

## Original Research

# Effect of Bhramari Pranayama and Yoga Nidra on cardiovascular hyper-reactivity to cold pressor test

Ritu Bajpai, Chanda Rajak, Sanjeev Rampalliwar

Department of Physiology, Shyam Shah Medical College, Rewa, Madhya Pradesh, India

## ABSTRACT

**Aim:** The aim of this study was to investigate whether regular practice of Bhramari Pranayama and Yoga Nidra for 3 months can reduce cardiovascular hyper-reactivity to the cold pressor test in young healthy medical students.

**Background:** A number of studies support the beneficial effect of Bhramari Pranayama and Yoga Nidra in hypertension. No study has been done to evaluate combined effect of pranayama and meditation in hyper-reactors to cold pressor test.

**Materials and Methods:** A total of 94 young medical students were selected who performed Bhramari Pranayama and Yoga Nidra for duration of 3 months. Cold pressor test was done on each student before and after yoga. **Results:** There was 79% reduction in hyper-reactivity to cold pressor test as number of hyper-reactors reduced from 32 before the study to 7 after 3 months of yoga. Systolic rise of blood pressure to cold pressor test reduced from  $20.1 \pm 3.5$  mm Hg to  $15.2 \pm 3.7$  mm Hg ( $P < 0.001$ ) and diastolic rise reduced from  $13.81 \pm 3.4$  mm Hg to  $10.37 \pm 2.62$  mm Hg ( $P < 0.001$ ) in hyper-reactors. Mean systolic blood pressure in all the 94 subjects reduced from  $119.87 \pm 12.01$  mm Hg to  $117.68 \pm 11.89$  mm Hg whereas mean diastolic blood pressure reduced from  $77.08 \pm 9.3$  mm Hg to  $75.11 \pm 9.07$  mm Hg ( $P < 0.001$ ). **Conclusion:** Bhramari Pranayama and Yoga Nidra together can significantly alleviate stress induced changes in cardiovascular parameters.

**Keywords:** Bhramari, Cold pressor test, Hyper-reactors, Yoga Nidra

## INTRODUCTION

Stress-induced hypertension is a major cause of cardiovascular mortality and morbidity in modern times. World Health Organization (WHO) global burden of disease survey estimates that stress-related disorders, will be the second leading cause of disability by the year 2020.<sup>1</sup>

Yoga is one of the most precious inheritances of Indian civilization. There is evident literature support on the beneficial effect of pranayama. Studies show that Bhramari Pranayama induces parasympathetic dominance on the cardiovascular system reducing systolic and diastolic pressures and heart rate.<sup>2</sup>

Yoga Nidra is probably the best known technique to induce complete physical, mental, and emotional relaxation.<sup>3</sup> Very few studies have been done on combined effect of pranayama with meditation on blood pressure<sup>4</sup> and none by performing cold pressor test and seeing effect on hyper-reactors. Our study does the same.

## MATERIALS AND METHODS

The present study was carried out in the Department of Physiology, Shyam Shah Medical College Rewa (Madhya Pradesh), India. Total 94 medical students aged 17-27 years participated in the study after obtaining clearance from an ethical committee of the institute and after taking written informed consent. They performed Bhramari Pranayama and Yoga Nidra under expert supervision for the duration of 3 months. Each subject served as its own control. Subjects excluded from the study were those suffering from respiratory or cardiac diseases or those on some sort of respiratory medication. Cold pressor test was done before and after yoga, and systolic and diastolic hyper-reactivity of blood pressure measured. Statistical analysis was done by MS Excel 2010 software.

## RESULTS

Of 94 students, 32 (18 females and 14 males) were found to be hyper-reactors to cold pressor test before

### Corresponding Author:

Dr. Ritu Bajpai, Department of Physiology, Shyam Shah Medical College, Rewa, Madhya Pradesh, India. E-mail: dramitharitwal@yahoo.com

© 2015 International Journal of Medical Science Research and Practice available on [www.ijmsrp.com](http://www.ijmsrp.com)

yoga. Most of the students were systolic hyper-reactors (Table 1).

Systolic rise of blood pressure to cold pressor test and diastolic rise was measured in all the subjects. Mean systolic and diastolic blood pressure in all the 94 subjects was also measured (Table 2).

There was 79% reduction in hyper-reactivity to cold pressor test as number of hyper-reactors reduced from 32 before the study to 7 after 3 months of yoga (Table 3).

**Table 1: Distribution of hyper-reactors as systolic/diastolic before Yoga**

Category	Number and percentage	Male subjects (14)	Female subjects (18)	Total subjects (32)
Systolic hyper-reactors	Number	8	9	17
Hyper-reactors	Percentage	25	28	53
Diastolic hyper-reactors	Number	4	4	8
Hyper-reactors	Percentage	12.5	12.5	25
Hyper-reactors to both	Number	2	5	7
Hyper-reactors to both	Percentage	6.4	15.6	22

**Table 2: Basal blood pressure and effect of cold stress on basal blood pressure with their mean value and standard deviation**

Subjects	BP	Basal BP (mmHg)		Rise in BP due to cold stress (mmHg)	
		Mean value	SD	Mean value	SD
All Subjects	Systolic	119.87	6.01	13	5.86
	Diastolic	77.08	4.65	9.29	4.35
Hypo-reactors (62)	Systolic	121.29	6.202	9.39	2.796
	Diastolic	78.58	4.29	6.97	2.584
Hyper-reactors (32)	Systolic	117.125	4.47	20.125	3.533
	Diastolic	74.187	3.88	13.812	3.441
Systolic hyper-reactors (17)	Systolic	117.33	4.46	21.83	1.724
	Diastolic	74.08	3.89	12.833	3.411
Diastolic hyper-reactors (8)	Systolic	116	4.32	18.93	4.725
	Diastolic	74	3.65	16.8	0.98
Both systolic and diastolic hyper-reactors (7)	Systolic	115.43	4.101	23.43	1.761
	Diastolic	73.43	3.332	16.857	0.9897

BP: Blood pressure, SD: Standard deviation

**Table 3: Change in hyper-reactivity to cold pressor test after 3 months of Yoga**

Category	Hyper-reactors to CPT before Yoga	Subjects became hypo-reactors after Yoga	Subjects remained hyper-reactors after Yoga	Hyper-reactors to CPT before Yoga
All hyper-reactors	No. of subjects	32	25	07
	Percentage	34	26.6	7.4
Systolic hyper-reactors	No. of subjects	17	13	04
	Percentage	18	13.8	4.2
Diastolic hyper-reactors	No. of subjects	08	06	02
	Percentage	8.5	6.4	2.1
Hyper-reactor to both	No. of subjects	07	06	01
	Percentage	7.4	6.4	1

Systolic rise of blood pressure to cold pressor test reduced from  $20.1 \pm 3.5$  mm Hg to  $15.2 \pm 3.7$  mm Hg and diastolic rise reduced from  $13.81 \pm 3.4$  mm Hg to  $10.37 \pm 2.62$  mm Hg in hyper-reactors.

Mean systolic blood pressure in all the 94 subjects reduced from  $119.87 \pm 12.01$  mm Hg to  $117.68 \pm 11.89$  mm Hg whereas mean diastolic blood pressure reduced from  $77.08 \pm 9.3$  mm Hg to  $75.11 \pm 9.07$  mm Hg. The difference in the mean values of all the above parameters was found to be statistically significant with a  $P < 0.001$  (Table 4).

## DISCUSSION

Our study found that hyper-reactivity to the cold pressor test reduced by doing regular Bhramari Pranayama and Yoga Nidra for 3 months. Furthermore, there was a reduction in mean systolic and diastolic blood pressure which was statistically significant. The reason for this can be parasympathetic dominance on autonomic activity which has been given in numerous studies.

Many studies have showed a beneficial effect of pranayama on blood pressure.<sup>4-6</sup> Pal *et al.* have explained this is due to increased parasympathetic activity.<sup>7</sup> Pramanik *et al.* found in male volunteers systolic blood pressure decreased from 116 mm Hg to 111 mm Hg and in female counterpart systolic blood pressure decreased from 109 mm Hg to 104 mm Hg following Bhramari Pranayama.<sup>2</sup>

Deepa *et al.*<sup>3</sup> showed a significant reduction of supine systolic blood pressure from  $(151.33 \pm 14.1)$  mm of Hg to  $(132.4 \pm 18.1)$  mm of Hg. The supine diastolic pressure showed decrease after Yoga Nidra practice from  $(90.67 \pm 9.0)$  mm of Hg to  $(76.93 \pm 9.6)$  mm of Hg. Their study found that in Yoga Nidra an attempt is made to activate the parasympathetic system, and slowly a new balance between the sympathetic and parasympathetic systems is achieved by inducing complete physical, emotional and mental relaxation. In their study one patient in the study group, the electrocardiogram showed improvement in left ventricular function following a significant reduction in systemic blood pressure. The decreased systolic pressure can be attributed to the relaxation of mind produced as a result of Yoga Nidra, which reduces stress and discharge of sympathetic nervous system. A decrease in diastolic pressure is most likely to be due to relaxation techniques that the patient has gradually learnt which finally resulted in peripheral vasodilation.

**Table 4: Changes in BP in mm Hg during cold pressor test in hyper-reactors before and after 3 months Yoga**

Parameters	Before Yoga		After 3 months of Yoga	
	Mean value	SD	Mean value	SD
BP (mm Hg)				
Basal BP				
Systolic	117.12	4.470	114.18	4.103
Diastolic	74.18	3.884	71.37	2.570
BP after hand dip in 4°C water for 1 min.				
Systolic	137.12	5.383	129.5	5.172
Diastolic	87.69	3.909	81.75	3.562
Rise in BP				
Systolic	20.125	3.533	15.19	3.669
Diastolic	13.812	3.441	10.375	2.619

BP: Blood pressure, SD: Standard deviation

Meditation ensures better peripheral circulation was reported by Bhargava *et al.*<sup>8</sup> and blood flow to the tissues reported by Gopal *et al.*<sup>9</sup>

Several EEG studies have shown sleep like changes during meditation with increased alpha activity in the beginning and theta activity towards the end of meditation practice.<sup>10-12</sup>

Recent EEG studies on Yoga Nidra showed similar results with alpha wave patterns with theta wave patterns occurring at later stages.<sup>13</sup> Alpha rhythm in meditation and Yoga Nidra is an expected finding under these circumstances. But the appearance of theta waves may indicate deep cortex induced relaxation in an awakened subject.

Harinath *et al.*<sup>14</sup> have shown a positive effect of hatha yoga and meditation together on cardio-respiratory performance. Our study is the first to show a beneficial effect of pranayama and meditation when practiced together on cardiovascular hyperreactivity to stress.

## CONCLUSION

We can conclude that Bhramari Pranayama and Yoga Nidra if practiced together can significantly alleviate the stress induced changes in cardio-respiratory parameters. Yoga is an easy and cost effective way to reduce damaging effects of stress and if incorporated in our lifestyle yoga can reward us with a long, healthy and disease-free life.

## ACKNOWLEDGMENTS

Department of Physiology, Shyam Shah Medical College, Rewa.

## PEER REVIEW

Not commissioned. Externally peer reviewed.

## CONFLICTS OF INTEREST

Nil

## FUNDING

Nil

## REFERENCES

1. Murray CJ, Lopez AD. The Global Burden of Disease: A Comprehensive Assessment of Mortality and Disability from Diseases, Injuries and Risk Factors in 1990 and Projected to 2020. Report on Behalf of the WHO and World Bank. Cambridge: Harvard University Press; 1996.
2. Pramanik T, Pudasaini B, Prajapati R. Immediate effect of a slow pace breathing exercise Bhramari pranayama on blood pressure and heart rate. Nepal Med Coll J 2010;12:154-7.
3. Deepa T, Sethu G, Thirrunavukkarasu N. Effect of yoga and meditation on mild to moderate essential hypertensives. J Clin Diagn Res 2012;6:21-6.
4. Malik S, Shah M, Hasan S, Bilal M. The physiological responses of yogic breathing techniques: A case-control study. J Exerc Physiol Online 2011;14:74-9.
5. Rampalliwar S, Rajak C, Arjariya R, Poonia M, Bajpai R. The effect of Bhramari pranayama on pregnant women having cardiovascular hyper-reactivity to cold pressor test. Natl J Physiol Pharm Pharmacol 2013;3:137-41.
6. Singh S, Gaurav V, Parkash V. Effects of a 6-week nadi-shodhana pranayama training on cardio-pulmonary parameters. J Phys Educ Sports Manage 2011;2:44-7.
7. Pal GK, Velkumary S, Madanmohan. Effect of short-term practice of breathing exercises on autonomic functions in normal human volunteers. Indian J Med Res 2004;120:115-21.
8. Bhargava R, Gogate MG, Mascarenhas JF. Autonomic responses to breath holding and its variations following pranayama. Indian J Physiol Pharmacol 1988;32:257-64.
9. Gopal KS, Bhatnagar OP, Subramanian N, Nishith SD. Effect of yogasanas and pranayamas on blood pressure, pulse rate and some respiratory functions. Indian J Physiol Pharmacol 1973;17:273-6.
10. Anand B, Chhina GS, Singh B. Some aspects of electroencephalographic studies in yogis. Electroencephalogr Clin Neurophysiol 1961;13:452-6.
11. Wallace KW, Benson H. The physiology of meditation. Sci Am 1972;226:84-6.
12. Younger J, Adriance W, Berger RJ. Sleep during transcendental meditation. Percept Mot Skills 1975;40:953-4.
13. Lou HC, Kjaer TW, Friberg L, Wildschiodtz G, Holm S, Nowak M. A 15O-H2O PET study of meditation and the resting state of normal consciousness. Hum Brain Mapp 1999;7:98-105.
14. Harinath K, Malhotra AS, Pal K, Prasad R, Kumar R, Kain TC, *et al.* Effects of hatha yoga and omkar meditation on cardiorespiratory performance, psychologic profile, and melatonin secretion. J Altern Complement Med 2004;10:261-8.

**How to cite this article:** Bajpai R, Rajak C, Rampalliwar S. Effect of Bhramari Pranayama and Yoga Nidra on cardiovascular hyper-reactivity to cold pressor test. Inter J Medical Sci Res Prac 2015;2(1):24-26.

**Received:** 03 Oct 2014; **Accepted:** 25 Nov 2014; **Published:** 31 Mar 2015