Dyspnea, difficult breathing, is a condition as old as the medical history of man, and some of the problems of breathing begin as early as the “first breath of life” for many a human. Not only is it a serious affliction robbing man of his health, wealth and happiness, but a major challenge to doctors and medical researchers. It has presented the greatest challenge to those doctors who use medication alone as their form of treatment. This is not to say that medication and drug treatment may not play a valuable part in acute, life threatening, crisis conditions. Thousands are alive today because of the discovery of life saving drugs administered during a crisis as well as the life saving critical care units.

But medication is not the answer and the condition usually returns, sometimes with greater intensity than in the original instance. Drug therapy alone cannot work because it does not deal with the cause of the problem, the faulty breathing. Suppression of symptoms alone should not be dignified by the name "cure" in any system of medicine. We must not forget that it is only by eliminating the root cause, can we bring back for the patient the basic good health so necessary for man.

This article is an attempt to present some methods to attain to a new state of health through the use of Rishiculture Ashtanga Yoga techniques. These techniques are equally valuable for a new student to Yoga, as they develop strong, healthy, and robust lungs. Any student of Yoga who has not used these particular techniques earlier will find a new dimension added to their present practice of Yoga when they use these practices.

AGGRAVATING FACTORS: For anyone who has breathing difficulties, the use of these techniques will soon correct such conditions, but we should also remember that breathing difficulties may also be aggravated by a number of other conditions:

- Environmental circumstances: Air pollution and working in areas where noxious, gaseous substances are discharged into the air from factories and heavy industries or discharged from the exhausts of automobiles, buses, or lorries may cause serious lung damage.

- Destructive personal habits: Smoking of cigarettes, chewing of pan, inhalation of snuff and the misuse of certain drugs destroy the ciliary lining as well as dampen the body’s response and immunity to infectious agents. These lead to the creation of many breathing difficulties.
• Dietary misuse: Acid-forming and mucous-producing foods create phlegm and acid discharges that clog up the respiratory passage and make it difficult to breathe properly.

• Personal emotional and psychological conditions: An overly sensitive nature or a nature, which is easily embarrassed, will add to breathing difficulties. We must never forget that our emotions and breath are closely inter-related and that many breathing difficulties are the surface manifestation of underlying emotional ‘hang ups’.

From the above statements it should be obvious that one needs to get out into fresh air, control or eliminate bad habits and get on to a healthy diet, while learning to become a positive, outgoing personality.

UNDERSTANDING DYSPNEA: In the course of Dyspnea or the common attack of labored breath, the bronchioles are so narrowed that the air can get into the lungs more easily than it can get out, resulting in the lungs being distended beyond normal. As the atmospheric air is packed in, there is little space in the distended lungs for more fresh air to get in and the subject feels a sense of “being breathless”. As a consequence, the patient tries to force the breath and breathe more deeply by heaving the chest and working the muscles of the face, neck and shoulders. This results in the chest being completely distended and the facial and neck muscles getting distorted. What is needed at this point is a Bhastrika (a bellows-like breath) that will empty the lungs so that the abdominal wall and lower chest contract forcibly, releasing the muscle spasm of the convulsive inspirations.

If the condition is not corrected in the early stages, then the patient is subjected to more frequent attacks. Each attack is usually of a longer duration and a higher intensity, until chronic distension of the chest takes place, so much so that the patient becomes “breathless” with the mildest exertion. Sometimes the patient becomes breathless even at rest and this is particularly aggravated by emotional or mental strain. The classical “barrel-shaped” chest of the patient is to be noted in chronic lung obstruction.

Bronchial Asthma, Emphysema and Bronchitis are all classified as Chronic Obstructive Airway Diseases. In all cases the major symptom is the shortness of breath as the result of an obstruction to Bronchial airflow. Excessive mucus secretion is also a predominant symptom in all these patients. In Bronchial Asthma, narrowing of the Bronchial airway is common, but the major symptom is the severity and wide variation of the obstruction and the sudden onset of the attack. There is often spontaneous release of obstruction when medication or Yoga therapy is administered. With Emphysema, the air spaces beyond the terminal bronchiole become over-distended and the alveolar walls collapse leading to the classical “Pink puffer” appearance. In the case of Chronic Bronchitis, mucous membrane lining the inside of the Bronchial tubes becomes inflamed and swollen, secreting excess, thick mucous into the lumen, thereby obstructing the airway passage. The classical description of the “Blue bloater” is seen due to the cyanosis and peripheral edema that accompanies this condition.

In all cases the usual tendency of Bronchiolar narrowing is increased by muscle spasms of the Bronchiolar wall producing the common “Bronchospasm” with accompanied swelling
of the inner lining of the bronchioles due to the inflammation. This mucosal edema secretes thick mucous phlegm into the Bronchial lumen complicating an already distressing condition.

Inflammation may affect any part of the respiratory tract, resulting in a temporary condition like the common cold, Laryngitis, Pharyngitis, Tracheitis, or the more chronic Bronchitis. In more serious conditions such as Pneumonia, an inflammation of the lung tissue itself is found due to infection. Pleurisy, the inflammation of the pleura, may be dry and very painful or with effusion collecting in the pleural cavity, inhibiting the normal lung function.

Other important conditions include Empyema that is a collection of pus in the pleural cavity. Pulmonary embolism is a medical emergency that occurs when an artery to the lung is blocked by an embolus, a clot of blood. Pulmonary Tuberculosis (TB) is a chronic infectious disease, while Carcinoma (Cancer) most frequently attacks the lungs of smokers. Pulmonary ventilation may be inadequate if the breathing is shallow or weak because of damage to the brain, spinal cord, nerves, muscles or ribs, or if the breathing is obstructed as in the case of Bronchial Asthma.

Dyspnea, difficult breathing, may be due to the weakness of the nerves or of the muscles as well as damage to the ribs or the pleural cavities. Pneumonia or pulmonary edema may also cause stiffness of the lungs leading to distressed breathing. Long term suppressive medication and radical surgery or lengthy hospitalization is usually employed to correct these conditions, but for those who wish to resolve the real cause of the problem, we suggest the use of Yoga Pranayama along with a Yogic diet, relaxation and the cultivation of positive mental attitudes.

**ROLE OF YOGA:** The Yoga life offers a holistic path to attain to all of these conditions through its practical and philosophical aspects that deal with the human existence at all levels. All aspects of yoga are useful but Pranayama, the Yogic science of conscious expansion of Prana, the Life Force, is the most valuable technique used to correct faulty breathing and chronic diseases associated with the nose, throat and lungs. Even a moderate attempt at these breath controls will pay giant dividends to the sufferer. The patient can quickly correct the faulty breathing habits which are the root cause of the disease, and then by adhering to a proper diet and living a Yoga Life will be freed from this malady lifelong. The use of Pranayama can enable the patient to regain the normal physiological chest movement associated with good breathing or to attain to that condition if it has never been present. The essential principle of therapeutic Pranayama is that the subject must learn to control the entire breathing mechanism in a conscious and aware manner. In the beginning this may be difficult for most persons, but in a short time, with disciplined control, the patient can learn to control their breath while doing physical exercise, climbing stairs and in other types of physical exertion. They can also lead to a control of the psychological and emotional factors that produce rest and relaxation necessary to alleviate tensions that otherwise often cause an attack of breathlessness.
HATHENAS: THE FORCING TECHNIQUES: Hathenas are specially designed forcing techniques that are used to produce a particular effect upon the human body. Many of them are Classical Hatha Yoga Asanas or variations of these poses, while others are designed primarily for the purpose elucidated here. These forcing techniques pressure and cause reflexogenic feedback through various nerves in the body corresponding to the parts of the lungs to be enlarged, expanded, reconditioned or rejuvenated. The entire procedure should be done at least once day, preferably in the early morning. If this is not possible, then an afternoon or evening session before food may be substituted. For those in a hurry to regain their lost health, a morning and evening session before food is recommended, and for the real devotee, a high noon time practice may be added prior to lunch.

Chatus Pada, the four-footed postures are the postures named after animals, fish, reptiles, birds, insects or other creatures and make up the majority of the Classical Asanas. Our ancient Rishis (the seers of reality) were keen observers of Mother Nature and were always watching for ways that the “Earth Mother” taught her children to care for themselves in time of distress and need, as well as in seasons of plenty. They were quick to adopt techniques used by our brother creatures, when they were felt to be of positive value or of health advantage to humankind. Especially important is the Vyagaha Pranayama, the Tiger Breath. In this posture the body is resting in the “four-footed” manner and the magnificent breathing pattern of the great cat is aped to utilize all sections of the lungs.

Hathenas to increase breath capacity and efficiency in the low chest area (Adham Pranayama): The group of Hathenas based on Ushtra Asana, the camel pose help force the inhaled air primarily into the lower lung area expanding and stretching the lung tissue. These Hathenas condition the respiratory system to perform conscious and efficient low-chest breathing known as Adham Pranayama.

- Sapurna Ushtra Asana– Variation 1
- Sapurna Ushtra Asana - Variation 2
- Purna Ushtra Asana
- Sapurna Shasha Asana

Hathenas to increase breath capacity and efficiency in the middle chest area (Madhyam Pranayama): A regular practice of the Hathenas associated with mid chest breathing ensures a healthy, strong heart capable of maintaining a healthy blood pressure and vigorous circulation. Pranic energy is stimulated to flow into the mid chest area and the intercostal muscles and lung tissue are strengthened and reconditioned.

- Sapurna Matsya Asana
- Ardha Matsya Asana
- Matsya Asana
- Purna Shasha Asana

Hathenas to increase breath capacity and efficiency in the upper chest area (Adhyam Pranayama): This set of Hathenas forces the air to move primarily in the upper lung area helping expand the lung capacity and strengthen lung tissue. This creates good upper lung breathing habits that prevent and relieve numerous disorders of the head and neck.
• Sapurna Maha Mudra
• Purna Maha Mudra
• Bala Asana
• Paripurna Shasha Asana

Hathenas to increase breath capacity and efficiency in the whole lung area (Mahat Yoga Pranayama): The Hathenas performed from the four-footed Chatus Pada Asana are designed to help produce a strong and powerful respiratory system. These practices help condition our body to deep, controlled and complete breathing in which all sections of our lungs are used to their fullest capacity.

• Sharabha Asana
• Chiri Kriya
• Vyagraha Pranayama

All the Chatus Pada or four-footed postures are to be recommended for practice by children of both sexes. These animal, reptile and bird postures help children to enjoy Yoga and develop a deeper understanding of the animal world thus developing empathy and sympathy for the inhabitants of that kingdom. These poses help the children to understand the animal’s viewpoint by putting themselves in the “shoes of the animals’ so to speak. These four-footed postures will ensure that breathing difficulties never occur and that normal development of mind and body takes place in the child.

SUGGESTIONS FOR THE CURE OF MUCOUS DISORDERS: All mucous conditions can be cured if the cause is removed and in some cases, a new environment substituted. Mere use of medications is never the answer. Smoggy cities and areas known to be pollen-laden must be substituted for by sea or mountain air locales and sunshine is an absolute must. Sunshine helps assimilate carbohydrates which otherwise break down into sugar starches, often the cause of the mucous secretion. The Yogic Pranayamas can then go to work and help clear up the trouble.

Diet must be studied and a new balance of food combinations achieved. All refined products must be avoided. Vitamin B necessary for the proper assimilation of carbohydrates in the body is found mainly in whole grains, so whole wheat and brown rice may be substituted for the white products commonly used. Vitamins have an excellent effect upon the Thyroid, which is involved in burning up carbohydrates in the system through the fire of metabolism. The inclusion of citrus fruits is wise, but these should be used as juices and with plenty of water to thin them down for quick and easy assimilation into the system. The common orange, lemon, pineapple, lime, grapefruit, tomato and the Indian gooseberry (Amla) are those best suited to help alleviate respiratory infections as they are rich sources of Vitamin C. Apple juice may be substituted for those who find the stronger citric acid hard on the stomach or the kidneys. Very ripe fruit is to be preferred for the use of juice. Green leafy vegetables are a rich source of Vitamin A and help protect the respiratory mucous lining.
The citrus fruit diet: Acute mucous infections respond well to a fruit or fruit juice diet. Some therapists term this a “fruit fast”. Generally fruits in season should be used. No sweetening agents should be used, especially chemical agents. In the case of chronic gall-bladder infection, orange juice should be avoided and pineapple juice can be substituted instead. Two teaspoons of pineapple juice added to a glass of warm water is excellent for a throat condition, while the juice of half a small lime in a glass of warm water is excellent for conditions of the ears. The use of weak grape juice is highly recommended, but persons with chronic kidney conditions must avoid this fruit. Honey may be added to the fruit juice for natural sweetness as honey also has anti-inflammatory properties in addition to soothing the respiratory tract.

The raw vegetable juice diet: Vegetable juices thinned with warm water are preferred in cases of pyelitis and cystitis (kidney and bladder infections). A juice made of three parts carrot and one part celery juice is excellent for the above conditions. No salt is to be added. A potassium or cooked vegetable broth can be used as well as barley water laced with lemon peel. Curds and buttermilk are also excellent and our Indian lassi and dhai are to be recommended. In making the broths, no masala or curry is to be used, as the spices may cause excess mucous secretions. Onion and garlic juices are both highly recommended in the cure of chronic catarrh. A few drops of lemon juice with a teaspoon of each of onion and garlic in a glass of warm water is one of the finest tonics, and is an excellent mucous eliminator.

Herbal teas: The use of herbal teas to break up chronic mucous conditions should not be overlooked. Teas made from an infusion of mint, peppermint, barley or oats straw, fenugreek and other alkaline materials can be used freely. In the case of acute mucous colitis, plain barley water or a tea made from slippery elm may prove to be the only agent of cure. Herbal teas of Thulasi are excellent for all respiratory complaints. Honey and natural jaggery may be used as natural sweeteners if required.

The fasting diet: Although a total fast from food may be indicated for certain chronic catarrhal conditions, a “fasting diet” may serve instead. A diet made up of finely ground, shredded, or sliced fruits and vegetable is usually used. If the “fasting diet” is to be used for a curative purpose, then a three-day fruit juice regime should precede it. The potassium broth may be used as a substitute for fruit juices and then the diet made up only of fruits and fresh vegetables is to be used. Absolutely no refined products are to be tolerated, although a little natural honey may be used if some sweetener is required. Raw potatoes can be used as a substitute for those who require bread or other starches. Fluid intake should be high, particularly in the case of pyelitis as well as cystitis and as much as three liters of water a day may be tolerated. Milk and other dairy products must be avoided. It is to be remembered that this is a curative diet and not one recommended to maintain general health. Usually a week to ten days on this diet will show great improvements in the condition. Other food items may then be gradually included in the regular diet. A careful watch should be kept for those foods to which the body has an allergy and these should be eliminated permanently from the regular diet.

SUNBATHS AND WALKING: Apart from the diet and dietary restrictions, one must think in terms of doing a lot of Pranayama, particularly out in the open air and sunshine.
The early mornings and late afternoons are the best times for the Pranayamas. Short sunbaths are often of great help, but care should be taken not to get sun burnt. A natural sunbath is to be preferred over the artificial sun lamp where and whenever possible. Sea baths aid in loosening of the congested mucous and a sunbath following a sea bath can have numerous added health benefits as well. An evening or morning stroll while doing deep breathing should be a daily routine for anyone with chronic breathing disorders. Sedentary city dwellers will find this an excellent daily constitutional, and although it may not permanently cure a condition by itself, the condition is of times greatly mitigated. The Sukha (1:1), Savitri (2:1) or traditional (1:2) rhythm of breathing may be adopted while walking to deeply exercise the heart and lungs in a healthy manner.

KUNJAL KRIYA: This is one of the classical Yogic cleansers (Shat Karmas) and is of immense value for the patient of mucous (Kapha) disorders. This practice is to be done in the morning on an empty stomach. One or two litres of lukewarm saline is drunk as rapidly as possible. The saline content is to be 10 grams of normal salt per litre of water (1%). The stomach should then be churned with Nauli Kriya or Agnisara (the abdominal pumping action done on the held out breath). When ready, the back of the throat is tickled with the fingers to induce vomiting until all the saline has been thrown out. A couple of rounds of vomiting may be required to empty all the water that had been drunk earlier. Relax for 10 minutes in the Shavasana with deep breathing. Over a period of time, inducement of vomiting becomes easier and sometimes all you need to do is think of vomiting for it to occur! This practice when done once a week can help patients have a great deal of relief from their breathing problems and has been scientifically proved useful in patients of Bronchial Asthma.

JALA NETI: One of the most important Yoga practices for the prevention and management of upper respiratory disorders is the Neti Kriya that is one of the Shat Karmas of Hatha Yoga. Neti is the practice of cleaning the nasopharyngeal tract with liquids or thread. Types of Neti include Jala Neti (nasal irrigation with lukewarm saline water) and Sutra Neti (nasal cleaning with a thread or catheter. Others are Dugdha Neti (with milk), Ghrta Neti (with ghee) and Jala Kapalabhati that includes Vyutkrama and Seetkrama Kapalabhati.

Hypertonic nasal irrigation is a therapy that flushes the nasal cavity with saline solution, facilitating a wash of the structures within. Originally part of the Yogic tradition as Neti, this technique is anecdotally regarded as safe and effective. It has been suggested as adjunctive therapy for sinusitis and sinus symptoms. Potential efficacy is supported by the observation that hypertonic saline improves mucociliary clearance, thins mucus, and may decrease inflammation.

Recent research helps us understand the scientific basis of how Jala Neti, one of the Shat Karmas can help in preventing and managing sinusitis in an effective manner by improving mucociliary clearance, thinning the mucus, and by decreasing the inflammation that blocks the sinus ostia. This information must be taken to the primary health care level as it has the potential to reduce the use of antibiotics and other suppressant medications in a healthy and cost effective manner.
CONCLUSION: The need of the modern age is to have an integrated approach towards therapy and to utilize Yoga therapy in coordination and collaboration with other systems of medicine such as Allopathy, Ayurveda, Siddha and Naturopathy. Physiotherapy and Chiropractic practices may be used with the Yoga if needed. Advice on diet and lifestyle is very important irrespective of the mode of therapy that is employed for a particular patient.

Though Yoga and Yoga therapy are very useful in bringing about a state of total health it is not a miracle cure for all problems. It needs a lot of discrimination on the part of both the therapist as well as the patient. It may not be useful in emergency conditions and there is a strong need to consult a qualified medical doctor where in doubt. Each patient is different and so the therapy has to be molded to suit the individual needs rather than relying on a specific therapy plan for patients suffering the same medical condition. A very true problem is that there is a different approach of the different schools of Yoga to the same condition. It is better to follow any one system that one is conversant with, rather than trying to mix systems in a “Yogic Cocktail”.

Yoga helps us regain the ease we had lost through dis-ease (as implied by *sthira sukham asanam*). It also produces mental equanimity (*samatvam Yoga uchyate*) where the opposites cease to affect (*tato dwandwa anabhigatha*). This enables us to move from a state of illness and disease to one of health and well being that ultimate allows us to move from the lower animal nature to the higher human nature and finally the highest Divine Nature that is our birthright.

SUGGESTED READING:

7. Pranava Pranayama with Dr Ananda. [www.youtube.com/watch?v=kaJ1IUq7f3k](http://www.youtube.com/watch?v=kaJ1IUq7f3k)
9. Yoga for breathing disorders with Dr Ananda Balayogi Bhavanani. [www.youtube.com/watch?v=qj6Onuvx2hw](http://www.youtube.com/watch?v=qj6Onuvx2hw)