

## **Yoga and Parkinson's A Report from the Inside**

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There is mounting evidence that yoga is helpful to persons living with Parkinson's disease (Yoga Journal, February 2007, p92) (International Journal of Yoga Therapy, No.15 (2005), p81). This paper is intended to add to the anecdotal evidence in ways that suggest techniques to be tried out. I qualify as an insider due to my long experience practicing and teaching yoga and my experience living with my own Parkinson's Disorder the last few years.

I have been practicing yoga for over 20 years, and teaching it for the last 16. My first teachers were from the Iyengar tradition, and for the last 10 years I have studied in the Anusara tradition, with over 280 hours in trainings led by John Friend. For the last 6 years I have led classes of devoted and highly disciplined students most of whom are in their 70s and 80s; they have demonstrated that there is much to be gained by a regular practice for people in that age bracket even, perhaps especially, if they have never done yoga before. These students have also given me a great deal of practice in modifying a pose to work around a student's physical limitations while preserving the essence of the pose.

Several years ago I began to have a variety of subtle symptoms that did not appear to fit any coherent pattern. They included loss of sense of smell, oily skin, profuse sweating, daytime apathy, intermittent anxiety, and frequent interruptions of sleep. Then, little less than two years ago, after some weeks of difficulty sleeping, I awoke in the middle of the night to find that I could breathe or sleep, but not both at once. I was also urinating every 15 minutes and shaking like a leaf. I underwent a large battery of tests, and the doctors concluded that the only thing wrong was severe sleep apnea, which was treated with moderate success. But my wife (a Ph.D. psychologist) and I knew there was something deeper wrong. She asked for a Parkinson's evaluation, but the physicians were convinced that sleep apnea was the whole story. Three months later she spotted dragging feet and lack of arm swing (not noticeable to me) that even more strongly suggested Parkinson's. Two more symptoms did get my own attention: handwriting going tiny, and loss of ability to kick up into handstand at the wall. A visit to a neurologist resulted in a positive diagnosis based on manifestation of all the primary symptoms.

Why did I not initially show the tremors and problems in moving that more often characterize early Parkinson's? It could of course just be a variation in the form of the disorder from one person to another, but *it also could be that yoga delayed the onset of the skeletal symptoms, so that the first symptoms to show up were in the autonomic nervous system.* This possibility is supported by the experience of John Argue (), who has been teaching motion skills to Parkinson's patients for over 20 years; his students have been very successful in standing off the decline of motor skills.

*An established yoga practice can serve as a medical diagnostic tool.* My experience of losing Handstand is an example of this. About the same time Wheel pose (Urdva Danurasana) went away. Both poses require shoulder mobility, upper body strength, and coordination (to get up), and Parkinson's was compromising all three. Interestingly, arm balances, like Crane pose (Bakasana), were relatively unaffected, indicating that difficulty getting straight arms over head was a key issue. With careful work I got both poses back, but Wheel was a lot harder, and was helped substantially by Parkinson's medication. This example shows how yoga and conventional medical treatment can work together; it also illustrates the role of yoga as a diagnostic tool: my recovery of the pose indicated that the medication was working.

There is some debate at present regarding whether an early diagnosis of Parkinson's is of any use, given that there is no known way of slowing the disorder's progress. My experience suggests that *early diagnosis would at least give one the opportunity to get a solid exercise program in place before the symptoms became onerous.* It is generally easier to maintain a capability than to recover it, let alone develop it from scratch with a body that is already compromised. Early signs are more evident to those who have sharpened their awareness of the body by yoga. Continuous, close-up observation is powerful for early warning: my wife suspected Parkinson's at least a year before any neurologist was willing to commit to that diagnosis. There are also early symptoms still being discovered. One that I and at least one acquaintance experienced might be called "amplified anxiety", that is, a lot of anxiety in situations that would normally produce just a little.

*Parkinson's compromises certain physical abilities more than others.* Therefore it calls for special emphasis on poses that support those characteristics. I have already mentioned shoulder mobility, which calls for backbends and shoulder openers. Then there is inner hamstring tightening, which calls for poses related to Wide Leg Forward Bend (Prasarita Padottanasana), and balance issues, which call for Tree pose (Vrkshasana) and its variations. I have also benefited from a modified Tree done with eyes closed and fingertips lightly touching the wall in order to tune up proprioceptive feedback.

There is a case for *sprinkling mini-practices throughout the day.* Even though nominally retired, I manage to fill up my days with commitments that compete with holding full 1 to 2 hour practices every day. In addition, I find it uncomfortable to go for long without some mild physical challenge. For both these reasons it has been useful to design little sequences of 2 - 6 poses that can be done without changing clothes and without preparation. Particularly useful are one sequence that can be done right in bed, immediately after waking up in the morning, in order to make the inherently difficult process of getting the body up and running quicker and pleasanter, and another, 5-pose, sequence that can be done in any clothes throughout the day and which lightly hits the whole body.

*Yoga may provide resources for working around emotional, in addition to physical, symptoms.* Having identified the amplified anxiety described above, I am now on the watch for it as well as for other amplified emotions, like anger or depression. Many such

emotions, at a low level, are common in everyday life. (Response to an attempted and failed household plumbing repair springs to mind.) Most schools of yoga foster taking emotions seriously, but not unquestioningly, and that is a good way to treat amplified emotions: take note of them and act on them, but only if appropriate, and only at an appropriate level, not the amplified one. Of course, just *knowing* about the phenomenon of amplified emotions already softens their impact somewhat.

I believe in *yielding no capacity before its time*. Yoga, medication, and Jin Shin Jyotsu (delivered by my wife, and that is another story) continue to be my principal tools for doing that in the presence of Parkinson's Disorder.