

Yoga helps the heart, researchers say

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The same kind of exercise that can bring peace to your mind may bring peace to your heart as well.

Researchers at the University of Kansas Hospital are finding that regular time spent doing <u>yoga</u> breathing and stretching exercises may help keep potentially dangerous <u>heart rhythm disorders</u> in check.

A hospital study published late last month in the *Journal of the American College of Cardiology* found that as little as two one-hour yoga sessions per week can help significantly reduce the number of episodes of rapid, out-of-control heartbeats experienced by patients with atrial fibrillation. These patients also cut their blood pressure and lowered their levels of anxiety and depression.

The results of this preliminary study are so promising, two similar yoga studies at the University of Kansas Hospital are enrolling patients with other disorders that cause faulty heart rhythms.

"Yoga is not a solution in itself, but it provides very profound effects," said University of Kansas heart specialist Dhanunjaya Lakkireddy. "It's not a drug; it's not a (medical procedure). It's something you can do in your living room for not very much money."

Lakkireddy wants to see if yoga training can work for other patients.

He has started recruiting people with tachycardia, another rhythm disorder with accelerated <u>heart rates</u>, and syncope, a disorder that causes



fainting when the heart stops beating temporarily.

Lakkireddy's studies are too small to prove definitively that yoga is effective. He hopes to persuade the National Institutes of Health to fund large-scale research to determine with more certainty what yoga may do.

Yoga, with its meditation, <u>breathing exercises</u> and sometimes-difficult poses, has been practiced for more than 5,000 years. Because it's known for its ability to bring inner peace, yoga often is recommended to heart and <u>cancer patients</u> as a way to relieve stress.

Research suggests yoga can lower blood pressure and slow the heart rate. But there has been little study aimed at using yoga as a medical treatment.

Lakkireddy was born and raised in India. His grandfather was a yoga instructor. But Lakkireddy gave up yoga when he was a teenager and started practicing again only in the past few years.

When a couple of his patients told him yoga helped dampen their atrial fibrillation, he was skeptical.

"I laughed at them, 'Show me.' I sent them home with a (heart) monitor."

Positive results piqued his interest in taking a scientific look: "I couldn't dismiss it."

Atrial fibrillation is the chaotic beating - sometimes several hundred times per minute - of the two upper chambers of the heart. The irregular rhythm causes the heart to pump less efficiently. Blood can pool and clot in the heart, raising risks of stroke and heart attack.

About 3 million Americans have atrial fibrillation. More than a half-



dozen drugs are available for to treat the condition, but they don't work for every patient, and even when they do, they can lose effectiveness over time. There also is a heart procedure that destroys electrical "hot spots" that trigger atrial fibrillation; it works about 70 percent to 80 percent of the time.

Lakkireddy theorized yoga may act on the autonomic nervous system the body's own yin and yang - to bring heart rhythms into balance.

The autonomic system has two components. The sympathetic nervous system produces the "fight or flight" response of rapid heartbeat and elevated blood pressure; yoga may tone it down. The parasympathetic system slows the pulse and lowers <u>blood pressure</u>; yoga may enhance its action.

Several years ago, Lakkireddy began putting about 50 atrial fibrillation patients through a three-month course of yoga training.

They visited a yoga studio in Overland Park twice a week for one-hour classes and also did yoga at home, if they wished.

Study participants wore a portable heart monitor to record episodes of atrial fibrillation during the three months before they started yoga classes and the three months they were going to class. They also filled out surveys to measure anxiety and depression.

Lakkireddy found that yoga training reduced instances of atrial fibrillation by about 30 to 40 percent.

While Although yoga is not a substitute for medical treatment, it does improve patients' quality of life, Lakkireddy said. And by reducing the number of atrial fibrillation episodes, it could potentially lower medical bills.



Atrial fibrillation is one of the most common heart problems that end up in emergency rooms.

"It almost competes with chest pains and heart attacks. Even a small reduction can translate to billions of dollars," Lakkireddy said.

Teresa Perkins, 60, of Lake Quivira, Kan., still, does some of the breathing and <u>stretching exercises</u> she learned as a participant in the study.

"I feel that when you're having an (atrial fibrillation) attack, I can calm down and it stops," she said. "You're more comfortable with it.

You're not as panicky that you think you're going to have a heart attack."

While conducting the <u>atrial fibrillation</u> study, Lakkireddy encountered a patient who helped convince him that he should expand his research.

Trayce Loyd, 23, of Moundville, Mo., developed syncope when she was 16. She fainted repeatedly, leading to trips to the emergency room.

"Everything they would test came back normal," she said. "It wasn't anything serious, they said."

Eventually, a heart monitor implanted in her chest revealed her <u>heart</u> was stopping for as long as 20 seconds at a time. She was put on drugs that made her so tired she slept 12 hours a day.

At age 21, Loyd became a candidate for a pacemaker. But her operation was delayed because she lacked insurance. Lakkireddy suggested that in the meantime, she try yoga. She did a yoga routine at least three times per week. She hasn't had a fainting spell in the past year and a half and no longer takes the three or pills a day she did before.



"I love doing yoga. I would much rather exercise than take medications the way I was," she said.

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