

# **REVIEW OF RESEARCH**

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## CLIENT CENTERED THERAPEUTIC APPROACH OF EFFECT OF SELECTED YOGIC PRACTICES ON LORDOSIS WITH ITS RELATED SYMPTOMS- TWO CASE STUDIES ON THE MALE PATIENTS

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## **ABSTRACT:**

A client centered yogic programmed to rehabilitate the patient of Lordosis. By administering proper Yogic programmed with diet management the effective improvement was observed. And to the case of lordosis this study is important to the general people as well as to the sports persons who are affected by this disorder.

**KEYWORDS:** *Effect, yogic practice, lordosis, case study, client centered, therapeutic approach.* 

## **INTRODUCTION**

Lordosis is one type of defective postural pattern of spine. This is mostly related to the lumber region of spine. It is the inward abnormality of the spine related to the lumber region from its normal position of the spine. From this postural deformity arising so many problems, as pain on the particular area and also to the related region, problems arising on nerves related to the region, pain on lower extremities etc. In this case the treatment based on corrective measures through mechanical devices, pharmacological interventions, metabolic

uniformity and improvement of mental conditions. In this regard Swami

Kuvalavananda (1924 & 1926), Vinekar (1963), Bhole (1976), Gharote et al. (1987), and Oak et al. (1987 & 1992) have reported about the importance of Yogic programmed towards improvement of functional disorder. Cause of this type of problem may differ as genetic, mechanical, orthopedic, malnutrition, mental depression etc. but yogic practices has a vital role to handle this type of problem in curative approach. Sometimes this problem occurred in early years of ages of the individuals and also to the sports persons who are in the field of games and sports. This type of disorder will lead a horrible condition in life for the general as well as to the sports persons. Particularly for this type of disorder the yogic treatment having an important approach



towards rehabilitation of persons affected by these deformities.

## **CASE REPORT:**

Subject's age was about 46 years plus (in June 2001) resident of kotalpur village, under the district of Bankura, West Bengal, India, a textile businessman approached directly to the investigator with the complaint of continuous pain on lumber region and it was difficult for him to maintain day to day life activities with this disorder, subject consulted with numbers of doctors and medicated in long term but there was no satisfactory relief in its lasting effects. Due to this unhealthy condition, he was in a mental depression state and was suffering from sleeplessness and a general weakness was also observed. He was maintaining his

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life with his wife, two daughters and with one of his son.

The other subject's age was about 37 years plus (in October 1996) resident of village Gechho, under Behar post office in the same district, Bengal, by occupation a labor , he also approached directly to the investigator with main complain more or less same to the first subject with an unbearable painful situation on that region and to the related regions also. He was also under medicated treatment in a long term but was not getting relief properly and it was very difficult to continue with medicated treatment as it was very much costly to him.

## **YOGIC TREATMENT:**

Both the subjects were initially under 60 days of yogic treatment for one hour in morning and one hour in the evening daily for seven days in a week. The selected yogic practices were advised according to suitability and improvement of the subject. The needed practices were advocated when it was possible to do by the patient. The all practices were done in a simplified and a modified way to see the limitation of patient.

The selected yogic practices were:

- a) Asana- Sahavasana , Merudandasana , Pavanamuktasana , Halasana , Chakrasana (side), Yogamudra , Ardhapadmasana and vajrasana.
- b) Kriya Kapalabhati (in a very simplified way)
- c) Pranayamas-(i) Nadisadhan (ii)Ujjai
- d) 'OM' Kar recitation
- e) Meditation

Beside these yogic practices there was always free discussion about their diseases and yogic concept of diseases and other needed discussion was made with the subjects in a very polite way.

## Diet:

Yogic moderate diet was advised to the patients. Yogic moderate diet includes as vegetarian unctuous food with leaving one quarter (of the stomach) empty which is called as mitahara (moderate diet).

## **DISCUSSION**:

On 7<sup>th</sup> day onwards, the first patient was felt comfort from his problem. On 15<sup>th</sup> day onwards remarkable improvement was observed and on 30<sup>th</sup> day it was observed that depth of the inward curve of spine near about  $\frac{1}{2}$ % (out of total 1%) corrected which was felt on touching the lumber portion of spine with the palm. And on 52<sup>nd</sup> day lumber curve was almost taken of its normal shape. Then the patient was very near to relief from his problem. Then another 20 days was under proper supervision of the investigator. And thereafter once in a month the investigator observed the case up to 3 months. Then he was almost free from his physical and mental problems and was able to lead a normal life.

On the other hand the second patient was felt comfort from his problem on 14<sup>th</sup> day onwards. On 25<sup>th</sup> day onwards his comfort was increased slowly. And 42<sup>nd</sup> day onwards he was almost nearer to get relief from his problem and thereafter up to four month he was under observation. On 3 month onwards he was free from his problem.

With face to face conversation both the patient expressed that they are very much happy and relief from their problems with yogic practices regularly till date and also they expressed that they will continue with these practices as their medicinal use is very limited now with other kind of problems also. They were very thankful to investigator about their rehabilitation from the disorder.

A remarkable improvement observed in these cases due to the fact that the possible mechanical movement was imparted to the patient with the yogic asana which was might have not imparted in other type of medicated treatment. Beside this the yogic practices were developed the muscular strength and nerve action in a better way which might have a cause to removal of the disorder.

Above all it was previously observed that a series of yogic practices has a deep intact on total metabolic system of the body. And this might have cause a total harmony with the systems to each other of the body which might have ultimately leaded to a healthy status of the patients and was significantly relief from disorder.

## **CONCLUSION:**

Within the limitation the study it can be concluded that the proper integration of diagnosis and treatment procedure of the lordosis disorder might have been responsible for an early recovery in these case. However further similar more studies will be able to established firmly this truth. The similar studies also established firmly the relationship between yogic practices and lordosis disorder with its related symptoms of the general as well as to the sports persons who are affected with this disorder.

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