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Commentary

Yoga for Prevention of fall

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DESCRIPTION

A fall is defined as a person's trunk, knee or hand, unintentionally coming to rest on the ground or some level below the waist. Thirty three percent of people over 65 and 49% of the community dwelling elderly over 72 fall. The US Department of Public Health estimates that 2/3 of falls are potentially preventable. Risk factors for falls include (but are not limited to) decreased balance, decreased strength, decreased gait speed and fear of falling. The use of therapeutic yoga to prevent falls and reduce the risk of falling in community dwelling older adults has gained popularity. The remaining two are included in the following review along with several additional studies that focus on community dwelling older adults and falls. These studies have examined the efficacy of using yoga to prevent falls and reduce the risk of falling in community dwelling older adults. The conducted a pilot study with 13 participants aged 62-82. A sample of convenience was used from a local continuing care retirement community. Subjects participated in a 60 minute yoga session one hour per week for four weeks. A statistically significant increase on scores of the Balance and Mobility test was found, revealing a reduced risk of falling after four weeks of yoga. The authors recruited 8 subjects aged 84 (±4.6 years) to participate in a therapeutic yoga program and 8 subjects aged 81.3 (±4.9 years) to serve as controls. They used a sample of convenience to conduct a study evaluating the effects of yoga on gait speed and hip extension. Although the authors did not directly measure falls or risk of falling, improving gait speed and hip extension ROM reduces the risk of falling. The authors recruited 19 subjects aged 62-83 to participate in a 90-minute yoga program, 2X per week X 8 weeks. The authors noted improved hip extension ROM, improved stride length at comfortable walking speed and a non-significant increase in self-selected gait speed.

Using non-parametric statistics, the authors noted that 63.6% of subjects showed improved scores on the Berg Balance scale, 59.1% of subjects improved on the Activities specific Balance Confidence Scale and 68.2% of subjects improved their times on the one-legged standing test. The authors included Vrksasana and Ardha Chandrasana in their program, which may have contributed to both, improved Berg Balance Scale Scores and improves ability to stand on one leg. Several authors have shown that including specific asana in an overall yoga program for older adults may improve balance. Yoga programs designed specifically for older adults should include a combination of sitting and standing asana and modifications such as warming up with heel raises and the use of a chair to reduce the fear of falling during the practice. These programs must be well documented in the literature (and provided in an appendix) when published so clinicians and yoga teachers can plan programs based on systematic data. Programs specifically designed to target the impairments that contribute to falls and the risk of falling appear to reduce both and should be considered a viable alternative to traditional exercise programs when advising older adults. An untapped wealth of data exists regarding the qualitative improvements people experience after yoga, such as greater connection and sense of well-being. They needed to cement the need for yoga in the prevention of falling in older adults. Control groups should receive a group based exercise program of equivalent time and length to the yoga programs. Using measures such as MDD (Minimal Detectable Difference) or MCD (Minimal Clinical Difference) will provide treating therapists with more insight into the efficacy of yoga than statistically significant data alone.

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