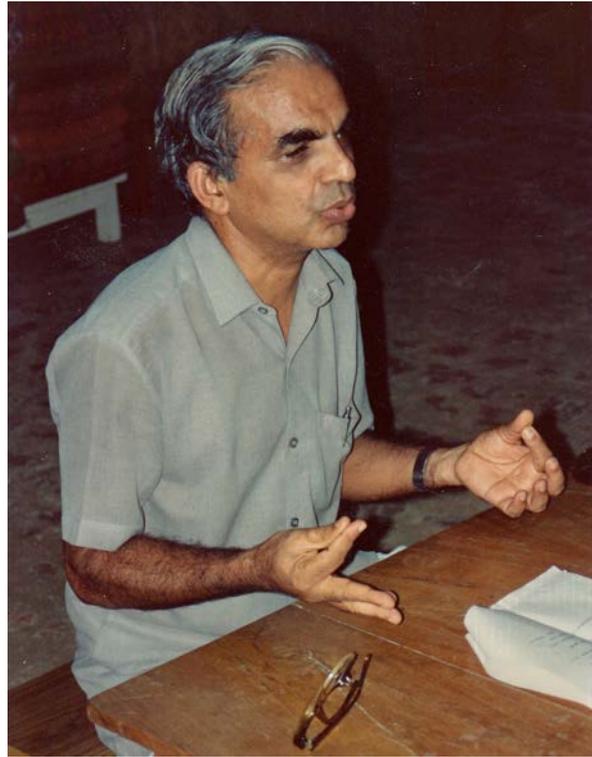


YOGA: SURGERY SANS INSTRUMENTS



Dr Uma Krishnaswamy talks to TKV Desikachar - from 'The Hindu' June 1998

Dr Uma Krishnaswamy: There is a tremendous current revival of interest in Yoga and also a public awareness about what Yoga can do. What has brought about this revival of interest?

TKV Desikachar: The revival of interest is essentially due to two factors, both of them related to the field of health. Though Yoga has an important philosophical aspect to it, its bearing upon health has an obvious appeal to the common man. Firstly eminent doctors, confronted by intractable problems like, say, asthma, have started recognising that western medicine, despite its unquestionable scientific basis, does not have all the answers. Secondly, they have started seeing the need for a more holistic view of human suffering in all its dimensions, such as are seen in other systems, especially Yoga.

Dr Uma Krishnaswamy: Yoga emphasises both the prevention of disease as well as treatment. What aspect of Yoga is of greater interest to the public? Is it the preventive aspect or the therapeutic health aspect?

TKV Desikachar: I think it is the second. Preventive health is a self-discipline and only a minority seeks Yoga as a preventive measure to prevent illness. Most people seem to seek Yoga only for therapy. But it must be remembered that the essence of Yoga is discipline. Essentially it is the discipline of the body, it is the discipline of the mind and it is also the discipline of the spirit. But prevention does not interest people even though it is of obvious importance. People get interested only when they are in trouble. So we now need to develop strategies using the salient principles of Yoga practice, so that it can be adapted to people with specific problems.

Dr Uma Krishnaswamy: When these individuals approach you, do they come because they are convinced that Yoga is going to help them or do they come because they are so desperate, that they will try any remedy?

TKV Desikachar: Desperate yes, but yet with some hope! Desperate, because as far as they are concerned, whatever they have tried has not produced the result they had expected. They perhaps wonder 'so many experts have not been able to help me, how can some ancient system of Yoga, taught by someone who does not even know human anatomy, do any good?' But, they are also hopeful because people would have told them: 'I had the same problem, I went here and there, to this doctor and that doctor but without any results. Then I went to this place and got results. You must also definitely try it, it may help you.' So you see, there is also hope.

Dr Uma Krishnaswamy: I have noticed that when you have a preliminary meeting with these patients, you tend to concentrate on a number of aspects pertaining to the individual. Am I right in saying that you are concentrating not only on the physical disability but on the person as a whole?

TKV Desikachar: Frankly Doctor, with the limited knowledge we have of the problem, we listen to the problem, we recognise the problem, but we also see that behind the problem, there is a person. So we need to understand the person and what the problem means to him. I cannot claim to understand the problem in quite the same way as a professional doctor does.

I honour the doctor's diagnosis, but what I am interested in is: 'How can I comfort this person?'

I believe Yoga is useful only if it gives comfort to the person who comes here. So the way I receive the person, the way I assure him, the way I build his self-confidence are all part of the resources that must be pressed into service to prevail over his sickness. This is what will finally decide whether this person will follow our instructions.

At the same time, we do not dismiss his symptoms. For example, if someone has back pain, we have enough common sense to know what to teach and what not to teach, even though we may not know what the actual problem is. By a series of gentle trials we check what hurts and what does not hurt, so we avoid those movements.

Dr Uma Krishnaswamy: Do you assess the breathing capacity as well in the preliminary consultation?

TKV Desikachar: The same thing applies to breathing. We will understand a person's breathing capacity and are careful to work within his or her capacity. But the main thing is to put the person at ease and give all psychological comfort and work on the same mental and emotional level and create a relationship. So, we are approaching the total person and I think when a chance is given for responding as a total person, something will happen for the better.

Dr Uma Krishnaswamy: A chance for the total person to heal himself is indeed a wonderful idea. I have had an opportunity to see a number of patients who approach you agitatedly for a preliminary session, but when they leave, they seem very calm. How is it possible to establish a rapport and put a person at ease so quickly?

TKV Desikachar: This is the basic capacity that is required of a Yoga teacher. First of all, you must like the person who comes, whoever he may be. He could be a person with a learning disability, a politician, whose political views I may not support. I think it is most important that

the person who comes here must feel 'the teacher likes me'. He should not feel threatened. For instance, when I go to a doctor, I am sometimes afraid and my blood pressure goes up! Here, we want the blood pressure to come down. So the atmosphere, the language one speaks, the time spent, all those things must make them feel that this man is not in a hurry, he has all the time for me.

Dr Uma Krishnaswamy: So once again I think you are emphasising on the essence of comfort you give to those who seek help.

TKV Desikachar: As you see doctor, there is nothing special in this place. Just a small hut with a thatched roof. I could have an airconditioned room here with beautiful decor, but surroundings alone cannot give comfort to a human being.

Dr Uma Krishnaswamy: Let us discuss this element of liking the individual who is seeking help from you. Is it true to say that this has not been emphasised enough in other systems of medicine, for instance in Western medicine?

TKV Desikachar: I have spoken to doctors about medical education in India. They say there is a lot of science, a lot of anatomy, physiology etc., but very little time is given to cultivating a warm patient-doctor relationship. I think this is an area of medical education that must be examined.

Even in terminal illness, I think a patient would want to die comfortably, peacefully and happily. A better quality of life is what one needs in life and death. To make one happy or comfortable does not cost much. When I make you happy, I too receive happiness. I do not lose anything here and therefore it is in my interest to make you comfortable and benefit mutually.

Dr Uma Krishnaswamy: When you talk to a patient about his problems you do not just offer a solution that has statistical support, you try to individualise. How important is this individualisation, particularly in view of the fact that group yoga classes are being offered everywhere?

TKV Desikachar: I will give you an example. The other day a Muslim girl who had polio came here. Her mother was in tears worrying about her future. I reflected over who was available here who could make a nice teacher for this girl. Suddenly I thought of a teacher here, who was young and had done the same University course that this girl was doing. I thought they may interact well with each other. It so happened that they were from the same school and I did not know this! So naturally, the girl had great confidence and trust in her teacher.

This is what individualisation is all about. We are not only individualising. While Yoga is for the student, individualising in respect of the teacher is also helpful. If the teacher had been somebody else, perhaps an elderly person. I would be worried that it won't work. This rapport is needed to make it work. How can I do this in a group, when each member of the group has different problems?

My father, who was also my teacher used to say that Yoga is like a surgery without instruments. Aśāstra Cikitsā. How can I do a surgery on four patients at a time? I have to not only think of the individual who is in front of me, I should also ask whether I am the right person to teach this individual. That is why we have been focussing here on developing a number of teachers, to cater for all needs.

Dr Uma Krishnaswamy: To regard Yoga as surgery without instruments is indeed a very original and unique perspective. While one sees that Yoga is not just about creating muscle strength or joint flexibility, one aspect that is always emphasised in yoga is breathing control. Why is there such tremendous emphasis on breathing?

TKV Desikachar: I will put it in a very simple way. One aspect is the relationship between the breathing and the mind. It has been said that an agitated mind is reflected in an agitated breath pattern. So will not an agitated breath pattern make the mind agitated? Quieten one and you will quieten the other. How can I quieten my agitated mind? I will have to use something that I can negotiate. This is easier with the breath than the mind. So I control the breath so that the mind gets quieter. This is the first part of the argument.

The second part is that breathing influences the human system in various ways. At least breathing influences the profile of the spine if nothing else. When I take a deep breath it stretches my spine. So in a way breath works on my body from the inside. But all these physiological aspects apart, we can say that the breath affects the body and the mind.

Dr Uma Krishnaswamy: There is, in fact, quite a lot of awareness about Prāṇāyāma. But as breath has such a profound influence on the mind, is Prāṇāyāma something that can be practised by everyone or is it something that has to be tailored to an individual need?

TKV Desikachar: When we talk about Prāṇāyāma, we are talking about regulating the breath. Regulation of breath consists of regulating the exhalation and regulation of inhalation. Apart from this, there are other aspects in Prāṇāyāma like holding the breath. Added to all these things is the conscious attitudes we bring to bear on the breathing process. When I visualise breathing as something very vital, my very life itself, the word Prāṇa signifies life. there is an aspect that borders on the spiritual, and I bring into operation one more important aspect of my personality.

All these things are variable. Somebody with good physique and fitness has a better breathing capacity, than one who is unfit. So we have got to tailor the breathing to many levels after finding out what is the right breathing pattern for a given individual. At another level is how do I relate to the breathing process. I may believe that some spiritual energy is coming through the breath when I inhale, inside me, and when I exhale, I give back to nature something that I have received with a thank you gesture. So all these things are part of Prāṇāyāma.

Dr Uma Krishnaswamy: There is a certain degree of emphasis that you place on diet. How far do you go into the dietary habits of an individual?

TKV Desikachar: Minimum. If there is too much discipline, people will not accept it. In Yoga, we have always been taught to accept the person as he or she is, including his/her liking of chocolates for example. So what we do is wherever it is absolutely required we negotiate a small sacrifice. For example, I may tell you to take all types of pickles but to avoid mango pickles. Instead of watching television for three hours I say watch for one hour, palm your eyes for a few minutes, then watch again.

All that is needed is to introduce an element of discipline in certain very important areas. Food is a very important area but a rigid discipline will not work. Many healing traditions have failed to become widely accepted because they insist too much on a strict diet. Once the importance of discipline is understood and once the person feels some beneficial change from it, I don't have to say much.

Dr Uma Krishnaswamy: There is a lot of junk food now, that children are particularly fond of and enjoy almost daily. Do you find that when you deal with children they are worse off for having subsisted on the junk food?

TKV Desikachar: It is the parents who are promoting this type of food because of a certain convenience. I am afraid the children are going to suffer much more in the future than we suffered. But what can I do here when it comes to the convenience of the family? Pizza or Cola is very popular. I will be a fool if I talk to these children about avoiding these things. No doubt they will say, "this man is very old, I think it is better if we don't talk to him".

Dr Uma Krishnaswamy: Moving on to the other aspects, the sense of mental relaxation, the sense of equilibrium is obviously quite important for health. How does yoga promote this?

TKV Desikachar: When I am agitated I tend to lose my temper more. When I have a more balanced mind I can say, "Wait a minute, I should not lose my temper". Yoga changes the attitude of the person. And the way I deal with a person in a way is like an example to others. I am not going to say "follow me", for that is dangerous. My quiet or calm behaviour may in turn be an indirect, subconscious influence coming from the relationship I had with my teacher.

Dr Uma Krishnaswamy: How do you assess the impact of Yoga on an individual? Is it something empirical or is it something that can be statistically proven?

TKV Desikachar: Both, in some cases it can be statistical like the data we have on cardio-respiratory improvement in people with such problems. These patients came here, they were in a Yoga programme and at the end of the programme certain changes were observed, which indicated that the condition was better in chemical or scientific terms. But the more important thing for me is how the person feels now compared to how he/she felt before. I think subjective improvement, that is, how I feel about myself is as important as how much improvement a scientist documents.

Dr Uma Krishnaswamy: Is subjective improvement much more valuable than an objective improvement on a day to day level?

TKV Desikachar: Even a slight headache can influence one so much. Even if it does not cure, Yoga allows the individual to accept the headache. He says, "I still have the headache Sir, but it does not trouble me much". Thus he is already healthy. Another person may have a slight headache but still, he says: "I have a headache". It is a big headache for that person. The subjective improvement is, therefore, very important.

Dr. Uma Krishnaswamy: There are some systems of medicine where the practitioners actually forbid the patients from taking help from other systems of medicine. But I have noticed that you always work in conjunction with allopathic practitioners. Is this a reflection of your openness or is it a reflection of the flexibility of Yoga?

TKV Desikachar: When someone comes to see me. I have to accept that person totally. Totally means including his medicine! So I don't have a problem. I am not interested in putting anybody into a particular box. I have no box. The box is the person who comes to me. For example, let us take someone with Parkinson's disease. He is able to come here, walk here, focus his eyes etc. only because of that medication. So the doctors are helping us, because, without the medicine, the patient will not be here. It is their contribution, so how can I reject this?

Dr Uma Krishnaswamy: What you are really saying is that Yoga need not be conditioned by any artificial parameters. That is, it can help in all environments. Is that correct?

TKV Desikachar: Yes, because, the first requirement in Yoga is to accept the person totally and to adapt Yoga to the person, whoever he may be. Since we do not have a rigid system that this is what everyone must do, it is easier for us to be flexible and help all.

Dr Uma Krishnaswamy: You have been involved in teaching Yoga to special needs children. What triggered you to do this? Is there any precedent as far as our Śāstra are concerned?

TKV Desikachar: I will take the second part of the question first. For example in the Pañcatantra, the Hitopadeśa etc., we read the story of a stupid prince who is fit for nothing. His father, the king, is worried and finally entrusts him to a teacher to somehow improve him. The teacher accepts the challenge and educates the boy through short stories and makes him wise.

That means there was a change in the boy's mind and intellect. This is a very important precedent in the sense that our ancient people who were familiar with what appears to be mental retardation, did not give up, but did something to improve the boy. This has always inspired me and excited me

Now as to what served as a trigger. I knew nothing about learning disabilities until Dr Jayachandran came with a developmentally challenged boy to find out whether we can do something to help him. This was a Christian boy, who had some difficulty in going to the toilet. His doctor had suggested surgery to rectify the problem.

Prof. Jayachandran knew of the use of Yoga in Germany in special institutions, so he thought he would take a chance here with us. When I saw the boy, he was dirty because he could not squat to go to the toilet. You know Yoga can be defined as Aprāptasya Prāpti. That is, obtaining something that is not available now.

I looked at this boy not as a child with a learning disability, but as one who could not squat. I thought since he is a young boy there is no risk in trying some Āsana to help him squat. After all, Yoga is about Yukti or tactics to help the individual.

With the help of my colleague I began to teach this boy and slowly he was able to squat. A month later he was able to go to the toilet. Because he was able to go to the toilet, his hygiene changed and he was acceptable to the family. He was slowly integrated into the family dinner, family life etc.

Dr Uma Krishnaswamy: It is wonderful that you have been guided by the spirit of the definition of Yoga rather than the words per se. Is it not a practical difficulty that you cannot hold the attention of such children for a long time. How do you get them to focus on what you are saying?

TKV Desikachar: We have got to change the strategy completely. We have to be in front of them, we have to be very patient, we have to do a lot of things to draw their attention using colours, illustrations, mimicry. All these things are not required when you deal with other people, so we learn these things out of necessity.

Dr Uma Krishnaswamy: So you learn as you go along.

TKV Desikachar: Yes, really it was something that had to be done. The main thing with these children is not that they have to do everything accurately, but that they should respond. But

we must be clear on how to bring this about. We have to use different techniques for different children - autistic children are different, microcephalic children are different, children with spastic conditions are different. And then there are aggressive and hyperactive children, but again we have to accept them as they are.

One of the problems with these children is that they are not accepted by the family, let alone in society. So when they feel that there is somebody who likes them they change. The greatest love we can receive is from these children. When I walk on the street, these children come running to say "Namaskaram Sir" even today because they know that we care.

Dr Uma Krishnaswamy: Co-ordinating movements with the breath can be quite difficult even for adults. How do you make these children control their breath?

TKV Desikachar: Yes, breathing is very difficult for them. Whenever my father taught Yoga to normal children, he always used to teach the children to chant Mantra. His theory was that as a child's attention span is small, we have got to introduce something to keep the attention. So I got an idea that maybe I could use this idea, but I cannot use Mantra, because they are complicated. So I use simple syllables like MAA instead of breath. After all when you say MAA, it is exhalation! So indirectly using sound syllables that are very simple is more successful than introducing breath control.

Dr Uma Krishnaswamy: Do parents tend to accompany these children and take an active interest?

TKV Desikachar: We want the parents to participate because the role of the parents, is very important. They are the most concerned people because of obvious reasons. So it is a triangular relationship: the child, the parents and the Yoga guide.

Dr Uma Krishnaswamy: What about group activities for these children?

TKV Desikachar: We start teaching individually with the parents. But we thought they should have social interaction. So first we taught them as a group. Then we found this is not enough, we have to integrate them with the normal children. So we combine them with normal children for teaching.

Dr Uma Krishnaswamy: Is there is an element of peer pressure that makes them respond better?

TKV Desikachar: I won't say pressure. I always say that if you apply pressure nothing is going to happen. The Yoga teacher's job is to make sure that the children respond, but with no pressure. Pressure means withdrawal, and, therefore, I would rather say peer love.

Dr Uma Krishnaswamy: So by integrating these special needs children with mainstream children you achieve more?

TKV Desikachar: I always tell the mainstream children, "you are lucky, you must show your love to these children and you have to accept them." So I always have them in the front row of the class as if they are the most important people. I have to educate people to accept them and to love them.

Sometimes we do some acting together, perhaps a small story like Gītopadeśa. We start re-educating them and ourselves. It is a part of our education not only to teach asanas but so many other things.

Dr Uma Krishnaswamy: Some of these children may have a behavioural problem. Some may be unfriendly, or apparently unfriendly because they have not perhaps been accepted by all the people whom they meet. How do you know that you are helping? How do you assess improvement?

TKV Desikachar: You see, their behaviour pattern is not intrinsic to them, it may be a reaction to how they have been treated. They do not know what they are doing, at the same time parents don't know what to do with them. Sometimes medicines do not help but only sedate them. So my one-word answer to this is where there is love the behaviour will change. They come running to you, they come to wish you, hold your hand and make eye contact. These are important indicators of improvement.

Dr Uma Krishnaswamy: Some parents might have guilt feelings about these children. Some of them in fact may feel ashamed because these children do not conform to acceptable social norms. They may feel small in the eyes of the world. Is there any strategy that you adopt to negate these feelings?

TKV Desikachar: Certain philosophical advice must be given depending on their culture, their religion etc. For example, to a Hindu, we talk about the Karma theory: "your Karma is not the same as your child's Karma and you should not feel guilty about it." Of course, we have to use different approaches. Generally, I always give examples of parents who took these children as a challenge and took upon them the responsibility of doing something for other such children in the whole country. I always tell them, if you cannot take this philosophically, take this as a challenge. It is not great to bring up a bright child, but, it is great to bring up such a child.

Dr Uma Krishnaswamy: What is the reaction of your teachers when they teach special needs children? Do they find it is a rewarding experience?

TKV Desikachar: In reality, not every teacher has the capacity to teach such children. We give the opportunity to all our teachers, but there are some teachers who do it very well. They love these challenges. To these people it is a very rewarding experience and they love this. These are people I use much more than those people who have theoretical interest but have practical difficulty in such teaching. We are a bit selective in this because teachers are different. Some people are artists and some are scientists.

Dr Uma Krishnaswamy: Would you say that Yoga is a discipline that is helpful to mentally challenged children and that it has got tremendous potential that we perhaps need to look into further?

TKV Desikachar: I can only share with you what I have seen. I have seen that those who have had the occasion to have this Yoga education, I will not call it Yoga therapy, have a total education of the body, speech, behaviour etc. They are better than those who did not have this education. Nothing further needs to be said.