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LEARNING OBJECTIVES

- Identify common goals of yoga therapy interventions in pain care.
- Understand how a biopsychosocial-spiritual approach to pain care using the *panchamaya kosha* model can form the foundation for effective yoga therapy.
- Apply concepts drawn from the *yamas* and *niyamas* to support client healing.

Pain and Yoga Therapy: Part 3—When Pain Persists

By Neil Pearson, Lisa Pearson, and Erin Byron

Pain and people are complex, so you should expect that pain care usually has little to do with finding the exact cause and fixing it. Commonalities exist in the pain care techniques and plans that provide best effects across individuals and across pain conditions, yet fitting the person to the plan and predicting outcomes too quickly disregards our unique natures. Maybe this person will attain excellent benefits in each of the three common goals listed below. Maybe there will be some successes toward each goal, yet none fully resolve. Maybe this person will report something that might seem strange to those who haven't studied the complexities of chronic pain, such as, "You know, the pain has not really changed much, but you helped me get my life back."

As in Parts 1 and 2 of this series,* we have done our best to provide an overview and some science to assist you in providing yoga therapy as a pain-care process. Whether the best plan is to integrate yoga therapy into existing pain-care programs, to integrate community-provided yoga therapy with the person's current pain-care plan, or to do our best when other professionals or programs cannot be accessed, yoga therapy has a valuable role to play.

Pain management/pain care includes

- medical care,
- pharmacological care, and
- nonpharmacological care (e.g., yoga therapy).

Common goals of pain management/pain care are

- less pain,
- better ease of movement/function, and
- enhanced quality of life.

Yoga therapy, like other nonpharmacological pain-care modalities, has shown promise across many musculoskeletal and pain-sensitization conditions.¹ It is important to understand, though, that significant research gaps persist for most nonpharmacological interventions, including yoga therapy.

Access to and coordination of pain-management services are obstacles to recovery and unfortunate realities when pain persists.² Yoga therapy is part of the solution, as it can fill the significant gap when primary care has not attained the desired treatment goals and people in pain are unable to access a multifaceted program in a timely manner. Additionally, when an individual requires ongoing care after completion of an interdisciplinary program (which might cost \$15,000 for 8 weeks),² a prescription for yoga therapy can provide cost-effective long-term support. In these ways, yoga therapy increases access to effective care and offers a unique path to recovery.

Contemporary multidisciplinary pain-management programs and yoga therapy view the person in pain as someone who, through an alliance with the practitioner, can gain more influence over living well, even when the pain does not abate or fully resolve. Recovering movement and treating the physical body are not the sole focus of either approach, yet the physical body is a powerful portal for pain care. An integrated biopsychosocial-spiritual perspective or the *panchamaya kosha* (five-sheath) model can be the foundation for treatment. To date, however, pain-management programs primarily provide treatment to fix assessed issues, while yoga therapy succeeds by recognizing that any aspect of one's existence can be affected through any other aspect.

Physically Informed Options

Yoga therapy can be used to address the physical changes reported by and observed in an individual. Referring back to Part 2 of this series, yoga therapists can match techniques and practices with the listed changes in someone's physiology, awareness, regulation, and resilience. For example, specific asana can be provided when muscles are assessed as "gripping," movements feel tight or stiff, or muscles need some assistance to engage. This way of using yoga therapy is similar to the current dominant approach of Western healthcare: Symptoms and impairments are evaluated, and yoga is applied to influence or resolve them. However, yoga ideally brings a more inclusive perspective than simply matching symptoms with prescriptive interventions and can offer customized, effective applications to unique personalities and situations.

Working with the Koshas

The *annamaya kosha* (the first and most physical sheath) can be moved or positioned to support or influence all other aspects of an individual's existence. Broadly put, asana are *mudras* (gestures) that affect not only *prana* (breath/energy) but each other kosha. Asana might be provided, for instance, to help restore thoracic movement with the intent of smoothing breathing patterns or adopting a less

protective posture. Empirically, individuals report that standing postures can influence cognitions, including improved self-efficacy, while supported postures and dynamic movements can assist with grief.³ Asana can even help reconnect us to peace and joy.

In other words, within yoga therapy we are not restrained to only using asana to influence the annamaya kosha. The multifaceted nature of pain suggests that best therapeutic effects may arise when we consider how to layer together influences from multiple koshas during asana practice. Combining techniques as in the following example may provide far more benefit than using any one on its own: Consider the effects of a mantra such as “I am strong, I am fearless” employed in warrior II. We could add to this by bringing gentle forcefulness and control into a cooling breath such as *ujjayi* (victorious breath); grounding through the feet; finding a balance of effort and release in the legs, torso, and shoulders; and holding the hands in *adhi* (primal) mudra.

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Science-Guided Instruction

Physiological, psychological, and social mechanisms discovered in science can inform how we instruct clients to perform asana when pain persists. This is an extensive and ever-evolving field of study and an important one for yoga therapists dedicating their work to decreasing suffering. Here are two examples.

- Our attention is drawn to priorities, and pain can be the highest priority. This might affect an individual’s ability to stay focused on anything but the pain. Other significant priorities to the brain, such as breathing and sensations from our hands and nose, can be used to retrain the ability to attend to what we want and gain efficacy in purposefully shifting our attention away from the pain. The practice of dividing attention between the breath and sensations in our nose, hands, and fingers is an important step for many in pain care. Give it a try.
- Macrophages (large immune cells that ingest harmful foreign particles) change and influence pain dependent on activity level.⁴ People in pain usually become less active. Decreased activity is associated with these immune cells producing more proinflammatory chemistry. Reincorporating movement into one’s life shifts the balance toward a more anti-inflammatory bias, potentially reducing pain. However, when a person initially resumes their activities, the first shift can be more proinflammatory—and therefore painful. This often-experienced increased pain was previously attributed to anxiety, fear that movement is dangerous. Knowing that physiological changes are also involved suggests that we might add more techniques that potentially decrease pain and inflammatory chemistry while a client reactivates with an asana practice rather than only focusing on anxiety reduction and managing client expectations by normalizing a potential initial pain response.

Asana as Education

Each technique and practice completed with positive change in pain, function, or quality of life is an experience that is inconsistent with an individual’s previous determination that movement is dangerous and that pain cannot be changed without “fixing” the body. Each time an individual asana or practice does not leave the person worse off, regretting the movement, feeling provoked, or not knowing when they will recover provides evidence that more ease of movement is possible, and that the pain can be changed. Some scientists explain it this way: We have more pain when there is greater credible evidence of danger. When we hold our breath, grip with our bodies, expect movement to hurt, and fear worsened pain, we have movement experiences that provide evidence of “danger.” When we teach an individual to notice their breath, body tension, thoughts, and emotions, this provides an experience that can lessen pain and offer evidence of greater safety or less danger. Each new positive experience teaches that change is possible. Each also teaches that we as individuals hold some influence over pain, as well as over recovering movement and a more meaningful life.

Research evidence supports the benefits of a cognitive-based approach to pain education.⁵ When we learn more about pain, the evidence of danger can decrease. Teaching people with chronic pain about pain neurophysiology through verbal and written formats, as described in *Explain Pain* (second edition) by David Butler, PT, and Lorimer Moseley, PhD, provides opportunities to bridge gaps between the physical and psychological. Knowledge about pain validates the positive effects of yoga, while the experiences of yoga provide lived proof supporting pain education.

Story and physical experience are equally valuable in reconceptualizing pain as more than an indication of the health of body tissues. The video of Moseley at www.youtube.com/watch?v=Sjes9CuN6Ko is a wonderful example of engaging story as educational agent. Through a guided yoga practice we can weave an equally powerful story. On the other hand, the stories that continue unchecked and unquestioned within us and during yoga practice when pain persists can become barriers to recovery. Sometimes learning about pain helps us reconceptualize pain, and this allows us to become curious about whether we can find ways to move the body with more ease. Other times, it is the experience that change is possible, followed by validation through learning about pain physiology, that leads to durable positive changes in moving and living with more ease.

Psychologically Informed Options

Yoga therapy could be considered a complete package of best non-pharmacological practices in managing persistent pain. It provides us with a clear framework to view the whole person in pain, one that aligns with a modern understanding that effective pain management necessitates physical and psychological interventions.⁶ Yoga therapists working within their scope of practice and competence may be able to offer evidence-informed pain-management strategies such as cognitive behavioral therapy, acceptance-and-commitment therapy (which includes pain acceptance and psychological flexibility), and mindfulness-based stress reduction—all of which are found in some form in yoga’s approach.

In yoga therapy, the lens of the koshas enables effective interaction with clients who experience persistent pain. When we lead a variety of asana sequences, clients develop a new relationship with sensation and mind-body communication. Breathing practices yield noticeable diverse access to thoughts, emotions, sensations, and physiology. Greater skill in focusing on deeper intentions and on personally meaningful aspects of life motivates a shift in attention away from painful sensations and negative thoughts and toward priorities in life beyond only the pain.

Guided relaxation, visualization, and cues to focus on enjoyable sensations during a movement practice train clients' attention to notice the "what" and "how" of their thoughts and feelings.

As outlined in Part 1, what we believe about pain dictates our experience of it. Through guided meditation techniques that further strengthen the ability to apply attentional strategies, yoga therapists have the opportunity to help clients build acceptance, self-efficacy, and realistic optimism. These concepts, once experienced, support shifts toward what is possible even when the pain persists. In the

of attempts to control the sensation, and/or to perceive a different kind of intensity while they received real-time feedback through the fMRI.

Similarly, imagined movement—for instance, performing asana in the mind when even gentle physical movement provokes too much pain—can be a first step to initiating movement and physical performance of asana. Yoga therapists can empower clients through a multisensory experience by teaching visualization and kinesthetic imagery, allowing virtual practice of yoga postures while cueing intention, sensation, and breath along with the imagined movements.

Other studies have also shown the power of cognitive methods to change pain.⁷ Feeling unable to control the pain or aspects of life that are altered by pain worsens the pain itself.⁸ Guided relaxation, visualization, and cues to focus on enjoyable sensations during a movement practice train clients' attention to notice the "what" and "how" of their thoughts and feelings. Reminders of pure intentions such as hope, acceptance, or tolerance help to calm the mind and nervous system, further decreasing pain. Automatic thoughts happen less, and clients experience greater ease in making an internal choice about where and how to focus. This does not always mean focusing away from pain.

Once established in meditation practice, we learn through *drishti* (single-pointed focus) to witness thoughts and feelings without ignoring, suppressing, ruminating, or being reactive. Rather, we acknowledge and observe internal experiences through the filter of equanimity and explore different, more pure (*sattvic*) perspectives. As yoga trains the objective witness to remain present to what is without projecting future suffering (*dukkham anagatam*), people living with persistent pain can learn to regard the pain without mental disturbance. Detached observation does not typically worsen pain. In fact, reconceptualizing the experience of pain is more effective than ignoring it. These methods help clients regain a sense of control; controlling the response to pain and accepting pain improves the experience of it.^{9,10}

The Yoga Sutras teach the nature of reality and provide techniques for accepting physical reality as it is. Furthermore, they remind us of transcendent reality and reinforce techniques and philosophies that support us in taking responsibility for our responses to external stimuli. They teach cultivation of neutral attitudes such as acceptance. Yogic tools like breathwork and sense mastery give us options and

skills in acceptance. Alternatively, positive experiences, realistic expectations, and connection to a higher reality can protect against painful stimuli and provide pain relief.

The essence of yoga therapy is to support clients in reducing pain *and* living well with pain. Pain is not immutable; it is ever-changing. Yoga offers a means of practicing equanimity and makes



2005 study "Control over Brain Activation and Pain Learned by Using Real-Time Functional MRI" (fMRI), R. Christopher deCharms, et al. determined that we can learn to control pain perception activity in some regions of the brain. Participants learned to modulate their pain and influence brain activity through strategies designed to direct attention toward or away from the pain, to let go

it possible to cultivate healthy habits and choose uplifting thoughts despite unpleasant sensations. The obstacles to enlightenment, or *kleshas* (discussed in Part 1), teach that everything is always changing and that psychological or spiritual pain arise when we forget this truth. The experience of physical pain is always changing, too, but that doesn't have to be for the worse. Pain, function, and quality of life are all moving targets. By educating clients on optimism, attention, expectations, etc., and cultivating these experiences through intentional movement, pranayama, sensory practices, concentration, and relaxation, yoga therapists support a shift toward greater self-efficacy, contentment, and freedom from the limiting factors of pain.

Spiritually Informed Options

For some with persistent or chronic pain, experiencing the benefits of yogic techniques and practices might be exactly what is needed for effective pain management. As yoga therapy continues to be integrated with Western pain management, we can also consider specific enhancements that yoga provides, such as practicing ritual with intention.

Ritual is powerful in helping people with persisting pain.¹⁰ It provides a process through which we can consciously engage in making life experiences meaningful. Scientists clearly state that the meaning attached to pain is an important factor and associated with all experiences of pain.¹¹ Although ritual is often related to *ishvara pranidhana* (surrender to a higher power) and considered an external ceremony to accomplish a goal, in yogic ritual can be an internal process used to affect the person's state of consciousness.¹² Through this new state of consciousness, we can develop a different relationship with pain, find new meaning in our experiences of pain, and clarify paths toward living well again.

Ritual in yoga is powerful in part because it is a potential portal to share a sacred pause and to connect with the spiritual aspects of life. We can make anything a ritual. If we give our actions conscious regard and the respect one pays to ritual, those actions take on more proactive alignment with our goals. Ritual within pain care can help to regulate our thoughts about how we identify with our pain, choose words that reflect our highest truth, react with less urgency and more care, and imbue our deeds with a sense of purpose.

Ritual serves as a reminder to slow down and be present, which is so often difficult when pain persists. For people in pain, the act of ritual can enable them to feel peaceful and supported by their own grace.

As a simple starting point for offering ritual, we suggest sharing the Kriya Yoga resurrection breath ritual (seminary and retreat notes and personal sadhana guidance with Goswami Kriyananda, 2000–2009). This can become a ritual to help both yoga therapist and client consciously enter into a specific practice, creating an experience of a beginning (resurrection breath), middle (kriya technique), and end (honoring the aftereffect/silence). It can also be used as a stand-alone kriya to remind one of connecting to the present moment, as described in the chapter on compassion in the book *Yoga and Science in Pain Care* (edited by Neil Pearson, Shelly Prosko, and Marlysa Sullivan). Additionally, it can be used as a separation between kriya pranayamas to create an obvious point between *kriya sadhana* practices, encouraging more mindfulness and the witnessing of presence before entering into meditation, a powerful ritual in and of itself.

Resurrection Breath: Technique

Begin with the head centered, chin above chest. Inhale and take a moment to set an intention to consciously enter into the present. Turn your head over your left shoulder and double exhale out through an open mouth “haa-haa.” This is symbolic of leaving the past behind. Inhaling, turn your head back to center. Next, turn your head over your right shoulder and as you exhale gently blow the air out through pursed lips. This is symbolic of extending the future from grasp. Return the head to center position, having established a ritual of new beginning.

Take a few breaths, then bow your chin toward the heart center, allowing yourself to consciously connect to the present moment with greater focus and clarity before you go on to your next phase of kriya or conscious-awareness practice.

Rituals are tools that give us freedom to consciously and joyfully take responsibility for the direction of our lives. Just going to a yoga class is a ritual. The therapist may include more ritual by lighting a candle, doing specific sets of kriyas, chanting “Om,” or offering other mantras or mudras. Shared ritual, which can include but goes beyond patient-centered or co-developed care planning, can also help yoga therapists create a deeper therapeutic alliance with clients, giving them opportunities to enrich the healing experience and engage on a deeper level than other pain-management providers may be able to offer.

As yoga therapists, we can also help clients maintain a lifestyle that supports and enhances the inner peace that they gain through their practices. A basic foundation in Ashtanga Yoga is often overlooked in therapeutic care. The first two limbs of this yoga offer the *yamas* and *niyamas*, our guides to living a life of balance and harmony. These ask us to endeavor toward virtuous qualities such as non-harming, truthfulness, nonstealing, control of the senses and nonexcess, nonpossessiveness, purity, contentment, self-discipline, self-study, and surrender of the ego. Offering an understanding of the *yamas* and *niyamas* can help clients to create a lifestyle that supports their healing journeys.¹³ As an example, to enhance inner peace we can use the following as a starting point to navigate the often arduous road that is chronic pain.

Yama: *Ahimsa* or Nonviolence/Kindness

Ahimsa teaches clients to be guided by a path of kindness and courage in life, even while living with ongoing pain. Practicing ahimsa encourages choices and habits that ease pain rather than increase suffering. Practicing self-compassion supports ahimsa as people navigate the unpredictable aspects of pain and its effect on life and community.¹³

Niyama: *Svadyaya* or Self-Study

Svadyaya teaches clients to learn from their reflections. Observing the thoughts they think, the words they choose, or the actions they take leads to better self-understanding. Adding self-compassion,

detachment, and curiosity to the process opens doors to different choices and greater acceptance. Cognitive issues, such as rumination and difficulty setting new goals, can be viewed from new perspectives. For some, self-study can encourage deeper inquiry into pain science, psychology, and neuroplasticity, or even the writing or reading of memoirs and poetry on pain in conjunction with their yoga therapy.

Whether we choose to share Raja Yoga including the eight limbs of Ashtanga, Bhakti Yoga, Jnana Yoga, Karma Yoga, or the practices of Kriya Yoga, any of these paths can lead the person in pain to greater inner peace, connection to their true nature, and a life with less suffering. In yoga and pain care alike, this is always the aim.

Concluding Remarks

This series began with wise words from Matthew J. Taylor, PT, PhD, C-IAYT, guiding us to become curious and to explore the complexities of pain. As you have read and realized, a deeper understanding of pain, pain care, and of people in acute or chronic pain is vital. Misconceptions about pain and pain management continue to limit our ability as yoga therapists to decrease the personal burden and societal costs of persisting pain. This three-part series is intended to reinforce our evolving understanding that pain as a human experience is always more than biological, psychological, or sociological. Listen well to increase the depth of your understanding, especially to those who discuss pain with uncertainty. Unidirectional and causal beliefs, such as “fibromyalgia is a psychological problem” or “it’s the meaning the person gives the pain that is the problem,” are incomplete and therefore imprecise. Linear connections, such as pain equals damage, or simple solutions that may temporarily alleviate pain can be as detrimental to yoga therapy as the simplistic belief that our only hope is to not provoke persisting pain and attempt to cope with it.

Yoga therapists have other options to assist people in pain. As discussed in Parts 1 and 2 of this series, we can view each individual through the lens of the koshas, the *gunas* (attributes), the *doshas* (constitutions), and by using the wisdom of the *kleshas*. These lenses give us a more circumspect understanding of the whole person in front of us. Combining this understanding with an expanded knowledge of pain, people living in pain, and pain management allows us to provide not only compassionate solutions, but the benefits of a sense of gained strength, wisdom, and inner peace. In this way we help clients move toward spiritual, mental, and physical well-being. **YTT**

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*See the Summer 2019 and Winter 2020 issues, respectively, of *Yoga Therapy Today*.



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