

### **Perspective**

# Yoga as Complementary Alternative Medicine, Let's not Forget What Works!

### McKivigan J\*

School of Physical Therapy, Touro University, USA
\*Corresponding author: James McKivigan, School of
Physical Therapy, Touro University, 874 American Pacific

Drive, Henderson, NV 89014, USA

**Received:** July 01, 2016; **Accepted:** July 05, 2016;

Published: July 07, 2016

## **Perspective**

Practitioners today have to contend with a stream of new treatment options that are increasing in number almost daily. The patients undeniably win when we incorporate the latest technology with traditional treatment methods but too often the old gets completely pushed out to make room for the new. While many Complementary Alternative Medicine (CAM) therapies may be considered "old" by some practitioners, there is still a steady flow of articles being published showing that they remain effective. What if instead of abandoning the traditional therapies we used them in true compliment to the newest options? Here we will explore some of the challenges faced when prescribing yoga as a CAM treatment and attempt to make basic recommendations that might make integration easier going forward.

A quick search of recent literature reveals ample evidence supporting the prescription of yoga. To help focus this discussion, the author selected a small sample of articles relating to back pain. A wide variety of therapies has proven effective for the treatment of back pain with strong and moderately strong evidence including acupuncture, yoga and thermal modalities [1]. Further, yoga has been shown to reduce both pain disabilities even when a wide range of styles and treatment durations were tried [2]. Even when back pain is chronic, yoga is supported by strong evidence for short-term improvement and moderate evidence for long-term improvement [3]. One challenge facing yoga therapy is patient compliance but if the patient is willing to maintain their prescribed regimen then yoga can be just as effective as exercise therapy yet is more cost effective [4]. One of the biggest challenges facing the measurement of improvement from the therapies mentioned is that they cannot be blinded, so removing bias is difficult. However, with chronic low back pain being the second most common reason a patient visits their doctor [5] it is imperative that we continue to look at every potential treatment and measure the cost versus the benefit.

Integration of yoga is not without its hurdles, though. Medicine is becoming more driven by cost. Even though many CAM treatments cost far less than the newest options, insurance companies deny

reimbursement for them. This situation shifts the cost burden to the patient's pocket, putting it out of reach for many. The culture of medicine is changing as well. A growing population of patients is more and more expecting doctors to heal them without having to actively participate in their own care. This condition makes prescribing a regimen such as yoga more difficult since for it to be effective the patient needs to take an active role in the program. Young practitioners entering practice and the schools they graduate from are feeling expanding pressure to stay on the cutting edge of research. This circumstance means that the time to teach traditional therapies is getting squeezed and in many cases cut out completely. As older doctors retire from practice, they are taking their knowledge of CAM with them. As a group, we have not done enough to bridge this gap.

With new journals such as Annals of Yoga and Physical Therapy emerging to cast a spotlight on yoga and other CAM therapies we have an opportunity to have an inclusive discussion on the integration of traditional therapies with the most modern options. It is the hope of the author that this discussion can lead to a set of recommendations regarding integration. If the hurdles to implementation can be overcome, patients will benefit greatly. While the scope of this article was necessarily limited due to its nature and the list of references was short it should never the less be a compelling taste of what is currently available in the literature. Additionally, this journal and others will no doubt be forthcoming with articles that further strengthen the base of support for traditional therapies. As practitioners, we have a duty to stay current, but we shouldn't forget that many therapies do stand the test of time and remain valid tools in our arsenal. We should take full advantage of yoga to the extent that the literature supports it, our patients will thank us for it!

#### References

- Wellington J. Noninvasive and Alternative Management of Chronic Low Back Pain (Efficacy and Outcomes). Neuromodulation. 2014; 17: 24-30.
- Holtzman S, Beggs RT. Yoga for chronic low back pain: A meta-analysis
  of randomized controlled trials. Pain Research and Management. 2013; 18:
  267-272.
- Cramer H, Lauche R, Haller H, Dobos G. A systematic review and metaanalysis of yoga for low back pain. Clinical Journal of Pain. 2013; 29: 450-460.
- Aboagye E, Karlsson ML, Hagberg J, Jensen I. Cost-effectiveness of early interventions for non-specific low back pain: a randomized controlled study investigating medical yoga, exercise therapy and self-care advice. Journal of Rehabilitation Medicine. 2015: 47: 167-173.
- Heffernan JJ. Low back pain. Textbook of primary care medicine. St. Louis, MO: Mosby. 2001; 1919.