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LEARNING OBJECTIVES

- Understand pain's widespread effects on various aspects of clients' lives.
- Explain how pain and emotional state influence each other.
- Understand the biopsychosocial-spiritual experience of pain through the lens of yogic philosophy.

Pain and Yoga Therapy: Part 2—The Lived Experience of Persisting Pain

By Neil Pearson, Lisa Pearson, and Erin Byron

“Pain and Yoga Therapy: Part 1,” in the Summer 2019 issue of *Yoga Therapy Today*, began a discussion of pain from a biopsychosocial-spiritual lens, offering a primer for yoga therapists working with clients in pain. The present article builds on the terms and perspectives introduced there, and Part 3 of this series will conclude with ideas on using yoga therapy tools to address the multidimensional phenomena of chronic pain.

Pain is an experience that does not exist separately from the individual in pain. We often observe people in pain through our preferred lens, explaining “pain-behavior” from physiological, psychological, or yogic views. Discussing the *lived experience* of pain, instead, reminds us that not only are we interacting with a human (rather than a painful part or situation), but that effective pain care focuses on living more than on fixing.

A Physical Perspective

Pain changes us.

It's tempting to think that we can understand all these changes and the lived experience of persistent pain by knowing about acute pain, pain biology, and tissue pathology. Yet, as noted in Part 1, pain is best understood as vastly complex. When pain persists, its intensity can increase and its influence can expand, new experiences related to pain typically arise, and other aspects of self and life can be diminished or lost. As one patient explained while trying to find humor in a dark situation, “You can lose everything. Your physical

competence, your job, your house, your truck, relationships, and even your dog. It's like living an old country-western song.” All these changes and losses impact us far beyond the physical, as explained in Part 1's brief discussion of the *kleshas* (root causes of suffering).

People living with persistent pain will do their best to communicate how their life has changed, including what's happening in their body. Yet some changes can be overshadowed by others, and pain can be associated with disruptions in awareness of breath, body, thoughts, and emotions. With these factors in mind, yoga therapists will gain a more complete understanding of an individual's lived experience via thorough assessments, both subjective and objective. People in pain typically report changes in mobility, stiffness, strength, or flexibility. They might also refer to increased muscle tension, muscle weakness, and/or altered movement and breathing patterns. Yet the altered body awareness and body schema and physiological dysregulation these clients are experiencing might not be fully communicated.

We might categorize the changes in the physical body when pain persists as changes in physiology, in awareness, in ability to regulate, and in the person, as the Yoga Sutras teach us. These categories and the list below are incomplete, but let's start here.

Note that it is not possible to state that the listed changes are *caused* by pain. Nor is it accurate to state that they are the cause of worsening pain, even though most of these changes potentially increase the evidence of danger. Correlation is not necessarily causality.

Not all symptoms are present in all individuals. Some even vary between activities and seem dependent on physiological, psychological, and social stressors, including such factors as body position, anxiety, and social support. In other words, pain depends on context.¹

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Changes in Physiology

- Increased sympathetic nervous system (fight-flight-freeze) activity
- Potential alterations in heart rate variability² and in blood pH
- Changes in endocrine activity such as decreased adrenal resilience³
- Decreased tissue tolerance related to decreased activity
- Pain from movements that are normally innocuous
- Pain from normally innocuous stimuli such as touch or thermal input
- More breath holding with movement, or even with just thinking about potentially painful movement
- Increased breath rate with less movement of the abdomen and more movement in the chest during inhale (chest breathing)
- Stiffness as a protective response⁴ (Stiffness is often experienced as an absolute physical limitation to movement, but, like pain, stiffness depends on context.)
- Less movement-related hypoalgesia⁵ (a decrease in movement's ability to reduce pain)
- Inhibition in some muscles, whereas others seem to be gripping

Changes in Awareness

- Unaware of breath pattern changes (or decreased awareness)
- Unaware of changes in muscle tension (or decreased awareness)
- Decreased ability to notice the subtle nonpain sensations of the physical body (interoception)
- Distortions in body awareness and/or body schema
- Increased hypervigilance of pain
- Decreased proprioception

Changes in Regulation and Resilience

- Difficulty influencing breath
- Difficulty influencing body tension
- Difficulty with motor control

Changes in the Person

- Less tolerant of movement/activity
- Less tolerant of prolonged positions
- Poor sleep
- Nutritional/diet activity changes
- Protective posture and movement patterns
- Changes in prosocial behaviors, including facial expressions, body language, and vocal intonation

Knowing how pain changes our clients provides some guidance for the planning of individualized yoga therapy. It also increases compassion in the yoga therapist, helping us reconceptualize the person in pain as an individual who is dealing with far more than an issue only in the tissue. Imagine not being able to engage in activities that previously seemed a given in life, struggling with regulating your physiology, having few options to cope, feeling that your body is distorted, and questioning why activities that used to provide a sense of peace no longer do—and these are just the changes we'd attribute to the *annamaya kosha* (physical body) effects of pain.

A Psychological Perspective

Navigating these physical impacts is associated with psychological change, too, such as in cognitions, a shifted locus of control (from internal to external), and decreased sense of self-efficacy. The *chitta-vritti* (mental awarenesses) are altered, and there may be greater obstacles to connecting to stillness of mind/body and the essence of one's self. These shifts in self-perception lead to a feeling of being burdensome and low self-worth. In turn, negative cognitions increase suicidal ideation and disconnection from loved ones, which can create a downward spiral of fear, anger, depression, and isolation.⁶

Psychosocial connections can help mitigate the intensity of chronic pain, just as connection to the higher self or spiritual practice can fill a human void.

Chronic pain disrupts emotional well-being by interfering with both physical and social function. Pain that we attribute to the physical body shares neuronal and psychological processes with the loss of or threat to social relationships. Increased pain has been linked to a decrease in positive social interactions and an increase in social withdrawal. Studies indicate that social distress increases perceived pain levels.⁷ Pain is a predictor for increased loneliness in older adults and likely relates to changes in mood, activity, and beliefs. A study of 675 people living with chronic pain showed that pain that reduced physical function led to emotional distress caused by reduced social interaction.⁸ This disruption in social connection was more salient than the physical pain in determining pain-related emotional distress, which is another clue, as yoga teaches, that the subtle realms can have greater impact on well-being than the material. Loneliness is a clear predictor of greater pain, and indeed a symptom of disconnection from the unitive yogic state. A 2015 study⁹ of more than 200 people showed that when individuals felt lonely in the morning, they had more negative cognitions about pain in the afternoon, which in turn predicted higher levels of evening pain. These negative thoughts about pain are consistently shown to worsen pain reports.

Conversely, social relationships offer an opportunity to build resilience. Psychosocial connections can help mitigate the intensity of chronic pain, just as connection to the higher self or spiritual

practice can fill a human void. Reducing pain expectancy makes us more likely to engage in social behaviors and may actually affect perceived pain, too. By encouraging clients to focus on the benefits of social interactions and away from the physical, energetic, and emotional aspects of pain, we support them in maintaining a balanced sense of self in the face of social interactions.

Balance is important, and as mentioned in Part 1, there is such a thing as too much help. Yoga teaches that self-reliance is a key aspect of the path, as no one can meditate or perform the practices for us. Even though clients may desire self-efficacy, the reality remains that help is necessary at times—and asking for needed help is an aspect of self-reliance.

There is a reciprocal relationship between pain and emotion.¹⁰ Pain increases reports of fear, stress, depression, anxiety, and a sense of isolation. Grief, which has a powerful link to pain, is often overlooked, even by the person in pain. There is also a reciprocal relationship between pain and cognition. Pain alters cognitive processes, including attention and awareness. Our negativity bias becomes more negative and beliefs become more limiting and catastrophizing, often heightening emotions such as fear. Again, these changes lead to increased pain reports. Fortunately, focusing attention (*dharana*) on things other than the pain, such as breath, body sensations, and the impermanence of thoughts and emotions, can diminish these reports.

Persistent pain is a condition of all layers of a person: body, energy, mind, belief, and spirit. Although we may need to separate these factors to discuss them, we have great opportunity to transform yoga therapy clients' lived experiences of pain by addressing the whole self and all the areas that pain impacts. As you will read in Part 3, the more we direct our attention to the whole, multilayered being, the greater the immediate and long-term benefits.

A Yoga Perspective

As discussed within the kleshas in Part 1, yoga states that *avidya* (ignorance and forgetfulness) is the root cause of all suffering, that in our ignorance we forget our true nature as *atman*¹¹ (divine Self); our personalities, humanness, and *ahamkara* (self/ego) move into cycles of imbalance and forgetfulness, resulting in the flame of our existence weakening or in our becoming overzealous in living karma experiences.

As yoga therapists we can ask, "How does pain impact the person?" The answer is this: Pain can change every aspect of a person's existence.

We most commonly hear in yoga therapy that pain creates changes that we can observe through a *panchamaya kosha* (five sheaths/layers of being) perspective. For example, pain can impact *prana* (energy/breath). We may observe an imbalance of prana during asana, perhaps as limited energy flowing through an area of the body or a sense of restriction within movement while other areas of the body are more fluid and open.

In addition to experiences related to the kleshas, karma, and *panchamaya kosha*, pain also interacts with the *gunas* (essential attributes of life), affecting our *agni* (inner fire) and the functioning of all human systems. The changes in *agni* and the emergent aspect of one of the tri-*gunas* can reveal to us how we live with pain when



it persists. For example, pain may put the person in a state of high anxiety. This may result in rigidity in body, mind, and spirit, including a constantly tight jaw, hyperdetailed focus, or debilitating fear. For others, pain can disconnect them from joy and love. These people may isolate themselves or become overbearing. Over time, these experiences lead them to feeling lost and hopeless on top of being alone, and to spiritual angst in not knowing who they are and not remembering their interconnectedness.

The lived experience of pain can affect our *dosha*, creating an imbalance from our original constitution, our *prakruti* dosha. In a persisting pain situation, our elements (*bhuta*) can be pushed into increasingly greater imbalances, such as too much or too little ether, air, fire, water, or earth, in turn pushing us into our *vikruti* (disordered) dosha.¹²

Often, the experience of pain impacts how we move and therefore how we practice movement in yoga. We might stop practicing all together, looking for a medical fix. We might become less introspective and/or change how we view ourselves and how we live in the world. It can even leave us feeling disconnected or overly attached to our bodies, thoughts, feelings, and emotions. Pain

might drive some to avoid movement altogether, whereas others will keep trying to “push through” it.

Karma affects pain. As indicated in Part 1, we come into human existence to learn specific soul lessons, of which pain might be a part. We may experience pain as a portal to remembering our true nature. Karma perpetuates our imbalances or softens them, depending on how we deal with our experiences and how we move through them. Our painful karmic experiences can potentially take us closer to Truth, remembering we are atman. As yoga aspirants, our soul work is to soften our karma and search deeper for root causes rather than to live as if the only thing needed is to fix the pain. Interestingly, understanding karma may be similar to our understanding of pain neuroscience—the purpose of pain and of karma is *not* to tell us details of what is wrong. Both intend to motivate behavioral change and suggest that we look deeper for insights and right action.¹³

Dharma (universal divine order) and living one’s *dharma* (path to union with this order) interact with our experience of pain. When our hearts are in line with what we do in the world, we are living closer to Truth. Potentially this aligned experience increases the evidence of safety, thus altering the lived experience of pain, even though living our *dharma* does not preclude pain.

Yoga tells us that living well with pain is possible. We can live a more peaceful, awake, *sattvic* (peaceful) lifestyle while experiencing pain.¹¹

In maintaining a *sattvic* lifestyle, we are directly taking action against *avidya*, which we believe will positively affect the lived experience of pain. When we combine this perspective with science that shows that we can also influence pain itself, we not only move toward a more hopeful outlook, but also understand more of the reasons for the success we see when we provide yoga for people living in pain.

In Part 3 we will discuss yoga as a therapy that addresses pain and the lived experience of pain whether these are viewed from physiological, psychological, or yogic perspectives. **YTT**



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