Yoga and the Prostate Gland

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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.

Abstract: We examined the long-term effects of a behavioral intervention on the psychological distress of patients recently diagnosed with localized cancer, who were being treated at Hadassah University Hospital. All 116 patients who met the inclusion criteria (49 men and 67 women) were randomized into an intervention group and a control group on a 3:1 basis. The intervention chosen was Progressive Muscle Relaxation with Guided Imagery, which is intended to decrease psychological distress and increase the patient's sense of internal control. The Brief Symptom Inventory (BSI) and the Impact of Events Scale (IES) were used to assess psychological distress within 1 month of diagnosis, 3 months later (shortly before starting intervention), and 6 months after the end of the intervention. At the final assessment, the effect of the behavioral intervention on psychological distress was positive. The effect was relatively modest but statistically significant when assessed in terms of the Global Severity Index (GSI) (a decrease of 2.3 points in the GSI of the treatment group as compared to an increase of 1.2 points in the GSI of the control group P=.005). Despite these moderately positive findings, we suggest that the results might be more meaningful if cancer patients are first screened for psychological distress to exclude those with a low distress level that does not justify intervention, and only then randomized for participation in the study.


“. . . helps prevent prostate and urinary problems due to poor circulation.”


OBJECTIVES: The use of unconventional medical therapies (UMTs) in the general population has increased dramatically in the past decade. Studies have estimated that 9% to 64% of patients with cancer use UMTs, and many do not disclose this information to their physicians. This study was designed to evaluate the rates of UMT use by patients with prostate cancer revealed by standard versus directed questioning and to identify demographic markers that may predict use. METHODS: A prospective study of 287 consecutive patients with cancer presenting to the Department of Radiation Oncology was performed. The prostate cancer population was 29% (84 of 287) of the total cancer patient population. Each patient underwent the standard history interview, including questions regarding prescription and over-the-counter medication. At the completion of the standard history interview, patients were then asked a set of directed questions regarding the use of UMTs. RESULTS: Of the 84 patients with prostate cancer, 31 (37%) used unconventional therapies. The standard history revealed that 6 (19%) of 31 used UMTs, and directed questioning revealed an additional 25 patients (81%) used UMTs in the study population (P <0.001). Of those using UMTs, 65% used megavitamins, 49% used herbal remedies, 13% used meditation or guided imagery, and 20% used nonherbal natural supplements. CONCLUSIONS: UMT use is prevalent among patients with prostate cancer. Some of these treatments may have a potential biologic impact on tumor behavior, therapeutic endpoints, and measured prostate-specific antigen values. The use of directed questioning during the patient evaluation significantly increases the physician's ability to identify patients with prostate cancer using UMTs.


“For men, difficulties in the second chakra area usually occur in the prostate gland. Often middle-aged men will experience swelling of the prostate, which doesn't cause pain but results in excessive urination due to the pressure on the bladder. Compression in postures such as the Hero, Cobra, Child, Yoga Mudra and Locust can flush out the prostate, bring in fresh blood and prana and improve tone. Some men have found that doing the Hero a few times a day cuts down their nightly trips to the bathroom. If the prostate is inflamed and painful (prostatitis), the same rule as with the female organs applies: Don't overcompress. Men who have inflamed prostates should avoid postures that press down into the pelvis and they should go only halfway into less compressing postures; i.e., the Sphinx instead of the Cobra and the half rather than full Locust.

“Pranayama can also be practiced in conjuction with the postures. *Kapalabhati* is an excellent practice for moving energy into the pelvis and is especially helpful for prostate enlargement . . . For inflammatory conditions, like . . . prostatitis, *dirgha pranayama* or *ujjayi* breath can help cool and relax the area.

“Relaxation is essential for all these conditions. If a student comes into class with a tense or competitive attitude and forgets to breathe deeply, the added stress will actually cause more congestion in the pelvis and aggravate the condition. Remind your students to breathe deeply, relax into the postures and allow the body to let go. On a deeper level, diseases of the pelvic area are often related to blocks or tension in the second chakra, which can be connected to sensual or sexual issues and passion for life in general. This is also the area that carries our deepest emotions, including pain and grief. If you do postures in class that activate the second chakra, you may find that students, especially those with imbalances in the pelvic area, will experience those feelings emerging. Encourage them to allow the release to happen, and suggest they come into Child or Puppy Stretch afterward to relax and integrate.”

Monro, Dr. Robin, Dr. R. Nagarathna, and Dr. H. R. Nagendra. Male reproductive disorders [which includes enlarged prostate gland]. In Dr. Robin Monro, Dr. R. Nagarathna, and Dr. H. R. Nagendra, *Yoga for Common Ailments*. New York: Simon & Schuster, 1990, p. 81.

**Noonan, David, and Karen Springen.** The prostate plan: Freshng findings suggest that changes in diet and lifestyle may slow prostate cancer. If the results hold up, surgery and radiation won’t be the main choices.

On Dr. Dean Ornish’s program combining a vegan diet of fruits, vegetables, whole grains, and beans (with soy products instead of dairy, and just 10 percent fat), no alcohol, three hours of aerobic exercise a week, an hour of meditation and other stress-management techniques daily (including yogasana), and weekly participation in a support group.

After the first three months, patients in the study showed an average 6.5 percent decrease in their PSA (prostate-specific antigen) level. Among those patient who adhered closest to the programs guidelines, the average drop in PSA was 9 percent.

One participant in the program, for example, has lost 50 pounds, is fitter than he’s ever been and even enjoys meditation and support-group sessions, things he once considered “a joke.” He says that best of all he has lost his fear.

These preliminary findings were presented at the Scientific Conference on Complementary, Alternative and Integrative Therapies at Harvard, 13-14 Apr 2002.

**Ranade, Dr. Subhash, and Dr. Mrs. Sunanda Ranade.** Prostate. In Dr. Subhash Ranade and Dr. Mrs. Sunanda Ranade. *Ayurveda and Yoga Therapy.* Pune, India: Anmol Prakashan, 1995, p. 107.


Abstract: Hatha Yoga (often referred to as “yoga”) is an ancient type of physical and mental exercise that has been used as a therapeutic modality in traditional Indian medicine for centuries. Yoga as a complementary modality in Western medicine is more recent and continues to grow. Chronic urologic disorders are often difficult to diagnose because their presentation mimics other medical conditions and are often a diagnosis of exclusion. Treatment is also frustrating because the more traditional treatments are often unsuccessful in managing chronic disorders. Health care practitioners are often forced to look elsewhere for other modalities to provide pain relief and improve quality of life. Hatha Yoga is one of these modalities which has been extremely useful to many patients in reducing the suffering seen with chronic urologic conditions such as: prostatodynia, chronic orchitis, chronic epididymitis, vulvodynia, interstitial cystitis, etc.


Of Related Interest


“UCLA scientists report that 11 days of daily exercise and a low-fat, high-fiber diet induce prostate cancer cells to die.

“The research, published in the new issue of the journal Cancer Causes and Control, is the first to show that diet and exercise can kill prostate cancer cells.”

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Has conducted a pilot study on the effects of Sudarshan Kriya® on prostate cancer. Data analysis was underway as of November 2000. Offers The Art of Living Course for Cancer Survivors. See description online at http://www.artofliving.org/c-special_cancer.htm.

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The programs for reversing heart disease and treating prostate cancer incorporate asana and meditation.

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Inpatient and outpatient Yoga therapy with prostate cancer patients.