

A Comprehensive Review of Clinical Evidence on Pain, Fatigue, and Psychological Well-being

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DESCRIPTION

Fibromyalgia is a complex, chronic condition characterized by widespread musculoskeletal pain, fatigue, sleep disturbances, cognitive dysfunction, and mood disorders. Affecting approximately 2-4% of the global population—predominantly women—fibromyalgia presents a substantial challenge in clinical management due to its multifactorial nature and uncertain etiology. Standard treatments often include pharmacological interventions such as antidepressants, anticonvulsants, and pain relievers, along with cognitive-behavioral therapy and graded exercise. However, many patients continue to experience persistent symptoms, leading researchers and clinicians to explore integrative and complementary approaches. Among these, yoga has garnered increasing attention as a potential therapy to manage fibromyalgia symptoms. This article presents a systematic review of the evidence supporting the use of yoga in fibromyalgia care.

Yoga, an ancient practice integrating physical postures (asanas), breath control (pranayama), and meditation, is designed to harmonize the body and mind. In the context of fibromyalgia, yoga's emphasis on gentle movement, mindfulness, and relaxation appears particularly well-suited to address the condition's wide-ranging symptoms. Over the past decade, multiple studies have investigated the efficacy of yoga in fibromyalgia management, examining outcomes such as pain intensity, fatigue, sleep quality, psychological well-being, and overall quality of life.

A systematic review of 12 clinical studies—ranging from Randomized Controlled Trials (RCTs) to observational studies—was conducted to assess the effectiveness of yoga in fibromyalgia patients. Most of the included studies implemented yoga interventions lasting from 6 to 12 weeks, with sessions held two to three times per week. The yoga programs were tailored to the needs of individuals with chronic pain, often incorporating slow-paced movements, restorative poses, mindful breathing, and guided relaxation. Several studies also included education on stress management and self-care practices, aligning with holistic approaches to fibromyalgia treatment.

The review found that participants who engaged in regular yoga practice experienced significant improvements in pain severity and physical function. For instance, a well-designed RCT involving 53 women with fibromyalgia demonstrated that an 8-week yoga program led to a 31% reduction in pain and significant gains in pain acceptance and psychological resilience compared to a waitlist control group. Similarly, other studies reported reduced fatigue, better sleep quality, and improved mood among yoga participants, with some patients maintaining benefits even at follow-up assessments several months after the intervention.

Psychological outcomes were also noteworthy. Patients reported reductions in anxiety, depression, and perceived stress—common comorbidities in fibromyalgia that can exacerbate physical symptoms. The meditative and mindful components of yoga likely play a role in modulating the stress response and altering pain perception, contributing to a more positive illness outlook and greater self-efficacy.

While these findings are promising, the review also identified several methodological limitations across studies. Sample sizes were often small, and interventions varied widely in terms of duration, style of yoga, and intensity. Blinding was difficult to implement, and some studies lacked appropriate control groups. These limitations make it challenging to draw definitive conclusions or establish standardized yoga protocols for fibromyalgia. Nevertheless, the consistency of positive outcomes across diverse study designs suggests a real and clinically relevant benefit.

Importantly, yoga was found to be safe and well-tolerated by participants. Adverse effects were rare and typically limited to minor musculoskeletal discomfort, which was usually self-limiting. This safety profile makes yoga an attractive adjunctive therapy, particularly for patients seeking non-pharmacological options or those who experience side effects from medications.

CONCLUSION

The systematic review supports the growing body of evidence that yoga can be a beneficial and low-risk intervention for

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managing fibromyalgia. Yoga provides a comprehensive strategy that is well-suited to the many demands of fibromyalgia patients by addressing the psychological as well as the physical aspects of the illness. Though more high-quality, large-scale RCTs are needed to establish standardized guidelines, current evidence

suggests that incorporating yoga into multidisciplinary treatment plans can enhance symptom management, improve quality of life, and empower patients to take a more active role in their recovery.