Original Article

Effects of Yoga on Blood Pressure and MDA in Mild Hypertensive Patients.

Asma Ali Khan¹, Ashfaque Ur Rehman², Adil Ali Zaidi³

¹Junior Resident, Department of Medicine, SMSRI Medical College, Jaipur, ²Senior Resident, Department of Medicine, SMSRI Medical College, Jaipur, ³Assistant Professor, Department of Medicine, SMSRI Medical College, Jaipur,

Abstract

Background: Cardiovascular diseases (CVD) have emerges as the leading cause of mortality throughout the world. Essential hypertension is one of the important risk factor for CVD in modern society despite advanced and effective management. Malondialdehyde (MDA) is a well known marker of oxidative stress, which is produced by oxidation of poly unsaturated fatty acid. Nadishodhan pranayam leads to decrease stress as well as blood pressure. **Subjects and Methods:** It was an interventional type of study. Ninety seven mild hypertensive patients (53 males and 44 females) of group I completed the yoga program. While, fifty normotensive subjects were include as control in group II. Blood pressure and MDA was measured of every participants before and after three months of yoga program. **Results:** Total ninety seven mild hypertensive patients of age 33.6± 8.66 years of group I completed three months yoga program. However, fifty subjects (34.7± 7.73 years)of group II had not done any yogic exercise during three months. Results of the present study showed that there was a significant difference in SBP (p<0.001), DBP (p<0.001), HR (p<0.001), PP (p<0.001) and MAP (p<0.001) group I mild hypertensive patients after following three months yoga program. However, there was a significant difference between before and after three months level of MDA in group II control subjects. **Conclusion:** In this study, it has been observed that daily practice of yoga improves the blood pressure of mild hypertensive patients. Moreover, it substantially decreases the oxidative stress. Yoga can be an effective alternative to reduce the blood pressure in mild hypertensive patients either with medication or without medication.

Keywords: Yoga, hypertension, MDA, CVD.

Corresponding Author: Dr. Ashfaque Ur Rehman, Senior Resident, Department of Medicine, SMSRI Medical College, Jaipur.

Received: September 2018 Accepted: September 2018

Introduction

Cardiovascular diseases (CVD) have emerges as the leading cause of mortality throughout the world.^[1] Essential hypertension is one of the important risk factor for CVD in society despite advanced and modern effective management.^[2] Disturbance of endothelium functioning leads to loss of dilating ability of endothelium results in increased blood pressure.^[3] Hypertension is a multi factorial disorder including various aetiological factors like obesity, high lipids diet, smoking, stress, sedentary lifestyle, excessive alcohol and high sodium diet etc.^[4,5] Imbalance between oxidants and antioxidants status of body leads to a well known condition known as Oxidative stress which in turn play a pivotal role in development of variety of hypertension.^[7,8] conditions including pathological Malondialdehyde (MDA) is a well known marker of oxidative stress, which is produced by oxidation of poly unsaturated fatty acid. Moreover, MDA is considered as one of the important marker for coronary artery disease. Increased reactive oxygen species play an important role in

pathogenesis of hypertension.[8-10]

Daily practice of Yoga causes decrease of mental stress and increase of memory.8 Yoga has been found effective in improving weight, BMI, dyslipidaemia, hypertension and heart rate.^[11-15] Psychological stress has been found associated with high level of oxidative stress; however relaxation of stress causes decrease oxidative stress.^[8] Nadishodhan pranayam leads to decrease stress as well as blood pressure.^[16,17] That is why the present study was designed to investigate the effect of yoga on blood pressure and MDA of mild hypertensive patients.

Subjects and Methods

Type of study

It was an interventional type of study.

Study Population

Study population was divided into two groups. Group I consisted one hundred nine mild hypertensive patients (60 males and 49 females), between 20 and 40 years of age while group II included 50 normotensive subjects of same age and

Khan et al: Effects of Yoga on Blood Pressure and MDA in Mild Hypertensive Patients

sex matched. All the patients were recruited from TMMC & RC, Moradabad. However, twelve mild hypertensive patients (7 males and 5 females) left the study in between due to various reasons and ninety seven mild hypertensive patients (53 males and 44 females) completed the yoga program. Inclusion criteria for the study were blood pressure from >140/90 mm Hg to <160/110 mm of Hg, 18 body mass index 18.5–25 kg/m2. Exclusion criteria were hypertensive patients on any type of anti hypertensive medicines or suffering from any type of chronic disease, any type of disability. All the participant of the study gave their inform consent before participating in the study.

Yogic intervention

Group I mild hypertensive patients were asked to perform yogic exercise "Nadi Shodhan Pranayama"^[16,17] (forced one side nostril breathing) early in the morning for 30 minutes, 6 days in a week.

Measurements of blood pressure

Measurement of blood pressure was done twice before yoga intervention and three months after yoga intervention. Blood pressure was measured three times by auscultatory method at every 10 min interval by Sphygmomanometer.

Collection of sample

Fasting sample were collected early in the morning before and after yogic intervention.

Biochemical Parameters

MDA in serum was estimated by thiobarbituric acid method (TBA).19 TBARS assay kit Cayman chemical company Ann Arbor, USA and Biochemistry Analyser E-C5VZ(10k) manufactured by Transasia (India) were used for the biochemistry analysis.

Statistical Analysis

The results of the present study were expressed as mean \pm SD. Unpaired student t test was used to evaluate the results. A p-value < 0.05 was considered statistically significant. IBM SPSS Statistics 21 manufactured by IBM USA was used for entire calculations.

Results

 Table 1: Comparison of pre and post yoga values of blood

 pressure in group I mild hypertensive patients.

Parameters	Before Yoga	After Yoga	P-value		
Systolic blood	$148.08 \pm$	142.17 ±	< 0.0001		
pressure mmHg	10.04	12.46			
Diastolic blood	104.15 ± 7.82	98.27 ± 6.78	< 0.0001		
pressure mmHg					
HR	76.13 ± 6.58	72.26 ± 5.29	< 0.0001		
PP	56.17 ± 6.43	53.19 ± 6.67	< 0.0001		
MAP	126.3 ± 8.72	119.42 ± 8.35	< 0.0001		

Total ninety-seven mild hypertensive patients of age $33.6\pm$ 8.66 years of group I completed three months yoga program. However, fifty subjects (34.7 ± 7.73 years)of group II had not done any yogic exercise during three months. Results of the present study showed that there was a significant difference in SBP (p<0.001), DBP (p<0.001), HR (p<0.001), PP (p<0.001) and MAP (p<0.001) group I mild hypertensive patients after following three months yoga program. [Table 1]

[Table 2] shows that there was an insignificant change in

SBP (p>0.05), DBP (p>0.05), HR (p>0.05), PP (p>0.05) and MAP (p>0.05) of group II after three months.

Table	2:	Comparison	of	pre	and	post	yoga	values	of	blood
pressu	pressure group II control subjects.									

Parameters	Before Yoga	After Yoga	P value	
Systolic blood pressure mmHg	126.28 ± 9.04	127.17 ± 12.46	NS	
Diastolic blood pressure mmHg	87.25 ± 8.32	88.17 ± 7.58	NS	
HR	72.44 ± 5.6	72.26 ± 6.19	NS	
PP	48.17 ± 4.27	49.35 ± 4.69	NS	
MAP	112.8 ± 6.66	112.89 ± 7.22	NS	

[Table 3] reveals that there was a significant difference between before and after yoga program MDA level of group I mild hypertensive patients. However, there was an insignificant difference between before and after three months level of MDA in group II control subjects.

Table 3: Comparison of pre and post yoga values of MDA in both group I mild hypertensive patients and group II control subjects.

Parameters	Group I		Group II		
	Pre yoga values	Post yoga values	Pre yoga values	Post yoga values	
MDA (m mol/ml)	5.16 ± 0.78	4.26 ± 0.56	2.86 ± 0.54	2.96 ± 0.67	
P value	<0.0001		NS		



Figure 1a: Correlation of MDA & SBP. Where MDA = Melanodialdehyde, SBP = Systolic blood pressure, ** p = <0.01 (comparison of post value with pre value).



Figure 1b: Correlation of MDA & DBP. Where MDA = Melanodialdehyde, DBP = Diastolic blood pressure, ** p = <0.01 (comparison of post value with pre value).

Khan et al: Effects of Yoga on Blood Pressure and MDA in Mild Hypertensive Patients

In the [Figure 1a] Pearson correlation coefficient for MDA and SBP in mild hypertensive patients of group I has been presented. It is evident from the Figure 12a that there was a positive correlation of MDA with SBP.

In the [Figure 1b] Pearson correlation coefficient for MDA and DBP in hypertensive elderly patients of group II has been presented. It is evident from the Figure 12b that there was a positive correlation of MDA with DBP.

Discussion

Finding of the present study suggest that yoga program for three months have substantially decrease blood pressure in mild hypertensive patients. Findings of the current study are onsistent with the results of the previous study of Svetkey et al.^[20] Similarly Jiro et al.^[21] recorded that regular exercise signifi¬cantly reduces systolic and diastolic blood pressure in mild hypertensive patients. Likewise Pal GK et al recorded significant decrease of blod pressure after following yoga program.^[22] This decrease of blood pressure seems to be due yoga improves balance of autonomic nervous system via decreasing sympathetic activity and increasing parasympathetic nervous system.^[22,23]

Further, results of the current study showed that there was a significant decrease of heart rate, pulse pressure, and mean arterial pressure which is consistent with the findings of Pal GK et al.^[22] This decrease of HR, PP and MAP seems to be due to yoga affects the baroreflex sensitivity which in turn reduces heart rate and blood pressure.^[24]

It has been suggested in literature that uncontrolled reactive oxygen species has been found involve in production and progression of various pathological conditions like CVD.^[25,26] Moreover, increased oxidative stress has been reported in early stage of hypertension; though, development of hypertension is caused by various factors. However, role of ROS cannot be picked out.^[27-29] MDA has been found elevated in hypertensive patients due to increased level of ROS which results in increased lipid peroxidation.^[26] Furthermore, present study recorded there was a significant decrease of MDA in mild hypertensive subjects. Findings of the present study are consistent with results of the previous study of Gordon et al.^[30] Patil et al.^[31] and Singh et al.^[32] as they observed a significant decrease of blood pressure after following yoga for different time periods of time. This decrease MDA level seems to be due decrease of ROS as regular yoga practice induces the production antioxidant like glutathione and super oxide dismutase which in turn decreases the lipid peroxidation.^[32] This decrease of MDA in mild hypertensive patients amy decrease the risk of CVD in hypertensive patients as MDA is an independent risk factor for the CVD.8

Conclusion

In this study, it has been observed that daily practice of yoga improves the blood pressure of mild hypertensive patients. Moreover, it substantially decreases the oxidative stress. Yoga can be an effective alternative to reduce the blood pressure in mild hypertensive patients either with medication or without medication. We emphasize more researches on larger population should be done to make effective module of yoga program to control blood pressure.

References

- Mozaffarian D, Wilson PW, Kannel WB. Beyond established and novel risk factors for cardiovascular disease. Circulation 2008;117(23):3031–38.
- Carretero OA, Oparil S. Essential hypertension: Part I: definition and etiology. Circulation 2000;101:329–35.
- Kuklinska AM, Mroczho B, Musical WJ, Usowicz-Szarynska M, Sawicki R, Borowska H, et al. Diagnostic biomarkers of essential arterial hypertension: the value of prostacyclin, nitric oxide, oxidized – LDL, and peroxide measurements. Int Heart J 2009;5: 341–51.
- Intersalt Co-operative Research Group. Sodium, potassium, body mass, alcohol and blood pressure: the intersalt study. J Hypertens 1988;6(suppl.4):S584–6.
- Sever PS, Poulter NR. A hypothesis for the pathogenesis of essential hypertension: the initiating factors. J Hypertens. 1989;7(suppl.1):S9– S12.
- 6. Whelton PK. Epidemiology of hypertension. Lancet 1994:344: 101–6.
- Kunwar A, Priyadarsini KI. Free radicals, oxidative stress and importance of antioxidants in human health. J Med Allied Sci 2011;1(2):53–60.
- Yadav RK, Ray RB, Vempati R, Bijlani RL. Effect of a comprehensive yoga-based lifestyle modification program on lipid peroxidation. Indian J PhysiolPharmacol 2005;49(3):358–62.
- Montezano A, Touyz RM. Reactive oxygen species, vascular Noxs and hypertension: focus on translational and clinical research. Antioxident Redox Singling 2013;22.
- Walter MF, Jacob RF, Jeffers B, Ghadanfar MM, Preston GM, Buch J, et al. Serum levels of thiobarbituric acid reactive substances predict cardiovascular events in patients with stable coronary artery disease: a longitudinal analysis of the prevent study. J Am Coll Cardiol 2004;44(10):1996–2002.
- Okonta NR. Does yoga therapy reduce blood pressure in patients with hypertension? An integrative review. Holist Nurs Pract 2012;26(3):137–41.
- Agte VV, Jahagirdar, Tarwadi KV. The effects of SudarshanKriya Yoga on some physiological and biochemical parameters in mild hypertensive patients. Indian J Physiol Pharmacol 2011;55(2): 183–7.
- Mahapure HH, Shete SU, Bera TK. Effect of yogic exercise on supra oxide dismutase levels in diabitics. Int J Yoga 2008; 1(1):21–6.
- Sinha S, Singh SN, Monga YP, Ray US. Improvement of glutathi-one and total antioxidant status with yoga. J Altern Complement Med 2007;13(10):1085–90.
- Bhattacharya S, Pandey US, Verma NS. Improvement in oxida-tive status with yogic breathing in young healthy males. Indian J Physiol Pharmacol 2002;46(3):349–54.
- Subbalakshmi NK, Saxena SK, Urmimala, D'Souza UJA. Imme¬diate effect of 'Nadi–Shodhana Pranayama' on some selected parameters of cardiovascular, pulmonary, and higher functions of brain. Thai J Physiol Sci 2005;18(2):10–16.
- Sukhdev S, Vishaw G, Ved P. Effects of a 6-week nadi-shodhana pranayama training on cardio-pulmonary parameters. J Physical Educ Sports Manage 2011;2(4):44–7.
- Frisoli1 TM, Schmieder RE, Grodzicki T, Messerli FH. Beyond salt: lifestyle modifications and blood pressure. European Heart J 2011;32:3081–7.
- Mossa MM, Bushra MM, Salih MR, May NY. Estimation of malondialdehyde as oxidative factor & glutathione as early detectors of hypertensive pregnant women. Tikrit Med J 2009; 15(2):63–9.
- Svetkey LP, Erlinger TP, Vollmer WM, Feldstein A, Cooper LS, Appel LJ et al. Effect of lifestyle modifications on blood pressure by race, sex, hypertension status, and age. J Human Hypertension 2005;19:21–31.
- Jiro M, Hiroshi I, Sanae H, Kazuo T, Tsuguru H, Tetsuo N, et al. Low frequency regular exercise improves flow-mediated dila-tation of subjects with mild hypertension. Hypertens Res 2005; 28:315—21.
- Pal GK, Chandrasekaran A, Hariharan AP, Dutta TK, Pal P, Nanda N et al. Body mass index contribute to sympathovagal imbalance in prehypertensives. BMC Cardiovascular Disord 2012;12:54
- Santella DF, Araujo EA, Ortega KC, Tinucci T, Mion D Jr., Negrao CE, et al. After effects of exercise and relaxation on blood pressure.

Khan et al: Effects of Yoga on Blood Pressure and MDA in Mild Hypertensive Patients

Clin J Sport Med 2006;16(4):341-7.

- Tyagi A, Cohen M. Yoga and hypertension: a systematic review. Altern Ther Health Med 2014;20(2):32–59.
- Alfaddal AA, Sallam RM. Reactive oxygen species in health and disease. J Biomed Biotechnol 2012;2012:936486.
- Aggarwal NT, Makielski JC. Redox control of cardiac excitability. Antioxid Redox Singal 2013;18(4):432–68.
- Sohal RS, Mockett RJ, Orr WC. Mechanisms of aging: an appraisal of the oxidative stress hypothesis. Free Radic Biol Med 2002;33(5):575– 86.
- Nandeesha H, Sathiyapriya V, Bobby Z, Pavithran P, Agarwal A, Selvraj N. Altered oxidant-antioxidant status in non-obese men with moderate essential hypertension. Indian J Med Sci 2007; 61(6):326– 31.
- 29. Subash P, Premagurumurthy K, Sarasabharathi A, Cherian KM. Total

antioxidant status and oxidative DNA damage in a South Indian population of essential hypertensives. J Hum Hypertens 2010;24(7):475–82.

- Gordon LA, Morrison EY, McGrowder DA, Young R, Fraser YT, Zamora EM, et al. Effect of exercise therapy on lipid profile and oxidative stress indicators in patients with type 2 diabetes. BMC Complement Altern Med 2008;8:21.
- Patil SG, Dhanakshirur GB, Aithala MR, Naegal G, Das KK. Effect of yoga on oxidative stress in elderly with grade-I hyper-tension: a randomized controlled study. J Clin Diabn Res 2014; 8(7):BC04–7.
- Singh S, Malhotra V, Singh KP, Sharma SB, Madhu SV, Tandon OP. A preliminary report on the role of yoga asanas on oxidative stress in non-insulin dependent diabetes mellitus. Indian J Clin Biochem 2001;16(2):216–20.

Copyright: (1) the author(s), publisher. Academia Journal of Medicine is an Official Publication of "Society for Health Care & Research Development". It is an open-access article distributed under the terms of the Creative Commons Attribution Non-Commercial License, which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

How to cite this article: Khan AA, Rehman AU, Zaidi AA. Effects of Yoga on Blood Pressure and MDA in Mild Hypertensive Patients of Western U.P. Acad. J Med. 2018;1(2):1-4.

DOI: dx.doi.org/10.21276/ajm.2018.1.2.1

Source of Support: Nil, Conflict of Interest: None declared.