

Feature

Befriending Cancer Through Nutrition and Yoga Therapy: A Collaborative Approach

By Anu Kaur and Maryam Ovissi

Often after completing allopathic treatments such as surgery, chemotherapy, and radiation, cancer patients are looking to play an active role in their wellness, partly by fully understanding their choices in nutrition to prevent cancer recurrence. Research shows that nutrition can make a difference in outcomes with cancer patients.¹ However, currently in the outpatient cancer care setting the average ratio of registered dietitian nutritionists (RDNs) to cancer patients is 1 to 2,308.² Thus, patients often resort to their own means to make sense of nutrition and cancer prevention. Additionally, a cancer diagnosis often evokes feelings of vulnerability, loss, anxiety, and stress, which activates the sympathetic nervous system (SNS), the “fight-flight-freeze” branch of the autonomic nervous system (ANS).³ Both the SNS and the hypothalamic-pituitary-adrenal (HPA) axis are stress-response systems that elicit a release of stress (and other) hormones that may promote tumor growth and increase inflammation.⁴⁻⁶

Yoga research is showing us that breathwork, movement, and mind-centering practices can help manage the ANS and hence be therapeutic tools.⁷ We, the authors—Anu Kaur, an RDN, and Maryam Ovissi, a C-IAYT—recently chatted about our work together as allied health professionals. Listen in as we discuss how the combination of yoga therapy and nutrition therapy can fill a gap in whole-person wellness strategies and deepen the healing on the cancer journey.



Photos: Tumo Albert

A mindful dark chocolate meditation starting with smell.

Experiences That Brought Us to this Point

MO: My yoga therapy experience has come through my field work (over 10,000 private yoga therapy hours) and studying with teachers like Nischala Joy Devi, Dr. Ganesh Mohan, and the Mohan family. Most importantly through my client work, I am learning how cancer is a journey unlike other imbalances and can carry a lot of unspoken trauma. Yoga is an amazing companion through the entire continuum of cancer.

AK: Over the last two decades, I have worked as an RDN with patients on the cancer continuum from postsurgery to those undergoing allopathic treatments, such as chemotherapy, as they journey forward into survivorship. Hearing clients repeatedly speak of the stress of a diagnosis and the fear of recurrence has brought me to this place of discussing *nourishment*, rather than just offering prescriptive nutrition guidelines. My work has given me an appreciation for patients seeking an integrative approach that encompasses complementary modalities like yoga to improve quality of life through their cancer journeys. My own experience with yoga and the yoga research has sparked my collaboration with yoga therapists to teach cancer patients self-care through a mind-body-spirit approach.

Roles in Allied Healthcare

MO: I see a yoga therapist as an allied health provider. We work to support rehabilitation and management of the body, mind, and breath. The rigor of the training yoga therapists go through develops their understanding of disease and makes them great collaborators alongside other medical providers. I also believe that the increase in yoga research has brought about a growing awareness from a medical perspective of how important it is to involve mind-centering practices, breathwork, and appropriate levels of yoga-based movement. Across a spectrum of diseases, especially cancer, we need to cultivate integrative approaches and support lifestyle/habit changes that can be impactful to the healing journey.

AK: My role is to support each person in finding their optimal nutrition through a personalized lifestyle medicine approach. Medical nutrition therapy (MNT) starts with a nutrition assessment that is shared with doctors and other healthcare providers. Equally important is the translation of that nutrition information in terms of culinary medicine, which provides clients and their caregivers practical guidance on how to nourish themselves with healthy food. As an RDN, my goal is to help boost clients' immune systems via nutrition and to monitor for biochemical effects of treatment. Often cancer patients' appearance or weight does not reflect the sarcopenia (muscle loss) that can occur because of the accompanying metabolic changes brought on with cancer, which makes nutrition management all the more important. My goal is to help individuals make behavioral and lifestyle changes that are *long-lasting*; this is where I often feel allopathic approaches alone miss the mark.

Philosophy in Cancer Care: Our Approach

MO: My approach is client-centered and trauma-informed. On the journey with cancer, the cancer itself becomes the focal point and causes trauma, which yoga teaches us can be managed with some key elements. When cancer alone is the focus, often the client develops an attitude of war with cancer, rather than one of befriending cancer. Understandably, it initially seems very hard to imagine “befriending” something you want to eradicate. A trauma-sensitive approach embodies a few key principles: (1) the power of choice; (2) commitment to present-moment awareness through body orientation, breath, and sensation awareness; (3) use of rhythmic, repetitive, and hold methods; and (4) activating awe and wonder. In this way, a yogic trauma-sensitive approach supports us to cultivate an attitude of befriending ourselves: This is the gift cancer can offer us.

AK: Often, I am privy to a person’s “new normal” and how they take care of themselves. The physical changes and psychosocial stress, which can play havoc on the immune system, are factors that decrease our immune response and lead to inflammation. I start with food as medicine and focus on what to eat, along with when and how to eat (mindfully), especially given the current research on the importance of dietary patterns, mindfulness, and metabolic therapies such as fasting. Helping individuals recognize their stress response, be it long-term or from short bouts of stress, often creates an opening in the conversation to discuss self-care tools. I find if people can connect with their breath, they feel more grounded and calmer, and in many cases they have a deeper experience in connecting with feelings of satiety and mindfulness when eating. Our Befriending Cancer collaboration is done in a group setting with cancer patients, caregivers, and even allied health professionals coming together to create a *sangha* (community), which offers a connectedness that further supports healing.



Plant-based food shared in community.

Expanding Support for Clients

MO: The first question I ask clients on the journey with cancer is whether they have addressed their nutrition. If they haven’t, I always make a referral to Anu. From a yogic perspective, I work with clients to acknowledge the presence of the abnormal growth and appreciate its impact on the body. At the same time, we acknowledge the uncertainty the disease brings because we are still discovering what turns on and off the cancer markers in the body. Cancer affects us at the cellular level, and instead of working with cancer from a symptom-management perspective only, there is great value when we also consider the body and its building blocks. Nutrition needs

much more attention here. This is why Anu and I created the Befriending Cancer program, which combines yoga and nutrition therapy and offers a *felt experience* of breathing, yoga asana, and mindfully eating healthy foods, together.

AK: I refer people to a yoga therapist if their medical situation is complex and they have never been to a group yoga class. I want them to really understand their range of movement given their recent surgery, treatment, or symptoms before jumping into a group class. Often in the allopathic medicine setting, people have heard from their doctor that they should consider “doing yoga,” but they may be apprehensive or think of yoga only as a form of exercise. A yoga therapist has the skill set and ability to delve in deeper with emotions—viscerally, mentally, and energetically (breathwork)—and do *embodied* work.

Understanding Integration in Healthcare

MO: I believe nutrition is essential while we are working on the mind, breath, and movement, because until the layer of nourishment is addressed the therapy cannot fully integrate with the person. A person can meditate, exercise, and even have an extensive breathwork practice, but if they never address the layer of food the effects of yoga tools can be limited. For example, I had a client consuming a diet that was mostly starchy carbohydrates and high in refined sugar, with some protein and very little vegetables and water. She always felt a form of congestion and sluggishness often recognized as “brain fog.” When the client began to work with Anu and address her diet, I saw a significant shift in wellness that I know I couldn’t have helped her accomplish on my own. It was amazing to see how there was a clarity of focus and a greater ability to connect to a peaceful, calm center.

AK: I think yoga is essential because, by educating cancer patients as to how stress activates the SNS, they become motivated to pay attention to their breath. From my perspective, elements

of MNT can be enhanced if patients have the opportunity to learn first-hand how to manage inflammation, not only with diet, but by managing their stress. A growing number of RDNs are becoming yoga teachers who can use mind-body modalities such as yoga to offer more sustainability in maintaining a healthy weight, managing a chronic disease like cancer, and improving quality of life.

Using Yoga and Nutrition to Inform Each Other’s Practices

MO: Working with Anu has helped me maintain a balanced approach. Sometimes, yoga therapists can fall into what I call the

“bubble syndrome”: We live in a bubble where all our choices are received with enthusiasm from the yoga clients. Anu refers clients who are outside the bubble, and that allows me to look again at ways to present yoga as accessible and approachable. She supports me to become a wiser and more compassionate yoga therapist.

AK: Working with Maryam has offered me greater insight into my clients’ bigger picture of wellness. I have found people are calmer and often allow themselves more grace and compassion when yoga therapy is part of that picture. For example, one cancer survivor had been interested in exploring yoga but, like many others I have met, she had limited experience with yoga and concern about going to a studio. We had already incorporated some pranayama techniques to assist with sleep and fatigue, so there was an openness to meet with Maryam. After the patient signed a release-of-information consent form, Maryam and I were able to speak. Although my focus is nutrition, I encouraged the patient to do her yoga practice, as it came up in our lifestyle and behavior goals. Maryam simultaneously was able to gently remind her of some of the mindfulness nutrition goals we had set by incorporating breathwork and specific movement practices before meals. This informed my work and reinforced the value of an interdisciplinary approach with a yoga therapist for lifestyle and behavior changes in particular.

Moving Forward in Cancer Care

More National Cancer Institute (NCI)–Designated Cancer Centers are starting to provide information on modalities such as yoga (69%); however, fewer actually offer services themselves.⁸ The growth of this field is dependent on using an integrative medical model of cancer care in which the entire person is seen, heard, and respected. An integrative medical model of cancer would develop plans for cancer patients that include the medical treatment plan, movement, nutrition, breathwork, meditation, and social engagement activities. The emotional stress of cancer care has been shown by many studies to be managed by yoga, breathwork, meditation, and movement. Collaborations between yoga therapists and other allied health professionals like RDNs can create a synergy for wellness and cultivate long-term lifestyle and culinary changes to support cancer patients’ journeys into survivorship. Moving forward, finding cancer centers that hire integrative health navigators and coordinators will be a key aspect to mobilizing yoga therapy and RDN support for clients with cancer. Based on our experience of the Befriending Cancer Program, we have seen the efficacy of the inclusion of yoga and nutrition therapy together. **YTT**



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Maryam Ovissi, C-IAYT, is the founder of Beloved Yoga in Northern Virginia (www.BelovedYoga.com) and offers a unique Befriending Yoga Therapy Program, combining polyvagal science with yoga therapy. Maryam trains teachers and utilizes a blend of evidence-based tools with yoga therapy for a modern approach to befriending the whole self.

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