Yoga and Pregnancy
(Pre- and Postnatal Resources)

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The contents of this bibliography do not provide medical advice and should not be so interpreted. Before beginning any exercise program, see your physician for clearance.
NOTE: See also the “Infertility/Impotency” bibliography and the “Children” bibliography, which includes citations related to parenting.

**Books, Articles, and Training Programs**

*(Videos, CDs, and audiotapes follow in a separate section)*


**Anandamitra Acarya, Avadhutika.** “Asanas should not be performed after the fifth month . . .” In Avadhutika Anandamitra Acarya, *Yoga for Health.* 2d ed. Paco, Manila, Philippines: Ananda Marga Publications, 1990, p. 64. (Please note that this is the viewpoint of this particular Yoga organization.)


“. . . yoga has certain benefits for pregnant women. Among other things, it helps to keep the muscles toned and joints lubricated. It calms the mind and helps to reduce one's overall stress level. And too, it gives women the tools to help them prepare for and go through labour and delivery with confidence—using breathing and the ability to find a peaceful place in her mind to help her relax . . .

“Jennifer and Sharon Feanny, yoga instructors and Shakti Yoga Centre founders, explained that pre-natal yoga addresses the complete pregnant woman and not just the changing needs of her body. It allows her to slow down her mind, center herself and connect to the growing foetus inside thereby creating a bond with her child before birth. It helps to 'prepare you during the whole pregnancy for birth. It’s like a friend to have for that entire time,' Jennifer said.

“It also helps to keep the posture as the curvature of the spine tends to deepen during pregnancy, and it has been known to help ease nausea in the first trimester as well as the fatigue experienced during the first and third trimesters, she said.

“Sharon said that the postures done during pre-natal yoga open up the body, particularly in the pelvic area, helping to set the baby up in the optimal foetal position for an easier labour and birth. She noted that although yoga postures can be performed throughout the entire nine months of pregnancy, there are poses to be avoided after the first trimester, in particular, those that require lying on the front of the body.”

**Apostolopoulos, Andrea.** Pregnancy and yoga. Available online: http://www.yogalinks.net/Articles/PregnancyAndYoga.htm.


Very helpful, with interesting helpful details, such as how Yoga can help with problems associated with the breast enlargement that accompanies Yoga (i.e., how asana can help with the neck and shoulder problems this may cause), how Yoga can help with constipations, eye dryness, headaches, etc.

__________. Satyananda Yoga for the prenatal student (Part 2). *Yoga* (Sivananda Math), Apr 2005.


“Instructor and registered nurse Paula Huffman [of Carrboro Yoga Company], who has been a childbirth educator for more than 12 years, noted that ‘yoga is probably the best preparation for labor that a woman can find.’ This is because yoga focuses on relaxation, breathing, and being in the present moment, said Huffman.

“Yoga benefits women both before and after childbirth. ‘Prenatally,’ said Huffman, ‘yoga can help prevent or decrease some of the common discomforts of pregnancy.’ In addition, ‘women work on poses that can be useful in labor.’ Postnatally, said Huffman, yoga helps the body get back into shape.

“Huffman pointed out that she herself did prenatal yoga 26 years ago, when she was pregnant with her daughter; but only in the last few years have doctors and midwives recognized and recommended the benefits of practicing yoga.”


From a review by Gabrielle Sedita at Amazon.com: “Prenatal yoga is the perfect companion for a beautiful, conscious birth. Here is a book for women who embrace the true meaning of what yoga is: Union with the absolute. It is not merely a book of postures for improving common pregnancy discomforts, but a true guide to being a woman with child, in all that this encompasses: living in our bodies as in the temple of the Goddess and of the child to come, embodying the tremendous energy and power that are ours to
reclaim through the initiations of pregnancy and childbirth. Along with potent asanas preparing women for the journey of childbirth and becoming aligned and established in their true selves, are the author’s own odyssey and growth into motherhood.”

From a review by Rachel Westfall at Amazon.com: “. . . having given birth twice and having discovered my own path to birth at its best, Jeannine Parvati Baker’s *Prenatal Yoga* has found its way onto my bookshelf. Oh, how I wish I’d had this book when my first child was conceived! With its simple, clear explanations of the exercises and postures, beautiful photos, and soothing birth stories, this book encapsulates much of what I have learned through my own childbearing experiences. *Prenatal Yoga* occupies a special place on my bookshelf, and it will be at the top of my list for books to give to friends who are preparing for childbirth.”


“*Preparing for Birth with Yoga* explains why we need yoga in pregnancy and how it can prepare us effectively for giving birth; how the force of gravity influences our bodies beneficially during pregnancy and birth; gentle and safe easy-to-follow yoga exercises graded for the beginner as well as the more advanced practitioner; how yoga can relieve stress, strengthen the body and help it to become more supple; and how this book can be used as an authoritative reference manual for midwives [and] antenatal and yoga teachers.”

Highly recommended by Kripalu Yoga teacher Shannon Partridge (shannonp@nunanet.com) as being the best of several pregnancy Yoga books she used during her pregnancy. She further states, “It’s very readable and yet comprehensive, with explanation of body changes, breathing exercises and asanas that help prepare for pregnancy wellness, delivery and a baby.”

Also highly recommended by Kripalu Yoga Teacher Martha Chabinsky: “I’ve been teaching Prenatal Yoga for over 5 years, and there is no book like Janet Balaskas’s book *Preparing for Birth with Yoga*. It is up to date (something the other books generally are not) and extremely complete.”


On the prenatal Yoga taught by Linda Spackman at Yoga Source in Santa Fe, New Mexico, including a sequence of basic Yoga postures, illustrated with photographs, for home practice by women of normal health who have no complications related to present or past pregnancies


On Francoise Freedman’s Pregnancy Yoga classes and classes for mothers and babies.

**Bardacke, Nancy.** The Mind in Labor classes. California Pacific Medical Center, Institute for Health and Healing, San Francisco, California. URL: http://www.cpmc.org/services/ihh/classes/integrative.html. For more information, email: cpmcihh@sutterhealth.org.

Course description: Childbirth can be a challenging experience that often involves physical pain and anxiety. How we use our minds to relate to that pain and anxiety can make a huge difference in the labor and delivery experience. Using awareness of breathing, Yoga and artwork we will learn how to use the powerful tool of mindfulness—moment to moment—for working with pain and fear in childbirth. Cosponsored by California Pacific’s Newborn Connections.


From the publisher: “Be strong, comfortable, healthy, and active throughout your pregnancy with *Motherwell Maternity Fitness Plan*. Considered by health professionals as the gold standard of maternity exercise, Motherwell’s medically proven program is designed specifically to meet the needs of women before, during, and after pregnancy.

"For maximum comfort and mobility through each trimester, the program includes breathing, core conditioning, flexibility, strengthening, motivation, relaxation, and nutritional advice to meet the needs of mother and baby. Choose among many fitness options such as walking, swimming, water walking, stretching, yoga, and meditation to be as active and healthy as possible up to and after delivery.”


From a review in the April 2001 issue of *Network*: “With a foreword by . . . Dr. Michel Odent, this book is the ideal introduction to the field, written by a mother of five, each of whose children arrived in the water. As the author is a yoga teacher, the reader benefits not only from her insights into pregnancy and the birth process but also from the many exercises and techniques she explains . . .”


**Bouthonis, Rev. Arulamma, and Kali Morse.** Prenatal Hatha Yoga Teacher Training. Yogaville. Email: iyi@yogaville.org.

Curriculum: Standard asanas that women can continue during pregnancy; knowledge of which asanas to avoid during pregnancy; instruction and guidance in teaching specific pregnancy asanas; useful pranayama for pregnancy, labor, and delivery; visualizations for baby and mother; understanding pregnancy, labor, and birthing; diet and nutrition for pregnancy; fathers and pregnancy


“Yoga is something that can be practiced during any phase of life, even pregnancy. Furthermore, proponents of the ancient practice say yoga during pregnancy can actually
help the woman prepare for childbirth and parenthood by getting her (and dad!) into mental, physical, and spiritual shape—gently.”


**Buckley, Sarah J.** *Yoga and motherhood.* *Australian Yoga Life,* 2003, no. 7, pp. 25-29.


**Cameron, Judy.** *Yoga for pregnancy.* *Yoga & Health,* May 2005, pp. 18-19.

**Campbell-Kaye, Jane.** *Yoga and pregnancy: Adapting your teaching for pregnant women.* *Australian Yoga Life,* 2002, No. 3, pp. 24-27.


From the website (ww.yogame.com): “Carmela Cattuti combines 20 years of yoga and 30 years of professional nursing experience in her teaching of prenatal yoga. A strong medical background in childbirth allows her to provide women with valuable yogic breathing, stretching and meditation techniques to aid with the fertility, delivery and postpartum stages of pregnancy. She teaches various classes in the Boston area.”

**Ceallaigh, Mary.** *Lotus Fertility: Yoga and Birth Education.* URL: http://www.lotusfertility.com.

“Preconception, prenatal, birth, postpartum doula services and intuitive consultations for yoginis, their partners, and all women on the self-healing path.”


**Childrens Television Workshop.** Say Om, Mom! *Sesame Street Magazine*, May 1999. (On Yoga for pregnancy.)

**Chi-uh.** *Yoga with the Unborn*. Mill Valley, Calif.: Whatever Publishing, 1980.


**Cirone, Marianne Woods.** Pregnancy yoga, prenatal yoga. Article available online: http://www.yoga-for-health-and-fitness.com/Pregnancy-yoga.htm

**Clarfield, Janice.** *Guided Relaxation, Breathing, Vocal Toning, Meditation and Visualization for Pregnancy and Childbirth* CD or audiotape. 50 minutes. URL: http://www.urbanyoga.ca/html/products.htm.

From the website: “Enhance comfort and enjoyment while deepening your relationship with your baby. Cultivate calm and confidence while letting go of fear. Letting go of anxiety eases childbirth, thus reducing pain and increasing the joy of giving birth.”


From the website: “Comprehensive manual that addresses the physiological and emotional considerations of pregnancy with posture, breath and sound work, meditation and visualization. Also of interest to practitioners of yoga who are pregnant.”

_________. Yoga teacher training for prenatal yoga. Kripalu Center, Lenox, Massachusetts. URL: www.kripalu.org. Contact Janet: www.urbanyoga.ca. (Highly recommended.)

“Q: I am a yoga teacher seeking certification from a national yoga association, a rigorous process that includes demonstrating poses and teaching them to students. I am also pregnant. Until recently, pregnant women could be tested, performing modified poses, but now there is a new policy: ‘You must not be pregnant at the time of the assessment, out of consideration for your own health and that of your unborn child.’ Doesn’t this unethically penalize women? Anonymous

“A: This policy unfairly thwarts people capable of performing a task, and because it necessarily refers only to women rather than defining a general level of physical ability, it is doubly unethical . . .”


“An ancient tradition, yoga can be practiced as one strategy in a personal health promotion plan or as a specific therapy in the treatment of disease.”


“Colette Crawford, R.N., and certified Yoga instructor, has created a highly successful program for prenatal and postnatal yoga. Combined with her experience as a nurse in labor and delivery, public health and childbirth education, and her study of yoga, Colette bridges Western medicine with alternative healing arts in teaching over 300 pregnant and postpartum women weekly. What makes Colette’s program so successful is that she weaves yoga poses with breath work and meditation with the physical aspects of giving birth while integrating factual information on the pros and cons of our current birthing technology. This helps women to understand what their choices are and make decisions to improve their birth outcome. In addition to producing internationally acclaimed prenatal and postnatal videos Colette has contributed to and written articles that have appeared in mainstream and alternative publications.”


Crisp, Tracy. Yoga with child. *Australian Yoga Life*, 2003, no. 6, p. 32.

D’Angelo, Sarah March. Yoga in pregnancy. Article available online: http://www.one-stop-yoga.co.uk/antenatalyoga.html.


_________. Yoga for the midwife. Available online: http://www.yogalinks.net/Articles/YogaForTheMidwife.htm.


Course description: A great opportunity for Yoga Teachers, teachers in training and all other perinatal professionals (doulas, child birth educators, midwives, etc.) who want to deepen their understanding of prenatal yoga. This comprehensive training will present a Mind~Body~Spirit approach to pregnancy and birth though yoga practice. Learn practices that empower expectant mothers and encourage them to draw on their inner resources for pregnancy, birth & mothering!"

Denmark’s Crown Princess Mary using yoga to help with pregnancy. Monsters and Critics website, 7 Sep 2005.


“Bearing, delivering and raising my son Ananda Balayogi has been the single most significant spiritual experience of my life, my first real initiation into the blissful state of Yoga—a Oneness and communion with the Universe on a nearly mystical level . . .”


Dhadkan. Garbham Dehi. Sony Music, 2002. For more information, contact sohum5@yahoo.com.

From the publisher: The mantras on the album are divided into three sections: those to be heard before conceiving a child, those listened to during pregnancy for the safety of the mother and child, and those to be heard after delivery for the safety and overall development of the child. The slokas are sung by Raghunandan Panshikar and the music composed by Bhupal Panshikar. The script is by Dr. B. P. Vyas.


“A typical session includes baby stretches to take small bodies through a full range of movement which often astonishes (and inspires) their mums; breathing with movement for the mums, and postures-for-two to give mums and babies new ways to relate to each other. The babies respond with evident delight to the use of gentle sounds, so chanting and humming helps everyone to wind down. By the end of the class, peaceful relaxation comes quite easily.

“Many of the Brixton baby yogis’ mums report that their babies are calmer and sleep more soundly after yoga sessions. They also observe their babies’ delight: ‘She really enjoys her yoga!’ At a more visceral level, some of the practices often provide babies with immediate audible relief from wind and constipation.”


“More and more mothers-to-be are turning to a gentle asana practice to prepare emotionally and physically for labor.” Features Yoga teacher Gurmukh Kaur Khalsa.

Durkin, Barbara. Relax with yoga & your baby. Article available online: http://www.lamaze.com/parent/health/articles/0,9474,159779_269746,00.html.

On how the author’s pregnancy taught her mindfulness.


“Examining the strength of your pre-pregnancy practice can help determine whether you should do inversions when you’re expecting.”

**Engles, Christina.** Prenatal yoga classes. Moms and babies yoga classes. Women’s Health Resource Center, Santa Rosa, California.

Christina Engles, M.S., R.N., F.N.P., was the Program Manager for the former Integrative Health and Healing Department at Sutter Medical Center of Santa Rosa. She is a labor and delivery nurse who integrates Yoga (both on land and in water), massage, and meditation into her training and practice. She is a Phoenix Rising Yoga therapist and a Kripalu-certified Yoga teacher with Iyengar training.

**Englewood Hospital and Medical Center.** Englewood, New Jersey. URL: http://www.englewoodhospital.com (click on “Classes,” “Childbirth Education”).

Offers pre-natal and post-natal Yoga classes.


**ESutra** online discussion group. Discussion on asana practice as a possible cause of miscarriage (speculative only). See messages with the subject line: RE: Yoga and Endocrine Development, 9/22/99. To join ESutra, write to the moderator, Leslie Kaminoff, ESutra@aol.com.

_________. Yoga therapy forum pregnancy discussion. End of July to beginning of August 2001. To join ESutra, write to the moderator, Leslie Kaminoff, ESutra@aol.com.

**Expecting . . . the yoga way.** *Family Health*, Mar 1978, pp. 44ff.

**Eykel, Kristen.** *Yoga Journal’s Yoga for Pregnancy* vido.

**Falcao, Ronnie, ed.** Turning a breech with yoga exercises. Article available online: http://www.gentlebirth.org/archives/breech.html#Yoga.


“Reports on the benefits of practicing yoga and shiatsu during pregnancy.”


*Fit Pregnancy magazine*. Gena Lee Nolin shows what yoga can do. Either Summer or Fall 1997 issue. *Shape* magazine special issue.


Abstract: A comparison of the third trimester muscle tension levels and labor outcomes of women who practiced Hatha Yoga in pregnancy with women who did not practice Yoga in pregnancy was explored. The study examined the relationship of the practice of Hatha Yoga to three dependent variables: muscle tension, as measured by a Muscle Tension Questionnaire, in the third trimester of pregnancy; the presence of meconium-stained amniotic fluid in conjunction with the presence of abnormal fetal heart rate patterns in labor; and the newborn baby’s Apgar score at five minutes.

A convenience, purposive, nonprobability sample was recruited from pre-existing antenatal/Yoga classes (n=8) and childbirth education classes (n=10) in the Denver area. Written consent was obtained from all subjects after explaining the study to them. Data collection was divided into two components: 1) collection of initial demographic data and evaluation of muscle tension during the third trimester of pregnancy and 2) retrospective chart review to collect labor and delivery data.
Chi-square analysis was performed for comparison of the Yoga and non-Yoga groups on the dependent variables. Results of this study demonstrated that there was no statistically significant difference between the two groups on mean muscle tension scores, the incidence of meconium-stained amniotic fluid, and on neonatal Apgar scores at five minutes. It was noted that the Yoga group did demonstrate a significantly lower incidence of abnormal fetal heart rate patterns (p<.01) in labor than the non-Yoga group, but these results were not attributed to the practice of Hatha Yoga.

Statistical testing of data generated in the study revealed the need for a much larger sample size as well as more precise measures of stress and tension.


“Elissa Rosch is a registered nurse, certified doula and a yoga instructor. She has a new take on the ancient Hindu discipline of enlightenment, designed specially to help mothers and their babies achieve spiritual bonding . . .

“Yoga is a philosophical and physical way of achieving harmony with the mind, body and spirit. The mother-and-baby version is designed to help the mother get some gentle exercise and build a stronger bond with her newborn. ‘It’s a way for moms to be with other moms,’ Rosch says. ‘And a way to strengthen the body after pregnancy. It promotes bonding. It’s a support group.’”


__________. *Aqua Yoga*. Lorenz Books, 2000. (See also *Aqua Video* in “Videos and CDs” section below.)

“Harmonizing exercises in water for pregnancy, birth and beyond. Here classic yoga postures have been adapted for practice in the water. Designed to open up your pelvis, develop your breathing and ease aches and pains, these safe and effective exercises are suitable for both swimmers and non-swimmers.”

__________. *Baby Yoga*. Barrons Educational Series, 2000/Gaia Books, 2000. (Francoise is the founder of Birthlight, an organization in England dedicated to improving the experience of childbirth through Yoga, tel: 01223 362288, URL: http://www.birthlight.com.) (See also *Baby Yoga* CD and video in “Videos and CDs” section below.)

From a review at Amazon.com: “This thoroughly enjoyable exercise book for new parents and their babies uses yoga as an approach to body toning and general physical fitness. It’s the perfect guide for moms who want to exercise soon after childbirth but realize that they should do so with care. Exercises are designed to tone arms, legs, and
abdominal muscles, and there are even breathing exercises to help parents renew energy at the same time they are soothing an irritable baby. Infants also share in these exercises. Parents will find instructions for gently manipulating their baby’s limbs to maintain their natural suppleness, and to ease colic and other digestive problems. At the same time, they’ll be reinforcing the loving bond between parent and child. Dads are also encouraged to share in the exercises.”


Contents: How yoga can help you; Getting started; Planning your yoga sessions; Anatomy of a yoga session; Stage one: Centering and breathing; Stage two: Breathing with gentle movement; Stage two: Breathing with vigorous stretching (loosening the hips); Stage three: Centre of gravity; Stage three: Standing exercises; Stage three: Floor exercises (strengthening the birthing muscles); Stage three: Exercises with breath, energy and sound; Stage three: Useful labour and birthing positions; Stages four to six: Completing a yoga session; Beanbag sequence; Appendix (Breathing, The pelvice ligaments and openings in the pelvic floor, Troubleshooting)


From the publisher: “Features exercises specifically developed for the first week after giving birth up to the end of the first six months. These postures gradually and gently help you to regain physical strength, tone your muscles, enjoy deep relaxation, and develop close bonds with your baby. Ideal exercises are included to help mothers recover from a Caesarean section, episiotomy and giving birth to twins, and special routines are given for both bottle and breast feeding. A clear, compelling, and beautifully illustrated guide to yoga postures developed specifically for mothers with new babies.”


“After pregnancy it is necessary to realign your spine. Standing in the water allows you the maximum stretch between your hip bones and your ribs as you lift your arms above your head. Aqua Yoga makes use of deep breathing in relaxed stretches that are easier and safer in water than on land. Your ligaments are still soft and should not be overstretched for at least 4 months after giving birth.”
“You can involve your baby in your postnatal aqua Yoga practice practically from birth at home in your family bath. Many parents prefer to wait until their infants have been immunized before taking them to a public pool . . .”


Includes Aqua Yoga and family Yoga.


Goldstein, Leslie. Relax with Yoga during Your Pregnancy audiotape. Nityananda Institute, 1989. 60 minutes


On Ann Dennehy, who teaches prenatal yoga classes to the homeless pregnant women served by the Homeless Prenatal Program in San Francisco, California. For more information, see http://www.skyindigo.com/community.html.


“This is a book of yoga exercises that help women regain fitness, muscle tone, and strength after childbirth while involving their growing babies in the process. The exercises work on many levels in a holistic approach to health and fitness; the focus of the book is the mutual enjoyment of movement and relaxation between mothers and their growing babies. All the exercises are presented in easily accessible sequences that are short, simple, and effective as well as totally safe. They are clearly demonstrated in photos, using ordinary women and their babies rather than models. This book is a practical invitation for women in our culture to aim at more than just ‘getting back to normal’ after childbirth. The ancient tradition of yoga, which brings together spirit, mind, emotions, and body, can help mothers, and fathers too, exchange greater fulfillment and joy with their babies during the early months.”


deMarin, Catherine. Yoga program for hospitalized antepartum mothers. University of Washington Medical Center. Email: Catherine@dharma works.net. Secondary contact: Esperanza “Mae” Hasse, yoga@michaelandmae.com

Mae Hasse, a labor and delivery nurse and Yoga practitioner, and other nurses at the University of Washington Medical Center are developing a Yoga program for antepartum mothers who are hospitalized for long periods of time for miscellaneous complications early on in their pregnancies. (Mae contacted IAYT April 2005.)

Catherine deMarin is a Yoga teacher who teacher prenatal Yoga at the Yoga Barn in Issaquah as well as voluntarily teaches Prenatal Yoga to high-risk pregnant teenagers. In addition, she does massage for pregnant women and women who have had abdominal surgery.


“Mothers practicing the TM technique experienced less pain and anxiety during pregnancy and during birth. A shorter duration of birth and fewer impairments to the children from the delivery were also noted.”

Hodge, Gavanndra. Pregnant? Then you’ll need some exercise. *Independent on Sunday*, 18 Nov 2001, p. 27.


“Mia Glick is always encouraging her prenatal yoga class to ‘breathe, relax, open, let go.’ The class is for pregnant women, but spouses are invited, too, and the few who give it a try are amazed at how hard it can be to just breathe and let go.

“‘I call out each part of their body and dramatically have them relax each part,’ Glick says. ‘And then once I get them to relax, I get them to relax even more. And once they relax even more, I get them to relax even more. It’s like layers of an onion.’

“That relaxation comes in handy during labor, when pain kicks in and a clinched jaw can lead to a tight pelvis, making it even harder to push out a baby.

“Glick, 35, knows this from experience. She began practicing yoga in 1984 and has been teaching prenatal yoga for the past five years at several locations in Miami Beach. She designed and taught her first class while pregnant with her daughter, now 4.

“A former student, Tamar Oppenheimer, 31, took her doctor’s advice and waited until her 13th week of pregnancy before starting the class, and she took her last class one week before her due date.

“‘It was great,’ said Oppenheimer, whose daughter is now 11 months old. ‘The breathing was very helpful in terms of exercise. I had a very fast delivery . . .’”


The goals of the video are to: assist physical recovery after birth, help to cope emotionally with the varying stages of motherhood, an teach relaxation strategies.


INFERTILITY. See the “Infertility/Impotency” bibliography.


See the sections on pregnancy.

__________. Answers the question: In the west a lot of women want to do yoga because they are pregnant although they have not done yoga previously. What should we as yoga teachers do? Available online: http://www.skys.com.au/women_geeta.html.


From the publisher: “A safe and natural way to prepare for a wonderful birth experience[.] Even if you have no prior experience with yoga you can increase your health, physical tone, and energy using a variety of stretches, positions, and breathing exercises especially selected for all stages of pregnancy. Harness your inner strength through visualizations and meditations, including some specifically intended for pregnant women that focus on the baby in the womb, the miracle of birth, and the wonder of being a woman. Six half-hour prenatal exercise programs are included, along with dietary suggestions to help ensure a healthy pregnancy. A section on important skills for labor, including meditations, positions, and essential oils, will help you ease the pain and make the most of the life-changing experience. You’ll also find inspiring birth stories in which eleven women explain how yoga played a significant role during pregnancy, labor, and birth, and postpartum programs to help you get back in shape after delivery.”


Ninety-two Iyengar poses carefully chosen as being safe and effective during and after pregnancy; appropriate trimesters indicated for each pose.

__________. Prenatal yoga: 20 postures, how to do them. *Yoga Journal*, May/Jun 1982. See also Sandra Jordan’s letter to the editor in the Nov/Dec 1982 issue of *Yoga Journal* about which asanas to avoid during pregnancy.


“At Joy of Motion’s prenatal and postnatal classes, [Margaret Townsend] teaches Ashtanga Vinyasa yoga, which she describes as ‘a vigorous style of yoga that incorporates a series of flowing movements linked to one’s breath.’ Townsend, who modifies the poses when teaching pregnant women, says Ashtanga Vinyasa is especially appealing to physically active women . . .”

Kalikamurti. Mothers, babies, and yoga. Available online: http://www.yogalinks.net/Articles/MothersBabiesAndYoga.htm.


__________. Running ante natal and post natal yoga classes in partnership with the NHS [National Health Service, Great Britain]. *Spectrum*, Autumn 2001, p. 18.


From the publisher: “. . . provides a blueprint for emotional, physical, and spiritual health for the nine months of pregnancy, delivery, and life with the baby. Gurmukh offers inspirational advice along with suggested meditations and exercises for expectant and new mothers. 30 illustrations.”

Four pregnancy yoga exercise sets. At Childbirth at Home Web site: http://www.socalbirth.org/shelly/yoga.htm. (See also *The Method* videos by Gurmukh in the “Videos and CDs” section below.)

___________. Pregnancy Yoga and Meditation Teacher Training. For information, contact Golden Bridge, 5901 West 3rd Street, Los Angeles, CA 90036, tel: 323-936-4172, email: goldenbridge@altavista.net, URL: www.goldenbridgeyoga.com.

___________. See also the article above by Samantha Dunn entitled “Special Delivery.”


“Yoga and meditation are helping mothers-to-be prepare for the ultimate in-the-moment experience.”


“*Pranayama* delivered me from the exhaustive Lamaze-style huffing and puffing that did me no good in labor with my first son. Knowing how to effectively breathe during asana
was as critical to my prenatal yoga practice as knowing when to stop once I reached my limit.”


From the publisher: “Based on her work with hundreds of women and their babies, Jyothi Larson shares the specially adapted yoga poses she teaches in her popular prenatal and postpartum yoga classes at several New York City yoga studios. Moms new to yoga and those experienced can follow these series of gentle asanas with their babies at home . . . This complete guide, with step-by-step instructions and . . . photographs, includes twenty routines, with chapters on: prenatal yoga, with a focus on the last trimester; what to do after birth through the first six weeks, with special poses for women who had had c-sections; modified yoga poses for mom that respect her changing body and give all of yoga’s benefits—stretching, strengthening and relaxing—through her baby’s first year; fun yoga moves for babies to encourage their natural flexibility and growth; and breathing exercises and partner poses . . .”


__________. *Yoga for Pregnancy*. Berkeley, Calif.: Rodmell Press.

__________. Teaching Yoga to Pregnant Women workshop. 25 hours. Email: JudithYoga@aol.com.

This workshop “is for those wanting to deeply study what it means to teach Yoga to the pregnant woman.” Includes a thorough grounding in the physiology of labor and delivery, which poses are helpful to the pregnant woman and why, the psychology of labor, how to help the laboring woman, and how the Yoga teacher can make a perfect doula. Recommended for teachers and student-teachers.
LUET. ESutra Yoga Therapy forum, 3 Aug 2001: Judith’s posting on pregnancy and the importance of avoiding inversions.


From the publisher: “Meditations for Your Pregnancy takes the reader through meditations for preconception, for each trimester, and for after the new arrival. Every meditation focuses on a different aspect of pregnancy and consists of easy-to-follow instructions explaining what the exercise will achieve and how to practice it.”


On class taught by Seva Simran Siri Kaur Khalsa, a certified prenatal Yoga instructor at Golden Bridge Yoga.


Macy, Dayna. Pregnant pause: Two months before my twins were due, my doctor put me on strict bed rest. Yoga Journal, Sep/Oct 2000, pp. 137-140. (On adapting asanas to the requirement for bed rest.)

“Yoga for easy childbirth. And yoga for a healthy, complication-free pre-natal and post-natal period. This was the gist of the lecture-cum-demonstration organised for the city’s gynecologists and obstetrics by the Society of Gynecologists and Obstetrics at Hotel Aroma today.

“Swami Dhirendracharya, a PhD yoga student from Panjab University, demonstrated various yoga asanas for facilitating easy delivery and a comfortable pre and post-natal period.

“Dhirendracharya said sukshmanama and some simple pranayams (breathing exercises) can benefit women of every age suffering from female disorders.

“Dhirendracharya had also modified some yogic exercises to suit the changed physical conditions of women during pregnancy. ‘One should not get stressed, because that can be harmful for the foetus,’ he said.

“He prescribed relaxation and recommended various postures such as shavasana, balshavasna, gyanmudra among others for pregnant women, besides asans for facilitating muscular contraction and expansion during childbirth.

“He recommended bhujangasna and makarasna for natal, gharabhasna and garudh asan for post-natal period and some other exercises which can help reduce labour pains.

“The gynaecologists were also told about some simple exercises which they could recommend to their patients during the post-natal period, especially the three crucial months immediately after delivery. To prevent complications and also get back into shape, he recommended anulom-vilom, breathing exercise and singhasnas.

“Besides these, Dhirendracharya demonstrated asans like shashankasna, masyaasna, padmasna, sukhasna and tardnasna to treat hypertension and kapal bhastrika, vrikshasna for those with low BP.

“Throughout the lecture, he maintained that relaxed muscles and a healthy body can help women give birth to a healthy baby.

“Doctors who attended the lec-dem said yoga can be treated as an alternative medicine. ‘It was a welcome seminar,’ said Dr Nirja Chawla, a gynecologist.


Medigrace. Medigrace is collecting information about research being conducted on meditation and childbirth to support its newest program on “calm birth.” Contact Medigrace, 140 High Street, Ashland, OR 97520, medgrace@mind.net, www.mind.net/medigrace.


Miller, Tim. Answers the question: “I am six weeks pregnant and am a serious yoga student. How should I modify my practice during the first, second, and third trimesters? It seems like all the prenatal yoga information is geared to beginners.” *Yoga Journal*. Article available online: http://www.yogajournal.com/practice/767_1.cfm/

Mira. [The postnatal practice of Yoga Nidra]. *Bindu*, no. 11, p. 25.

“A woman dancer was on one of our post natal yoga courses. She told me that after giving birth she felt stiff and full of aches in her muscles, just like after training her dance exercises. But after each class, which involves physical yoga and Yoga Nidra, the aches in her muscles were gone. She wondered why.

“Swami Satyananda once said than an hour of Yoga Nidra is equal to four hours of sleep. And I have read that you need four hours of unbroken sleep for the muscles to relax
enough to allow the blood to carry away the lactic acid that has accumulated there. This woman never slept that long at a stretch without being woken by her baby, and therefore the lactic acid remained in her muscles and caused the pain.

“Could it be that her muscles relaxed as much during half an hour of Yoga Nidra as thy would during four hours of unbroken sleep?”


Contains some discussion of abortion and stem cell research.


Morse, Kali. Prenatal Workshop for Teachers. 5th Annual Integral Yoga Teachers Conference, 30 Aug - 3 Sep, 2001, Satchidananda Ashram - Yogaville, Buckingham, Virginia. Email: iyi@yogaville.org.


Abstract: Objective: To study the efficacy of yoga on pregnancy outcomes. Design and setting: Three hundred thirty five (335) women attending the antenatal clinic at Gunasheela Surgical and Maternity Hospital in Bangalore, India, were enrolled between 18 and 20 weeks of pregnancy in a prospective, matched, observational study; 169 women in the yoga group and 166 women in the control group. Methods: Women were matched for age, parity, body weight, and Doppler velocimetry scores of umbilical and uterine arteries. Yoga practices, including physical postures, breathing, and meditation were practiced by the yoga group one hour daily, from the date of entry into the study until delivery. The control group walked 30 minutes twice a day (standard obstetric advice) during the study period. Compliance in both groups was ensured by frequent telephone calls and strict maintenance of an activity diary. Main outcomes: Birth weight and gestational age at delivery were primary outcomes. Results: The number of babies with birth weight ≥2500 grams was significantly higher ($p < 0.01$) in the yoga group. Preterm labor was significantly lower ($p < 0.0006$) in the yoga group. Complications such as isolated intrauterine growth retardation (IUGR) ($p < 0.003$) and pregnancy-induced hypertension (PIH) with associated IUGR ($p < 0.025$) were also significantly lower in the yoga group. There were no significant adverse effects noted in the yoga group. Conclusions: An integrated approach to yoga during pregnancy is safe. It improves birth weight, decreases preterm labor, and decreases IUGR either in isolation or associated with PIH, with no increased complications.

From an article by C. Vidyashankar, “Yoga may help improve pregnancy outcome,” in the 22 May 2005 issue of The Macon Daily.

“‘The exact role of yoga is unclear at present,’ co-author Dr. Vivek Narendran of Cincinnati Children’s Hospital and Medical Center in Ohio told Reuters Health.

“‘He said possible mechanisms whereby yoga improves pregnancy outcomes include increased blood flow to the placenta, decreased transfer of maternal stress hormones, and decreased premature release of hormones that trigger the onset of labor.

“‘Given the larger picture of multiple failed attempts to reduce low birth weight and prematurity globally in the last decade,’ Dr. Narendran commented, ‘we provide preliminary data for the first time, to support a simple potential intervention, particularly in India, to improve pregnancy outcomes.’”


Abstract: Abortion is a complex phenomenon experienced by millions of women every year. Post-abortion distress, operationally characterized by feelings such as guilt, regret, sadness, depression, bereavement, and anxiety is found in approximately 9–26% of women who have an abortion. This dissertation reviews the literature surrounding the experience of abortion, including the psychodynamics of abortion and its relationship with mourning. Seeking to better understand the concepts discovered, a thorough review of the theories of self psychology, Buddhism, and mindfulness meditation is provided. Using these frameworks as lenses, the experiences of abortion and post-abortion distress are explored. This dissertation integrates several key elements of the aforementioned schools of thought, ultimately seeking to conceptualize the experience of post-abortion distress. In light of the integration, psychotherapy is discussed including implications for treatment, the therapeutic relationship, and the therapist. Following a descriptive analysis of these concepts, the discussion offers a summary, potential cultural implications, limitations, and recommendations for future theoretical and empirical efforts.


“Sylvia Klein is a long-time yoga instructor who developed the Positive Pregnancy Fitness program, a prenatal health care program that is now taught in more than 30 states. *Positive Pregnancy Fitness* presents a gentle and sensible approach to exercise that incorporates yoga with nutrition and stress management.”

Oprah television program. April 6, 2001, episode on the healing power of Yoga.

See the segment in which Kandice, who was depressed and exhausted to the point of insomnia following her pregnancy, found “instant relief” through Yoga.


“. . . It’s no secret that overextended Bostonians are flocking to yoga classes to relieve stress, increase flexibility and tone their bodies.

“But who knew the little tykes are sorely in need of some om action as well?

“‘Whenever I ask a group of 5-year-olds—‘Who’s ever been stressed out?’—they all raise their hands,’ said Evan Cooper, who teaches yoga to kindergartners in Los Angeles.

“So what’s a concerned parent to do?

“Start those yoga postures early, said Maggie Magner, who teaches yoga classes for newborns in the Boston area.

“Three-week-old babies are welcome in her Itsy Bitsy Baby class, where she teaches poses such as the Jiggle Giggle Wiggle Pose, Womb Wings, the One-Handed Bump Hold and Baby Planet.

“‘It’s hard to be a baby sometimes,’ said Magner, who teaches at the Arlington Center and Isis Maternity in Brookline. ‘Babies do carry stress in their bodies.’

“Last week, 11 moms and their tiny charges learned the Super Baby Belly Pose, where a prone baby rocks on mom’s shins and knees.

“‘It started as way for me to get out of the house,’ said Tracy Winkler, whose 8-month-old son Drew has been attending yoga classes half his life. ‘But now I come for him. He loves it and he sleeps much better.

“‘The poses are magic. He can be hysterically crying and those cries turn to giggles in seconds.’

“Newborn yoga helps babies deal with ‘belly issues,’ or digestive troubles. It also develops motor skills, improves digestion and calms fussy babies, said Magner.

“At Kripalu Center for Yoga and Health in Lenox, yoga workshops are available for children and for youths with special needs.

“‘Kids, just like adults, get overworked and overstressed,’ said Denise Barack, a yoga instructor and program director at Kripalu. ‘Even 12-year-olds face a lot of competition’
“Experts say yoga teaches children to pay more attention to their bodies, and helps develop flexibility in body and mind.

“The Arlington Center offers several yoga classes for babies and children.

“‘We try to pack children’s craniums full of words and concepts at a very early age,’ said Arlington Center founder Chip Hartranft. ‘This helps to counter the overly cerebral development we impose on children.’”


From the publisher: “Begin a healthy relationship with your baby through the innovative Yoga Baby methods developed by DeAnsın Goodson Parker, Ph.D., a licensed child psychologist and certified yoga instructor. From deep relaxation massage to postures enhancing specific developmental stages, these exercises are designed for newborns through two-year-olds and offer a wonderful opportunity to lay a solid foundation for a lifetime of learning and bonding together.”


Pedersen, Lisa. Yoga Birth, Manhattan, California. Tel.: 310-372-8400, email: lisa@yogabirth.com, URL: www.yogabirth.com.


“On a recent Saturday morning at Yoga Haven in Tuckahoe, 15 pregnant women settled onto rubber mats and greeted one another with questions about how they were feeling and when their babies were due. Then the instructor, Reyna Gonzalez, guided them through a prenatal yoga . . . ‘Breathe into the baby,’ . . .”

Phillips, Lyssa. Mind, Body and Mommy prenatal Yoga support class. Caritas Norwood Hospital, Norwood, Massachusetts. Contact the Childbirth Education Department at 781-278-6402.

From the hospital website: “Gentle Hatha yoga is a safe and beneficial exercise during all stages of pregnancy and at any fitness level, even without previous yoga experience. Yoga helps the participant learn to trust her body’s ability to give birth, while strengthening and toning. Postures participants will learn will help prevent or lessen the
effects of many common ailments associated with pregnancy, including fatigue, backache, water retention, heartburn and constipation.”

The course instructor, Lyssa Phillips, is a certified Whole Birth™ Yoga instructor (http://www.wholebirthresources.com/teachertraining.html).


**Post natal rehab.** Article available online: http://www.yogamedicine.com/postnatalrehab.htm.

**Powers, Sarah.** Answers the question: “I have just had a child and am receiving mixed reports as to when I can go back to my Ashtanga practice, which I was doing regularly right up to giving birth, with modification for my swelling belly. I had a natural birth with no complications.” *Yoga Journal*. Article available online: http://www.yogajournal.com/practice/810_1.cfm.

___________. Answers the question: “What do you think about backbending during pregnancy? It seems that in the Ashtanga vinyasa tradition, there isn’t much taboo against it, yet the opposite seems to be true in the Iyengar tradition. Any thoughts?” *Yoga Journal*. Article available online: http://yogajournal.com/practice/811_1.cfm.

**Practicing yoga during pregnancy.** Article available online: http://www.womenfitness.net/yoga_during_preg1.htm


**Pregnancy and yoga.** *Yoga with Compassion*, Sep 1999, pp. 2-5.

Includes precautions and benefits.

**Pregnancy, Parenthood and Yoga.** Santacruz, Bombay, India: The Yoga Institute.

**The pregnant yogini: One woman’s story.** Article available online: http://www.allspiritfitness.com/library/features/aa062201a.shtml.


**Prenatal yoga.** *YOGItimes*, Apr 2003.


“A Welsh midwifery student hopes to ease more women through pregnancy and childbirth through the power of one of the ancient sciences—yoga.

‘Christine Kalimurti has been studying the practice for 10 years, and teaching for two. She is now training as a midwife and hopes to integrate the two elements to help ease the pain of pregnancy.

‘“Breathing [correctly] is quite important during pregnancy and childbirth, so yoga can help familiarise women with the different techniques,’ she said.

‘“Some practices could be used in the second stage of labour when the woman is pushing. For example, if the head is crowning quite quickly sometimes women need to hold back so the baby doesn’t come out very quickly. So breathing techniques could help hold the head there and have a controlled exit.’

‘The relaxation element to yoga is also important, as the whole experience can be very stressful for women.

‘“It’s also useful after the baby is born, both physically for recovery and for the stress afterwards when you’re coping with no sleep,’ said Ms Kalimurti, who was born in South Africa but whose father is from Wales . . .”

Rodenbeck, Joachim. A more harmonious pregnancy with Bhramari [pranayama]. *Bindu*, no. 10, p. 5.

Based on research conducted by Monghyr Hospital in 1993, in cooperation with Bihar School of Yoga. Compared to the control group, pregnant women practicing Bhramari 1-2 times a day for 5-10 minutes during the entire pregnancy and through the first phase of the actual birth all experienced normal blood pressure compared to 25% with high blood pressure in the control group, a lower number of spontaneous abortions (2% compared to 8%), fewer premature births (2.6% compared to 5%), on average about a 25% shorter labor, generally little pain during labor, only one case (1%) of Caesarean section compared to 4% in the control group, none of the newborns suffered from lack of oxygen (0% vs. 12%), a greater average weight for the newborns (3325 g vs. 2850 g). The results show that there was less worry and stress during pregnancy as a result of the regular practice of Bhramari. The women’s hormone balance was better regulated, which promoted the birth of healthy children.


Rothlein, Susan. Good reasons for taking yoga classes after giving birth (mom and baby classes). Article available online: http://members.aol.com/mommayoga/page7.html.

________. Good reasons for taking yoga during pregnancy. Article available online: http://hometown.aol.com/mommayoga/page3.html.


From the website: “The Whole Birth™ Yoga Teacher Training is a unique opportunity to grow personally and professionally while you serve and enrich your community. The Whole Birth Yoga Teacher Certification Training is open to all perinatal health professionals, childbirth educators, doulas, and yoga instructors interested in offering a complimentary, mind-body approach to pregnancy, birth and parenting preparation.

“Whole Birth™ Prenatal Yoga Classes bring together elements of hatha yoga postures, meditation, self inquiry, and group support adapted to engage women in developing their own authentic understanding and trust in the birth process. Whole Birth Yoga Instructors provide a warm and open environment for women to support one another and to inquire together as to what it means to be bringing life into the world.
“Whole Birth™ Yoga is rooted in the foundation of mindfulness practice. Mindfulness is a way of being fully present in our lives that cultivates self-understanding, acceptance, compassion and wisdom. Mindfulness practice is non-secular, does not conflict with any belief or religion, nor does it necessitate adherence to a new ideology or belief system. *Those interested in attending this training should be prepared to commit to an ongoing daily practice of mindfulness meditation.*”


**Satchidananda, Sri Swami.** *Mother is Baby’s First Guru: Infant Care and Yoga.* Pomfret Center: Satchidananda Ashram, 1976.


“Gentle moves to ease your body and mind and prepare for labor.”

**Schmitt, Haime Stover.** Now that you’re pregnant. *Yoga International,* Aug/Sep 2000, pp. 49-54.


“Pregnancy can be a stressful time for any woman, much less a teenager who is trying to balance pregnancy with school and work.

“Young women in Clermont County are getting the opportunity to relieve stress through yoga, from the help of a new program called Project Lotus Blossom.
‘Julie Toren, yoga instructor at TriHealth and East Side Wellness Connection, started the free classes as part of a project from Landmark Education.

‘“I was looking for a group that could benefit from (yoga), but wouldn’t necessarily be something they could find on their own,’ Toren said.

‘Toren teaches a prenatal class at TriHealth and found herself inspired to help young mothers who might not be able to afford class.

‘“The reason I chose to go into this, was what I got out of it,’ Toren said. ‘It’s not just about the physical benefits. Yoga also provides self-esteem and respect.’

‘Working with Carolyn Quickel, GRADS instructor at Glen Este, Batavia, Amelia and Clermont Northeastern, Toren gathered a group of teens who were either pregnant or had just given birth to participate in these classes.

‘GRADS, which stands for Graduation, Reality and Dule Role Skills, is a program offered by Great Oaks to help support teen parents through graduation.

‘“These girls are really busy with school, jobs and babies,’ Quickel said.

‘Regardless of their busy schedules many of the girls in the program had expressed interest in finding a way to relieve stress during pregnancy and tone up after the birth of their child.

‘“Yoga can first help with breathing. It allows for various breathing patterns. There is also a focus on pain management. The postures support and strengthen parts of the body that are stressed by pregnancy,’ Toren said.

‘Every Tuesday night for six weeks the girls meet to focus on their health and the health of their child.

‘“They are happy to have a place to talk about it and get support,’ Toren said. ‘I’m not doing anything different with them than I would in any other class. I’m just giving them the time and space to get together.’

‘In order to expand the project, Toren is looking to write a grant under a non-profit.

‘“This project is keeping me grounded in why I’m teaching,’ Toren said. ‘I want to be with the community and give back to them.’

‘To receive more information on Project Lotus Blossom, contact Julie Toren at 513-403-7337 or on her Web site at www.julieanntoren.com.”

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Smith, Susan J. Pregnancy Today’s advisory panel answers: What yoga positions should I avoid during pregnancy? Available online at: http://www.pregnancytoday.com/experts/posavoid.htm. (See also the video by Susan in the “Videos and CDs” section below.)


That is called [Yogic developmental] action of the body in which reason takes no part and which does not originate as an idea springing in the mind.

To speak simply, yogis perform actions with their bodies, like the movements of children.
Jnaneshvar, 1987, p.102

From the abstract: In this paper I hypothesize that the so-called “practices” of sahaja (“innately-arising”) Kundalini (“ultimate creatrix” originating at the spine’s sacral base) Yoga (and cross-tradition similars, e.g., Judaic davvening, Tibetan tumo heat, Chinese tai chi, Islamic zikr, Quaker “quaking,” the whirling of the Dervish, etc.) constitute auto-developmental movements and bodily maturations consistent with those of intrauterine gestation, infant movements, and teen-aged puberty. Although these “practices” are typically learned by rote mimicry of “standard” Yoga poses, breathing exercises, moral guidelines, or meditation techniques, according to the tradition and contemporary clinical reports, they can emerge endogenously-animated by prana or Kundalini, as it were—as
the 13th century adept, Jnaneshvar notes above. I assert that these Yogic kriyas or “developmental actions” (and cross-tradition similars) constitute what might credibly be termed “postgenital puberties” of the neuroendocrine system and, thus, the matured embodiment of citta, the “light” of consciousness itself in various yogically defined energies and secretions: ojas, virya, auras, amrita-soma (the substance of primary worship in the Rig Veda) among them.


**Spiers, Katie.** Mummy & me. *Australian Yoga Life*, 2003, no. 6, pp. 28-30.

“Many women take up yoga in pregnancy, as it provides a wonderful opportunity to bond with their unborn baby, have some rest and relaxation time and help keep them fit and flexible. Unfortunately, once motherhood becomes a reality it is often difficult to maintain any semblance of previous lifestyle and routines, let alone a yoga practice . . .

“Your own ability to relax teaches your baby how to relax as well, so that you can enjoy life together. Physical, emotional, mental and spiritual well[-]being after giving birth requires that you learn to nurture yourself in deep relaxation. Only then can you truly nurture anyone else.”


From the publisher: “How does a new mother get back her shape without giving up precious time with her baby? In Baby Om, [the] authors . . .—both dancers, yoga instructors, and moms themselves—answer the new mother’s need for a calming and rigorous way to align and strengthen her body while having fun with her baby. Based on their popular New York classes of the same name, Baby Om takes mothers through a yoga practice they can do with their infants—anytime and anywhere. The techniques help new mothers enjoy the spiritual and physical benefits of yoga, allowing them to nurture themselves as well as their babies. This easy-to-use book includes: Baby Om basics—the practical information you need to get started, baby engagement—how to play with and stimulate your baby during yoga, four step-by-step Baby Om classes—each concentrating on a unique stage in your child’s development.

”The beautiful illustrations and photographs in Baby Om capture the intimate sharing between mother and child, and create a visual model for how to achieve the poses at home. Safe, effective, and easy to learn, Baby Om brings mother and baby together, ensuring the health and happiness of both.”

**Steffens, Sara.** Front and centered: In baby yoga class, it’s never too early to start lowering the stress. *Contra Costa Times*, 26 Jun 2001. Article available online:
http://www.contracostatimes.com/health/stories_fitness/x26baby-yoga_20010626.htm. (If this link no longer works, search the Times archive.)


From the publisher: ‘They’re pregnant. They’re glamorous. They’re blissfully balanced. Or maybe that’s all just a pose . . .

“Laura is pregnant. She is stressed. She is exhausted. So she takes a deep, yogic breath, forgets about her husband, leaves her cramped apartment . . . and joins the Prada-clad celebrities and socialites at the most elite yoga center in the city. She figures she is a few tax brackets too short of fitting in. But she finds herself befriended by four huge-hearted, fabulously pregnant women who prove her wrong. Soon they are exchanging birthing plans and baby names and dirty secrets about their significant others. Everything is falling into place. Until she discovers one of them has a secret so big it just might burst their blissful yoga bubble.”


Stone, Charlotte Chandler (Hamsa). On using inversions to turn a breech-positioned baby. ESutra mailing list post 9 Jan 2002. Author’s email: stoneyoga@aol.com.


“. . . a beautifully illustrated yoga handbook for all three trimesters and the weeks following delivery . . . a complete collection of safe, carefully selected postures written in consultation with top yoga instructors, midwives, and doctors approved by leading pregnancy experts. Wendy Teasdill is an experienced yoga teacher and the mother of three children . . .”

Sandy Pellerin, C.Y.T. and Certified Prenatal Yoga Teacher, says about this book: “I have found Step by Step Yoga for Pregnancy to be a wonderful assist to my Prenatal (teaching) Yoga Class. It has great sketches and easy to follow directions.”


“Pregnant women are hurting themselves and risking their unborn children by practising some common yoga poses, experts say.

“An informal committee including midwives and obstetricians has been set up to develop guidelines for safe practice of the popular activity.

“Royal Prince Alfred Hospital childbirth educator Enid Guthrie, who is spearheading the committee, said she had seen women with ruptured membranes, and there was a risk of miscarriage for women who did inappropriate poses.

“Mrs Guthrie said she did not let her pregnant yoga students do inversions - including the downward facing dog and shoulder stand - partly because the hormone relaxin causes the ligaments that hold the uterus to soften during pregnancy. Other "no-no" positions were intense twists, sit-ups and strong stretches.

“Mrs Guthrie said that, while she had no scientific evidence that yoga could cause miscarriage, her concern was based on her experience as a midwife, theatre nurse and prenatal yoga teacher of 13 years.

“She said many women signed up for yoga classes when they fell pregnant, thinking it was a gentle activity.

“‘It’s the women who have never done yoga before they get pregnant who I am most concerned about,’ she said.
“She warned pregnant women should not rely on yoga DVDs, unless they already knew
the yoga practitioner and had been to their classes.

“Generally, they should not be doing yoga in the first trimester because of the danger of
miscarriage. Women's health physiotherapist Julia Schwarz, who is also on the
committee, said prenatal yoga teachers needed to have some obstetrics training to
understand the particular changes in a pregnant woman's body.

“‘With pregnant women you need to be careful. You are not dealing with a normal body,’
she said.

“Ms Schwarz said women with pubic symphysitis, which causes groin pain and can occur
after 20 weeks of pregnancy, should not be allowed to squat, sit cross-legged or do one-
legged poses.

“She also said pregnant women with sacroiliac joint dysfunction needed to avoid lying on
their backs.

“Prenatal yoga teacher Sally Molineaux said if women were very fit and experienced in
yoga, she allowed them to do inverted poses—but only at their own risk: ‘I tell them they
can only do certain poses if they take responsibility for it themselves,’ she said.

“‘I do not think women should be doing inversions and strong twists during pregnancy.’

“Sports Medicine Australia director Anita Green said anyone teaching an exercise class
or yoga to pregnant women required additional expertise.

“‘Yoga is good, but it needs to be modified accordingly for each stage of pregnancy,’ Dr
Green said.

“AMA’s obstetrics spokesman Andrew Pesce said there was no evidence that yoga was
anything other than beneficial and safe in pregnancy. However he said women should
listen to their bodies.

Specific contraindicated poses demonstrated in this article: boat pose (“can cause a
miscarriage”), downward facing dog pose, shoulder stand, a seated closed strong twist,
camel pose (and “other strong abdominal stretches”).

**Thomas, Virginia Castleton.** Preparing for natural childbirth. In Virginia Castleton

**Thompson, Judi.** *Healthy Pregnancy the Yoga Way.* Garden City, N.Y.: Doubleday &


Tovatt, Louise. Baby & Me Yoga classes. Universal Force Yoga, 7 West 24 Street (Between Broadway & Sixth Avenue), New York, NY, 10010, 917-606-1730.

“Deepen your bond with your baby . . . Focusing on the energetic sets and interaction with your baby, this class will strengthen, tone, and relax your body.”


From a review at Amazon.com: “*I Can’t Believe It’s Yoga for Pregnancy* will show women that yoga is the best way to stay in shape and prepare for childbirth. By relieving stress and discomfort, yoga is a safe, natural alternative for expectant mothers (and fathers too!). Beautifully photographed, with exercises for every stage of pregnancy. Also included are breathing exercises and relaxation techniques that can be used during labor and childbirth, plus specific postpartum exercises to help women restore their level of fitness and muscle tone.” (The author describes herself as a “personal and yoga trainer.”)

Uma Dev, L., and R. Nagarathna. Yoga improves blood flow to placenta as shown by Doppler measurements in pregnancy. Swami Vivekananda Yoga Research Foundation.


Contents: Pregnancy, Birth, How to start, After the birth, Beginning at home, When you have it going, Regular practice, Parenthood

Vedic course for expectant mothers. *The Times of India*, 11 Feb 2003. Article available online:

“Sujeet Jha, a post-graduate from Hindu College in Delhi University, is opening a unique institution, Sanskar, in Patna. It will run a course for expectant mothers—with a pregnancy of upto five months. The course will aim at helping the child in the womb to absorb good ‘sanskar’ (values) through vedic chants.”
The course, name “Vaidehi,” will be of two months’ duration, with two sessions every week. ‘We will be conducting classes for expectant mothers and teach them the Vedic ways of bringing up their offsprings after birth,’ Sujeet said.

“It is our belief that a child starts learning right in the mother’s womb. The most memorable example is in Mahabharat, in which Abhimanyu learnt how to break into a chakravyuh while in her mother Subhadra’s womb as Arjuna narrated the technique to her. But, goes the legend, Abhimanyu could not learn the technique of coming out of chakravyuh because his mother fell asleep mid-way,’ said Jha, insisting that the ancient belief has been proved right in researches carried out by scientists. ‘The Vedas should not be associated with one religion. Members from other religions are welcome to join the course,’ he asserted.

“He said that expectant mothers would be taught Vedic shlokas, yogic postures and exercises. The aim was to provide expectant mothers confidence to undergo the experience of childbirth and overcome post-natal depression, he added. He claimed that such courses were being held in places like Delhi and Mumbai.

“Incidentally, Sujeet’s institute is not only aiming to teach Vedas to expectant mothers, but also to children of the age group of 4 to 8 years through a course named ‘Lav-Kush.’ He stressed that the course was aimed at instilling a sense of self-discipline and respect for ancient heritage.”


Abstract: Objective: To identify common treatments used for low-back pain (LBP) during pregnancy. Design: A two-part anonymous survey. Setting/location: New Haven, Connecticut. Subjects: Pregnant women and providers of prenatal health care (nurse educators, nurse midwives, and obstetricians). Results: We found that the majority of pregnant women who participated in our survey (61.7%) reported that they would accept complementary and alternative medicine (CAM) therapy as treatment for LBP during pregnancy. Similarly, 61% of providers of prenatal health care in our sample reported that they would consider using CAM as treatment for LBP during pregnancy. Massage (61.4%), acupuncture (44.6%), relaxation (42.6%), yoga (40.6%), and chiropractic
(36.6%) were the most common CAM therapies recommended for LBP in pregnancy by the providers of prenatal health care in our sample. Conclusions: This two-part survey study found that both providers of prenatal health care and pregnant women in New Haven county are likely to use CAM treatments for pregnancy-induced LBP. Further investigation should focus on whether it is a nationwide phenomenon, as well as if various CAM therapies are an efficacious treatment for LBP during pregnancy.


“‘Yoga is one of the best exercises you can do while you are expecting a baby, other than walking and swimming,’ [Naomi Bradshaw, teacher of this prenatal Yoga class] says. ‘It helps with the day-to-day stresses and strains of pregnancy and is great for flexibility.’”

**WCMC to offer prenatal yoga class: Free course open to all pregnant women in second and third trimesters.** *The Daily Citizen*, 17 Jun 2005.

“White County Medical Center is the first hospital in Arkansas offering free prenatal yoga classes to all pregnant women in their second and third trimesters . . . Kim Becker, Registered Yoga Teacher, expectant mother and Physical Therapy Assistant for WCMC, is the instructor.

“Becker is expecting her second child. While she was pregnant the first time, she did prenatal yoga.

“‘I didn’t experience a lot of symptoms commonly associated with pregnancy: I didn’t have back pain, swollen ankles or sleepless nights. I believe that yoga was the reason. And I always felt so much better after I did the exercises,’ said Becker.

“By helping a woman focus on breathing instead of the physical exercise, yoga serves as an excellent preparation for childbirth. Yoga also trains a woman for labor by teaching her to isolate and relax individual muscles. Other benefits include increased flexibility and energy levels and decreased muscle tension.

“Prenatal yoga differs from regular yoga by eliminating excessive bending and twisting. To further ensure safety for participating women, a New Life Center Registered Nurse will be present at all times during the class. Marsha Pound, an RN who has been instrumental in getting the class at WCMC, will be one of the nurses involved . . .

“To participate, women must have written permission from their doctors . . .”


From the publisher: “*Yoga for Pregnancy* will guide both beginners and those who have practiced for years on the best way to utilize yoga safely during their pregnancy. Readers will learn the most suitable methods and breathing techniques for each stage of pregnancy, as well as specific exercises that can offer relief from common pregnancy-related discomforts, such as heartburn, fluid retention, aches and pains, dizziness, and more.

“The book is broken down by trimester, offering routines appropriate for each stage of the pregnancy. Each exercise is explained carefully in text and accompanied by easy-to-understand, step-by-step photographs. Not only is yoga an ideal and safe method of exercise during pregnancy, it also can enhance awareness of muscles that will be used during labor and childbirth.”

The book was reviewed and endorsed by a prenatal expert and teacher from the National Childbirth Trust in London.


“Yoga for you and your baby is time that will make your connection stronger, keep you at peace, and allow your little one to be part of he transforming path of yoga.”


Addresses bearing children before you are ready, contraception, and abortion.

**Yoga: Labor of love for some moms-to-be. Yoga workouts can continue into pregnancy, with modifications.** Click2Houston, 4 Aug 2003.


Yoga Biomedical Trust (London). Pregnancy classes and Postnatal classes. URL: http://freespace.virgin.net/yogabio.med/ (click on “Yoga Therapy & How to Try It,” then click on “Index-Alphabetical,” then click on “Pregnancy & Childbirth” or “Postnatal”).


Yoga for pregnant women. Bindu, no. 7.


“‘It helps with discomforts of pregnancy, lower back pain, shoulder tension, sciatica, leg cramps,’ said Randi Coen Gilbert, a prenatal yoga instructor.

“Gilbert said that’s because the poses include delicate stretches and the release of tension. Breathing techniques are essential when preparing for delivery. The techniques calm the nervous system. Yoga also increases blood flow and builds muscle strength.

“‘As the spine gets longer, it creates more space for baby,’ Gilbert said.

“Dr. Kara Nakisbendi, a gynecologist in Ardmore, Pa., recommends yoga to her patients and has educational magazines about the exercise in the waiting room.

“‘It prepares the body for labor—wonderful poses that strengthen pelvic muscles, legs. It helps make labor easier,’ Nakisbendi said.

“Nakisbendi said high-risk pregnant patients need to consult with their physician before taking yoga, but she said most instructors will modify positions for a woman’s specific needs. Nakisbendi said it is not a good idea to overdo it.
“You don’t want to stay on the back for too long a period of time because the weight of the uterus can impede blood flow to baby,’ Nakisbendi said.”


_Yogasanas for pregnancy._ Article available online: http://www.indianwomenonline.com/womenhome/HealingTouch/Fitness/fit/yogapreg.asp.


_Yogendra, Sitadevi._ [Menstruation, pregnancy and intra-abdominal compression]; Sex and motherhood (includes: The sex glands, Glandular secretions and health, Eroticism detrimental to health, Yoga directives on sex, Healthy motherhood for healthy progeny, Care of the pelvic organs, Matsyasana, Paryankasana, Ardha-sarvangasana, Vipraitakarani, Painless childbirth); [Bhujangasana contraindicated during menstruation and advanced pregnancy]; [Halasana contraindicated during first part of menstrual period and last half of pregnancy]. In Sitadevi Yogendra, *Yoga Physical Education for Women._ Bombay, India: The Yoga Institute, 1947, pp. 80; 82-103; 115; 117.


“Once a week, in a room painted a calming blue, [Christine] Marasco practices prenatal yoga. She joins a growing number of expectant moms-to-be practicing yoga throughout the country.

“It’s a combination of breathing, stretching and movements that work around a burgeoning belly.

“‘(Instructor Lori Woodyard) knows how to get around the big hump,’ said Marasco, 28, of Marietta. ‘It accommodates our growing bellies and it really increases our flexibility and strength. It’s good preparation for labor and for after the birth . . .’

“‘It’s light postures, sets of breathing and a lot of relaxation,’ she said. ‘The baby feels all the feelings the mother does so the calmer you are, the calmer the baby is. That’s one of the most important aspects.’

“Expectant mothers can expect to not find themselves twisted into a pretzel.

In fact, part of most pregnancy yoga classes, including Woodyard’s, simply requires talking.

“‘It’s a chance for pregnant women to be together and to talk about what’s happening with their pregnancies and get advice and input and support from the other women,’ Woodyard said. ‘It also helps me to know what they need to do in the class. So far, we’ve
had a lot of complaints about pain in the hips so we’ve done more hip-openers.’

‘Those in the class also learn postures and breathing techniques that could help them in labor.

‘‘You have more awareness of your body,’ said Heather Willis, 30, of Walker, W.Va., who is expecting her second child. ‘So far, it’s helped with everyday aches and pains . . .’

‘Pregnancy yoga took off as a sub genre in part due to celebrity Mom endorsements from Madonna, Cindy Crawford and Sarah Jessica Parker, who all said practicing yoga kept them looking great during their pregnancies and helped them bounce back afterward.

‘‘It has benefits spiritually, mentally and physically,’ said Woodyard. ‘Physically, you have everything from better blood flow, increased oxygen to the baby and stronger arms to help carry the baby after birth.’

‘Pregnancy yoga can be safely practiced all the way through to the end of a pregnancy but some experts said expectant mothers should wait until they are 12 weeks along to start. Marasco said she has taken a lot of the moves she learned in class home with her.

‘I’ve incorporated a lot of things into my routine at home,’ she said. ‘I like to do the breathing and the stretches when I’m getting ready to go to bed. Pregnancy can be a stressful time and it’s important to take time for yourself to be quiet and relax.’

‘Pregnancy yoga is a great way to empower women who may be facing first time parenthood and a lot of uncertainties, said Woodyard.

‘It’s mothers taking the birth experience into their own hands,’ she said. ‘It lets them know what to expect, have confidence in their bodies and do things the way they want. It’s taking a new approach to childbirth.’”


Videos, CDs, and Audiotapes

Alle, Kelly (M.D., OB-GYN), and Mari Oxenberg. Birthwell Yoga! video. 60 minutes.

From the publisher: “A gentle, relaxing program of yoga for pregnancy and childbirth developed by midwives and based on ancient yoga traditions. Includes breathing and relaxation techniques, visualization and much helpful information for the pregnancy and the birthing process. Taught by an Integral Yoga trained instructor.”

Anderson, Christine. Dynamic Prenatal Yoga DVD. 90 minutes. URL: http://kidchiropractic.easystorecreator.com/store.asp.
From the producer: “Dr. Christine Anderson has designed this prenatal yoga program to accommodate all levels of fitness during pregnancy by modifying typical yoga poses . . . Dr. Anderson is a Los Angeles chiropractor who specializes in pediatrics and pregnancy. She has been teaching fitness classes for over 23 years and has practiced yoga during her three pregnancies.”

**Arndt, Jennie, and Helayne Waldman.** *Pre & Postnatal Yoga* video. Oakland, Calif.: Preston Media Associates, 1988. 35 minutes. Reviewed by Donna Farhi in *Yoga Journal*, Nov/Dec 1988, p. 95. (Donna’s review provides information about which asanas to avoid during pregnancy.)

**Baby Yoga video.** The Baby Yoga Company, Ltd. 86 minutes. URL: http://www.birthlight.com.

**Berch, Rama.** *Yoga for Pregnancy* video. La Jolla, Calif.: Master Yoga Academy, 2001. (Reviewed by Richard Rosen in the May/Jun issue of *Yoga Journal*, p. 160.)

**Berk, Bonnie.** *Yoga Video for Expectant Mothers* video/DVD. URL: http://www.motherwellfitness.com.


“This series of warm-ups, relaxation, asanas, pranayama, and meditation is specially designed [for] pregnancy . . .”

**Calm Birth audiotape.** Medigrace. URL: http://www.medigrace.org/products.html.

From the website: ‘Practice of Opening: This practice is a reclining meditation for pregnant women and their partners that engages and benefits the unborn child. The Practice of Opening brings progressive relaxation that increases the woman’s awareness of her natural abilities.

Opening is an enlivening practice that gives rest to the pregnant woman and inspires the child’s development. The child is aware and responsive in sympathetic resonance with the mother and father doing this practice.

“The Practice of Opening enriches family bonding. It opens the entrance to realization experiences natural to childbirth. Opening provides important calm. Today, calm may be the child’s greatest need. (26 minutes)

“Womb Breathing: This [advanced and complete childbirth method] is a sitting meditation that comes from ancient wisdom . . . Womb Breathing offers optimal breathing because it provides full oxygenation plus the absorption of vital energies. This
practice increases the woman’s capabilities and functions during childbirth, enabling the woman and child to embody a deep calm. (21 minutes)

“Giving and Receiving: This is a sitting meditation . . . that brings the experience of healing into childbirth. It is a method of compassionate breathing that is valuable for prenatal and postnatal care. This practice develops innate healing capabilities that the woman can use for the rest of her life. The birthing woman’s partner, family, midwife, doula, nurse and doctor can all do this practice to benefit the childbirth.”


From the website (ww.yogame.com): “Carmela Cattuti combines 20 years of yoga and 30 years of professional nursing experience in her teaching of prenatal yoga. A strong medical background in childbirth allows her to provide women with valuable yogic breathing, stretching and meditation techniques to aid with the fertility, delivery and postpartum stages of pregnancy. She teaches various classes in the Boston area.”


From the back cover: “Yoga strengthens the uterus and pelvic muscles, improves circulation, aids digestion, exercises the spine, and increases overall comfort. Yoga can also [help to] alleviate many of the common aches and discomforts of pregnancy such as nausea, constipation, varicose veins, swelling and back pain including sciatica.”


From the cover: “With over twenty years experience as a yoga teacher and a women’s health nurse, Colette has developed this video to help you reconnect to this wisdom. She’ll show you how linking the postures with the breath leads to mind, body and spirit awareness, giving you the ability to respond in the moment. With consistent practice you will: strengthen your body and increase endurance and flexibility; experience clarity of mind and self-confidence; decrease back pain, sciatica, swelling of the ankles and feet, constipation, varicose veins and nausea; strengthen the uterus and pelvic muscles; improve circulation and aid digestion; feel more prepared for the challenges of labor and birth.”
Drexinger, Rachel. *Yoga for Pregnancy* video. Available from Kripalu Center, Lenox, Massachusetts. (Highly recommended.)

From a review by Olivia Voigts at Amazon.com: “Instructor (and pregnant woman) Sue Elkind leads this 40-minute workout with concise descriptions and a healthy knowledge of yoga as it relates to pregnancy. The content here provides a workout that is both safe and efficient, with great attention to participants’ individual fitness levels. This session is presented with a backdrop class (consisting of women in various stages of their pregnancies) that demonstrates modified and more challenging options to each pose . . . Basic postures within yoga are taught with intensive focus on breathing, flexibility, and the constant connection between mind/body (and mother/child). Some poses are altered to accommodate the roundness of the midsection with constant awareness of spine alignment. Elkind gives special attention to balance as she slowly increases the intensity of postures. After a series of basic poses are performed, Kegels are practiced (which strengthen the pelvic floor), and meditation closes out the workout. This basic format is friendly for beginners, pre- and post-natal women, or anyone who requires modifications. This safety-conscious video offers a simple, straightforward workout with real potential for increased strength and flexibility. Props needed: a blanket or pillow, a mat, and (especially if you are expecting) a chair.”


From the website: “A regular prenatal yoga practice as taught in *Yoga for Your Pregnancy* can give you the energy to enjoy your pregnancy, the serenity to build a deeper intimacy with your body, and the ability to be present for the miracle of birth. Prenatal yoga can ease the discomforts of pregnancy, such as moodiness, shortness of breath, swollen ankles, nausea, indigestion and insomnia; and help you prepare for the rigors and mysteries of labor.

“PART 1: ENERGIZING & STRENGTHENING (30 minutes) Gentle flowing practice to build strength and stamina for the demands of labor-and alleviate the discomforts caused by your ever-changing body.

“PART 2: RELAXING & REJUVENATING (15 minutes) Learn breathing exercises to help you manage contractions-plus meditation techniques to help you relax and concentrate during delivery.”
“Lamaze Interview—with expert Carol Penn Erskine

“Exclusively on DVD:
Pranayama for Pregnancy: 3 simple breathing techniques to calm your nervous system
Meditation for Pregnancy: Guided meditation to help foster inner focus and awareness
Birthing Room Yoga: Simple yoga techniques to encourage a peaceful mind and body during delivery
Postnatal Yoga Practice: Gentle practice to help you regain strength and flexibility 6 weeks after delivery
Articles from Yoga Journal and Lamaze Parents magazine on yoga and pregnancy on a special DVD-Rom section

“This video shows you how to modify some poses using yoga props. Depending on your flexibility or stage of pregnancy, you may need a chair, two large pillows, a blanket, or sofa cushions. The use of a yoga mat is recommended.”


“Yogiraj Alan Finger guides his wife, Greta, through a yoga series designed to meet the needs of the pregnancy cycle, promoting strength and flexibility. Specific pregnancy issues are addressed, including relief of lower back pain, edema, varicose veins and stress.”


“Learn proper body alignment to carry your baby more comfortably. Increase flexibility and improve circulation, which reduces the potential problems associated with pregnancy. Strengthen your body to help relieve common discomforts along with breathing techniques to relieve shortness of breath and stress. Designed [by Alan Finger] for his wife, Greta, to safely practice Yoga and stay in shape while pregnant . . .”

__________. Baby and Me Yoga video. New York: Yoga Zone. Available from Yoga Zone, www.yogazone.com, 1-800-264-YOGA. [Uncertain if the practitioners in this video are Alan and Greta Finger.]


“Yoga with babies is based on the kind of infant massage that has existed in India for millennia. It induces deep relaxation, allowing babies to sleep well and thrive while mothers can rest and find their balance after giving birth.”
“Harmonizing exercises in water for pregnancy, birth and beyond. Here classic yoga postures have been adapted for practice in the water. Designed to open your pelvis, develop your breathing and ease aches and pains, these safe and effective exercises are suitable for both swimmers and non-swimmers.”


Graham, Rocki. Rocki’s Prenatal Yoga. 2002. 60 minutes.


From a review by Wendy Haring in the Autumn 2001 issue of Spectrum: “As an antenatal yoga teacher, I have long been looking for a video that my pregnant students can use to practise with at home in safety, and, at last, I have finally found one that I would highly recommend.

“The presenters are both yoga teachers and Yoga Biomedical Trust therapists who have trained with pregnancy expert Francoise Barbira Freedman.” Marion Symes was also a midwife for twelve years.


Patrick, Priscilla. Priscilla’s Yoga Stretches for Expectant Mothers video. URL: http://yogaone.com/cgi-bin/leeshop/open.pl.

From the website: “Priscilla and her daughter-in-law, Kim, who is 7 months pregnant in this video, produced [this] workout for expectant mothers and their families. There are two separate workouts, each at 18 minutes in length containing over 20 different stretches and postures. The exercises in this video were carefully worked out in actual classroom situations with expectant mothers in varying stages of pregnancy. In addition, the completed program was previewed and unanimously approved by doctors of obstetrics and gynecology. The exercises in this video cassette are perfectly safe in all stages of a normal, healthy pregnancy.”


Richard Rosen: “This is among the best of the prenatal videos we’ve reviewed in the past decade, and gets the highest recommendation.”

Reviewed by Kimberly Heinrichs at Amazon.com: “The best thing about this prenatal yoga tape is that there is a model for each trimester. Instructor Shiva Rea demonstrates each of the stretches and exercises for the first trimester, and two pregnant women show modifications for the second and third trimesters (they’re even dressed in different colors for easy reference). This removes the self-doubt home-exercisers often have about the safety of certain moves—especially in that cumbersome final stage of pregnancy. Using gentle voice-over instruction, Shea and her assistants take viewers through a half hour of meditational stretches using blocks and chairs for support. She follows that up with 16 minutes of floor work: lunge pose, bridge pose, child’s pose, plank pose—all with the necessary adjustments. She winds things up with a four-minute guided relaxation on her back—the traditional position—with the second-trimester woman on her side and the third on her side with one leg up on a chair. By including the different adaptations, Shea has made a tape with the flexibility to carry an expectant mom through her entire pregnancy—and beyond, if she wishes.”


From Richard Rosen’s review: “Rea’s instructions are to-the-point and interspersed with patches of soothing silence, and her sequencing is intelligently organized. The practice naturally recognizes the needs of the brand-new mom, focusing on stretching and strengthening strategic areas like the abdomen, back, and hips, and improving overall posture . . .”


“Can . . . be suitable for post-partum incontinence.”

**Satchidananda, Swami.** *Integral Yoga Hatha for Pregnant Women* audiotape. Buckingham, Va.: Shakticom.

From the publisher: “The yogic approach to pregnancy may be experienced through the gentle, relaxing and tonifying practices on this tape. Included is a complete booklet of instructions for visual information and further instructions.”

**Smith, Susan J.** *Hatha Yoga for Pregnant Women* video. See information online at: http://www.drsuzy.com.

**Southall, Alice, and Tara Herron.** *Pre Nataal Yoga* (with Alice Southall) and *Post Nataal Yoga* (with Tara Herron). Devon, England: BSY Group. URL: http://www.bsygroup.co.uk/accessory_list.asp?section_id=a.


“An exercise program for pregnant women combining Yoga stretches and dance movements.”

**Of Related Interest**


Abstract: Objective: This study aimed to compare ratings of body image satisfaction (BIS) from 6 months prepregnancy to 23-30 weeks’ gestation for high exercising and low exercising pregnant women. The authors also aimed to assess and compare expectations of BIS for the post-partum period in high and low exercising women. Design: A partial prospective approach was implemented. Sample: A total of 71 healthy pregnant women (40 high exercisers and 31 low exercisers) participated. Methods: Participants completed a series of questionnaires at 15-22 weeks’ gestation and 23-30 weeks’ gestation. Main outcome measures: There were two main outcome measures. At 15-22 weeks’ gestation there was an exercise inventory and two versions of the Body Cathexis Scale (BCS) (retrospective prepregnancy BIS and current BIS). At 23-30 weeks’ gestation there was an exercise inventory and two versions of the BCS (current BIS and projected post-partum BIS). Results: At 15-22 weeks’ gestation, high exercisers demonstrated significantly higher levels of BIS compared to low exercisers. There were no other significant differences between groups. Within groups, high exercisers were significantly more satisfied with their bodies at 15-22 weeks’ gestation compared to 6 months prepregnancy, and expected to be less satisfied with their bodies at 6 weeks’ post-partum than they were during pregnancy. Low exercisers demonstrated no significant changes over time. Conclusions: The findings suggest that women are able to assimilate the bodily changes of pregnancy without a negative shift in BIS. However, women who exercise during pregnancy may respond more favorably to changes in their bodies at early pregnancy compared to women who remain sedentary.

“A treatment commonly used to combat motion sickness in cars, trains and boats may also relieve morning sickness.

“That’s the finding of a new five-center study appearing in the July issue of Obstetrics and Gynecology. Doctors report on the effectiveness of a wristband that uses an electronic sensor to gently stimulate nerve endings through the skin—the same method used to control motion sickness.

“‘It works on the same nerve pathways used in acupuncture to control nausea and vomiting—the P6—but instead of stimulating the nerve ending with a needle, this device uses harmless, painless, mild electrical stimulation to accomplish a similar result,’ says study co-author Dr. Andrei Rebarber, director of maternal fetal medicine at New York University Medical Center.

“When P6 is stimulated, say experts, it sends a signal to the brain to quiet the stomach, which in turn stops the nausea.

“For women who can't or choose not to use anti-nausea drugs early in pregnancy, Rebarber says the band is a noninvasive and safe alternative . . .

“The three-week clinical trial took place at five hospitals around the nation. Two hundred and thirty women, all between six and 12 weeks pregnant, participated. They reported mild to moderate nausea and vomiting, often with difficulty eating. The intensity and frequency of their symptoms were recorded on the Rhodes Index, a scientific system of documenting these kinds of symptoms.

“Each woman was then randomly assigned to wear either a wristband equipped with a battery-operated nerve stimulation device or a sham unit that looked identical.

“During the following three weeks, the women were asked to wear the wristband continually and to keep a record of their morning sickness symptoms. In the end, 187 women finished the trial, with equal dropout rates from both groups. Only one woman withdrew due to a problem with the wristband itself, which involved an irritation where the band touched her skin.

“The women who used the wristband had far less nausea and vomiting, and their morning sickness appeared to stop sooner than those using the fake wristband. In addition, the women wearing the nerve stimulation band gained nearly three times the weight as the women wearing the sham band—2.9 pounds as compared to 1.2 pounds. In addition, none of the women or their babies suffered any complications as a result of the treatment . . .
“The wristbands are currently sold in most drugstores under the product name ‘Relief Band.’ They cost between $60 and $100. Other bands that offer wrist point acupressure, without the nerve stimulation, are also available.”


From a review by Belleruth Naparstek, Health Journeys: When Dr. Rogerio Lobo, Chair of Columbia Presbyterian’s Department of OBGYN, and Dr. Kwang Y. Cha, a researcher at Cha Hospital in Seoul, studied the effect of intercessory prayer on the pregnancy rates of 219 women, aged 26-46 years old, being treated with in vitro fertilization, they found that the prayed-for group had double the pregnancy rate (50% vs. 26%, P = .0013) and double the implantation rate (16.3% vs. 8%, P = .0005).

This was a double-blind, randomized, placebo-controlled clinical trial, in which patients and providers were not informed about the intervention. Statisticians and investigators were masked until all the data had been collected and all the clinical outcomes were known. The setting was an IVF-ET program at Cha Hospital, Seoul, Korea. The intercessory prayer was carried out by prayer groups in the United States, Canada and Australia. The investigators were at Columbia Presbyterian Hospital in the United States. The study concludes that there was a statistically significant difference for the effect of intercessory prayer on the outcome of In Vitro Fertilization.


“Not so long ago, many doctors took a conservative approach on recommending physical activity for expectant mothers. There were fears about the unknown effects of exercise and concern that overexertion might cause a miscarriage or harm the fetus.

“In the late 1980s, new research forced the medical community to rethink old notions. Scientists found that active pregnant women often had trouble-free pregnancies and did not increase their or their baby’s risk for health problems. Some studies even found that women who exercised regularly endured labor better, although exercise did not shorten the time spent in labor.

“Even more recent research has further pointed to the growing benefits of physical activity during pregnancy, most notably the finding that exercise may reduce by half a woman’s risk for a type of diabetes known as gestational diabetes mellitus . . .

“Two years ago, the American College of Obstetricians and Gynecologists revised its guidelines to relax previous restrictions on how much exercise mothers-to-be should get.
“Healthy, active women with uncomplicated pregnancies are now encouraged to follow the federal guidelines for adults, which calls for at least 30 minutes of moderate exercise a day several times a week. Women who never regularly worked out, but who want to start during pregnancy should talk to their doctors first.

“Fitness centers around the country are increasingly recognizing this change in attitude. Community gyms are adding new exercise programs designed for pregnant and postpartum women. Their popularity has also spurred the opening of specialty gyms that focus on prenatal exercises such as yoga.

“Raul Artal, who heads the department of obstetrics, gynecology and women's health at St. Louis University School of Medicine, noted that pregnancy is a good time to introduce lifestyle changes such as increased exercise to otherwise sedentary women.

“‘Pregnancy should not be a state of confinement. It’s a unique time for behavior modification,’ said Artal, who helped draft the exercise guidelines for expectant mothers.

“Despite the boom in fitness, pregnant women are still advised to avoid contact sports like basketball and hockey. Activities such as horseback riding and downhill skiing are also discouraged because of the risk of falling and possible injury.

“While swimming is generally safe, expectant mothers are warned against scuba diving because it may create gas bubbles in the fetus’ circulatory system. They should also take into account altitude sickness and avoid activities higher than 6,000 feet.

“Fitness experts warn that pregnant women who experience dizziness, vaginal bleeding, or any sign of discomfort should immediately halt their workout.”


“Maternal exercise guidelines designed to enable women to safely include exercise in their pre- and postnatal health care. Covers physiological changes, benefits, ACOG guidelines, contraindications, exercise prescription, and more.”


“According to a study in the May 2000 issue of The Journal of Bone and Joint Surgery, the increased demand that weight gain during pregnancy places on a woman’s ankles and hips results in low back and hip pain, as well as leg or calf muscle cramps.”

“Just like athletes who throw a ball too many times or who repeatedly swing a racquet, pregnant women are at risk for overuse injury of their muscles,” says orthopedic surgeon and study co-author Jon R. Davids, M.D., assistant consulting professor orthopedic surgery at Duke University Medical Center in Durham, N.C. . . .

“Bottomline—if you want a relatively pain-free pregnancy, get in shape beforehand, then keep exercising under your doctor’s direction. Even if you’re not in peak fitness beforehand, moderate exercise during pregnancy will keep aches and pains at bay.”


Abstract: Objective: Although it is well documented that breast milk provides optimal nutrition and immune benefits to the infant, factors that influence the immunologic composition of breast milk are less understood. A recent study reported that immunoglobulin A (IgA) levels in breast milk are lower after exercise compared with resting concentrations. However, the women exercised until exhaustion. The effect of moderate exercise on immunologic components in breast milk has not been reported. Therefore, the purpose of this study was to 1) compare the levels of immunologic compounds in breast milk of exercising women with the milk of sedentary women and 2) determine whether 30 minutes of moderate exercise affects immunologic properties of breast milk. Methods: Exclusively lactating women were studied at 3 months’ postpartum. Women in the exercise group (EG; n = 29) reported exercising aerobically at least 30 minutes/d for 3 days/wk, and women in the sedentary group (SG; n = 24) had exercised once a week or less during the previous 6 weeks. Cardiovascular fitness levels and concentrations of IgA, lactoferrin, and lysozyme in milk were measured. A subsample of the EG (n = 17) participated in a 30-minute exercise session at 75% of maximum heart rate and a rest session of 30 minutes of sitting rest on 2 separate days. Breast milk samples were collected before and 10 and 60 minutes after exercise and rest sessions. IgA, lactoferrin, and lysozyme concentrations were measured. Results: Women in the EG had a higher level of cardiovascular fitness than women in the SG (39.7 ± 1.0 vs 32.4 ± 1.0 mL O_2/kg/min). Milk concentrations of IgA, lactoferrin, or lysozyme were not significantly different between groups. In addition, there were no significant differences in the concentrations of IgA, lactoferrin, or lysozyme after moderate exercise compared with sitting rest. Conclusion: Moderate exercise during lactation improves cardiovascular fitness without affecting levels of IgA, lactoferrin, or lysozyme in breast milk.

“Reviews the contraindications to exercise and discusses which exercises should be included and excluded in a sound pre/postnatal exercise program.”


Abstract: This study examined the effects of pregnant women’s acute stress reactivity and chronic anxiety on fetal heart rate (HR). Thirty-two healthy third trimester pregnant women were instrumented to monitor continuous electrocardiography, blood pressure, respiration, and fetal HR. Subjects completed the trait anxiety subscale of the State Trait Anxiety Index, then rested quietly for a 5-minute baseline period, followed by a 5-minute Stroop color-word matching task and a 5-minute recovery period. Fetal HR changes during women’s recovery from a stressful task were associated with the women’s concurrently collected HR and blood pressure changes ($r = .63, p < .05$). Fetal HR changes during recovery, as well as during women’s exposure to the Stroop task, were correlated with their mothers’ trait anxiety scores ($r = .39, p < .05$ and $r = -.52, p < .01$, respectively). Finally, a combination of measures of women’s cardiovascular activity during recovery and trait anxiety scores accounted for two thirds of the variance in fetal HR changes during the same recovery period ($R^2 = .69, p < .001$). The results from this study link changes in fetal behavior with acute changes in women’s cardiovascular activity after psychological stress and women’s anxiety status. This indicates that variations in women’s emotion-based physiological activity can affect the fetus and may be centrally important to fetal development.


About the Zen custom in Japan of making offerings to Jizo, who watches over miscarried fetuses, and the absence of any such honoring in Western culture.


This research with 60 first-time mothers showed that those who practiced guided imagery during the first 4 weeks after giving birth had less anxiety and depression and more self-esteem and confidence than their counterparts who did not use guided imagery.

“A Welsh midwifery student hopes to ease more women through pregnancy and child birth through the power of one of the ancient sciences—yoga.

“Christine Kalimurti has been studying the practice for 10 years, and teaching for two. She is now training as a midwife and hopes to integrate the two elements to help ease the pain of pregnancy.

“‘Breathing [correctly] is quite important during pregnancy and childbirth, so yoga can help familiarise women with the different techniques,’ she said.

“‘Some practices could be used in the second stage of labour when the woman is pushing. For example, if the head is crowning quite quickly sometimes women need to hold back so the baby doesn’t come out very quickly. So breathing techniques could help hold the head there and have a controlled exit.’

“The relaxation element to yoga is also important, as the whole experience can be very stressful for women.

“‘It’s also useful after the baby is born, both physically for recovery and for the stress afterwards when you're coping with no sleep,’ said Ms Kalimurti . . .”


“The use of acustimulation over P-6 allows many patients to maintain a better-quality lifestyle and work status within the home or away than otherwise.”

From another source: The P6 point is located on the inside of the forearm, about 2 inches above the wrist crease. The most common means of acustimulation involves a wristband with a pearl-sized bead in it situated over P6. It exerts pressure by itself while it is worn, and the user can also press on it for extra stimulation.”


Abstract: Background: In 3 to 4 percent of all term births, the fetus presents as a breech. The objectives of this trial were to assess if assuming the knee-chest position reduced the frequency of breech presentation at delivery, increased the success of the subsequent external cephalic version, or both, and to determine if this management plan reduced the need for cesarean delivery. Methods: A randomized clinical trial recruited 100 women from two hospitals in Adelaide, South Australia, with a singleton breech presentation and a gestational age equal to or more than 36 weeks. Women in the treatment group were advised to assume the knee-chest position for 15 minutes three times a day for one week. Women in the control group did not perform postural management. All participants were reviewed one week later, and women whose baby remained as a breech presentation were offered an external cephalic version. Results: Postural management did not increase the
success of the external cephalic version, reduce the frequency of breech presentation at delivery, or reduce the need for cesarean delivery in women with a breech presentation at term. Conclusions: Findings from this trial included in a meta-analysis of postural management for breech presentation at term suggested that this is not an effective form of care to be offered routinely to women with a breech presentation at term.


Abstract: Objective: To estimate the severity of the low back pain (LBP) during pregnancy, including prevalence, risk factors, impact on daily living, and health provider management. Methods: An anonymous survey consisting of 36 questions was distributed to pregnant women participating in various prenatal care clinics and educational classes in New Haven County, Connecticut. A total of 950 surveys was returned from May 2002 through October 2003. At each site, a researcher was available each week to answer questions and gather surveys. Results: Six hundred forty-five (68.5%; 95% confidence interval [CI] 65–72%) respondents reported experiencing LBP during their current pregnancy. The prevalence was not affected by gestational age (P = .56). Low back pain during the current pregnancy was predicted by age (younger women were more likely to develop it; P = .004), history of LBP without pregnancy (P = .002), during menstruation (P = .01), and during a previous pregnancy (P = .002). The majority of respondents reported that LBP during pregnancy caused sleep disturbances (58%; 95% CI 54–62%) and impaired daily living (57%; 95% CI 53–62%). Average pain was moderate in severity. Nearly 30% of respondents stopped performing at least one daily activity because of pain and reported that pain also impaired the performance of other routine tasks. Only 32% (95% CI 28–36%) of the respondents with LBP during pregnancy informed their prenatal care providers of this problem, and only 25% (95% CI 21–28%) of prenatal care providers recommended a treatment. Conclusion: Low back pain during pregnancy is a common problem that causes hardship in this population. Further studies are indicated in the areas of prevention and treatment.


“I frequently see patients who believe that they have difficult lifelong physical or emotional patterns resulting from trauma suffered in utero or during birth. Often they feel a sense of hopelessness about changing these patterns.

“Combining two concepts in Ayurvedic philosophy may point a way to address such maladies. These two concepts are brahmamuhurta, the pre-dawn and dawn hours, and the concept of the relationship of the macrocosm with the microcosm . . .”

“In healthy women with normal pregnancy it is possible to reduce nausea and vomiting during pregnancy significantly at P6 as compared to acupressure at a placebo point and to no treatment.”

From another source: The P6 point is located on the inside of the forearm, about 2 inches above the wrist crease. The most common means of acupression involves a wristband with a pearl-sized bead in it situated over P6. It exerts pressure by itself while it is worn, and the user can also press on it for extra stimulation.”

**Ongoing Research**

**Judith L. Balk, M.D.**
Research Assistant Professor  
Division of Gynecologic Specialties  
University of Pittsburgh  
Pittsburgh, PA  
Conducting research at Magee-Women’s Hospital on Yoga and peak flow rates in pregnant asthmatics. Funded by NIH (NCCAM).

**Amy Beddoe**  
University of California at San Francisco  
Will be conducting research for her dissertation on the effects on pregnancy of mindfulness-based stress reduction. (IAYT learned about this research in July 2005; Amy will provide contact information once her project is underway.)

**Helen Garabedian**  
Sudbury, MA  
Helen@baby-yoga.com  
Tel.: 978-443-8468  
Conducting research in developmental movement and Yoga. Babies will be observed by Helen and her colleagues as they play/move independently. A collection of mom volunteers can participate by recording information before and after practicing Baby-Yoga with Helen routines at home with their baby. Volunteer parents and babies are expected to be available to meet with Helen during the day at least once and as many as three times from now until December 31, 2002. Babies must be between the ages of birth and 24 months to participate.

**Renee M. Jeffreys, M.S.**  
Holistic Health Center  
St. Elizabeth Medical Center  
renee@fitnessforwomenonline.com
Renee Jeffreys is an exercise physiologist specializing in prenatal populations looking for research funding opportunities for the study of the physiologic impact of Yoga on pregnancy. Contacted IAYT 5/23/05.

**University of Sydney, Australia**
According to Gurmukh Singh Khalsa, in an article by Adam Skolnick in *LA Yoga*, Nov/Dec 2002 (http://www.layogapages.com/issue2/feature/feature.htm), the University of Sydney will soon publish research that shows that yoga asana and meditation during pregnancy affect the birth itself, as birthing yogis have been found to be less fearful, able to remain calm, and more likely to access inner strength than others.

**Ila A. Vidyarthi**
advidyarthi@millerchemical.com
As primary investigator, with local physicians as secondary investigators, will conduct research on Prenatal Yoga. Contacted IAYT 8/16/02.