

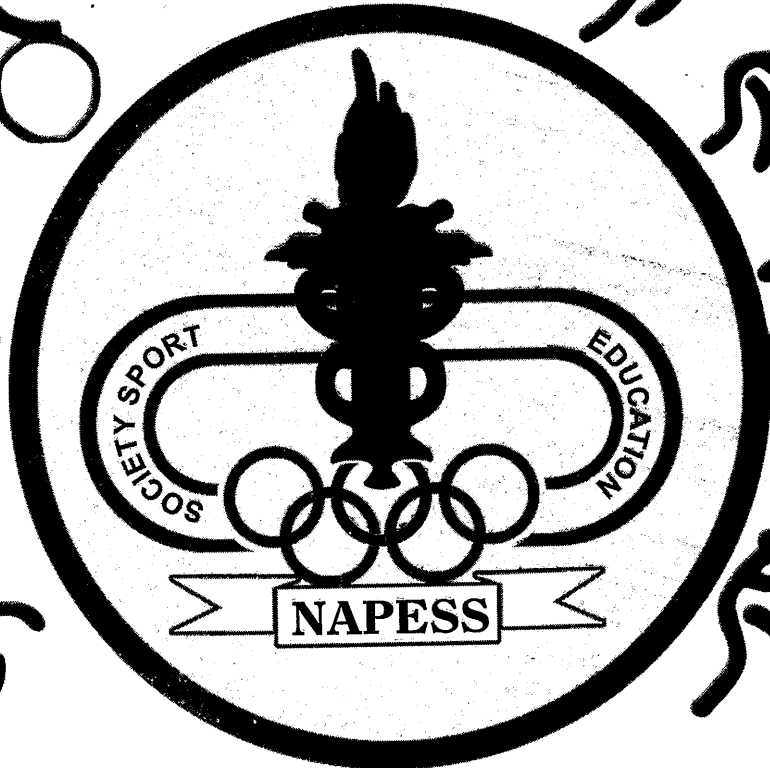
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# EFFECT OF VARIED PACKAGES OF YOGIC PRACTICES ON SELECTED PHYSIOLOGICAL AND HEMATOLOGICAL VARIABLES AMONG OBESE GIRLS

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## Abstract

*To achieve the purpose of this study, 45 obese (bmi  $30 \pm 2.5$ ) girls were selected as subjects and their age were ranged between 16 and 19 years. they were assigned into three groups, group i underwent asanas and pranayama, group ii underwent asanas and meditation and group iii acted as control. the selected subjects were measured their physiological variables [peak expiratory flow rate (pefr), systolic blood pressure (sbp) and diastolic blood pressure (dbp)] and hematological variables [haemoglobin (hb) and postprandial glucose (ppg)] the interventional period for this study were six weeks for both the experiment groups. the control group was not given any practice. Data were collected on selected variables before and after the training period, and were subjected to statistical treatment using analysis of covariance (ancova). in all the cases 0.05 level of confidence was fixed to test the significance. when the obtain 'f' ratio was significant. scheffe's post hoc test was used to find out the paired mean difference. Within the limitations set for this study, it was concluded, that both the experimental group were significantly influence the selected physiological and haematological variables than the control. However asana with pranayama practice shows better effect than the asana meditation. Hence, it was recommended that asana with pranayama practice may have better effect on obese patient in respect to bp, pefr, hb, ppg level.*

**Key words:** Obese, Asana, Pranayama, Meditation.

## INTRODUCTION

Technological advancement in modern life has induced less physical activity. At homes, people use electrical gadgets to save on hard physical labour, thereby, resulting in inactive lifestyle. Nervous tension and disturbances, improper functioning of the endocrine glands or digestive disorders also causes obesity. Indiscriminate eating without any wisdom to control leads to an invariable obesity. The fast life of modern times has caused this melody, affecting many.

## METHODOLOGY

To achieve the purpose of this study, 45 obese (BMI  $30 \pm 2.5$ ) girls were selected as subjects and their age were ranged between 16 and 19 years. They were assigned into three equal (n=15) groups, group I underwent asanas and pranayama, group II underwent asanas and meditation and group III acted as control.

**TABLE I- ANCOVA FOR SYSTOLIC BLOOD PRESSURE, DIASTOLIC BLOOD PRESSURE, PEAK EXPIRATORY FLOW, HAEMOGLOBIN AND BLOOD GLUCOSE**

Variables	Asanas pranayama group	Asanas meditation group	Control group	SV	SS	df	MS	F
Systolic blood pressure (SBP) MmHg	109.75	114.83	118.56	Between	583.16	2	291.58	28.68*
				Within	426.96	41	10.17	
Diastolic blood pressure (DBP) MmHg	81.29	90.19	91.79	Between	959.43	2	479.72	93.28*
				Within	216.41	41	5.14	
Haemoglobin (HP) grm/100ml	13.53	11.94	11.20	Between	40.36	2	20.18	94.70*
				Within	8.950	41	0.21	
Peak expiratory flow rate (PEF) L/sec	308.58	299.51	252.58	Between	26438.30	2	13219.15	37.66*
				Within	8765.4	41	351.00	
Blood glucose (BG) mgs//dl	89.91	93.78	96.78	Between	325.81	2	162.90	24.17*
				Within	276.34	41	6.74	

Table F- ratio at 0.05 level of confidence for (2) (41) = 3.21.

**Table II-MEAN DIFFERENCE BETWEEN EXPERIMENTAL GROUP AND CONTROL GROUP**

Variable	Control Vs Asanas meditation	Control Vs Asanas pranayama	Asanas meditation vs Asanas pranayama	CI
Systolic blood pressure (SBP) mmHg	3.64*	8.72*	5.08*	2.95
Diastolic blood pressure (DBP) mmHg	1.60	10.50*	8.90*	2.10
Haemoglobin (HP) Grm/100ml	1.59*	2.33*	0.79*	0.422
Peak expiratory flow rate (PEF) L/sec	9.07*	56.00*	46.93*	17.35
Blood glucose (BG) Mgs//dl	3.00*	6.87*	3.87*	2.40

## Conclusion

Within the limitations set for this study, it was concluded, that both (asana pranayama and asana meditation) the experimental group were significantly influence the selected physiological and haematological variables than the control. However asana with pranayama practice shows better effect than the asana meditation in reduce SBP, PPG and increase Hb, PEFr.

## Recommendation

*It was recommended that asana with pranayama practice may have better effect on obese patient in respect to BP, PEFr, Hb, PPG level.*

## Implication

*Asana with pranayama practice may be used as therapy to reduce or control obesity. However asana with meditation may also be given instead of asana with pranayama to reduce or control obesity.*

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