onPractice

Insights on Pregnancy from Yoga and Ayurveda

uring pregnancy the expectant mother is fulfilling an inherent dharma that exists for females of all species. Throughout the globe, pregnancy is seen as a rite of passage that will forever change a woman's existence. While pregnancy has the potential to be a wondrous experience, many women are laden with ailments and feel uncomfortable in their bodies for nine months. Yoga and Ayurveda provide a wealth of knowledge about how to care for women during this extraordinary time to alleviate many common discomforts and create a joyful, healthy pregnancy.

As a Yoga practitioner for over 20 years, I am steeped in the teachings of T.K.V. Desikachar, which align with the science of Ayurveda. Both Yoga and Ayurveda have an overarching view that everything is specific to the individual—from the foods we eat to the asana we practice. Pregnancy is a time that calls for an even greater "tailor-made" approach to health. In addition to her unique constitution, each woman may have specific health challenges, varying states of mind, and family or relational issues. These are colored by her stage of pregnancy and how she is adjusting to it. The foundation for this premise lies in my background of study in Yoga and Ayurveda, my experience working with women in pregnancy, and my own pregnancy.

When Yogic practices that include asana, pranayama, meditation, and chanting are incorporated with diet and lifestyle practices specific to pregnancy and each woman, our work as Yoga therapists becomes more comprehensive and effective. Then we find that Yoga therapy more truly expresses the intentions set forth in the classical texts: integration of the general principles of Ayurveda, Yoga's sister science, with Yoga.

Combining the principles of Ayurveda and Yoga, I continually observe and assess my clients. I notice how they walk when they come in the door, the feeling in their voice, and the look in their eyes. I evaluate their physical appearance and utilize the traditional assessment tools of face, pulse, and tongue diagnosis. Having an understanding



of a woman's *prakruti* (psychosomatic biological constitution determined at birth) and *vikruti* (current imbalanced state of health) provides a crucial framework for designing practices and treatment plans that are appropriate for each individual. In each session I educate women about the basics of the *doshas* as they relate to each client individually. As T.K.V. Desikachar says, "The object of meditation for the teacher is the student in front of them." Creating appropriate practices is like putting together a big puzzle, as each session unfolds and a relationship evolves.

First Trimester

During the first three months of pregnancy, all the major organs and the central nervous system are forming within the fetus. Brain cells are growing rapidly, and the face, eyes, ears, and mouth begin to develop. This time is a big adjustment for many women; some feel overjoyed to be pregnant while others may be ambivalent. The first trimester, when the pregnancy is establishing itself, can be a delicate time, especially if there is a history of miscarriage or other obstetrical complications. It is also a time of surging hormones, which can create additional changes in the physical body, digestion, and emotions. Women may need to adjust their diet to include essential nutrients for pregnancy and lifestyle to honor the new journey of pregnancy.

According to my orientation to Yoga, the general rule for the first trimester is that if someone has not practiced Yoga, then it is prudent to wait three months before beginning a traditional *asana* practice. Women who have been practicing Yoga can usually continue their pre-pregnancy practice, but should avoid extreme forward bends and twists, jumping *vinyasas*, extreme back arches, and very strenuous or heating sequences.¹

Simple asanas in the first trimester might include tadasana (mountain pose), chakravakasana (ruddy goose pose), dwipadapitham (two-leg posture), and urdhva prasarita padasana (supine staff pose). Now is an excellent time to introduce the concept of bhavana: an attitude, idea, or intention one would like to cultivate. This can be very personal and is a good starting place for designing a practice.

Case Study, First Trimester

Sara is a 37-year-old *pitta*-predominant woman who had a strong *asana* practice before she became pregnant. However, she had extreme nausea and every forward movement, standing, sitting, or kneeling exacerbated her nausea. She discovered that brisk walking gave her considerable relief. Sara also recently had a miscarriage and was concerned about having another one.

Nausea and vomiting of pregnancy (NVP) occurs in 50-90% of all pregnancies.² While this condition can happen in all *doshic* types (*vata, pitta,* or *kapha*), it is more common among *pitta* individuals. This may be possibly due to the rise in hormones during pregnancy that circulate in the blood and trigger *pitta* in the stomach, resulting in increased acid secretions.³

I created a protocol that would not aggravate her *pitta* in body, breath, or mind from an understanding of her *prakruti* and *vikruti*.

The *bhavana* for Sara was to feel protected and strengthened in the first trimester while feeling physically comfortable. I suggested she stop *asana* for now but continue the brisk walks and *(continued on page 13)*

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follow them with shitali pranayama (known for its cooling effects on the body and mind) and a short meditation visualizing her body and energetic field sealed and protected.

Creating appropriate practices is like putting together a big puzzle, as each session unfolds and a relationship evolves.

She was instructed to follow a pittareducing diet. I advised her to eat small meals throughout the day, especially first thing in the morning and before bedtime, to prevent acidic secretions from irritating the stomach, and to use fresh ginger root (Zingibar officinalis), which has been clinically proven effective and safe for NVP.4 I chose fresh ginger root over dried because fresh does not aggravate pitta, whereas dried does. Finally, I recommended the herb shatavari (Asparagus racemosis) to settle her stomach due to its demulcent qualities. It has been used historically to nourish the mother and fetus and exhibits anti-oxytocin activity to protect against threatened miscarriage.5

After two weeks had passed Sara felt better overall, even though the nausea had not completely disappeared. She was also able to function much better in her work. home, and social life.

Second Trimester

Most women begin to feel better overall in the second trimester. The pregnancy is more established; NVP typically goes away by the fourth month, and energy increases. However, it is still important to begin each session assessing the doshas along with current mental and emotional states through observation, questioning, and feeling the pulse so that practices and recommendations can be adjusted to ensure their appropriateness.

In the second trimester and beyond, women should avoid all asanas that put pressure on the abdomen. The most benefit will come from asanas that focus on opening the pelvis and hips, such as baddhakonasana (bound angle posture) and upavishtakonasana (seated angle posture). If women regularly practiced inversions they can continue until 20 weeks, but by end the fifth month, shirshasana (headstand) and sarvangasana (shoulderstand) should be avoided according to Sri Nathamuni's Yogarahasya, a widely utilized Yogic text.⁶ Pranayama can be practiced without holding any bandhas, but kapalabhati and bhastrika should be avoided completely.7 It is very important that women don't contract the abdomen upon exhale. General bhavanas in the second trimester can include whatever visions the pregnant woman wishes for herself, her growing baby, and evolving family.

Case Study, Second Trimester

Rebecca is a 29-year-old woman who came to see me in the fifth month of her first pregnancy. She was in much discomfort from constipation, fatigue/low energy, pain in the lower back and hips, and insomnia. She is a pitta-kapha type. These are all very common complaints in pregnancy that respond well to diet and lifestyle changes along with Yoga practices.

Rebecca had the underlying strength and stamina typical of pitta-kapha types but was depleted from her stressful job and lifestyle. Through understanding her prakruti I knew that her ojas (deep energy reserve of the body) would increase through simple changes and she would benefit tremendously from increasing circulation, which can tend to become stagnant when kapha is involved.

I suggested gentle asanas to increase circulation and alleviate pressure on the lower back and open the hips such as chakravakasana, adhomukha shvanasana (downward facing dog), upavishtakonasana (seated angle posture), and dwipadapitham, all modified for pregnancy by making the legs wider than the hips.

She was instructed to incorporate certain foods into her diet known to increase ojas, such as almonds and dates, and to increase fresh vegetables and fruits (which were lacking in her diet). I advised her to drink one cup of warm spiced milk before bed with 1 teaspoon of ghee added to relieve constipation, and to take a warm evening bath with Epson salts and a few drops of lavender oil to relieve her low back pain and induce a sound sleep.

After two weeks she felt like a different woman. She was sleeping much better, had

more energy during the day, and had regular bowel movements. She was bothered by her back only at the very end of the day, when she then did her Yoga practice, which gave her relief.

Third Trimester

The third trimester can be an exciting and anxious time as pregnancy is coming to an end. While asana practices generally should be mild, we also want to ensure that women are maintaining their strength, which they will need when they go into labor. Standing poses are excellent to increase energy. Asanas that bring strength and flexibility to the spine are invaluable to support the extra weight of the baby and help prepare for labor. Modified versions of uttkatasana (fierce posture) and janu shirshasana (head-to-knee pose) may be appropriate. Supported asanas such as suptabaddhakonasana, (supine bound angle pose) are also very helpful now and add an element of conscious relaxation.

Chanting is another wonderful practice to incorporate throughout pregnancy and especially to help prepare for labor when women need to work with the strength of their breath and keep the mind keenly focused on the process. It can add another dimension to one's practice and encourage the breath to lengthen naturally and increase its capacity while the mind focuses on the sounds.

Case Study, Third Trimester

When I was pregnant with my daughter, in the eighth month I began to feel anxious about becoming a new mother and the unknown of giving birth. This nervousness and anxiety is characteristic of vata dosha. My teacher taught me a chant to honor different gods and goddesses to invoke the qualities of each one in my growing baby. Through chanting slowly and calmly I began to feel very relaxed in my body and mind. I followed a basic vata-reducing program of warming, well-cooked and spiced foods; I received plenty of rest and spent time several days a week swimming and massaging warm sesame oil all over my very pregnant body. I practiced suptabaddhakonasana, (supine

bound angle posture) daily, extending the exhalation to relax the nervous system while my body softened and I visualized a smooth labor. Within a few weeks my anxiety diminished significantly, as I felt more grounded and prepared for what lay ahead.

Yoga and Ayurveda provide the insight and wisdom through their tailor-made approach to health. We can begin by creating appropriate Yoga practices that honor each trimester and the various mental and emotional states of each woman. When we add the tools for continuous balance and monitoring of the doshas, encourage our students and clients to make simple changes, and incorporate nourishing practices into their lives, they are more likely to feel the benefits of a healthy, joyful pregnancy. **YII**

Endnotes

- 1. Frawley D, Kozak S. Yoga for Your Type. Twin Lakes, WI: Lotus Press; 2001:196.
- 2. Romm A. Botanical Medicine for Women's Health. St. Louis, MO: Churchill Livingstone Elsevier; 2010:353.
- 3. Lad V. The Complete Book of Ayurvedic Home Remedies. New York: Harmony Books; 1998:225.
- 4. Willettts KE, Ekangaki A, Eden JA. Effect of a ginger extract on pregnancy-induced nausea: A randomised controlled trial. Aust N Z J Obstet Gynaecol. 2003; 43(2):139-144.
- 5. Goyal RK, Singh J, Lal H. Asparagus racemosus-an update. Indian J Med Sci 2003; 57:408.
- 6. Krishnamacharya T. Sri Nathamuni's Yogarahasya. Chennai, India: Krishnamacharya Yoga Mandiram; 1988:133.
- 7. Ibid, p. 134.

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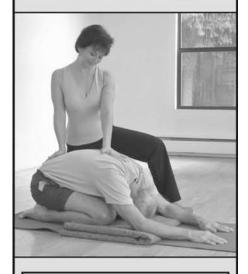


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