



Effectiveness of Yoga Therapy on Hypertensive Patients : A Quasi Experimental Study

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Introduction

According to conservative estimates, there are 972 million people worldwide who have high blood pressure. By 2025, it's expected to be worth \$5.6 billion. What would be the most efficient method of discovering the truth? With a combined population of 639 million, both developed and developing countries have hypertension. Between 30 and 45 percent of Europeans suffer from hypertension. People all throughout the world are becoming more prone to high blood pressure. People of color are particularly severely struck by hypertension as it expands across the country, with an estimated 44 percent of African Americans suffering from it. Hypertension impacted 34% of the population in the United States in 2006. However, menopause seems to diminish this disparity between men and women who have high blood pressure. Excessive blood pressure is another issue in India, which affects around 10% of the population. These drugs can have negative side effects and are prohibitively expensive, so not everyone should use them. Patients with hypertension frequently deviate from their prescribed treatment plan for a variety of reasons. Even in the absence of additional treatment, antihypertensive medications alone will be unable to control hypertension. You must have enough physiological relaxation to keep a healthy blood pressure. It is India's fourth largest postal service (Indian Express, 2004) Using this method has a number of advantages, including better circulation and lower blood pressure. Reviewing the data shows that hypertension can be found in a variety of places, including the patient's job in the community. The researcher selected this study since it was simple to implement in daily life and had no known dangers.

Methodology

The input, process, and product evaluation model developed by Daniel L. Stuffle Beams serves as the conceptual basis for this investigation. Pre- and post-test control groups were used in this investigation, which was quasi-experimental in nature. This investigation was limited to a certain area of Uttar Pradesh. Depending on their level of curiosity, 130 people were randomly assigned to either the experimental or control groups. Inclusionary criteria and purposive sampling were used to choose the samples, which included all members of the intended population. Using descriptive and inferential statistics, the acquired data was assessed and interpreted in line with the project's objectives and goals.

Findings

The study found that 40% of the hypertension patients were between the ages of 41 and 60 in the test group. The control group's hypertension patients, on the other hand, were mostly in their fifties and sixties. There was a higher percentage of female patients in the experimental group using the new procedure than in the control group using the standard method. Researchers found that patients in the experimental group (those receiving the new treatment) were more likely to be uneducated compared to those in the control group (those not receiving the new treatment). Patient Coolies made up 73.33 percent, while patient Coolies made up 73.33 percent of patients in the control group during experiment. For patients in the experimental group, the median monthly income was \$3000, while for those in the control group it was \$3000 or less for 66.66% of patients. There was no family history of high blood pressure in either the control group or the experimental group, with the latter having the highest percentage. In the experiment, 73.33 percent of patients didn't have any risky habits. Among the patients in the control group, more than half had no history of risky behavior. Non-vegetarian patients made up a larger percentage of the experimental group (83.33%), while vegetarians made up a larger percentage of the control group (96.67 percent). Prehypertension was present in 84.33 percent of patients in the experimental group but was absent in 90 percent of individuals in the comparison group. Experimenters had 83.33 percent lower post-test blood pressure than prehypertensive controls, who had 83.33 percent lower post-test blood pressure. Preliminary results from the post-test blood pressure values of the experimental group reveal that the majority of patients (83.33%) are still normal readings. The experimental group had lower mean blood pressure than the control group by 0.16 units. This hints to the possibility of managing blood pressure. The experimental group's standard deviation was 0.36, whereas the controls' was 0.39, and the 't' value was 15.625, showing that the t-distribution with 15.625 degrees of freedom had a standard deviation of 0.36. The experimental group had reduced blood pressure. Dietary habits had a substantial impact on blood pressure despite the fact that demographic factors such as gender and age had no effect on post-test blood pressure. When significance was set at $p < 0.05$, there was no link between demographic characteristics and blood pressure.

Conclusion

Yoga Therapy was investigated to determine whether it may help people with high blood pressure. According to the study's findings, the experimental group's blood pressure rose after receiving Yoga Therapy. Yoga Therapy, according to the findings of the study, has a significant effect on blood pressure. Yoga therapy is a low-risk method that is both simple and effective.

Bibliography

- Kearney PM., Whelton, M.(2004).Worldwide prevalence of hypertension *Journal of Hypertension*.22 (1):11-19.
- AnnetrinJytte Basler,(2011).The *Journal of Alternative and Complementary Medicine* on hypertension. 17(5): 435-440
- Anand PM, (2002). Non pharmacological management of essential hypertension.The *journal of Indian medical association*, 24-26
- Asokkar, (2003).Hypertension in the next millennium.*Journal of Indian medical association*, 32-34
- .Agarwalk.k, (2001). Non pharmacological treatment of hypertension.*Herald of Health* (61), 14-15
- . Dateyet.al, (2001). Shavasana and yogic exercise in management of hypertension.*Angiology research foundation* (20), 325-330 .
- GopalK.S, (2004). Effect of yogasana and pranayamas on blood pressure and pulse rate.*Indian journal of physiopharmacological therapy*, 273-275
- MohanV., Deepa M., (2007).Prevalence, awareness and control of hypertension in Chennai representing Urban South India.*Journal of Association of physician India* (55), 326-32.
- Kannan L, (2009). An epidemiological study of hypertension. *Sri RamachandraJournal of Medicine* 2(2), 1-5
- Yadav S, (2008). Prevalence and risk factor of pre hypertension and hypertension.*Indian journal of medical research* (128), 712-720
- Karen Tu, (2008).Prevalence and incidence of hypertension.*Canadian Medical Association of Journal*(11),178
- IhabHajjar, (2006).Prevalence and incidence of hypertension.*Annual Review of Public Health* (27), 465-490
- SS. Reddy,GR.Prabhu., (2005).Prevalence and Risk Factors of Hypertension in Tirupati.*Indian journal of community medicine* 30 (3), 84-86
- Hennis A, (2002).Prevalence of hypertension.*Journal of hypertension* 20(12), 2363-2369
- SV.Joshi,(2000).Prevalence of hypertension in Mumbai.*Indian journal of medical science* 54 (9), 380-383
- Gupta R.,(2004). Trends in Hypertension Epidemiology India.*Indian journal of medical science*18(2), 73-78