

WORKSHOP: YOGA & EMPOWERMENT for MENOPAUSE (PRE / DURING / POST)



GENERAL YOGA PRACTICE PRINCIPLES

1. This is like a fingerprint – individual. Your yoga practice must serve YOU.
2. Primary focus areas for practice should be pelvis, chest, throat (thyroid)
 - a. calcium drop happens first in the legs; osteoporosis usually starts in the pelvis
 - b. considerations for **bone density** (especially the hip socket) – yoga really helps - weight bearing is critical (e.g. standing poses) – clinical trials prove this
 - c. strengthen the immune system, promote lymphatic drainage around the breast tissue, energize the nervous system, etc...
3. **Estrogen** has a dramatic effect on musculoskeletal function and collagen production important for soft tissue (tendons, ligaments, fascia). As estrogen production slows / ceases completely, we **fight stiffness** – bodywide
 - a. especially inner groins as result of tension in internal reproductive organs
 - b. Knees can become (much) more of an issue when **hips get tighter**
4. **Movement is water** – we get dryer (starting in 40s) so we need to MOVE
 - a. Standing poses and seated forward bends help with **many symptoms**
 - b. **Cooling** yoga postures are key – restorative and forward bends
5. The Iyengar system is VERY strict about **practicing during your period/peri meno** (e.g. no inversions and no core work and no deep twists)
6. **Restorative poses** – vital energy is regenerated not consumed; key for menopause
7. Yoga helps at a **deep, cellular level**
 - a. we replicate and produce new cells at a rate of roughly two million per second
 - b. studies show yoga promotes regeneration of b-Cells in the pancreas increasing glucose metabolism and insulin receptors (fighter later in life propensity for insulin resistance); increases red blood cells - great for lung reflexes and cardiorespiratory health to name just a few

PERI / DURING	POST
<ul style="list-style-type: none"> - Lots of ups and downs - Consider your ability to meditate and expand your “container” of knowledge - Peri is a gradual and slow lead up; usually mid-40s start symptoms of irregular periods, PMS, headaches, etc. - Can be VERY slow process of change - Geeta – women says body changes every 5 years; some say 7 - For most, a process - Be creative here with yoga practice and self care is paramount - No pain; don’t sustain pain in your yoga during this transition - Need to soothe yourself during meno symptoms – take care of yourself - Learn to practice to chill out/it is key to battle brain fatigue – THIS IS SO HARD FOR MANY <p style="text-align: center; color: red; font-weight: bold;">THE YOGA PRACTICE NEEDS TO BE ANTICIPATORY PARTICULARLY IF YOU’RE EXPERIENCING SYMPTOMS ESPECIALLY INTENSE ONES</p>	<ul style="list-style-type: none"> - When greater understanding comes, then hold poses longer (again) and use props. - Get more creative and active – with wisdom - Practice becomes more focused - Open front body is KEY - Hard to open breast bone - Regular practice to fight ongoing stiffness and dryness <p style="text-align: center; color: red; font-weight: bold;">THE YOGA PRACTICE CAN BE SHARPENED (AGAIN or ANEW). LET’S GET BACK TO ‘WORK’</p>

YOGIS / ATHLETES / EVERYONE

After you’re through with menopause you can build and build hard. But you have to be patient in the meantime. Don’t dwell on what you used to be able to do. This is a change of the same order (though perhaps not same degree) of pre/post pubescence. You’re becoming different. As an athlete, you’ll be part of a group that currently gets almost no recognition in the public consciousness (physically formidable post menopausal bad asses.)*

**that’s changing too finally*

CHANGES THAT (CAN) OCCUR

This is not a “disease of deficiency”.

Get smart and learn how to change for the

better. The sooner healthy lifestyle habits are initiated,

the less dramatic and more positive this transition can be.



**It's not a hot flash.
It's a power surge.**

PERIMENOPAUSE AVG AGE 40s (also 30s)	MENOPAUSE AVG AGE 51	POSTMENOPAUSE AVG AGE 50-52+
<p>Symptoms start; body transitioning; body making less estrogen. Can be 10 yrs before meno; often in 40s, sometimes even 30s. Lasts 4 yrs on avg. Frequency and duration of symptoms very specific to each individual; many times linked to what your mother experienced</p> <ul style="list-style-type: none"> - Hot flashes - Night sweats - Cold flashes - Vaginal changes (dryness, low libido, thinning of uterine wall = painful sex), low libido - Mood swings, depression, irritability - Sleep problems - Foggy brain - weight gain, headaches, joint pain, racing heart, dry skin/eyes - sleeplessness, fatigue, less energy, memory loss, poor concentration, mood volatility, joint pains <p>Many have NO symptoms here. But change is happening.</p> <p>COMMON DEFICIENCIES HERE ARE VITAMIN D and B12</p>	<p>Intermittent / losing period. True menopause is once period has stopped completely for 12 months. End of the natural reproductive potential and declining sex hormone levels (estrogen, progesterone, testosterone) Early or premature can come from hysterectomy or radiation</p> <p>Meno / postmenopause, the symptoms may continue avg 4 -5 yrs, for many they decrease in frequency / intensity; for some symptoms last longer.</p> <ul style="list-style-type: none"> - Hot flashes can continue (one study showed median of 10.2 yrs) - Night sweats/Cold flashes - Vaginal changes (dryness, low libido, thinning of uterine wall = painful sex), low libido - Mood swings, depression, irritability - Sleep problems - Foggy brain - weight gain, headaches, joint pain, racing heart, dry skin/eyes - sleeplessness, fatigue, less energy, memory loss, poor concentration, mood volatility, joint pains 	<p>Period gone</p> <p>May still have symptoms ongoing and need to make important strategic long term changes to yoga, training, lifestyle</p> <p>Meno / postmenopause, the symptoms may continue avg 4 - 5 yrs, for many they decrease in frequency / intensity; for some symptoms last longer.</p> <p>Time to SHARPEN again – get to work (really). In safe, wise and sustainable way.</p> <p>SERIOUS /OTHER CONDITIONS ASSOCIATED WITH MENOPAUSE (estrogen plays significant role in protecting bones and heart)</p> <ul style="list-style-type: none"> - Osteoporosis - Heart disease - Urinary tract infections - Incontinence



GENERAL LESLEE ANECDOTES (My specific experience)

1. 7 year experience with exploration/experimentation in nutrition, supplementation, very briefly on HRT (a few months)
 - a. Nutrition, supplements, etc. is another workshop
 - b. No caffeine and no alcohol **SIGNIFICANTLY** helped my symptoms
 - c. Also reduction of sugar and dairy helped
2. There is some evidence that athletes have a more dramatic symptomology
 - a. Frequent and intense hot flashes
 - i. I learned to NOT fight; don't resist; rather breathe and let them run course
 - ii. Modified any sport training, exercise and yoga
 - iii. LOTS of walking – the perfect movement plan
 - b. Irritable and (**badly**) disrupted sleep
 - c. Frequent urination
 - d. Fatigue – inconsistent but **really** impacted energy and yoga and exercise
 - e. Brain fog (thankfully mine not as bad as many friends)
 - f. Weight gain! MENO-POT
 - i. Too many starchy foods / comfort foods (on top of all of it also caregiving sick parents)
 - g. Thyroid nodules – biopsy and benign. Very common
 - h. Dryness of skin – increased vaginal dryness (believe it or not, yoga can help)
3. Be in the moment and accept (symptoms, age, transitions) – view as a transformation and stronger on the other side - while exploring tools and possible solutions
4. Careful of HRT – if you must, try to limit the duration / amount of time
 - a. Long term HRT – individual - use is associated with decreased tendon cross-sectional area, especially in an active population
 - b. The result may be a bigger, stronger muscle pulling on a small brittle tendon that is in turn connected to a stiffer bone.
5. Work hard to have strength (when can) and explore options. Accept limitors (**which are temporary**)
6. **Lack of confidence** in the middle of it and the importance of POSTURE and opening the body's front line
 - a. My (former swimmer and cyclist shoulders naturally internally rotate and this was a HUGE piece of feeling good for me even in the heat of it)
7. In post meno, I'm feeling **incredible** – SHARPENING my yoga practice again
 - a. consume significantly less carbs, no sugar, etc.
 - b. combination of HIIT, strength, flexibility, nutrition, recovery

RESOURCES

(So many resources, but these are MY main ones)

Iyengar Yoga practice

Patricia Walden, Bobby Clennell, Lois Steinberg, Geeta Iyengar, *Yoga a Gem for Women*

Athletes / Active: Stacy Sims, *ROAR, (Women Are Not Small Men)*

TODAY'S PRACTICE – THE WHAT AND THE WHY

(NOTE: there is license taken in this sequence for workshop purposes; may deviate slightly from traditional class structure + organization. Trying to get so much in this workshop...)

POSE

CUES / BENEFITS

WARM-UP

SUPTA VIRASANA

Start here if can or some modification

- Stimulate adrenals
- Nice full stretch
- Most effective to promote healthy functioning of the urinary tract; drains blood from legs; tones blood vessels and reorients circulation to legs, hips and pelvic organs
- Great for healthy knees but can be unavailable

OR SUPTA BADDHA KONASANA

- Nice restorative posture to start/end
- Can add a hard block under butt/sacrum
- GREAT ALSO FOR SIJ compression



OR SUPTA TADASANA on back with belt at shins

CENTERING / PRANAYAMA

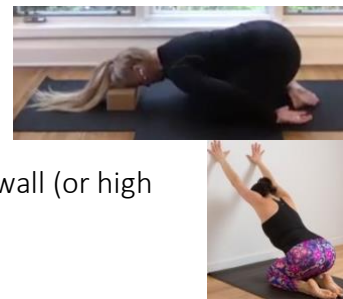
Soften abdomen. Sacrum elongating to get abdomen to soften in pelvis bowl. **Keep two ribs under breasts lifted and in your awareness to maintain oxygen to breast tissue.** Quiet the mind by becoming more conscious of the breath. Explore a wash cloth rolled and long way under back of head to tip chin down for unbelievable quiet and throat soft (thyroid, etc).

“Forward head posture may result in the loss of 30% of lung capacity. These breath-related effects are primarily due to the loss of the cervical lordosis, which blocks the action of the hyoid muscles, especially the inferior hyoid responsible for helping lift the first rib during inhalation.”

--Dr. Rene Calliet, MD, Former Director of Physical Medicine and Rehabilitation USCS.

CHILD’S POSE

Inhale broaden the back, exhale into skin of forehead (soothe irritability/brain fog); hands behind; upper arms back/gather trapezius and down; re-establish gathering - drop chin down (your posture per comments above is KEY to signaling right from the beginning). **VARIATION:** Hands up wall (or high blocks) during intense symptoms or supported



DOWN DOG

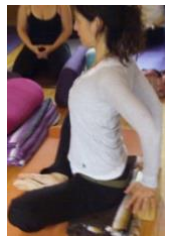
Should be doing a few every day; will discuss in detail in a little bit

UTTANASANA

Cooling pose with inversion benefits; helps with brain fog and general malaise; standing poses have bone density impact.

BADDHA KONASANA

Mobilizes the hip joint; hands behind on block for chest lift. Or can put back at the wall with a block at the shoulder blades.
VARIATION: for tighter hips or hip/knee issues: raise feet on 2 folded blankets or a block. Supta tadasana if issues with hip; also legs straight (right) a great option



[COMMENTS]

TRANSITIONS ARE HARD ON THE BODY

- Hormones, periods, menopause
- Seasons
- Injury, trauma, chronic patterns
- Even transitions in yoga from pose to pose if not done well

THE IMPERATIVE OF GOOD POSTURE

- Lack of confidence – posture impacts spirit
- Breath dysregulated
- Breast tissue at mid-rib location under breasts is key
- Role of pec minor and back body tone to keep front line open and a freedom of the diaphragm and the breath

HOW TO PRACTICE Can't look at these phases as a step down from a glorious practice (yoga, lifestyle, sport, etc.); what you *were* doing that menopause is curtailing; not dwelling on “what I have gained/lost” but rather “let’s look at the reality now.”

- Peri – really unsure and experiment with yoga practice; be kind
- During – must go more mellow; *REALLY* be kind
- Post – fire it up; safely and strategically SHARPEN; it’s a new day

DOWN DOG

PRE: EXPLORE

DURING: VARIATIONS
ESP SUPPORTED

POST: HOLD
and SHARPEN

ONE OF THE TOP, GO TO POSE. CAN BE ACTIVE OR QUIET/RELAXED.

HELPS MANAGE HOT FLASHES – NOT REDUCE BUT MANAGE

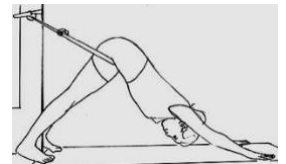
- boosts estrogen from the adrenals
- great to battle brain fog; quiets the mind
- great for lungs – the inversion benefits
- offers emotional stability, helps fight depression
- great to fight irritability and helps fatigue
- helps joints (esp when hands on blocks or chair)
- can help in between migraines
- KEY CUES:

- o wider legs to soften belly
- o can put heels against wall or rope around groin, forehead supported (DON'T shorten back of neck) **TO CHILL OUT**

- VARIATIONS

- o Feet on blocks at wall
- o Hands turned at crease of wall and floor
- o More accessible: hands on blocks or higher on a chair or the wall

- **POST MENO:** Do the traditional pose if you can – explore feet together – work to regain sharpness; capture the geometry of the pose: get to work again



Drawing: Bobby Clennell



ARDHA (HALF)
UTTANASANA

PRE, DURING:
aggravation in
concave?
POST: excellent

NOTE: concave poses can be bad / aggravating – explore for yourself
Stretching adrenals; bone density for legs
KEY CUES

- Toes turned in to soften belly
- Hands on blocks/chair, back concave
- Roots of thighs back



FULL
UTTANASANA

DURING: GREAT!
(with head supported)

Very cooling esp if head supported for max impact
Maintain strength of legs
KEY CUES

- eyebrow and forehead on chair or top of head on block(s)

VARIATIONS

- Butt against wall and head on chair
- Feet turned in
- Seated (pic right)



SUPTA
PADAGUSTASANA
(1, 2, 3)

Do before standing poses
This is about where the legs come into the hip socket
Phenomenal for low back and sacrum



- **DURING MENO**
 - o Supta 1 isn't great if a lot of symptoms due to constriction in abdomen; unless you're experiencing back pain then it overrides the constriction
 - o Supta 2 great for inner groin; leg extending out; abdomen soft
- **POST MENO**
 - o 1, 2, 3 with awareness, intention, engagement
- **KEY CUES**
 - o Take non belted leg out from the midline
 - o GREAT option at all stages is belted leg dropped to against a wall and hold; **feeds bone density in hip socket**
 - o Beginners have no control over their muscles so hard to engage – Iyengar said this is a “dead pose” for those who aren't engaging and what a loss and a waste

FORWARD EXTENSIONS – like Down Dog, Uttanasana, many others later in practice (standing or sitting) help keep head and body cool, soothe the nerves, reduce hot flashes, deal with migraines, high blood pressure, irritability and anxiety. This set of poses also helps insomnia and restore balance in the endocrine system. IF in bad menopause symptoms, don't close space between thigh and abdomen – stay in HALF Uttanasana and no Supta Padangustasana 1, for example. Need buffer zone to warm up. Ideally do them later in the day – when warmed up and also for insomnia and relaxation.

ARDHA
CHANDRASANA

PRE: EXPLORE

DURING:
VARIATIONS and
DON'T HOLD

POST: HOLD and
SHARPEN

Women's health expert, yoga guru Geeta Iyengar (BKS's daughter) did this PRIOR to Triangle; Can be more accessible – esp at wall

- Lessens gut heaviness – BALANCE BETWEEN BRAIN & ABDOMEN
- Horizontal poses can be cooling – at the wall
- Great for inner groins
- Turn femur bones out (ext rotation) in lateral standings (big time!)
- MUST continue to promote balance – maintain strength

VARIATIONS

- o Back at the wall (ahhhhh)
- o Face to the wall – relaxing and grounding (real support)
- o Forearm on chair

TRIKONASANA

KEY CUES

- Criss cross for hip issues - feet wide on mat (front foot to left and back foot to right with wide stance so NO weight on front leg hip)
- At wall is GREAT
 - o Back at wall for stability
 - o Face wall for relaxing and grounding
 - gives you moral support (Geeta Iyengar)
 - quieting
 - feels a bit like a forward fold, whereas looking away is more like a backbend



VIRABRADASANA /
WARRIOR 2
(A WORD ABOUT)

Controversial for *during* menopause – can make one hot, bothered, annoyed

- Esp if you feel bloated / abdomen “inflamed” and heavy
- Is good for sciatica and stretching inner groins so decide for yourself...
- Cues / Variation
 - o Foot on bottom of a turned over chair (USE BLOCK IF DON'T HAVE CHAIR) and don't hold, but rather go in and out slowly to lessen the signaling

STANDING POSES

To cultivate strength, skeletal health, fight sciatica, stiffness, etc. Peri / Meno – adjust to needs; face the wall to soften the belly and offer moral support; can help with sciatica / fibroids sometimes that are common pre-meno. Post: sharpen – with new sense of selves

“TOUCHING THE POSE”

DURING: GREAT if have the energy

Best way to practice during big symptoms - short holds each pose

Slow, mindful sequencing more than holding

- W2 > Half Moon > W2 > WLFF
- (With bolster) kneel to lunge > pyramid > supported wide legged forward fold > switch

SUPPORTED PARSVOTTANASANA

DURING: GREAT
VERY COOLING/
RELAXING

Pyramid: one of the BEST during
Legs active from strengthening
Some belief that it promotes vaginal moisture
CUES

- o Head supported on seat of chair
- POST MENO – on 2 blocks more active (right); elbows forward and pelvis back is cooling but more active



PADAGUSTASANA 2

DURING: GREAT

Standing – leg out to side

CUES:

- Leg extended out to side FOOT AT THE WALL
- **Horizontal poses are cooling**
- Keeping inner groins open
- Arms out with palms up

TREE POSE

DURING: GREAT

Aids balance work which can decline

Helps fight sciatica

Cultivates strength

VARIATIONS/CUES

- Variations with blocks at inner knee and hip facing wall
- Prone on floor – arm at shin (pic right)



BACKBENDS

To stimulate the adrenals and estrogen production as well as manage energy levels. Keeps mood up – combats feelings of loneliness, emptiness and depression. Backbends can cause nausea, and headache. Liver reacting – liver releases toxins from digestive process in the blood. De-toxing that gets triggered when liver (literally) is stretched – backbends increase the output of the liver/the release of toxins. Don't eat 3-4 hours prior to practice except fluids. Not a lot of deep backbending, esp if having intense menopause symptoms.

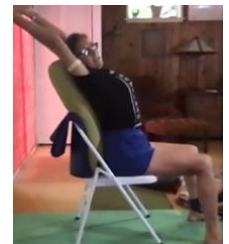
SETU BANDHA SARVANGASANA

- FROM SEMI ACTIVE TO TOTAL RESTORATIVE
- Legs somewhat active
- Relax throat for thyroid – keep throat open and soft
- In general in BB – find connection between heels and tailbone
- VARIATIONS WHERE APEX IS
 - o Chair version/shoulders on bolster
 - o Bolster and blankets at sacrum
 - o Kidneys end of bolster and back on floor
 - o Cross bolsters (I love this one!) with belt at thighs and legs straight OR baddha konasana
 - Thoracic spine at apex
 - If endometriosis, put pelvis at apex



GENTLE SEATED BACKBEND

- PHENOMENAL option all stages; monitor hot flash response if in active symptoms to any backbending
- This was one of my personal go-tos!

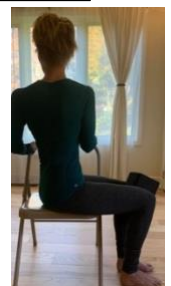


TWISTS

To aid in digestive upset, torso stiffness, breath cadence and general tension release. Great to do in a chair.

SEATED TWIST

- In chair with blanket on chair
- Bolster inner thighs
- Aerate hands
- Twist to R and let L knee move forward
- Explore twist lower, middle, upper torso correlated with breath



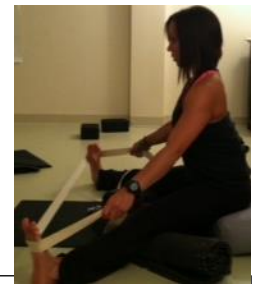
SEATED POSES

Using this time to unfold the thoracic; make sides of torso longer; shoulders must remain back and down. Maintain the support in pelvis and energize out of low back.

JANU SIRSASANA

DURING: GREAT
meno symptom
companion

- see box prior on forward extensions
- great cooling during menopause
 - o bolster atop of shin for cooling during hot flashes
- traditional belief it promotes vaginal moisture
- maintain concave back with strap at foot (pic right with F Raoult, OPEN SKY YOGA)
 - o Lift extended leg side ribs UP
 - o Think extension not bend – DON'T contract front body best can; open front body with tone in back – delay the flexion
- Fully supported version with head resting on chair



PASCHIMOTTANASANA OR UPAVISTA KONASANA

DURING: GREAT
meno symptom
companion

- See box prior on forward extensions
- Supported:
 - o With bolster at shins and block between shins
 - o Hold 5 mins if can

INVERSIONS

These MUST be a pillar in any practice. The importance of INVERTING IN a few poses for the body influence on balancing the hormones MORE than any other category (!) -- and the pituitary, thyroid, adrenal and ovarian glands. **Recommend one day a week to do a practice of mostly inversions.** Tones and balances the uterus. Ideally invert for at least 10 minutes – even if a few different poses cumulative.

SARVANGASANA

- o MANY VARIATIONS of shoulder stand
- o Need “ledge” of blankets at neck to protect neck; weight only in shoulders



PRASARITA PADOTANASANA / WIDE LEG FORWARD FOLD

- For nice support, belt outer feet (as in pic, right)
- Head supported on props or floor
- Can put top of head to wall for grounding support



RESTORATIVE

“The soft work is the hard work” said Geeta Iyengar. And this is THE most important of all. You need to rest and rejuvenate, especially if you aren’t sleeping well...(!). This carries you into next phase of life. Ideally at least one restorative pose a DAY! Esp during menopause. Can you do yoga 2x a day – a few active poses in the AM, and a few restorative in the PM

DURING: GREAT
meno symptom
companions

VIPARITI DANDASANA

- Good for for fibroids, etc.
- Ideally feet against a wall with knees virtually straight
- OPTION HERE for CROSS BOLSTER (previously) with back more on the floor



SUPPORTED HALASANA

- No one can be angry after doing this pose – ha!
- OR ARDHA SUPTA KONASANA – legs on 2 chairs or (not as good) wall



VIPARITI KARANI

- GREAT final pose in meno practice
- CUES / OPTIONS
 - o belt thighs
 - o legs in baddha konasana as an option
 - o NO mat
 - To come out - push back, slide on floor
 - o Letting go
 - o BE IN THE SPACES BETWEEN THOUGHTS
- **Bhramari breath of the bee buzzing sound**



PRANAYAMA

Soften abdomen. Sacrum elongating to get abdomen to soften in pelvis bowl. Keep two ribs under breasts lifted and in your awareness to maintain oxygen to breast tissue. Quiet the mind by becoming more conscious of the breath. Explore a wash cloth rolled and long way under back of head to tip chin down for unbelievable quiet and throat soft (thyroid, etc).

“STRAW BREATHING”

- Excellent for aiding the cooling of hot flashes
- If can’t roll tongue (a genetic thing), then make a whistling shape / pucker of the lips and put tongue on roof of mouth





APPENDIX (additional practice information)

WORKSHOP: YOGA & EMPOWERMENT for MENOPAUSE (PRE / DURING / POST)

THIS IS A **POST MENSTRUATION (post bleeding)** PRACTICE (for younger/PERI)

Even post-menopause, we are cyclical beings and highly recommended that we pick a time every month and do THIS sequence. Blood pressure can change pre/post meno.

- DD with feet higher – like on blocks – heels on wall and feet up on blocks
 - o (great post-partum)
 - o Brings abdomen back toward legs
 - o Great prep for headstand too (beginner)
- DD with head rested on block/etc
 - o Keep arms and legs strong!
- Uttanasana Variation
 - o Palms flat
 - o Fingertips, not pads
 - o Elbows out
 - o Let arm skin now lift when normally going down
- Parsvottanasana (Pyramid)
 - o Elongate front leg shin bone
 - o Lift front foot and root into heel
 - o Then drop head
 - o Then second time
 - Left foot and ground through heel
 - Lift left knee cap to expose more shin
 - Foot drops, not toes
 - Keep front of shin long then drop head and hold
 - Keep toes lifted
- Prasarita Padottanasana
 - o Support knees by putting elbows there and gently push out
 - o Top of inner thighs must go back to get top of femur back into socket
- Handstand
- Elbow balance
- **Shoulder stand – inversion at least 10 mins in one or combo of poses**
- Halasana / Chair shoulder stand
- Setu bandha – throat, neck, thyroid
 - o Keep some space between chin and chest
- Savasana



PRACTICES AND INFO FOR A FEW SPECIFIC SYMPTOMS

BRAIN FOG

(Classic Iyengar Restorative Sequence below for this)

1. Uttanasana, head supported, up to 5 mins
2. Adho Mukha Svanasana, head supported, up to 3 mins
3. Adh Mukha Vrksasana, 1 minute, twice
4. Sirsasana, supported if needed, 5 minutes
5. Viparita Dandasana, with chair, 5 minutes
6. Kapotasana, on chair, head must be supported, 3 minutes OR OTHER BACK BEND
7. Setu Bandha Sarvangasana, 5 minutes
8. Sarvangasana, with chair support, 5 mins
9. Halasana with legs resting on chair, 5 mins
10. Vipariti Karani, 5 mins
11. Supta Virasana, 5 mins
12. Supta Baddha Konasana, with bolster and eyes wrapped or covered, 5 mins

FREQUENT URINATION / BLADDER STRESS

1. Lateral standing poses facing the wall, like Triangle
 - a. Lifting pubic up to lift urinary tract (this has really helped me)
2. Baddha konasana with weight on upper thighs
3. Supta baddha konasana with pelvic alignment (cone shaped mat assist) or belt
4. Supta virasana – most effective to promote healthy functioning of the urinary tract; drains blood from legs; tones blood vessels and reorients circulation to legs, hips and pelvic organs
5. Backbend / wheel if strong. Turn toes in slightly, press heels down, raise tailbone and move toward knees and up. Roll inner thighs down toward floor. These combines actions will create pelvic alignment and relaxes bladder for better functioning
6. Supta baddha konasana over cross bolsters
7. Upavistha konasana (feet turned forward) then baddha konasana
8. Setu bandha on cross bolsters – pelvis raised – first with legs straight with belt at thighs and then legs in baddha konasana
9. Chair sarvangasana

IRRITABLE / EASILY ANGREY

- Forward extensions
- Supported poses
- Supported halasana is great!

DEPRESSION

- Backbending – supported or more active
- Forward bends will make worse (crying, etc.)
- Chair shoulderstand and supported bridge are great!

PRACTICES AND INFO FOR A FEW SPECIFIC SYMPTOMS, CONT...

UTERINE PROLAPSE

- Prolapse can make pelvic floor muscles weaker, but weak pelvic floor doesn't always lead to uterine prolapse. Occurs when weakness to ligaments that help maintain upper vagina and cervix in position at the same time as maintaining the uterus in its inclined position
- With prolapse be cautious of standing poses as chance that movement or jumping could cause further slippage of uterus.
- When support in pelvic cavity has lost tone, don't have resilience against weight and gravity
- Inversions are critical – gravity becomes ally
- Down dog really the best pose
 - o With feet UP on blocks and belt at hips if possible (door knob)
 - Maybe even block inner thighs
 - o Firmness and stability in feet creates space in internal organs
- Headstand
 - o Block inner thighs and about 2 belts around thighs
 - o Can be hormonal not just mechanical
 - o Why inversions are so important
 - o Once you align legs in headstand – a GREAT release
- Advanced prolapse should NOT DO THESE:
 - Standing poses
 - Baddha konasana or upavista konasana
 - Twists
 - Core
 - Navasana
 - UPP – urdhva prasaritta padasana
 - Arm balances
 - Salamba Purvottanasana

HOT FLASHES

Short, lovely practice to the right thanks to Sr Iyengar teacher, Bobby Clennell

