need to keep moving and those who have been sedentary need to find ways to get moving. General

3. Ayurvedic assessment:

RA is a disease that affects all three doshas. Therefore an ideal practice would require great discernment on the part of the practitioner to listen to the body and adapt accordingly. For example: Days that there are severe symptoms the Vata practices of Yoga nidra, restorative yoga and meditation would be best. Days there are less or no symptoms other Vata, Pitta and Kapha practices may be suitable. Having a Yoga Therapist to teach and work with closely is highly recommended.

1. Vata – disruption related to air and ether elements: RA Vata symptoms may include joint aches, pain and stiffness, restricted movement, cracking joints, disturbed sleep, and loss of concentration, negative thoughts, fear, anxiety and stress.
**Yoga recommendations** - Slow flow with breath such as Joint Freeing Sequence and Sun Salute slow from *Structural Yoga Therapy* by Mukunda Stiles, Palm Tree Vinyasa from *Ayurvedic Yoga Therapy* by Mukunda Stiles. Physical practices are to be done slow and deliberate with rhythmical Ujjayi pranayama to promote flexibility, sensitivity and balance the air/either quality of Vata/Prana. Yoga nidra, restorative yoga, meditation, and self-study to relax and rejuvenate prana. Yoga Sadhana would aim at promoting peace through deeper sensitivity of body, feelings and emotions that ultimately arouse insight. Yoga asana such as knee to chest would by directing energy downward towards Vata dosha’s home in the pelvis – the colon.

2. Pitta – disruption related to fire and water elements: RA Pita symptoms may include red, hot/inflamed and swollen joints, anger, frustration and impatience.

**Yoga recommendations** - Enthusiastic, moderate intense and invigorating practices such as Sun Salute or solar series and Sunbird Vinyasa from *Ayurvedic Yoga Therapy* by Mukunda Stiles to generate body heat and/or sensitivity to energy flow. Such practices promotes vitality, energy and heat sufficient to balance the fire/water quality of pitta. Breath is to flow freely. These practices can redirect frustration and anger. Yoga asana such as gentle, long twists, boat, bow and sphinx poses would direct energy towards Pitta dosha’s seat the small intestines.

3. Kapha – disruption related to earth and water elements: RA Kapha symptoms may include degeneration of the bones, accumulation of tissue/weight gain, water retention, depression and fatigue.

**Yoga Recommendations:** Challenging hatha yoga with holding of yoga poses to increase strength and stamina and purify the physical body to balance the earth/water quality. Perform sequences such as Warrior Vinyasa and long Sun Salutes from *Ayurvedic Yoga Therapy* by Mukunda Stiles with emphasis on toning and lifting upward against gravity. Benefits promoted are release of sadness and dullness as well as normalized weight and physique, courage, hopefulness, faithfulness and humility. Yoga asana such as shoulder stand, bridge, fish, peacock, lion pose are good in that energy is directed to Kapha dosha’s seat in the heart. Bhakti yoga is also recommended for its heart opening benefits. Kapalabhati pranayama would be a beneficial practice for stimulating digestion and eliminating stagnation.

4. **Common Body Reading:**

LM is not exhibiting extreme visible signs common to Rheumatoid Arthritis patients such as nodules, bony erosions or other deformity. There is one finger that appears to be slightly crooked at the upper joint as seen more commonly with osteoarthritis. One wrist is enlarged and her knees swell.

5. **Contraindicated Yoga Practices:**

There are many variables to consider based on the client’s disease progression, such as if there are joint replacements, client’s yoga experience and client’s capacity to get up and down from the floor. A yoga therapist would assist in setting up an ideal program considering all the variables and client must know his/her limits.
The John Hopkins Arthritis Center reports, “The general rule for arthritis patients (and people in general) is that if it hurts, stop. When doing backbends, arthritis patients should keep them relatively small and be aware not to hyper-extend the neck, keeping the head in line with the rest of the spine. For those with arthritis of the hip, be cautious when doing "hip openers" or poses with extreme external rotation of the hips. Generally, you will notice pain if you are going too far in a pose, but sometimes the effects is not felt until the next day. It is important to be gentle with your practice, especially at first. If you do not experience any pain after a few days, you can decide to gradually increase the intensity of the poses. Interventions that balance opposite muscle groups and exercises that improve muscle awareness (such as yoga) might help stabilize the knee. As with any condition, it is important to be cautious and pay attention to your body. Also, be sure to consult your doctor and instructor if you experience any pain or difficulty resulting from yoga practice.”

I would also caution while doing yoga asana that they not be held too long such that pitta rises as it could add pressure to the joints and increase inflammatory conditions. Also, balancing postures that put too much weight/pressure on the joints can also add to swelling and inflammation. Fast flowing vinyasa would also be contraindicated as it could aggravate vata, pitta and kapha conditions, add to fatigue, overexertion and increase the chances of inflammation.

General activities to modify or eliminate:

- Avoid stress and anxiety as it could worsen symptoms.
- Take a break – periodically relax and stretch.
- Repetitive movements and heavy lifting that can add stress to the joints
- Avoid grasping actions that strain your finer joints. Instead of using a clutch purse, for example, select one with a shoulder strap. Use hot water to loosen a jar lid and pressure from your palm to open it, or use a jar opener. Don't twist or use your joints forcefully. 4
- Spread the weight of an object over several joints. For instance, use both hands to lift a heavy pan. 4.
- Maintain good posture. Poor posture causes uneven weight distribution and may strain ligaments and muscles. The easiest way to improve your posture is by walking. Some people find that swimming also helps improve their posture. 4
- Use your strongest muscles and favor large joints. Do not push open a heavy glass door. Lean into it. To pick up an object, bend your knees and squat while keeping your back straight. 4

6. General recommendations for the condition:

a. Therapeutic / Free of Pain

- Yoga can play an important role reducing stress and frustration that results from pain and disability, and increasing positive feelings and wellbeing.4
- The joint freeing series for increased range of motion, tone and strength to support the joints. Yoga asanas added if tolerated without symptoms.
- Practice relaxation techniques savasana (corpse pose), restorative yoga, guided imagery, deep breathing, 5 pranayamas for pain, and muscle relaxation.
- There should be a good balance between exercise and rest.
• Apply heat. Heat will help ease pain, relax tense, painful muscles and increase the regional flow of blood. One of the easiest and most effective ways to apply heat is to take a hot shower or bath for 15 minutes. Other options include using a hot pack, an electric heat pad set on its lowest setting or a radiant heat lamp with a 250-watt reflector heat bulb to warm specific muscles and joints. If your skin has poor sensation or if you have poor circulation, don't use heat treatment. Since heat can affect pitta, therefore inflammation and swelling, heat treatments would not be appropriate on joints that are showing such symptoms.

• Apply cold for occasional flare-ups. Cold may dull the sensation of pain. Cold also has a numbing effect and decreases muscle spasms. Don't use cold treatments if you have poor circulation or numbness. Techniques may include using cold packs, soaking the affected joints in cold water and ice massage.

• Keep a positive attitude. Studies show that people who take control of their treatment and actively manage their arthritis experience less pain and make fewer visits to the doctor.

• Use assistive devices. A painful knee may need a brace for support. You might also want to use a cane to take some of the stress off the joint as you walk. Use the cane in the hand opposite the affected joint. If your hands are affected, various helpful tools and gadgets are available to help you maintain an active lifestyle. Contact your pharmacy or doctor for information on ordering items that may help you the most.

• Take your medications if prescribed as recommended. By taking medications regularly instead of waiting for pain to build, you will lessen the overall intensity of discomfort.

b. Stabilize situation

• Follow-up with clients to see if changes are needed to the prescribed program.
• Emphasize the need to cultivate sattva (balance and harmony) on and off the yoga mat – so yoga becomes a lifestyle. Yoga and all life activities practiced with mindfulness will lead to deeper awareness and sensitivity that ultimately brings insight as to what creates imbalance and increases symptoms.
• Client is to stay in touch with health care providers so to be monitored and proper care is administered.
• Consider visits with alternative health care providers such as a psychotherapist or bodyworks to help deal with symptoms and pain management.
• Those with RA may find it helpful to belong to a support group as an outlet for expressing concerns and emotions.
• Stay active with normal activities as much as possible, rest when needed.

c. Maintenance

Yoga Sutra II, I is emphasized … The practical means for attaining higher consciousness consist of three components: Self-discipline and purification (to balance pitta), self-study (to balance vata), and devotion to the Lord (to balance Kapha). The practices as described in earlier stages are essential in the maintenance of the disease.

The practice of the Joint Freeing Series with its varying modifications as prescribed will remain the foundation of the physical yoga practice as maintenance for ROM and toning and strength. Done regularly it will help maintain vata/prana and sattva. Emphasis is that the JFS is done as
tapas (self-discipline and purification) and practiced as sadhana not just exercise with resulting benefits of ease in regular activities and more sensual pleasure and awareness. Clients would continue to explore and recognize their need for balance between activity and rest. Restorative yoga poses, meditation and breath work are continued as part of the maintenance phase to restore and maintain prana and to deepen spirituality and faith in one’s high power.

The following are coping skills from the Mayo Clinic. The degree to which rheumatoid arthritis affects your daily activities depends in part on how well you cope with the disease. Physical and occupational therapists can help you devise strategies to cope with specific limitations you may experience as the result of weakness or pain. Here are some general suggestions to help you cope.5

- **Exercise regularly.** Different types of exercise achieve different goals. Check with your doctor or physical therapist first and then begin a regular exercise program for your specific needs. If you can walk, walking is a good starter exercise. If you can't walk, try a stationary bicycle with little or no resistance or do hand or arm exercises. A chair exercise program may be helpful. Aquatic exercise is another option, and many health clubs with pools offer such classes.

  It's good to move each joint in its full range of motion every day. As you move, maintain a slow, steady rhythm. Don't jerk or bounce. Also, remember to breathe. Holding your breath can temporarily deprive your muscles of oxygen and tire them. It's also important to maintain good posture while you exercise. Avoid exercising tender, injured or severely inflamed joints. If you feel new joint pain, stop. New pain that lasts more than two hours after you exercise probably means you've overdone it. If pain persists for more than a few days, call your doctor.

- **Eat a healthy diet.** A healthy diet emphasizing fruit, vegetables and whole grains can help you control your weight and maintain your overall health, allowing you to deal better with your arthritis. However, there's no special diet that can be used to treat arthritis. It hasn't been proved that eating any particular food will make your joint pain or inflammation better or worse.5

7. **Questions and Answers from www.yogaforums.com**

05-11-2002, 01:18 AM: My mother was diagnosed with Rheumatoid Arthritis about 5 years ago. The medicines doctors have prescribed for her never seem to work. I was watching the news last week and saw a woman with RA talking about how yoga therapy has helped her become more mobile. Do you believe that it could work for my mother? Some days she can't even get out of bed because she hurts so bad. Thank you for your time. If it will help, could you tell me how to get her started on it? Thanks again.

Reply by Mukunda - Learning Yoga Breathing (specifically the wave motion of Ujjayi pranayama as described in my book - Structural Yoga Therapy) can help a great deal with management of pain. In addition I would recommend getting the Yoga Therapy for Knees and Shoulders reprint from Yoga International magazine or from my Website boutique. It has articles on Yoga and Arthritis. Also I would recommend the arthritis diet from my teacher Indra Devi. I have attached it below for you. This works wonders if your mother will restrict her diet for 10 days.
04-26-2002, 08:34 PM: I'm offering yoga therapy to a 54-year-old man who is seemingly in good health. It turns out he has arthritis in his joints. I haven't seen an X-ray yet but he was told (and he feels them) that there are bone spurs in one hip, one shoulder, and in some of the spinal segments. He is responding beautifully to sequences that emphasize moving the joints through their R.O.M. Before we hold any pose, we move in and out with the breath, easing our way into greater opening and freedom. His main restriction is in the thoracic spine. Can you give me some advice in how to work with him?

Reply Mukunda - What you are doing is good. Vinyasa motions coordinated with breath can release joint pain. My sequence of joint freeing series is important as the specific sequence given there allows the prana to move through its 5 forms to the subtlest, called Vyana. The development is to teach him how to send Vyana Prana into the joint that he is moving. At first showing how to keep attention onto specific joint and visualize its functions anatomically, then progression is made by learning to stay attentive to the feeling of prana as it moves into and throughout the joint. The fifth chapter of the Hath yoga Pradipika describes this as the method of overcoming bad practice and how to generate healing force of prana.

04-27-2002, 01:19 AM: I am new to teaching (3 months) and am still learning everyday- but the other day a lady came to me who is getting the beginnings of arthritis (inherited from her mother) I showed her the plough position and wanted to know if there are other asanas especially for relieving or helping to avoid arthritis (she feels it down her left leg and it starts in her lower back - usually starts up after walking for a while).

Reply by Mukunda: Main recommendation I have is to do joint freeing series regularly and find a way to connect to your breathing as you do it. Eventually you can send prana into the joint you are freeing and that will eliminate any pain.

03-08-2006, 05:24 PM: ankle arthritis Do you have any suggestions for severely arthritic ankles? I am 47 years old, a fairly new yoga student, and have been told by my doctor that I have the ankles of an 85 year old. I have had two surgeries and several cortisone shots in my ankle and continue to have trouble.

Reply by Mukunda - For arthritis symptoms regardless of where they are do a search on this site for arthritis diet. I believe it is April 2002 posting. This 10 day diet makes huge changes if you do the diet with commitment. That is the best recommendation I can give. To supplement it do an anti pitta diet which you can find in any Ayurveda book for long term maintenance. For exercise I would also recommend that you do my joint freeing series regularly as this can promote free flow of synovial fluid to all joints. The series is in my Structural Yoga Therapy book and on DVD too. Namaste Mukunda

02-02-2005, 01:48 PM: Nightshades - Thought you may like to know that in You are what you eat by Dr. Gillian McKeith; page 77, it says,

"Arthritic sufferers need especially avoid the nightshades because they contain a substance called solanine, which interferes with the enzymes in the muscles, often causing pain and discomfort and aggravating joint problems. If you really love these foods, the best thing you can do is to roast, bake or cook these veggies with a little miso soup. This process will neutralize the solanine compound."
Mukunda - Thank you so much for sending this. I am delighted to hear the details behind why nightshades are not good for arthritis and I would add that this is true for those with pitta predominant constitutions, as they are the most likely candidates for arthritis. Namaste.

01-11-2003, 10:22: PM Dear Mukunda, I have a sister-in-law who has had 2 back surgeries and 1 hip surgery due to degenerative arthritis. The last back surgery was 3 months ago and it does not seem to have helped her much. She is 68 years old and has never done yoga. She is of German descent and a farmer of stocky build. Would there be something you could suggest that I could help her with? She has also had rotary cuff surgery because of a severe injury, and it left her with a weak arm. Her only exercise is walking. Also for a bursitis at the upper femur: how can that be stretched? Thank you for all the E-mails. I do enjoy them. J

Reply by Mukunda - For someone at this stage of life, who only does walking for exercise the joint freeing series is the best to give her. By emphasizing learning to coordinate the motions with her breath, she can begin to develop more bodily intuitive sensitivity to what she should and shouldn't be doing. I would not give more specifics unless I see such a person face to face. Bursitis is not a condition that responds to stretching. Stretching increases pitta, and bursitis as well as arthritis is an inflamed pitta condition. Therefore doing stretching is quite likely to inflame her condition. JFS is much better to be done gently and slowly to her capacity. If she is willing to make some bigger changes I would recommend she undertake Indra Devi's arthritis diet, which is basically for all increased pitta conditions. This will make the biggest difference. Details can be found on the archive site for Q & A - www.yogaforsums.com then search for arthritis diet.

BIOGRAPHY
Mary Bartel began a practice of Yoga 10 years ago as a way to ultimately heal chronic neck and back problems as well as relieve stress. Having received great relief through her practice she wanted to share what she learned. Mary has since received attained a Professional Level Certification, E-RYT 500 hours (experienced registered Yoga Teacher as recognized by the Yoga Alliance), through the Kripalu Center for Yoga and Health, in Lenox, MA.

Mary opened, owns and directs Inner Quest Yoga & Wellness Center, in Saranac Lake, NY (a small town in the Adirondack Mountains) where she and others teach classes, workshops and private sessions, since Nov. 2004. She also hosts Yoga & Outdoor Retreats as part of a lifestyle business.

In 2006, while at Kripalu, Mary met Mangala Warner and received a recommendation to practice with Mukunda Stiles since she had a great interest to learn Yoga anatomy and pursue a Yoga Therapy certification. So she did; her training began March 2006 through June 2008. Mary has found the training and practices required a Godsend. It is Mary's intention to offer Structural Yoga® Therapy at her Wellness Center, giving folks in her small community an alternative holistic yogic approach for healing body, mind and spirit. It is her continuing quest to work through her back care challenges and to specialize in helping others one on one to cultivate optimal well-being and a life with less or no pain!

REFERENCES:

Books


Websites
MedicineNet.com is an online, healthcare media publishing company. It provides easy-to-read, in-depth, authoritative medical information for consumers with information provided by highly accomplished, qualified executives in the fields of medicine, healthcare, Internet technology, and business to bring you the most comprehensive, sought after healthcare information anywhere.


The mission of the National Institute of Arthritis and Musculoskeletal and Skin Diseases is to support research into the causes, treatment, and prevention of arthritis and musculoskeletal and skin diseases, the training of basic and clinical scientists to carry out this research, and the dissemination of information on research progress in these diseases.

en.wikipedia.org/wiki/Rheumatology#Diseases. An on-line dictionary

www.whfoods.com/genpage.php?tname=nutrient&dbid=84 The George Mateljan Foundation for the World’s Healthiest Foods. A non-profit organization with no commercial influence provides this website for free. Dedicated to making the world a healthier place by providing you with cutting-edge scientifically proven information about why the World’s Healthiest Foods are the key to vibrant health and energy and how you can easily make them a part of your healthy lifestyle.


The Yoga Institute in Mumbai have been committed for over 100 years to help those who wish to help themselves become healthier and happier individuals. We at The Yoga Institute, imbued with the true spirit of Yoga, have been instrumental in bringing about a positive change worldwide, for over 100 years.

101. Number of years. 1,00,000,000+. LIVES TOUCHED. 1,00,000+. TEACHERS CERTIFIED. Yoga therapy training course of exceptional quality & value. Registered with Yoga Australia and AAYT. Amongst Australia's leading yoga training providers. Contact our Course Coordinator for more information.

If you completed your teacher training at The Yoga Institute you can apply and join the next available module. If you completed your studies elsewhere you can apply and then complete Foundations of Yoga Therapy before joining other modules which are offered on a rolling basis. Get More Info. 100hr Foundations of Yoga Therapy. First Module of Yoga Therapy Training Course. Not sure if you're ready to commit to a 650hr program? This introductory module can be taken as a standalone unit for yoga teachers.