

Mentor's Corner: Q&A

by Robin Rothenberg

I am wondering about what asanas to offer a student who lives with severe neuropathy in the feet. He cannot completely feel his feet on the ground and has tingling and pain in them. We have worked with massaging the feet as well as most standing poses. Do you have anything else to suggest?

—Tolisa Mize Horning, Bay Village, Ohio

Dear Tolisa,

Sometimes as yoga therapists we play an integral part in helping to heal the condition a person is suffering from, and sometimes our role is more about supporting the person and helping them to cope with their condition. I'd like to suggest that peripheral neuropathy (PN) is one of those conditions where our job is more about tending to the person than directly "treating" the condition. PN can stem from an array of causes: structural, autoimmune, uncontrolled Type 2 diabetes, or idiopathic (meaning the cause is unknown). Since you didn't specify the cause, I'll address it in a more general way. First, understand the acuteness of the kind of electric, stabbing, burning pain of PN creates a big stressor on the nervous system over time. So, I tend to work with these clients as with all my chronic pain clients, developing a *langhana* practice, calming and cooling, using the exhalation breath to calm the nervous system and quiet the stress reaction in the body. This will help to subdue the pain. Relaxation techniques such as restorative postures and guided meditation can be useful as well. I have found that non-weightbearing work is often more effective in relieving pain and numbness than is standing. I position my clients either sitting or in a supported *savasana* with feet on a chair and work with micro-movements of the toes and feet to increase proprioception. Studies have shown that increasing proprioception decreases pain. Sometimes simply visualizing movement of the affected areas and the feet bathed in cool water or fanned can help alleviate symptoms. It's also important to shift your client's focus more globally to the other parts of the body to keep the attention from getting hyper-focused on the pain. Adaptive *asana* practice can effectively do this, as can yoga nidra, which works directly on the mind-body connection. This helps to move the *prana* (life force) in an overall way and aids in releasing identification with the condition. Some of my clients with PN have found relief with magnetic inserts in their shoes, or with acupuncture. A colleague recommends cold laser treatments to her clients with PN with good success. There may be other adjunct therapies that can help. This list is not intended to be exhaustive and it's important to remember that what works for one person may not for another. As a practitioner, stay flexible and open to options.

I am a yoga teacher with sciatica pain for many months stemming from compression in my lower back. I practice an alignment-orientated style of hatha yoga, and it is embarrassing to be in pain for so long. The typical piriformis stretches are not helpful and I can't tell if hamstring stretches help or hinder. I have been focusing on strengthening in the core, but nothing seems to help. Am I doing more harm than good?

—Christine Apter, Boca Raton, Florida

Dear Christine,

First, I want to thank you for your honesty in acknowledging that you have lower back pain and that you are not sure whether your yoga practice is helping or harming. That's a brave thing to admit, and I can assure you that you are not alone in this experience. I have counseled many yoga teachers over the years with similar concerns and have dealt with this issue myself. The reality is, sometimes our yoga practice does indeed make matters worse, so it's important to pinpoint the cause of the discomfort and then assess our practice accordingly. As a yoga therapist, I am not in a position to diagnose. If you haven't already had a professional (such as a chiropractor or orthopedic doc) look at your back and give you clear ideas about where your sciatica is originating from, I'd recommend you start there. There are

multiple reasons why a person can have sciatic-like discomfort: lumbar disc compression, SI (sacro-iliac) hyper-mobility, pelvic displacement, weak and or tight rotators or IT band, or some combination of the above. The ways to work with these conditions are not necessarily interchangeable, so having a clear starting point helps tremendously. That said, given that you're a yoga practitioner and what you've shared about stretching not helping, I suspect that it could be related to the SI joint, one of the most common areas of injury in the world of yoga. The thick band of ligaments that attach the sacrum and the ilium are intended to hold the pelvis in alignment while allowing for some freedom in movement. However, repetitive asymmetrical movements and overstretching can cause a strain or sprain (tear) in this ligament and destabilize the pelvis, resulting in chronic one-sided pain low down, often radiating into the buttock area. If this sounds like you, here's what I would suggest:

- Start by removing all asymmetrical postures from your practice, including sitting in a cross-legged position.
- Stop stretching and think strength. More stretching will lead to more instability. Use a block between your thighs to strengthen your adductors and work with postures like *utkatasana* (powerful pose), with the pelvic floor and transverse abdominus strongly engaged.
- Use variations of modified *shalabhasana* (locust) and bridge pose to strengthen your adductors, hamstrings, abductors, and gluteus muscles.
- Work in side-lying position with "baby clamshells" (see Figures 1 and 2)—a physical therapy move that can be yoga-fied by working very slowly, and mindfully, with the breath. This move strengthens the hip rotator and IT-band area very effectively.



Figure 1



Figure 2

- Stretch spine and hips lightly after you've strengthened—always with good support of the pelvic floor and transverse abdominals (part of the core). No twists; keep the pelvis symmetrical.
- Learn how to strengthen your multifidi and engage them in all your extension and backbending postures.
- Practice *savasana* (resting pose) with a belt around your thighs and your legs on a chair, keeping your thighs parallel, but with the belt loose enough to allow them to relax.
- Observe your everyday stance multiple times a day, noting if your feet are misaligned, and bring them into alignment.

If you find these suggestions make a difference, it's likely an SI issue, and working with a qualified professional can help to set your sacrum correctly while you're retraining the muscles. Myofascial release work can be useful in working with the connective tissue around the pelvic girdle.

Once things have settled, you can piece out specific muscles like the quadratus lumborum, psoas, and piriformis that may be tighter on one side and contribute to the underlying imbalance. **YTT**



Robin Rothenberg is an internationally recognized yoga therapist, teaching in hospitals and clinics in the Seattle area. She offers an RYT-500 teacher training and comprehensive yoga therapist training for experienced teachers. Robin is the author of The Essential Low Back Program: Relieve Pain & Restore Health, and Soothing the Spirit: Yoga Nidra to Reduce Anxiety (CD).