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Yoga in cancer caregivers: A way towards wellbeing

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Abstract

Cancer is one of the most leading cause of morbidity and mortality globally. As the prevalence of cancer increases, higher number of patients will have to depend on caregiver for the support. Increase in cancer patient symptom burden leads to poor quality of life and it needs additional support and care from the caregivers. Care giving is physical and emotional situation and caregivers shows clinical levels of depression, anxiety, fatigue and sleep disturbances as similar to the cancer patient. Hence cancer has its effect not only the quality of life of the patient with disease but also the family members close to them. Yoga which has shown physical and mental health benefits, for example: stress reduction, improved mood, balance, strength is a form of Physical Activity (PA) which can be one of the useful measures for the caregivers. Studies conducted on effectiveness of yoga on cancer caregivers have shown positive results in decreasing psychological distress and improving quality of life. The research conducted on impact of yoga in cancer caregivers are in limited numbers. Hence more research has to be conducted with randomized control trail, large sample size and longer duration to find the more accurate result.

Keywords: Yoga, cancer caregivers, wellbeing, psychological distress, quality of life, physical activity

Introduction

Cancer is one of the most common causes of morbidity and mortality, with approximately 14 million new cases and nearly 9 million cancer deaths annually worldwide. Psychosocial and biomedical sequelae of cancer and its treatment include psychological distress (eg, depression, anxiety, fear of recurrence), fatigue, sleep disturbance, pain, nausea/vomiting, cognitive difficulties, immunosuppression, and cardiotoxicity ^[1] The acute and long-term effects of a cancer diagnosis extend beyond the patient with cancer to social network members, including spouses or partners, immediate family members, and friends. As the prevalence of cancer increases, a greater amount of patients will need to rely on informal caregivers for support from diagnosis into survivorship ^[2]. In the United States, caregivers caring for patients with cancer are a fundamental source of cancer care. There are at least 2.8 million informal caregivers in the US, who provide care to patients with a primary diagnosis of cancer (National Alliance for Caregiving, 2016) ^[3].

Poor quality of life of patients is directly linked to symptom burdens. It also requires additional care and support from family caregivers. For example, rates of psychological distress are high in cancer caregivers ^[4]. Similarly Cancer affects not only the quality of life (QOL) of individuals with the disease but also that of their family members and close friends ^[5].

Cancer Caregiver and quality of life

Quality of life (QOL) has been found to be complex concept which is studied widely by psychologists, social scientists and healthcare professionals. QOL, as defined by multiple studies should be taken as a multidimensional concept and should be assessed in terms of physical, psychological, social, economic, and spiritual well-being ^[6].

Caregiving is emotional and physical phenomenon and family caregivers shows clinical levels of anxiety, depression, sleep disturbances, and fatigue at similar to patient ^[7]. Low overall QOL was found in caregivers while patients were receiving radiation, bone marrow transplantation, and hospice care ^[6]. When caring for the physical and psychological need of a cancer survivor, caregiver often go through psychological distress which is greater than or equal to the distress experienced by the cancer survivors. If the psychosocial needs of the caregivers are not met it results in poorer mental health and quality of life (QOL) ^[2].

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Cancer Caregiver and psychological distress

Globally, more than 350 million people suffer from depression with approximately 4.7% of the world population. Depression is seen to be the leading cause of disability worldwide, and is a major contributor to the global burden of disease. Similarly prevalence of anxiety disorders is estimated to be 7.3% of the world population^[8].

Caregiver often go through psychological distress (PD) because of patient's long-term hospital stay, poor knowledge about illness, illiteracy, and poverty. Some of the studies suggest that impact of caregiving for someone with illness brings the risks of mental ill health to the carer which is in the form of emotional stress, depressive symptoms, or clinical depression^[9].

Cancer Caregivers are a group which needs more of attention, research, and interventions focusing on their unique healthcare needs such as psychological and emotional distress, personal care or medical issues and unmet activity needs. Maintaining or improving QOL and reducing the psychological distress of caregivers is important not only for caregivers' health, but also for the caregivers' ability to provide optimal care, reduce the burden on the healthcare system, and improve the outcomes of patients with cancer and survivors^[2].

Yoga for improving quality of life and psychological distress

Yoga is a mind-body movement practice with a focus on yoga asanas or physical postures, pranayama or controlled breathing, relaxation, and meditation. Yoga falls under the category of mind and body complementary health approaches according to the National Center for Complementary and Integrative Health and can either be practiced alone or in a group setting^[10].

Yoga, with its growing popularity and physical and mental health benefits (e.g., stress reduction, improved mood, balance, strength), is a form of Physical Activity (PA) that may be a useful intervention for caregivers.

The study conducted by Keats shows that a six-week Vinyasa yoga (VY) program on cancer care giver was effective. Significant improvements were found in the mental component score of overall QOL and in overall psychological distress^[2].

Hatha yoga is also one of the CAM technique in which the evidence is beginning to build. It is becoming increasingly popular in Western culture particularly as a tool for stress reduction and improving physical fitness. Hatha yoga uses a combination of asanas (postures), pranayamas (breathing) and dhyana (meditation). The study showed that 8-week Hatha yoga program showed lower body strength increased significantly for those in the yoga group (caregiver) and other notable trends occurred in terms of coping, upper body strength and aerobic endurance^[11].

The study also shows that Participants (patients and caregivers) when offered any three meditation group classes - Power of Breath (PB), Sacred Sounds (SS), and Movement & Breath (MB), there was clinically significant reduction/improvement in GDS (Global Distress Scale) scores and in individual symptoms of well-being, fatigue, anxiety, and shortness of breath^[12].

The manualized yoga program developed in collaboration with Swami Vivekananda Yoga Anusandhana Samsthana which consists of four main components like joint loosening with breath synchronization, postures (asanas) including

partner-poses followed by relaxation techniques, breath energization (pranayama) with sound resonance and guided imagery/meditation focusing on dyadic concepts (eg, love, acceptance) helped in marginally clinically significant improvements in SF-36 vitality and role performance of caregiver^[13].

The study showed that with Vivekananda Yoga program which consists of a combination of a set of asanas, pranayama, meditation, and yogic relaxation which are based on principles of stimulation and relaxation taken from ancient Indian texts called Upanishads, there were clinically significant reductions in patient sleep disturbances and improvements in patient and caregiver mental QOL.⁷ Similarly in another study using Vivekananda Yoga Program there was significant increase in patients' mental health and a significant decrease in caregivers' sleep disturbances^[14].

Similarly in the study where Tibetan yoga program was conducted, after the TYC program, caregivers reported significantly less fatigue and anxiety compared with baseline ratings (large effects) and marginally significantly less sleep disturbances^[15].

The study used the manualized yoga program developed in collaboration with Swami Vivekananda Yoga Anusandhana Samsthana and it revealed that the use of yoga techniques helped cancer patient and caregiver cope with the stress of their negative experience and served as a form of social support allowing patients to connect with their loved ones^[16].

Viniyoga was implemented for six weeks in one of the study. Each individualized yoga practice specified appropriate physical postures and movement; breathing exercises; relaxation; mindfulness and meditation; and other aspects of yoga practice such as cultivation of positive values, thoughts and attitudes, and lifestyle factors. Some components were recommended for reducing both depression and anxiety, some were recommended to include or avoid specifically for depression or anxiety. The result showed that there were statistically significant differences between yoga and control group on reduction of depression score. Statistically significant differences in favor of yoga were also found on total DASS, K10, SF12, mental health, SPANE, FS, and resilience scores^[8].

In the study that investigated the effects of 8- and 16-week gym yoga on stress and psychological health among employees, significant reductions in stress and all psychological health measures were found within the Yoga group over 16 weeks. When compared to the control group, yoga practitioners showed significant decreases in stress, anxiety, and general psychological health, and significant increases in well-being^[17].

Shambhavi Mahamudrakriya, which is a yogic practice that includes both deep breathing and meditation techniques was implemented in the study. Participants were instructed to practice the kriya each day for 21 minutes. After 6 weeks of daily practice, participants reported subjectively lower levels of perceived stress (Perceived Stress Scale) and higher levels of general well-being (General Well-Being Scale) compared to baseline^[18].

In the another study Caregivers' yoga module (CYM) consisting of satsanga (theory), asanas (postures), pranayama (breath control), imagery, meditation, and relaxation techniques was taught to those in the experimental group at 35 m/d for eight consecutive days and

were encouraged to continue on their own for another 3 weeks. The result showed that there was statistically significant reduction of psychological distress and improvement of mental wellbeing among caregivers of Patients Admitted to Neurological Rehabilitation Wards ^[9].

The study was conducted to examine the effect of a short-term Iyengar yoga course on mood in mildly depressed young adults. Subjects in yoga group attended two 1-hour Iyengar yoga classes each week for 5 consecutive weeks. The class emphasized yoga postures thought to alleviate depression, particularly back bends, standing poses and inversions. Subjects who participated in yoga courses demonstrated significant decrease in self-reported symptoms of depression and trait anxiety ^[19].

Similarly, Siddha Samadhi Yoga was implemented in another study. It is a program in which meditation is associated with pranayama (breathing exercises). 22 volunteers with anxiety complaints were assigned to two groups: 13 attended the yoga group, and 8 attended a waiting-list or control group and were evaluated before the

intervention and 1 month after it on the State-Trait Anxiety Inventory, the Beck Depression Inventory, Tension Feelings Self-evaluation Scales, and the Well-being Self-evaluation Scales. The result showed significant reduction in scores on anxiety, depression, and tension in yoga group, as well as an increase in well-being in comparison with the control group ^[20].

In one of the study, yoga was programmed for cancer patient. Yoga classes started with a relaxation and a short conversation about the participants' mental and physical condition. Afterward, several exercises of gentle Hatha Yoga, inspired by John Kabat-Zinn was implemented. The exercises were then followed by a meditation at the end of the session. The result showed that six months after the end of yoga therapy, symptoms of anxiety, depression, and fatigue were significantly reduced compared with baseline.²¹ DruYoga, once a week yoga sessions for 12 weeks was carried out for women with breast cancer. The result showed that Depressive symptoms were significantly lower with yoga at 3 months ^[22].

Table 1: Effect of yoga in cancer caregivers

Study, sample size, design	Population, Setting	Type of yoga, Duration	Outcome
Liao <i>et al.</i> N= 26 Pilot RCT ^[13]	Caregiver of patient undergoing thoracic radiotherapy Country: USA	yoga program developed in collaboration with Swami Vivekananda Yoga Anusandhana Samsthana. It consisted of four main components: joint loosening with breath synchronization, postures (asanas) including partner-poses followed by relaxation techniques, breath energization (pranayama) with sound resonance and guided imagery/meditation focusing on dyadic concepts (eg, love, acceptance) Duration: 2-3 times per week for a total of 6 weeks; 60 minutes per session	The results revealed that the trial was feasible. Regarding QOL, effect sizes for caregivers ranged from small to medium, with marginal clinically significant improvements in vitality and role performance
Lopez <i>et al.</i> N= 282 unique participants (205 patients, 77 caregivers) ^[10]	Cancer patient and caregiver Country: USA	2 yoga classes as YLow and YHigh. YLow was designed as a low- to moderate-intensity beginner/ intermediate level yoga class, which included joint loosening and breathing, asanas or physical postures, and pranayama or breath energization. YHigh included moderate- to high-intensity physical postures beyond the breathing and flexibility focus of postures taught in YLow. Both classes closed with savasana or deep relaxation. Duration: July 18, 2016, to August 8, 2017 Both classes were scheduled for 60 minutes.	Caregiver pre-post comparisons revealed clinically significant improvement for symptoms of anxiety, depression, fatigue, pain, sleep, well-being, and ESAS (Edmonton Symptom Assessment System) subscales of PHS (Physical Distress Score), PSS (Psychological Distress Score), and GDS (Global Distress Score).
Keats N= 12 informal caregivers A single-group, pre- and post-test pilot study ^[2] .	Caregivers for patients with cancer. Country: Canada	Yoga sessions included between 25-40 yoga poses derived from the VY method and were taught according to the principles of VY. Each VY session included 5-15 minutes of pranayama (i.e., breathing) exercises and meditation, 50-60 minutes of VY poses, and 4-10 minutes of savasana (i.e., a pose that calms the mind, promotes relaxation, and relieves stress and pressure from the body) Duration: twice a week for six weeks for a total of 12 sessions.	Significant improvements were found in the mental component score of overall QOL and in overall psychological distress.
Milbury <i>et al.</i> N= 20 (10 patient, 10 caregiver) ^[15]	Lung cancer patient and caregivers Country: USA	Tibetan Yoga Program. The program consists of five main components: deep breathing awareness with visualization, breath retention exercises (e.g., 4-Part Breath), mindfulness and focused attention through guided meditation, Tsa Lung movements and a brief compassion-based meditation. Duration: two to three weekly sessions (45-60 min each) over the course of 5-6 weeks.	There was 30% reduction in fatigue, 30% in sleep disturbances, and 10% in depressive symptoms.
Lopez <i>et al.</i> N= (15 Patient, 15 caregiver) Single-arm feasibility trial ^[14] .	Patient with advanced lung cancer and their family caregivers Country: USA	Vivekananda Yoga (VKC). The program consisted of 4 main components: joint loosening with breath synchronization, postures (asanas) and a deep relaxation technique, breath energization (pranayama) with sound resonance, and meditation Duration: 2 to 3 weekly sessions (60 minutes each) over the course of the 5 to 6 weeks of radiotherapy.	Significant decrease in caregivers' sleep disturbances. For caregivers, medium effects were found for improvement in physical functioning
Mahajan <i>et al.</i> N= patient 5, caregiver 5 single-arm pilot trial ^[7]	Patient with High-Grade Glioma undergoing Radiotherapy and their family caregivers Country: USA	Vivekananda Yoga. The intervention focused on breathing exercises, gentle movements, and guided meditations. The program consisted of 4 main components: joint loosening with mindfulness training, asanas with deep relaxation techniques, pranayama with sound resonance, and meditation/ guided imagery focusing on love and compassion for self and family caregiver and acceptance of change (within self, the relationship, and physical functioning). Duration: 12-session program across the course of patients' radiotherapy. 2 or 3 weekly session (60 minutes each) over the course of patients' 5 to 6 weeks of RT	Significant improvement in caregiver mental QOL.

Table 1 shows that yoga for cancer caregiver helps to improve the quality of life and psychological distress. Though most of the study conducted is pilot study and small sample size, further research can be carried out with RCT and large sample size so that the result will be more clear.

Conclusion

Few studies have sought to improve a caregiver's overall QOL and psychological distress with the use of PA or yoga.² From the above studies it shows that yoga is one of the supportive care method used to decrease the psychological distress and improve mental quality of life. The research on effectiveness of yoga on cancer caregiver is very important, more studies with randomized control trial and large sample size with longer duration has to be conducted to find out the more specific findings.

Conflict of Interest

Not available

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