How to Not Wreck Your Body Doing Yoga
or: How I Really Feel about Headstand

Timothy McCall, MD

By now most of you will have heard about if not yet already read the article in last Sunday's New York Times Magazine, entitled, "How Yoga Can Wreck Your Body." My email box has been lighting up. One message, from Colleen Duggan, read:

_I have gotten so many email inquiries from students that I am having to field because of this article, I thought I might write to you to find out what you really think. As you know, I am an iyengar certified teacher, and take inversions pretty seriously. A lot of people after reading the article are concluding that across the board inversions are unsafe and unwise to be doing. While, for many people I think inversions might not be a good idea for many reasons, I believe if a student is ready for inversions and well instructed by a proper teacher, they are fine, and the benefits make doing them worth it. What do you think? I want to be clear that I understand your position._

The buzz over the _Times_’ science writer William Broad’s article, has been spreading around the yoga world and in the media. One article in London’s _Daily Mail_, stated that, "physician Timothy McCall, medical editor of Yoga Journal, told Mr Broad that the commonly-practiced headstand is 'too dangerous' for most yoga classes.” Did I really say that? Well, not exactly. Actually, the Daily Mail has it wrong. I never told Broad anything because we never spoke. He seems to have read an article I wrote around 2003 for _Yoga Journal_ and based part of his article on that. And since the impression conveyed in the Times piece doesn’t accurately represent how I feel, I thought I’d review headstands, and the general topic of avoiding yoga injuries.

While most of us disagree with many of Broad’s conclusions, the fact is he is highlighting an important issue: Some people are seriously injured doing yoga. For that, we owe him and the _Times_ our gratitude. As many of you know, I’ve been writing about the issue of safety in yoga for years, in _Yoga Journal_ and elsewhere, and included a long appendix in _Yoga as Medicine_ on Avoiding Common Yoga Injuries. I’ve also been concerned that the problem has not being discussed more openly in the yoga world.
So here’s a quick list of my central thinking on headstands and yoga safety, as well as links to various articles I’ve written on the subject:

1. Some poses like headstand, shoulderstand and lotus are inherently risky if not done with good anatomical alignment.
2. Some people have contraindications to doing certain poses. So, for example, someone who has poorly-controlled high blood pressure or diabetic retinopathy should avoid headstand and other inversions as they could precipitate a retinal hemorrhage. I do not think that people who lack such risk factors need to worry that going upside down is going to cause retinal problems.
3. Some people who will eventually be able to do headstand without problems are not ready for it when they first come to yoga. Even though the pose is fairly easy to get into, they should wait until they’ve developed the strength and flexibility to do it safely.
4. Some public yoga classes are strenuous, regularly including many of the more acrobatic asana, which require considerable strength, balance and flexibility to do safely. Other classes are gentle, and injuries in them are rare.
5. In some classes, particularly large ones, students don’t get much individual attention when doing potentially risky poses, increasing the likelihood of dangerously poor alignment.
6. Many of the students drawn to vigorous styles of yoga are highly competitive, like to push their limits, and may ignore signals from the body -- like pain or erratic breathing -- that suggest they are doing too much. From an Ayurvedic standpoint, most of these yoga overachievers have a lot of either vata or pitta (or both) in their constitutions. When I lived in New York City in the late 90s, I regularly saw these folks roll up their mats and leave when the teacher called for Savasana. They weren’t going to waste their time relaxing, when they could be accomplishing something!
7. Just because some people get hurt doing particular practices -- usually due to poor alignment, over-efforting, or a failure to modify their practice in light of contraindications -- does not mean that people who are doing them with more skill and mindfulness are at risk.
8. Yoga can be adapted to meet the needs of just about anybody. They might not be doing headstand or Chaturanga Dandasana, but bedridden cancer patients, those with debilitating arthritis and children with developmental disabilities, for example, can do modified practices with great benefit. And don’t forget that yoga isn’t just asana. There’s visualization, pranayama, meditation, chanting, selfless service and countless other yogic tools.
9. Krishnamacharya called headstand and shoulderstand the king and queen of the asanas for a reason. They are, according to the yoga tradition, powerful practices that over time profoundly change the nervous system and the mind. If you are able to do these poses comfortably and with good alignment, the benefits almost certainly outweigh the risks.
10. Even though in rare circumstances practicing yoga might precipitate a heart attack or stroke, yoga – via its effects on stress hormones, blood pressure,
cholesterol, blood clotting, etc. -- greatly lowers the likelihood of your having either. Author Jim Fixx might have died of a heart attack while jogging, but this does not mean that on balance running is bad for your heart.

11. Beyond citing a few dramatic cases of yoga injuries, and making, to my mind alarmist calls to avoid inversions or yoga entirely, those making such suggestions need to provide a sense of how common these problems are in yoga compared to other activities. What would those who are injured in kick-butt classes have been doing instead of practicing yoga? Skate-boarding? Jogging in Central Park? Sitting on the couch?? All of those may be quite a bit riskier than practicing yoga, particularly if you’re doing your yoga in a smart way!

The Times article correctly mentions that I developed (in late 2001) a case of thoracic outlet syndrome (TOS), in which I believe headstand, plow pose and shoulderstand played a role. But part of it could also be blamed on my own stubbornness (I’ve got a bit of pitta myself). Just before I developed intermittent numbness and tingling in my right arm, I’d been increasing my headstands up to 10 minutes a day, even though that was more than I could comfortably do. I was allowing an external goal suggested by someone else -- not my own body’s feedback -- to dictate when I came down. I now believe that at the moment (or just before) you lose that balance of effort and ease in the pose, if your breath is rough, or if it just doesn’t feel good, you need to come out.

What’s noteworthy is that I also used yoga to heal from the TOS. For three years, I refrained from standard versions of all three poses. When I had access to wall ropes or
the pelvic slings you can hang from, I would do headstand that way. Instead of doing
the full shoulderstand with the feet directly over the shoulders (which despite the
impression you get from the article, most people do with blankets or other support under
the shoulders), I did chair shoulderstand (see photo). Indeed, chair shoulderstand,
which allows you to use your arms to gently coax more opening in the thoracic spine,
was probably the single most useful thing I did to overcome the TOS.

After 3 years of refraining from these poses, in 2004 I began to slow reintroduce them,
first shoulderstand, then headstand, and finally plow pose. By that time, the therapeutic
yoga I was doing, along with Ayurvedic treatments and other bodywork, had opened my
thoracic spine and shoulders enough that the poses were no longer contraindicated. I
now do both poses almost every day, and they feel wonderful. Yes, I had a satisfying
yoga practice without the poses, but am very happy to be able to do them again.

So my answer to Colleen’s email was that I agreed with every word she wrote. Not
everybody should be doing the poses like headstand, but if you don’t have a
contraindication, you’re getting good instruction, and you’re paying attention to the
feedback your body is giving you, you’re unlikely to do harm.

Links:

Headstand can have just as many risks as benefits. [Here are a few things to consider]
before going up.

Is it safe to go upside down when you’re having your period?

Talking With Your Doctor About Your Yoga Practice

Working With Students Who Have Yoga Injuries (Part 1)
Some advice regarding sources of yoga injuries and a yogic approach to their treatment
and prevention.

Working With Students Who Have Yoga Injuries (Part 2)
Dealing with common injuries: knee problems and aching backs.

Working With Students Who Have Yoga Injuries (Part 3)
Dealing with common injuries: wrists, hamstrings, and shoulders.

Working With Students Who Have Yoga Injuries (Part 4)
What do injuries have to teach us? Using yoga injuries and the healing process as a
vehicle for deepening your students’ practice.

And since we can all use a little levity in moments like this
Is Yogic Levitation Possible?