YOGA FOR BREATHING DISORDERS

Extracts from Yogacharya Dr. Ananda Balayogi Bhavanani’s talks at IYTA, Sydney, Australia in November 2012 transcribed by Yogacharini Jnanasundari (Janita Stenhouse), France.

I’ll just give you a few ideas which will come in handy a little later. Now the concept of vibhaga is something which is very vital in understanding that we have different sections in our lungs. Each of these sections exists so that we will use them. Now in modern medical science in the past decade or a bit more than that, maybe two decades now, they have finally come to understand that there are at least ten segments, called broncho-pulmonary segments: in each of the lungs there are ten. Now this is something which, when I was a medical student, if you looked at some of the older textbooks they said maybe there are eight in one lung and nine in the other – now this was not too long ago, 1993. Then as we were studying we came upon newer textbooks which said maybe it is nine and nine, nine and ten, and finally they rounded it out to ten and ten. So there are ten broncho-pulmonary segments in your right lung, ten in your left. Now it is very vital that we understand this, for the simple reason that we have three lobes – low, mid, high – on the right side, but only a low and high on the left side. Now this is part and parcel of the human evolution and as the heart became bigger and took up space, the heart compressed against the middle lobe pushing it up into the upper lobe so the upper lobe became quite big, and it ends up with an area which looks like a tongue - hence it is called the lingular lobe.

This lingular lobe is the remnant of what would have been the middle lobe that exists because the heart as it grew due to the necessity of the human evolution (now I’m talking about millions of years, it’s not yesterday or today! – but just as continents drifted apart and joined together and things like that, the middle lobe of the left lung, due to the heart, got fused with the upper lobe, and so you ended up with an upper lobe with the lingular, and a lower lobe on the left. So immediately people said “oh! Your right lung has three but your left lung has two so there must be less!” And immediately in Yoga circles when you say “breathe in low, mid and high”, they say “ahahaha! You don’t know it Doctor Ananda, there is no middle lobe on the left side! Heeheehee, we caught you!” (There are always a few of those.) Anatomically you may not have a left middle lobe but physiologically speaking, functionally speaking, this lingular lobe basically functions at the same level as your middle lobe on the right side functions. And this is proved by the fact that we have an equal number of broncho-pulmonary segments on the right and on the left. So in fact functionally both your lungs have the same amount of capacity. We must be clear on this as there is a common tendency to believe we have three lobes on the right and only two on the left, so the left lung must be functioning less than the right – I’m sorry but no. Now the ten broncho-pulmonary segments that science has come to accept.... now it’s funny and in fact I enjoyed my medical studies because it kept on bringing out so many of the yogic concepts I had grown up with. In the yogic concept you can breathe into the front, the side and the back of each of these lobes which means you end up with nine areas on the right and nine areas on the left, and please understand, two decades ago they were still debating is it eight or nine? We are talking of teachings that go back God knows how long and talking about nine parts on the right, nine parts on the left. This is as good as trying to land a
helicopter on a one-dollar coin – that is the level, and they were talking of nine. Now you say “but still, this is ten”. Now I’ll let you know something more.

Along with these nine you have three internal aspects – there are in fact twelve. In my father’s teachings the number twelve comes up a lot. Right from the concept of 12 chakras to go with 12 Zodiac signs, to go with the 12 aspects of the human being – ah well, there’s a whole lot of things on the number 12. Now you have front side back on three levels and you have internal low, internal mid and internal high, so 12 on the right and 12 on the left, so medical science is still catching up. This is something I got confused with when you say nine and ten and there’s still a bit of difference and then I realized there is something more. In fact there’s a whole series of gestures, mudras, where you work on the internal lobes. Please understand the internal breathing is that which brings the lungs in contact with the heart when you are utilising that area consciously. You may say “why should we do it?” Unconsciously we are breathing 300, consciously you can breathe up to 4000, 5000. Well, that’s why! It’s the 10% becoming closer to 100%. Because please remember as long as you are just breathing 300 millilitres of air there’s not much prâna going to be flowing, barely enough to keep yourselves functional. Just being functional is not enough, just being able to survive – it’s not enough. And that is why you have to be breathing 50 to 60% of your capacity if prâna is to flow and if your prânâyâma is to truly become prânâyâma. Until that point it becomes – you know what these are? (Presses alternate nostrils) If you are breathing at 300mls and you are doing this, you know what this is? Haven’t I said it before? It becomes a finger-nose exercise technique. Breathing at 300mls is virtually nothing because it is just keeping you surviving. And that is the importance of learning to breathe, learning to use your respiratory system as it was intended to be by God. My father often said that his guru told him, God breathed into Man the first breath of life (I think it’s a common statement you’ve heard before) and he said: “and God expected Man to keep it going”.

This “keep it going” part is where we’ve maybe not done enough. Because it’s unconscious, we don’t have to care about it. Imagine if 15 to 20 times a minute you’d have to be telling your respiratory centre “breathe in, breathe out”! Imagine 70 to 100 times a minute you’d have to be telling your heart “beat! Beat! Breathe in, breathe out, beat! Beat! Breathe in, breathe out, beat! Food digest, breathe in, breathe out, beat, food digest, breathe...” Imagine 24 hours a day if you had to be doing that! Please understand that there are life forms which have to be doing this and so they can’t be doing anything else. Why did God make it automatic? Why make your respiratory centre (well, it’s semi-automatic), make your cardiovascular reflexes automatic, your digestion automatic, so many things going on in your body automatically – why should the Divine, god, nature, cosmos, have done that? Just so that we can sit on a couch? Watch television while eating potato chips, becoming a couch potato? You know humankind in modern times, we have invented the best of machines to wash, to clean, to vacuum, to do... what was the idea? The idea was to have more time to do something useful. Because we are blessed with it, we neglect it. Because we are blessed with it, we do not think about it. And this is what I tell the young people, I say that the very fact we are born human is such a blessing! I can never stop talking about it because it is such a blessing to be born human that we have to do something about it?

Vibhaga. Each of these sections, these broncho-pulmonary segments, consciously trying to breathe into them, and to make it simple – the broncho-pulmonary segments are a bit more complicated – anterior, interior, superior, lateral – it’s a bit confusing. There’s a diagram I put in the Yoga 1 to 10
where under number 10 I put that. Just making it simple, breathing into the low front, low side, low back, mid front, mid side, mid back, up front, up side, up back – nine and nine. Consciously sending the mind, because you all know the mantra “where the mind goes, the prâna flows”. The moment you focus on the front of your lower lobes, you are going to channel prâna there. Now the problem is we human beings have a bit of trouble focusing. And that is why we need our hands. So what we do is we put our hands here and the moment I put my hands here and I focus here, my mind finds it a bit easier to go here than if my hands were not there. You use your hands to “get a grip on things”. That is the sparsha mudra. Sparsha meaning to touch; there’s a concept called the sparsha diksha – the guru touches the student and they gain the guru’s blessing by touch – sparsha. To touch yourself - again, many people are afraid to touch themselves. See, to put your hands in a loving manner, in a caring manner on your own body – self-acceptance. And when you put your hands and you focus your mind there, and you breathe 50 to 60% of your capacity or more, you are channelising prâna to that part of your lungs. So it is not just that you have to do something with your hands while you are breathing and keep you busy in class so we say okay put your hands on the front-side-back - no, no! Please understand that the breathing and the hands are there as a tool. Now as you develop you may not need the hands, that’s fine. You may be able to concentrate and focus your mind, and when you can do so, you are welcome to keep your hands down and do it, but initially we need that, we need guidelines, we need latitude, longitude to find out where we are.

And this work this vibhaga, is something that I include for every patient – I repeat – every patient who comes to me. It doesn’t matter what their condition is. The reason that if you are not breathing properly, there’s not enough prâna flowing through you to heal you, irrespective of what your condition may be, be it musculo-skeletal, be it breathing disorder, be it diabetes, be it cancer, be it HIV – whatever it may be, if you are going to heal yourself you need prânic energy to channel through you and for that the breath is essential. Now, you know what? For many people, just to put their hands on themselves and breathe opens up some new brain cells. Pop! Suddenly something happens! Even just that! And on top of this when you breathe into the low part of the lungs, you are energising, you are creating the environment conducive to the healing energies to get into the lower part of the body. So if somebody is having pelvic problems, lower abdominal problems, problems of the legs due to blood vessels or the nervous system or anything, the low chest breathing, focusing on low, mid and high, and the front side and back – again many people find it amazing that there’s a back part of the lobes – and when you do that, you are sending energy into the lower limbs, you are creating the conducive environment for healing to occur. Say someone had a problem in the mid part of the body, a heart disorder or a lung disorder, something to do with the digestive system (digestive system is a bit of give and take between the low and mid, okay? So you have to play around with it a bit, depends on what type of problem it is. The digestive system is 21 feet long, okay, so that is 3 times in height of anybody here, so you have to play around a bit to find out where it is).

But the mid lung region energises the whole area between your neck and your hips. The pelvic is more low chest and as you start to move up you find a mixture of low and mid chest. Above the diaphragm is definitely mid chest. And what you are doing is that you are channelising the healing energies by focusing your mind, enhancing your breathing, thus energy is channelled into your healing process. You are going to heal yourself, nobody else, but you need the energy to do so. So when you breathe into the upper chest and neck – someone wants to work on the thyroid,
parathyroids, that comes right from the neck. If you have a problem with your swallowing reflexes, you have a problem with your oral cavity, with your jaws, with your eyes, ENT in the head – upper chest. And you know what? Most people are not breathing properly into the upper chest. Because the diaphragm is at the bottom of your lungs – or your lungs are on top of the diaphragm, whichever way you want to look at it – so each time the diaphragm goes down and comes up, the lungs are stretched and you breathe a bit but nothing is happening up here in the upper chest. You are not getting any energy into your head at all – no wonder we have cob-webby thinking! Nothing is there! We are not clear because what is happening is there’s no energy going up there.

Now my father used to talk about differences in male and female anatomy and physiology, so the male is able to breathe a bit more into the lower part of the body, and the female into the mid part. Nowadays I don’t think there are too many differences in that regard. Because if you look at heart disease, women have caught up and post-menopausal have overtaken men as the first choice of heart disorders, so it’s quite different to the last 40 years. There have been tremendous changes in this and basically, if we are able to utilize these sections and we are able to breathe into them, we are enhancing the flow of healing energy. And again, there’s no reason why you should say “oh, I only have a problem with my feet so I’ll only do low chest”. Low chest is important but why not enhance all aspects of your personality? Why not enhance all functioning in your whole body? Why let go of the opportunity? So vibhaga prânâyâma becomes like a bread-and-butter technique as far as I’m concerned in my therapy practice. Every patient is introduced to it. And the natural next technique that comes in is the pranava, which we are going to be doing – the pranava that uses the A, the U and the M. Now this combination, the A is a combination to do with your low chest; you breathe in and you breathe out with an AAAAAA – a nice base sound. Your whole lower lung vibrates and energy is sent down to the lower part of the body. A deep AAAAA, not a high AAAAA (see, I know all the mistakes that can happen and I’m preventing them. Heyam dukham anâdatam according to Patanjali. With experience you try to figure out all the things that can go wrong and put them out so that nobody does it). So AAAAA – a nice base guttural sound that really is down there. You feel your abdominal area, you feel the energy down there. As opposed to the mid chest which is where the sound UUUUU – the lips are puckered up. It’s not down here, the sound UUUU is pulling it up. And then the third, the upper part, MMMMM. It’s not a low growl; it’s up there (in the head). If you understand the sound, this is nâda, this is nâda yoga, this is vibration. You understand that certain sounds vibrate at different frequencies and by tuning in to that, the closest human sound that can tune in to it, because we are talking about vibrations that are way beyond human levels, but the sound that is closest to it. AAAAAUUUUUMMMMM. And you know what? This kind of humming is good for the sinuses also. In fact there are scientific studies that show humming is good for your sinuses. Humming improves the nitric oxide in your nasal cavities. In fact in one of our recent studies on the pranava we did one sitting doing it with hypertensives, and the other one lying down as a relaxation (which is what I am going to be trying with stroke patients, that lying down and doing the pranava is an attempt to do something different and we want to see if doing 10 minutes of this, does it change the cerebral blood flow – I believe it will. We’ll see, research is good.) Now with the pranava, the AAA, the UUU, the MMM, what we are doing, and this is part of the mechanism I have suggested, is that nitric oxide also relaxes your blood vessels, nitric oxide is a potent vasodilator; now if vasodilation occurs, your blood pressure is going to fall also. I’m trying to find a scientific mechanism for things that have been taught for thousands of years just so that the scientific community can understand that these things are possible, valid. It’s nice when it clicks; sometimes
you have to go back and take a whiteboard and start, put stuff on it and not know where you are going. And those are beautiful moments too because questions make you think more and look for things that sometimes you don’t think about.

So we’re going to do this; first we are going to do the AAAA, the UUUU, the MMMM. We are going to then combine them. Now, you could do it with your hands on each region; the second option is to use the different mudrās such as the chin mudrā, the gesture of consciousness. You know the danger of the language English – chin mudrā; one of my DVDs was translated into Italian and they ended up translating it as the mudrā of the chin! I can take responsibility for the mistakes in English, but it is difficult. The translations were good for the most part but that was one of my Italian students picked up and said “ahah! Doctor Ananda, I have to tell you this!” The chin mudrā is the chit mudrā – the mudrā of consciousness, which we use for the low chest breathing. If you curl your fingers in, bind your fingers in, it becomes chinmaya – maya means to bind, to hold together (as in the annamaya kosha, that which is held together by food, prānamaya kosha, that which is held together by prāna, manomaya kosha by mind, etcetera). In chin mudrā, where the fingers are held together - there are a lot of symbols in that (if I get into that we’ll be stuck on it for the next 3 hours so I’m not going to do that). These 3 fingers can have a lot of representations but the moment you have them all 3 together, you are signifying control that is obtained through consciousness. So I’ll just say conscious control is represented by these 3 fingers held together. The thumb and forefinger coming together at the tips is union between the individuality and the universality, creating the circle of life. And so this is a nice circle of life, through consciousness, through control we are reuniting. Now there are various mudrās, different interpretations and I am not here to argue with anybody’s interpretations, I’m just putting forth what is in our tradition so that you know it. The moment I bind my fingers together inward, I have bound myself into consciousness so that’s called chinmaya mudrā. So this is the cohesive mudrā of consciousness, which enhances the flow of air into the mid lung region, the prānic flow. It helps focus the mind, the neuronal connections which, one day when I’ve done some research on this I’ll come and present it to you because these are things that I would need equipment which is definitely out of my reach today. You’d need radio-isotopes and I’m talking something which is cutting level technology which is not available for yoga yet. The third one – the thumb in the centre (of the palm), the other fingers held around it, the ādhi mudrā, clenching into a fist, is a gesture signifying the highest or the higher – like in ādhi-vyādhi, the higher mind influencing the body, the psychosomatics; well, this represents the higher as in the upper part of the lungs.

So we have 3 mudrās: chin mudrā for the low chest, chinmaya for mid chest, ādhi mudrā for upper chest, and all of these mudrās are placed down on your thighs, in an erect sitting position. Now, you can use different sitting positions, but when you sit in the vajrāsana, the advantage is your diaphragm can move much more than in any other position, and please remember that it is your diaphragm that is THE most important muscle of respiration. Okay? Underline that in green, blue, red, purple! The diaphragm is the most important muscle of respiration; your diaphragm goes out – you need to be on a ventilator! Now if you sit in vajrāsana, your diaphragm has much more scope of going down and up, your spine is erect which allows the other muscles of the intercostal cage to expand more, your spine is straight allowing anterior, posterior, lateral, medial, superior, inferior expansion of the lungs, and the amount of increase in capacity just sitting in vajrāsana is phenomenal. Now as time goes on, with practice, once you have the capacity – which is tremendous – sitting cross-legged is fine, because you have attained a certain capacity. But if you are already
breathing 300mls of air and on top of that you limit yourself by sitting cross-legged and hunched over – what’s going to happen? Nothing much. Now, please understand why in Hatha Yoga Pradipika and the Gheranda Samhita they talk about cross-legged positions, these were class notes of accomplished yogis, and we have to be very careful how we approach these teachings. You need a good opportunity to expand; once you have it, fine, you can stand upside-down and do prāṇāyāma once you are used to it, but that’s not where you start. Now on top of that, when you sit in whatever position you choose to, you are placing your hands down on the inner, upper aspect of your thighs – why? Because right down this area, your amazing blood vessels and nerves are going down into your feet from your hips. These nerves, coming out of your lumbo-sacral plexus are coming right down here; and so your hands are connecting the cervico-thoracic nerve plexii with the lumbo-sacral nerve plexii. What a union we are creating! (We should understand what we are doing and why.) The elbows are in a relaxed position, it should be comfortable – I’m not going to say it should be 90° and 240° this side and – I’m not going to do that because it should be comfortable. Because if there is discomfort anywhere in your body, your mind is going to go there, and then the prâna is not going where you want it. So you are putting your hands down the centre and creating a closed circuit of energy. The upper part of your spinal cord and the lower part of your body are getting this closed circuit of energy; in addition to that your fingers are creating another closed circuit of energy and you are coiling up energy like energy coils – amazing stuff is happening! How to research this? (I’m breaking my head on it because what do you do? We came up with Kirlian electrography and science says no, it is false, so what’s the next one? It is very difficult!) So we are placing the hands here, we are placing the mudrā down for the simple reason you want that connection – you want an intimate connection at this level. Now when we sit for meditation, when we sit for concentration with your hands in jñāna mudrā, it’s a different issue, you are working on something else. Sitting as straight as possible – if you need any pillows, if you need a back support or anything, you are welcome to do so – I want you to be as comfortable as possible so that your mind can focus on what we are doing. Your hands in chin mudrā, placing them down on the upper and inner aspect of your thighs in a relaxed position, we are going to be breathing in now into the low chest region, followed by making the sound of AAAA.

Breathe in – AAAAAA. Again breathe in, low chest, front, side, back – AAAAAAAA. Again breathe in, low chest, front, side, back – AAAAAAAA. Just sit quietly now, letting your mind focus on that low chest region and the lower part of the body. Now chin mudrā becomes chinmaya mudrā curling the fingers inward, again on the inner, upper aspect of your thighs. Now we are focusing on the mid chest and make sure you realize there is a front, side and back – all 3 parts. Breathe in – UUUUU. Again breathe in, front, side, back in the mid chest – UUUUUU. Again breathing in – UUUUUU. Just sitting quietly, focusing on this mid chest region we have been working on, the mid section of the body from the hips up to the shoulders, in the region that houses so many vital organs through the Madhyam Prāṇāyāma we can energise and rejuvenate this area. Relax your feet a bit, just to give you a short break from this position; if you need to shake your feet, please do so, so that any tensions are thrown out. The ādham, which is the low chest, the madhyam which is the mid chest; the sound of AAAA and the sound of UUUU – again, when we make UUUU it is a mudrā, the kaki mudrā which is made by pursing up the lips, something which really works on a whole set of nerves that are related to the glossopharyngeal plexus. In fact there is a teaching that the kaki mudrā helps you to have a nice voice; now I don’t know why it is kaki mudrā because crows don’t have such a
nice voice! Maybe it’s because it works on the glosso-pharyngeal nerves which are part and parcel of your vocal apparatus.

Let’s come to the next part, the ādhi mudrā, the upper chest region focusing on sending some healing energies up into your head and neck region – a very important region. The thumb in the centre and the rest of the fingers around it, bring the fists down onto the inner, upper aspect of your thighs, creating a nice closed circuit of energy. In a relaxed position, we are going to be breathing into the front, side, back of the upper chest - remember, an area that is usually neglected – focusing our mind and breathing out with the sound of MMMM. Breathe in – MMMMM. Again breathe in – MMMMMMM. Breathe in – MMMMM. Just relaxing while you’re contemplating this upper chest region that energises the head and neck with healing prânic energies.

Now to bring these 3 parts together in the 4th part, we bring the 2 ādhi mudrās together – so the clenched fists together – at the navel keeping both (hands) with the knuckles touching. This mudrā is a bit more uncomfortable that the rest because of the tightness that is there. We are going to be contemplating the low chest (remember the front, side, back), mid chest (front, side, back), upper (front, side, back), and then we are going to be breathing out with the sound of AAA for one third, UUUU for one third, MMM for one third, so let’s give it a go. Breathe in – AAAAAUUUUUMMMMM. Again breathe in low, mid, high - AAAAAUUUUUMMMMM. Once more low, mid, high breathe in – AAAAAUUUUUMMMM. Relax your hands to the lap and just sit quietly, letting the vibrations of the Pranava, the A, the U, and the M seep into every cell of the body, creating conducive conditions for healing, an environment where healing is supported; regeneration, rejuvenation is supported, enhancing the flow of the healing prânic energy, strengthening our natural ability to heal ourself.

Relax yourself, kicking or shaking your legs as required. The Pranava is an excellent practice along with the vibhaga, the sectional breathing. The Pranava is a bread-and-butter practice that we apply to any and every patient who comes to us, the reason being that we all have the energy to heal ourselves but sometimes we need to create the right conditions, we need to create the right environment externally and more importantly internally. Now how can we do that? - by creating a link with our essential nature. Our essential nature is divine, but with the Pranava, in addition to the A, U, M, each section energizing, when we do the 4th part we unite it all together, the akara, the A-making, ukara the U-making, and makara, the M-making, are brought together in the Omkara, the OM-making; kara means to make. We place the two ādhi mudrās together and it gets the name Brahma mudrā, or it can also be called mahat yoga mudrā, there are 2 names for this mudrā, and this mudrā we are placing at the navel. Why at the navel? Well, people who are religious in India will say that from the navel of Vishnu came Brahma, and from Brahma came the universe and so on – okay, fine, that is one way to look at it. But you know what? The mother and baby connection, that bond between the mother and the child, starts long, long, long before the baby comes out. You know, the umbilical connection that goes between us and our mother is a bond that, even when I’m 80 years of age, I know my mother’s going to be telling me: “Watch out as you cross the road”. And it’s natural because there’s a bond that goes beyond anything. And you know what? There’s a stronger bond that goes between us and the mother-universe, and that is also related to this area through the Manipura Chakra, the 3rd of the centres. The centre that is related to this area is the centre in which the Life Force first comes in. the Life Force comes into the Manipura and then it goes to the other parts of the body, and this is the centre that connects us to the universe – it’s like our psychic umbilical cord connecting us to the universe.

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Patanjali says the name of the divine or the sound we can utter for the Divine is the Pranava, A,U,M, the vibration that we can make as a human being that is closest to the divine vibration is A,U,M. we are making the vibrational sound A,U,M. while having our hands at the umbilical area, connecting ourselves to our divine nature. Now please understand, the universe is a happy, healthy universe! The Divine is happy and healthy. Now when we connect ourself with our essential nature of the divinity, isn’t it natural that happiness and health start to manifest through us? You may say this is philosophy – this is life for me! If we connect with our innate nature – and that’s what we are doing. So it’s not just saying, okay fine, I can say you chant AAA and certain vibrations happen, UUU certain, UUU certain... and in addition to that, we are breathing out for 2, 3 or 4 times the amount of time that we took to breathe in! You know normally you ask somebody to breathe in, okay, breathe out; and you say try to do a 6:6 count and they find it difficult. But if you tell them breathe and breathe out AAAAA – and suddenly they find they can breathe out longer! When you make sound you can breathe out longer than if you don’t make sound. Try this experiment when you have time. And with the pranava you start to elongate, so I say breathe in 23456, and you’re breathing out for at least 18 counts - AAAAAAUUUUUMMMMM. What you are doing is prolonging the exhalation. You know what that does? It brings scientifically into play something called sinus arrhythmia. What is sinus arrhythmia? Who is it? Why is it? Sinus arrhythmia is a natural physical process – it’s not unnatural, it’s not pathological. It is a natural physiological process by which when you breathe in your heartbeat starts to go a bit faster, and when you breathe out your heartbeat starts to go a bit slower. Natural physiological process. Every time you breathe in your heartbeat starts to go a bit faster, the heart is beating lub-dub, lub-dub, lub-dub, you start to breathe in it goes lubdublubdublubDub, and you breathe out is goes lub dub lub dub dub lub Dub. LubdublubdublubDub; lub dub lub dub lub dub. It should happen. If it doesn’t happen, something’s wrong! And this is why heart-rate variability, we test what is intrinsically happening and the heart-rate variability should be more. The more it is, the better your heart’s response to the autonomic nervous system. And in diabetes, with hypertension, with so many conditions it starts to go down, and we are finding with the prāṇāyāma you can start to bring it back to normal. It’s actually happening. Now imagine what you are doing with the Pranava – you are breathing out twice or 3 times or more, so what’s going to happen? Your heart rate is being pulled down, pulled down, pulled down. What’s happening is that the parasympathetic effect, the anti-stress effect is starting to set in. You are giving yourself a chance to relax. And it’s only when you relax that you can heal – please understand that. It is only in relaxation that anabolism starts to happen. As long as you are tense, anxious, running around doing things, the catabolic activity, the breakdown activity is enhanced. The faster you breathe, the more the catabolic activity – just keep that as a code. Every time your breathing goes faster – when does it go faster? When you are emotionally not balanced, when you are mentally disturbed, what happens is it starts to go faster, the catabolism sets in, the acid base changes and you become a bit more acidic. And you know, the acidic medium is a breeding ground for disaster. Now recently we did a study on 60 nursing students studying the 2nd year Bachelor of Nursing course in one of the hospitals where we now have a Yoga Centre, and they measured their urinary pH along with other things, and it’s changing from acid to alkaline significantly in 60 of the young girls. I think there were 4 boys on the course. There is a shift from the acidic to the alkaline happening. What is happening is they learned to breathe. When you start to breathe properly, the acid base balance starts to come under control. The faster you breathe, the more the acid base balance is thrown off. So what is happening? Again the Pranava is creating an opportunity for the parasympathetic anabolic activity, healing, rejuvenation to occur, for the repair work to start, giving an opportunity for your body to heal. It

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doesn’t matter what the condition is; again I come back to that, and that is why the Pranava has become such a bread-and-butter technique in our practice. It’s hitting right at the core – the ādhi is being tackled, not just the symptomatic management but you are getting right back to where the cause is – the cause was all the agitation, the cause was the stress that is throwing everything off balance. We are getting right back to that. And you’re pulling the person from a sympathetic-dominant situation, bringing them to a balanced situation by enhancing parasympathetic. That is what those scientific reviews were telling us – decrease in sympathetic, increase in parasympathetic, changes in neuro-chemical, neuro-hormonal changes – how is it happening? This is what’s happened! And that is why slowing down the breath, breathing to your full capacity – and the Pranava enhances it – and in addition the humming (increases) the nitric oxide levels, clears your sinuses, vasodilatation, which means more of the healing can occur. Please understand that as long as your blood vessels are tight there’s no healing occurring. With vasodilatation, healing starts to occur – it doesn’t matter what the condition or where it occurs – it could be your toes, your nose, your hair – because what’s happening is that you are enhancing an opportunity for healing. That’s what we want; we want to enhance that ability, irrespective of what the condition may be.

Now what I want to introduce to you here is this set of pictures, which are sort of the core of the teaching we use for breathing disorders. Now please remember that this is not that only those with breathing disorders should do this - no! Because these practices are geared, codified to work on the low, mid and upper chest regions, helping you to breathe better low, mid and upper chest, which means in turn you are going to help everything. So please do not limit any of this to “oh, this is only for breathing disorders and how can it work for thyroid disorder?” Now, if you look at these practices, basically in the hathenas we work on the low chest region so that these practices we use for the low chest. And the vajrāsana is basically the starting position, and we have ushtrāsana I, which is going up into the camel with the hands by the side and as you breathe in you go up into the posture; as you breathe out you come back out. For most of the hathenas there’s a synchronisation with the breathing. Because the hathenas are postures that sort of force you to breathe into certain parts of your lungs. The concept of ha is to force – and that is why the hatha, as in hatha yoga, is often translated as the forceful yoga. In fact there’s a book called the Forceful Yoga which is a nice translation of 3 of the Hatha Yoga texts – Hatha Yoga Pradipika, Gheranda Samhita and Shiva Samhita I believe. So what are you forcing? You are forcing yourself to breathe into the low chest region when you do the variations on the ushtra, the Camel posture. And again one needs to take into consideration the person’s physical condition – what they can do, how much they can do, and when doing the ushtrāsana, please notice that you have the eyes open. Because when you bend back and your eyes are open, you avoid the opportunity of dizziness to occur. Sometimes people get into ushtrāsana, close their eyes, and get dizzy and fall. So one has to be a bit careful, and it can be related to many things, anything from vestibular to vertebral arteries, circulation, to the very fact that you’re suddenly getting a burst of oxygenated blood that you never got before. It could even be that! The first variation where you are going up into the ushtra, going onto your knees with the hands by the side; the second where your hands in touch with your feet and you lift up as you breathe in and as you breathe out you lower; the third is the classic ushtrāsana. Now when we do the hathenas for the low chest, we bring in something called nasarga mukha bhastrikā. Now what is this? This is something that is vital to be taught to everyone struggling with breathing disorders. Nasarga, meaning the nose; mukha, as in the mouth; bhastrikā - a forceful blast. What it is, is that you breathe in and you blast out WHOOOSH! through the mouth. This is one of the 9 different
bhastrikās, nau bhastrikā. So you breathe in through the nose and you’re blasting out through a puckered mouth. So in the āsana you are blasting out using the diaphragm and the abdominal wall which are pushing like a bellows; that’s why bhastrikā is called the Bellows. So you are pushing and what you are doing is enhancing the expulsion of air - I repeat, expulsion of air. The major problem in breathing disorders is in breathing out. Because the process of breathing in is normally an active process; your respiratory centre (I’m cutting it very short here) sends a signal to the muscles of respiration saying “breathe”, and the diaphragm goes down, your respiratory muscles open up, the pressure volume changes and air rushes into your lungs. Now to breathe out, all your respiratory centre has to do is stop sending signals. And by elastic recoil – you breathe out, by elastic recoil. So this is why you find in my writings I often say that the respiratory centre makes us breathe in and allows us to breathe out. Active inspiration, passive expiration – it’s normal. Now what happens if your respiratory passage is blocked, if your bronchioles are hyper-inflammatory and hyper-reactive? You’re able to breathe in because there’s a natural push and all that, but the breathing out – you start to struggle. And that is where the bhastrikā comes in. Training people in the bhastrikā, you have opened up something. Now you do not go into emergency medical services and say to the first acute asthmatic “I’m going to teach you bhastrikā”. You catch the person when they are relatively normal and train them in this so that when they feel an attack coming on, then they are able to do the bhastrikā and get the relief. Please understand that this is like a bit of prevention of a secondary nature, or a tertiary nature, maybe not primary prevention but at least secondary. So they learn the technique when they are relatively normal and get the hang of it so that they can try it out when they are in an emergency. And it will help them. So getting used to expelling the air actively – this is where the yogis started to do things not done in normal life; they said normally active inspiration, passive expiration, let us make active expiration. And then in practices like kapālabhāti they turned it upside down totally (like shirshāsana) where in kapālabhāti you are trying to do an active exhalation and let the air come in passively. Now it’s more theoretical, there’s still an active element but just to give the concept. So this ushtrāsana would also involve this mukha bhastrikā as part of it. It can be done on its own also, you know there are many bhastrikās. You can involve it in different movements, there are different places you can use it, but this is one.

The shasha āsana, the first of the Rabbit Postures, where you are crouching like a rabbit, and in this you are breathing into your low chest region. You are made aware of your low chest region because of the way your chest and thighs come together. So these are the hathenas, the 4 practices – basically 3 uṣṭha, 3 camels and 1 rabbit (just to make it easy!). For the mid chest, it is based on the Fish Posture, matsya. The first one with the legs stretched out and resting on your elbows, opening the chest depending on the person’s level of flexibility, the mid chest region is where you focus as you breathe. The second is a bit more difficult where you are balancing on your head – now, I must say that those of you who have neck problems should be careful doing this – common sense, logic, intelligence. This is a bit more difficult, I personally do not use it much with my patients but for the sake of the completeness of the practice I am giving it to you. The first one can definitely be used – I use it with all of my hypertensive patients also, to enhance the flow of prāna into the mid chest, to help the heart to work better. The third one, the classic matsyāsana, either with your elbows up or if you can pull your elbows back – again, the idea is that here there is an energy dissipation occurring (indicates chest area), here the energy is locked up (indicates legs) so the prāna is more focused on the mid chest. So if you ask me this is the better one if people can do it, but if not, that also (the first one) is beneficial. Especially for some of the people who have heart problems, locking the legs up
may give too much blood coming back to the heart and they may find it a bit more difficult. The first one is relatively easy. And you have the second rabbit posture, with the head up (more than in the illustration) and your wrists and knees are close together, and again you are focusing on the mid chest, to send prāna into the mid chest region. Normally what we would do is help the person understand ādham prānāyāma, the breathing in the low chest region, into front side back; we would introduce these practices so they have awareness of the low chest; we would introduce the pranava prānāyāma of making the sound AAAA; we would introduce using the chin mudrā to go with this – that would be one part. The next part would be with madhyam, we would introduce them to breathing into the mid chest, front, side back, using the sparsha mudrās to touch the different regions and get used to your lungs; doing the UUUU sound with chinmaya mudrā, and doing these practices (hathenas) – all of these go together and they go with the Kaya Kriya. It’s all like the different spokes of the same wheel, and you get the wheel of healing going.

Now comes the third part, with the bālāsana, useful for the upper chest. Here are the maha mudrā 1 and 2 where we are working on something called the “dead air space”. Normally when you breathe in, air goes into your lungs but there is a certain amount of air that stays in your lungs even after you have breathed out as much as you can – the residual air. Residual air is important to keep your lungs from collapsing, and other things, but what starts to happen is, because people are not breathing properly, this starts to become stale. You can imagine what happens if you don’t clean a room for a long time and you have the cobwebs and all? And this residual air starts to be the seat for infections to occur. Now what we try to do is, in maha mudrā, expel that so that new air can come in. Now you’ll say that if you expel it, your lungs will collapse but it’s not that, it’s a bit of cleaning. You know, lift the carpet here and clean underneath and put it back and lift over here – it’s not like lifting the whole carpet and throwing it out and leaving the room bare. So maha mudrā aims to clean out the stale air that is stuck in your lungs so that fresh air can come in its place. This is very different from other techniques so I am stressing a point here – in maha mudrā you breathe in, in the first part in vajrāsana, breathe out as you go down and take your head down. Now I’ve breathed out as much as possible and I use my hands as leverage and this pushing enables any further air that is stuck there to come out. Then I breathe in and come up. So what we are doing is breathing out as much as possible, using the hands as a leverage to push out whatever we can of the residual, and then we breathe in, bringing a fresh supply in. It is important to breathe out as you go down and on the out breath do the pumping action – you do not breathe in there. If you breathe in there, you are going to do two opposite things that are going to cancel each other out. Looks good but – nothing’s happened. The same thing is enhanced in the second maha mudrā. In the first the hands are separate, but here you put them together and use this leverage, like a pump. And what this does is, it’s like at the end of the toothpaste, we start (makes a twisting movement with his hands) – don’t we all do it? Well this is like that. Maha mudrā 1 and 2 are like that – what it is doing is that just when you feel you have finished the toothpaste ... my wife is very good at that, she can always get that extra inch out and I think we men sort of struggle with that! So maha mudrā is which works on cleaning out that stale air, so that you are absolutely clean and get a fresh breath in. Now once maha mudrā 1 and 2 are done, you can do the third of the rabbit postures which is actually not really a posture it is more a sequence. Which is: you breathe in, come down as you breathe out, breathe in and lift the hips – and this is where people get confused because in this one you breathe in whereas in the others you hold the breath out. Then you breathe out sitting back down, and you breathe in and come up to the vajrāsana. Believe me, we take one month of the 6-month course, the full
month goes on just this, so how much importance we give it, I don’t have to tell you! In the shasha, psychosomatic harmonisation – moving into a position, out of a position. And in the last one, the bâlâsâsana, where you are helping the drainage as well as the air entry into the upper chest region. The additional benefit is for the neck, back, shoulders, in addition to those who have headache, because many headaches are related to the blood flow, so you alter the blood flow across the brain and that’s what we want to now start testing in the hospital. So these are the 4 – the maha mudrâ 1 and 2, the shashâsana Rabbit posture which is now the third variation, and bâlâsâsana the baby posture – these are focused on enhancing the pranic flow through the breath into the upper chest region.

Now often when we teach and lecture and talk, we say if you do chin mudrâ you will breathe only into the lower chest; you do this âsana, you breathe in the upper chest – it’s not only into that part. It’s not water-tight compartments! I would prefer to say you breathe primarily into that part; so when you do chin mudrâ, you’re going to be primarily breathing into lower chest, and similarly when you do these techniques (indicates the ādhyaṃ prâṇâyâma hatheṇas), you are forced to breathe primarily into the upper chest. There’s a difference between the words primarily and only! How can you breathe into the lower part without it going through the other parts? It is the focus, where the majority of it is happening.

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These practices facilitate the pranic energisation in the upper lobe region, energizing the head and neck, as well as all the vital parts lying inside our head. Now, when you realize we have the cranial nerves, we have immense amount of connections there, the necessity for good prânic energisation of the brain cannot be over-emphasized. Because everything that happens in your body is governed by something in here (indicates head). So if you can get some prâna up there you are going to help whatever is happening. Now I have already said that when we breathe we are not usually breathing properly into the upper part of our lungs. In the maha mudrâ I was talking about expelling the residual stale air. Normally when you are breathing, you have a tidal volume of 300ml, being very generous 450, 500 millilitres. Now if I were to ask you, in a pulmonary function testing lab to come for a test, we would ask you to breathe into a mouth-piece a couple of times slowly – that is your tidal volume. We would ask you to take a nice deep breath in and a nice deep breath out, and we would say this is your capacity to breathe in, this is your capacity to breathe out. And despite all of this we would find that there is a certain amount that is always going to be in your lungs. There is always going to be a small bit, depends on how well or badly you breathe. So you have that which you are breathing normally, your ability to inspire, your ability to expire, and something more, and this becomes your total lung capacity. The something more is what we are trying to re-circulate when we do the maha mudrâ – that residual air that we would like to re-circulate as much as possible.

In the fourth part you find the chatush pada asana, the 4-footed crawling that we do, from which you can do the vyahgraha, the tiger breathing. You find the chiri kriya; now you have one practice where you can hold this as an asana, as a static posture, where it becomes sharabha. A sharabha is like a griffon, you know the sort of eagle-lion-bird, and here we have a slightly different variation on it. But the combination of breathing into the sharabha and breathing out with the knee to the head, that becomes chiri kriya. One is the posture and one is the kriya, a systematic rational movement
done in synch with your breathing. These are practices that are focused on enhancing your ability to breathe low-mid-high, integrated flow of prāna into all 10 and 10 broncho-pulmonary segments so that your upper part of the body, middle part of the body, lower part of the body are all energized by the healing prāna. And where does prāna come in? Through the breathing! Breathe at 50 to 60% of your capacity, you have more chances of the prāna really working. You have such a capacity and this is what you are normally breathing.

Now when it comes to specific breathing disorders, one of the commonest is the sinusitis that people have, and nobody even thinks about sinusitis much - unless you have it! Why do they not think about it? It’s not going to kill you. The priority is what kills you – acute asthma could kill you, sinusitis is not going to kill you, so put more energy on acute asthma. But you know with sinusitis, there are days when you feel like killing yourself, it is so bad! And that is where one needs to work. What do we work on? Well, 2 things: one is the humming. Now the humming could be the Pranava in which we are doing the A-U-M; the second could be the bee sounding bhramari, where you close off your sensory apparatus and you make the sound of the high-pitched hum of a bee. This humming clears the sinuses, improves the nitric oxide in your nasal passages and sinus cavities, preventing the bacteria from settling down there. And the humming clears up the whole neural connections, and harmonises the cellular functions in the brain. In addition to the bhramari, the humming, cleaning the nasal cavity with warm saline. I know it has become very popular, you have commercially available stuff; I still feel that just a neti pot, warm water, a teaspoon of salt – I feel you can get it done just as well, maybe better than with these commercial preparations. The moment neti came onto the Oprah show in the U.S.A., the moment it got popular, the Americans had to make it a business (as usual!), and you know what happened! All you need basically is to create an isotonic or slightly hypertonic solution of warm water – WARM water – not hot water mixed with cold water from the tap. Recently in America they have reported a couple of people dying of a brain amoeba infection that they traced back to these people using tap water to do nasal flushes – God knows whether it’s true or not but this is what came out and many people sent me these reports. Now you do not take water out of the tap and put it up your nose – the Municipality said it is clean enough for drinking but not for putting up your nose! Now I don’t know what that means but that’s the defence the American authorities gave, that the process of purification of water is fine if you drank it but when it goes up the nose, these are brain-eating amoeba! Sounds like something out of a science fiction thriller! So I’d just like to repeat here that it should be boiled water that has cooled, not hot water mixed with cold tap water. Why warm? First of all it improves circulation in that whole area; if circulation improves, prānic flow increases – that link between circulation and prāna is always going to be there proportionally. In addition the warmth facilitates expulsion, the break-down of the mucus that is blocking; in addition to that, the salt – being of isotonic or slightly hypertonic nature (don’t put too much of salt or too little, you’ll end up with a stinging or burning sensation if the salt content is not correct). The salt acts as an antiseptic, as an anti-inflammatory and as an agent to pull out that which needs to be pulled out, suck the mucus out and in addition, please remember that salt has the capacity to absorb negative prāna. Now I don’t like to use the term negative prāna because to me all prāna is positive, the only thing which is negative is when prāna is not there, but there is concept that wherever there are these negative energies and you want to clean them out, wash your hands in salt water to clean up the energies. This is quite valid, and using the salt as part of the isotonic or hypertonic nasal solution or for other cleansing is partly also a psychic cleansing and don’t discount the psychic aspect of medical conditions.
Now the neti is easily done but then doing the neti is 50% of the story. And everybody teaches you how to put the neti pot, and how to pour the saline solution in and now you’re done with it. And you know what happens? Water stagnates inside, because inside your nose you have these concha, water stagnates in this area, and people decide to do it at night. First of all, do it first thing in the morning if you want to, but don’t do it at night please. And I’ll tell you why – if you do it at night, what happens is you go straight away and lie down to sleep, and you’ll be sleeping all night with this water stagnating in your nasal cavity – stagnant water, stagnant anything leads to disease. And then you say wow, I had an infection after doing neti – most probably this is what happened. This is why you do it in the morning, so that you have the whole day to let the residual water come out; if you do it at night, you don’t have that opportunity. Now what do you do? After the neti, you are going to bend forward and you’re going to be blasting out a nasarga bhastrikā. It is just going to be nasal, in and out the nose. Now something may still be there so turn the head to one side and do several blasts, turn the head to the other side and do several blasts. Go up, stretch a bit, come down and do another couple of blasts to each side, and you know what? You’d be surprised at how much water still remains at that point. Touch your toes, come up, turn right, left; because it’s like a conch inside, all twisted and turned and water will still be there. So you have to turn and twist to get the water out, and this is the vital vital vital 50% of the neti. And you see the video, they pour it in, it looks wonderful, finished! What has been forgotten is blasting out.

Some people have a predisposition for ear infections. And then they do the neti, get something started off – despite all the precautions and everything. So then – don’t do the neti! If you’ve done everything correctly and still it is happening, stop the practice. So you say then what can I do? You can do something called anunāsika prānāyāma. It is a dry neti; anunāsika prānāyāma is the atomic breath as Swamijii called it. And in this what you do is like a dry neti. You are going to be breathing in through your nose one time and blasting out many times. One in, multiple out. You do it through both nostrils six times. Then you close your left nostril and do it through your right nostril six times. Six times means: breathe in, out-out-out-out-out – that is one; six rounds of that. So both nostrils six; right nostril six, close the right, left nostril six, and then with both nostrils six – this is one unit. Both nostrils, right, left, both. So 6:6:6:6 is one cycle of anunāsika, the atomic breath, which is equivalent to the jail neti but is a dry neti for those who have problems with the water or have difficulty or a nasal septal defect that is channeling the water someplace else or one nostril is totally blocked for whatever reason. The anunāsika, I warn you, can be a very messy affair – anything that is up there will come out. It could be made into a 6-day routine. On the first day you do what I described, the full cycle. The second day you do both, right, left, both, right, left, both – that’s 2 cycles but the both in the middle you don’t have to do both. Third day: both, right, left, both, right, left, both, right, left, both – up to the sixth day. Now it takes time, but seriously if you go through 6 days of that there’s nothing going to be remaining in your nasal cavities (except what should be there)! It is an amazing cleanser without the risks of jala neti. Now one thing you have to be careful, if you have a severe ear problem, with this breathing through the right and left, you may be causing a bit of back-up, and if it is very severe, then just do the both nostril cleanser, don’t do the right and left. And always use natural salt please, just natural salt.

There is a third practice which often, with patients who have a lot of mucus, chronic bronchitis especially, we suggest a yogic cleanser. Please understand that when people come to me, I talk to them, we set up the schedules, I explain what these techniques are, especially the cleansers, I have
one teacher to demonstrate and help them through it, at least one or two times, have the person do it and come back to me and say what are their difficulties. So it’s not just okay fine, go and watch this video and do it. One has to be a bit careful. So this is a practice called vaman dhauti or kunjal kriya. What this is, is basically warm saline, isotonic or slightly hypertonic – the minimum should be isotonic because anything less than that you are just going to be absorbing it. So you don’t want to absorb the salt, you want it to go through and clean. At the same time you don’t want it so salty that it dehydrates you – the other extreme, so you know, sort of, again a balance. Isotonic is the best bet. You drink in the early morning on an empty stomach – please understand all of these cleansers should be done in the early morning on an empty stomach just to avoid many of the complications that occur. Cleansers at night are not the best of ideas – if something stays in, it’s going to stagnate over the 8 hours you sleep, and stagnation at any level causes disease. Physical, mental, emotional, spiritual stagnation! Now a couple of litres, two, two and a half – at times, three litres of warm saline, again, warm from boiled (I have given you all the precautions with the neti) are drunk quickly. Not over 25 minutes! But within a few minutes you drink this, put your hand in and stimulate the back of your throat so that the vomiting reflex is activated. (I hope I can say vomiting without offending anybody; I had one student who objected, and said I should say “regurgitating”, but I’ve already said it now!) You drink the water rapidly because if you drink it over a period of time it’s just going to go through the normal process and doesn’t do any good, so drink it rapidly, put your hand in (and that’s why it’s important to be on an empty stomach in the morning), and bring it up. Very, very effective if you can do it, if you’re up to it. Now this is not what you’re going to tell a person when they are in an emergency but in the in-between area I have had a few of the patients – not all of them – who have taken up this suggestion. I suggest it and leave it up to their choice, no forcing. Some have taken it up and find it very effective; so me of them are doing it once a week. Usually I advise once a month, maximum twice a month, not more than that. You don’t want to interfere with the gastric acidity too much; doing it too often you are interfering with the gastric acidity. Once a week at the most, once or twice a month is good or when you feel there’s a lot of mucus. Again please understand the cleansers are needed when there are impurities to be cleansed, not all the time. So, a very simple practice and the advantage of that is that even if the water doesn’t come out, it’s going to come out at the other end so you don’t have to worry too much about it. It’s just going to happen. So the idea is, if you can get it up with the water, what happens? One: you clear the gastric secretions. These are directly linked to often the aspiration that occurs with food particles et cetera that then sets off asthmatic attacks. So what you are doing is that you are clearing the gastric contents and because the food pipe and wind pipe are both closely hugging each other, when you set up this counter-current in the food pipe, you are stimulating a reflex, a similar process in the wind pipe, and the mucus that has accumulated starts to be pushed out. You are not working on the wind pipe; you are working on the food pipe but because both are so close together, the neuronal connections are so close and physically they are virtually hugging each other – if someone gets an electrical shock and you are hugging them, you know what happens to you! It’s something similar to that. And what this does it stimulates the peristaltic expulsion and the mucus starts to come out. There have been some very good studies long ago at Kaivalyadhama, one of the oldest centres in India, from 1910 or something; they did a lot of work on the kunjal, they of course also did with the cloth. I do not get into that because I know the pathetic complications that people could have if the cloth gets stuck beyond the pyloric sphincter, so water is fine because even if it doesn’t come back up, you are going to be dealing with it. And that is why the jala neti and kunjal are suggestions worth trying out, but please, the request I make to you is that before you suggest this to
anyone based on my talk today, you first try it out yourself. Understand the experience, understand the difficulties, the positivities, the negativities, and do not suggest it to anyone until you have done it yourself. That’s a very important thing. I do not prescribe it to every patient who comes to me; I understand the person, where they are, what are they coming for, and whether they are going to be open to it and then I make the suggestion. Some take it up, some don’t. But those who take it up usually find it beneficial – because we’ve excluded all the ones who won’t! It definitely is useful even from your own sadhana point of view; just experience and feel it. And please understand for yoga therapy before you prescribe – suggest – any of the techniques to anyone, please have an experience of the technique yourself. It’s not like every doctor can experience an insulin injection before prescribing it to a patient, but as a yoga therapist I think it is essential that we know what it feels like, what it brings up in you, so that when they say it, you know what it feels like. And this is why it is so very important that one is practicing yoga, one is living yoga, if one is going to be a yoga therapist. Just taking techniques and saying “here, I give you technique 1,2,3,4” – this is the mention I have made in the latest International Journal of Yoga Therapy of which 30% got cut out because it’s deemed to be offensive to some people, I still say it. Because you call it something else, not yoga then. It has to be experiential. What does Patanjali say? Atha yoga anushâsanam – yoga is an experiential discipline. We need to experience what we are going to suggest. Now you may not be able to do it perfectly, but you should have experienced the process. The process is important, the journey is important. For each technique.

Questioner: Do you have any techniques that may be helpful for people who snore?

Dr. Ananda: Yes! First of all, the reason people snore is usually there’s a nasal block, or the soft tissue in the back of throat is falling against the throat causing snoring to occur. The first thing is clearing up the nasal passages, which we have been doing; two, sleeping on the side, especially with the right side up. Now if you sleep with the right side up, within 10 to 20 minutes the right nostril is going to be open – whichever side you have up, within 10 to 20 minutes the nostril opens. If your right nostril is open, it is going to be sympathomimetic. Now sympathomimetic means your bronchial passages are going to dilate. You know, in breathing disorders they give you sympathomimetic drugs, so right nostril breathing when you are on that side is going to create a sympathomimetic effect, open the bronchial passages as wide as they can. Now there may be certain structural defects that mean they can’t go wider – open it as wide as possible, so lying on your side, right side dominant, cleaning up the nostrils, adding a bit of the throat breathing as taught commonly in ujjayi, where you are learning to constrict and exercise the back of the throat region, that needs to grow strong. So these are just a few ideas, in addition to avoiding mucus-forming foods that are going to block it up further. And sometimes you need surgery, fine, that is part and parcel of it. But if all of this doesn’t work and still it is blocked, then maybe there’s a defect that needs surgical correction or medicinal help.

We were talking about chanting and humming, just a few of the studies that have shown about the sinus ventilation, daily humming or AUM chanting. There was a study – not in India, Sweden! 15 times higher increase in nitric oxide levels! Now that’s just a figure for you if you want to quote it. And we were talking about bhramari and pranava, neti, surya namaskar as an effective measure for health. Well if you can do it without any of the physical problems, definitely it is useful. The only people who I would avoid suggesting surya namaskar are those who a major back or neck problem, and a modified version may be useful in such people. But if you want to be safe, be a bit more
careful there, especially with the jumping part of it, if there’s not a jumping part then the bending forward, especially asking them to bend their knees to take the strain off their back and their neck. A few of the practices we have been talking about, the Ardhâ Kati and the Meru asana which is normally designated as the Adho Mukha Shvâna, the downward-facing dog; in our tradition we call it the Mountain Posture, resembling the stability of the mountain. The Usârâsana, the Vyagrâh Pranâyâma and the twisting to open up the chest help facilitate the respiratory system on the right and left sides by getting the spine and the ribcage working together. The Bala Asana that we have been talking about, the Matsya Asana, Bhujânga, and the Pavana Mukta which, again, I would say Pavana Mukta is close to Bread-and-butter. Just like Pranâva, Vibhâga, the left nostril – I think to most of my patients I would give the Pavana Mukta because as I said, in Indian systems of medicine, we understand that it is through the digestive system that most diseases come in. And we are working on the digestive system with the Pavana Mukta Asana – the right and the left and the both, and you are going to be creating a healthy flow of energy right down here. And remember, I said this is the region connected to the Universal Energy. Again you are reconnecting with something higher which will help you become healthier.

The Bhastrikâ, the Bellows Breath in different forms; Surya Bhedana the right-in and left-out or just the right nostril breathing; both are useful as sympathomimetic agents when you need to open the breathing passages. It mimes the sympathetic activity basically – that is a bit of Yogopathy actually! Just as they use sympathetic drugs to help open the respiratory passages, the right nostril breathing could have that effect. Again it would depend on which is the more important – opening the right nostril or dealing with somebody’s stress, so left nostril may also be useful in an asthmatic if the stress is what is causing the attack. The Pranâva and the Anunâsîka which I was describing; the Kukkura Pranâyâma, one more technique from our tradition where you put your tongue out and pant, also good for snoring! Gets the tongue out, gets that area energized, again the diaphragm and gets the mucus out. It’s good for the throat, the mucus – you just have to be careful you don’t overdo it. It’s more of a hot-weather prânâyâma so I don’t know whether it’s too good in winter because it does cool the system down a bit, so in winter - what are the plusses and minuses, you have to balance. In the relaxation we have the Makara Asana, the prone relaxation, the Shpanda-nishpanda and the Kaya Kriya.

The Shpanda-nishpanda is based on the concept of tension/relaxation. Activation/de-activation. Contraction/relaxation. Shpanda is to tense, hold tight; nishpanda is to let go. It is again something similar to Patanjali’s concept of abhyâsa/vairagya – making the effort and then letting go, do your best/leave the rest; it comes down into the practice of the shpanda-nishpanda. This is where the theory comes right down into the practice and they all go together – it’s not separate. Initially we study the theory separately, the practice separately, but they all come together. Because we are multi-layered. So in the Shpanda-nishpanda we lie down in the shavâsana and what we start to do (in fact in my Office DVD we have Vibha doing it in a chair, because we said, well what can people do sitting in a chair?). You can lie down and what you do is start to tense from your toes right up, tense your toes, tense your feet, tense your thighs, tense your abdomen, tense your hands and arms, tense your face and make all the tension as much as possible and then – whoosh! – you let go! Do you get the point? We push ourself to the extreme level of tension which is shpanda and then just let go so that you go to the other extreme, which is nishpanda. Now this is supported by so many studies, including some that we have been doing, where it is found that just lying down and relaxing
doesn’t give you so much relaxation, but if you do something – a couple of rounds of *surya namaskar*, a few *āsanas* and then relax, the relaxation is much deeper. It makes very good common sense but we need studies to tell us that! If you make an effort and relax, the relaxation is better, deeper, more prolonged, sustained, than if you just try to relax. You know, if the whole day you are off, just sitting at home and watching television on the couch eating potato chips, you know, that night you’re not going to sleep so well as the night when the whole day you’ve been running around and been busy, especially physically, you’ve been busy and tired yourself out – I know tonight I’m going to really sleep well! All this standing – it’s not the talking, it’s the standing! You know, you put out the physical exertion, you are going to sleep so nicely! And whenever people say ‘I have trouble going to sleep’, and I say maybe you need to do a bit of activity – not sitting at a computer, not that kind of activity! It’s like the joke about the mother saying to the child “go out and play” and they take the computer game out and play! You say “yeah I’m busy!” but what have you done physically, just sitting at a computer desk, in your chair the whole day, you haven’t put out the effort and that night you’re not going to sleep. Get the activity.

So the *shpanda* part is the contraction – they say try to get to 100%, now it’s not going to happen, but just aim for the maximum contraction, and make your face as grrrh! as possible, and then you just let go. You’re going to do this 3 times, okay. After that we are going to do a practice called the *Kaya Kriya* which has 4 parts. In the first part you’re lying down in *shavāsana* and the feet are turned in until the toes are touching and they are touching the ground as you breathe in; and as you breathe out the feet go out. You are concentrating on the low chest breathing. The second is the hand movement; as you breathe in you move your hands out - not as if you’re flying, you’re just turning your arms outward along the ground as you breathe in, and as you breathe out, turning your arms back in close to your body. So the movement is of the arm and the shoulder, out and then in. The third movement is rolling your head to the right as you breathe in, moving it to the left as you breathe out. Those are the 3 movements. Now the fourth one is a difficult one! You breathe in, toes come in, now breathe in mid-chest, hands go out, breathe in upper chest and head goes to the right. So this is the point of maximum inspiration. Now breathe out low and let your feet go out, breathe out mid and let your hands come in, and breathe out up and let your head go to the left. This is the point of maximum expiration. There is an expansion, and a contraction. Just remember, the movement of the feet and the movement of the hands are opposite to each other. These practices are in nearly all of my works – books or DVDs – because it’s an integral part.

So lie down with head to the north, feet south. Make yourself comfortable in the supine posture; we are first going to do *shpanda-nishpanda*, tension and relaxation practice for 3 rounds, followed by 3 rounds of the *Kaya Kriya*. To start the *shpanda-nishpanda*, start to tense your toes, make them tense, make your ankles, your feet, your knees, your thighs, your hips, your gluteal muscles, your abdominal muscles, your chest, the hands as tight as possible in a clenched fist, the arms, the shoulders, the neck, the face, all the facial muscles, hold the tension! Tension, tension, tension – let go! Let there be some breathing so I know you are alive! When people are in *shavasana* you have to make sure they’re breathing because – you never know! Now again - toes tense, feet tense ankles, knees, thighs, hips, gluteals, abdomen, chest, hands, arms, elbows, shoulders, neck, face, whole body as tense as tense, tense, tense, tense, let go! Wow! Though we do this lying down, it could be done in a sitting position, standing is not really advisable when you want to relax. But sitting in a chair you can do this in your office, as long as nobody’s
watching, or they may call Emergency, thinking you’ve just had a seizure or something! So you have
to watch out a bit where you are. At home, make sure you tell people what you’re going to do –
blame it on Doctor Ananda. Okay, one more time just to make sure you’ve got the full idea. Start
tensing your toes, ankles, knees, thighs, hips, gluteas, abdomen, chest, hands clenched, arms,
elbows, shoulders, neck, face, all as tense as possible, whole body TENSE! Let go! I feel relaxed! And
just let the breath take over, breathing in and out a few times, calm, deep, regular breathing; enjoy
the relaxation. Shpanda nishpanda enables us to go to one extreme and back to the next, enabling
us to realize that we can go across the spectrum and find balance, bringing a state of balance,
harmony, equilibrium, homeostasis, samatvam according to the Bhagavad Gita, sthita prajna –
equanimitiy in all situations (well, that is to be developed). But these are practices that physically
bring these teachings alive. In our day-to-day lives, if you just have a few minutes and you need to
relax, this is a very useful technique to use; it really gives an immediate response. Some people like
to call it the Instant Relaxation Technique, but the name is shpanda-nishpanda.

We will now go into the Kaya Kriya, so I want you to keep your feet apart to such a level that when
you breathe in you should be able to bring your toes in, so check whether you can do that – both the
toes should be touching and they should touch the ground if possible. That’s the aim. So it’s a total
internal rotation at the hip joint, and as you breathe out you make an external rotation until the
little toes are touching the ground on the outside – an external rotation at the hip joint. And we are
going to put this in tune with our breathing into the low chest, energizing the whole lower limbs as
we move with the breath. Again – psychosomatic harmonization. So once you are ready, I am going
to give a count of 6 for this. Breathe in – toes in, 2,3,4,5,6. Breathe out – toes out, 2,3,4,5,6. Breathe
toes out, 2,3,4,5,6. Now just relax in that position, adjust your feet if you need to. Just relax a few
seconds. This could be done 6 or 9 times depending on how much time you have and which part of
the body you want to work on. But if you want to work on the lower limbs, it makes sense to do this
3, 6 or 9 times – it’s not really necessary to do more than that usually. To now come to the mid chest
breathe in, we work on the arms at the shoulders, so bring your arms close to the body. We are going
to be rotating the arms out as we breathe in, and we are going to be rotating the arms back in as we
breathe out. Please understand the lower limbs and upper limbs go in opposite directions evolution-
wise. We talk about with animals it goes in the same direction but with humans, because of our
position, there is a reciprocal aspect. And that is why our knees go in a different way to our elbows.
So similarly the movements of the feet and of the hands go in opposite directions, because of that
very reason, to deal with the neuronal connections. So hands by your sides, close to your body; now
breathe in – roll them out, 2,3,4,5,6 along the ground. Breathe out- roll in 2,3,4,5,6. Keep your hands
on the ground and just rotate them. Breathe in – rolling the hands out, 2,3,4,5,6. Breathe out - roll in
2,3,4,5,6. Breathe in – rotating the hands out, 2,3,4,5,6. Breathe out - rotating internally 2,3,4,5,6.
Just one more time breathe in – externally, 2,3,4,5,6. Breathe out- internal rotation 2,3,4,5,6. Just
relax a few seconds. If there are any tensions coming up in any part of the body, just shake it, let the
tensions get dissipated. The Kaya Kriya works on relieving many of the traumas, physically we have
had from accidents and so many other situations, falls that we may have had, tripping over our feet,
falling down the stairs, falling off the bicycle – these things are stored in the cellular memory and the
Kaya Kriya enables those to come up and get cleaned out. Psychosomatic harmonization of the
movement and the breathing.
Coming into the upper chest region where we are going to be rotating the head to the right as we breathe in and to the left as we breathe out – getting ready. Breathe in – right 2,3,4,5,6; breathe out - left 2,3,4,5,6. Breathe in – right 2,3,4,5,6; breathe out - left 2,3,4,5,6. Breathe in – right 2,3,4,5,6; breathe out - left 2,3,4,5,6. Just relax with the head in the centre a few seconds with just deep breathing; if there are any tensions coming up, shake them, let them get dissipated. Just a slight movement can always change those tensions, dissipate them, enabling health to occur in a much easier manner. Now to bring all these 3 parts of the *Kaya Kriya* together; *kaya* means the body, so it’s a dynamic type of relaxation that we are trying to facilitate. We are going to be breathing in, for the first 2 counts bringing the toes in, then breathing in mid chest taking the hands out, and then the head to the right. And then the feet, hands, and head as we breathe out. Make sure you’re breathing and moving at the same time – it’s a bit like a dance. You have to put all the pieces together and create something which is very wonderful. So get ready. Breathe in - toes in, hands out, head to the right. Breathe out - toes out, hands in, head to the left. Breathe in - toes in, hands out, head to the right. Breathe out - toes out, hands in, head to the left. Breathe in - toes in, hands out, head to the right. Breathe out - toes out, hands in, head to the left. Now just lie in the *shavasana*; if there are any tensions coming up just relax that body part, dissipate it. We are just going to go through 9 rounds of the *savitri prânâyâma*; breathing in a count of 6:3:6:3. We will be breathing in for 6, holding in for 3, breathing out for 6, holding out for 3 – a very useful *prânâyâma* for relaxation, creating a healthy rejuvenation while we are relaxing, to maximize the healing potential that occurs when one is in a state of relaxation. So, no movement, just the breathing in the *shavasana*. Breathe in 2,3,4,5,6; hold 2,3; breathe out 2,3,4,5,6; hold 2,3. In 2,3,4,5,6; hold 2,3; out 2,3,4,5,6; hold 2,3. In 2,3,4,5,6; hold 2,3; out 2,3,4,5,6; hold 2,3. In 2,3,4,5,6; hold 2,3; out 2,3,4,5,6; hold 2,3. In 2,3,4,5,6; hold 2,3; out 2,3,4,5,6; hold 2,3. In 2,3,4,5,6; hold 2,3; out 2,3,4,5,6; hold 2,3. In 2,3,4,5,6; hold 2,3; out 2,3,4,5,6; hold 2,3. In 2,3,4,5,6; hold 2,3; out 2,3,4,5,6; hold 2,3. Continue breathing at your own rate, rhythm, enjoying a sense of relaxation in which the anabolic healing activities can kick in, rejuvenation, re-invigoration can occur, enabling us to regain health, harmony, a state of well-being – a dynamic state of well-being. A state of one-ness, a state of integration, an integrated state in which we are at peace with ourself, we are at ease with ourself, a state of one-ness with our innate nature – that innate nature which is of a divine nature, a state that is a natural state of happiness, bliss, health, well-being. May we be worthy of that; may we enable others to attain that; may others attain it also so that all beings are at peace, are at ease with themselves, making the Universe a much better place.

To come out of the relaxation slowly start to wriggle your toes and fingers, letting the movement come back to your feet and hands, your ankles, your wrists, your knees, your elbows, the hips, the shoulders. Turning from side to side, letting the body, the mind understand that you want to come back to a state of activity; giving yourself a nice healthy stretch, one of those beautiful stretches – aaaa! Turning over to the left with the right dominant for a few seconds, with the knees slightly bent – this is the signal that you are coming back to activity, a signal being sent to your left brain that you need to get up and drive or travel to get home; you need to be alert for that. Slowly coming onto the face, a few seconds on the face; slowly coming back to a sitting posture.

*Om, lokah samasthath sukhino bhavantu. Sarve janahah, sukhino bhavantu. Om shanti, shanti, shantihi, om.*