Perspective

Role of Yoga in Supporting Psychological Recovery from Anxiety and Depression Disorders

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DESCRIPTION

Mental health disorders such as anxiety, depression, and Post-Traumatic Stress Disorder (PTSD) are among the most common and debilitating conditions worldwide. Traditional treatment approaches typically include psychotherapy, pharmacotherapy, or a combination of both. While these methods have proven effective for many, they are not universally accessible or sufficient, and they often come with limitations such as side effects, high cost, and incomplete symptom relief. As a result, there is increasing interest in integrative and complementary interventions, particularly those that are low-risk, low-cost, and holistic. One such intervention is yoga, an ancient mind-body practice that is gaining scientific credibility for its therapeutic effects. This article explores the findings of a meta-analysis examining the impact of yoga on anxiety, depression, and PTSD, and discusses the potential for integrating yoga into mental health care.

Yoga incorporates physical postures (asanas), controlled breathing (pranayama), and meditation or mindfulness. Unlike conventional exercise, yoga emphasizes the connection between the mind and body, promoting awareness, presence, and inner calm. This integrative quality is particularly relevant for individuals with mental health conditions, where dysregulation of the nervous system, stress response, and emotional processing play central roles.

The meta-analysis reviewed data from 25 Randomized Controlled Trials (RCTs) involving over 2,000 participants diagnosed with anxiety disorders, major depressive disorder, or PTSD. Interventions ranged from six to twelve weeks in duration, with most programs incorporating hatha yoga or trauma-sensitive yoga sessions conducted two to three times per week. Primary outcomes were measured using standardized scales such as the Hamilton Anxiety Rating Scale (HAM-A), Beck Depression Inventory (BDI), and PTSD Checklist (PCL).

Findings from the meta-analysis revealed that yoga interventions were associated with statistically significant reductions in symptoms of anxiety, depression, and PTSD across most studies. On average, participants experienced a 25-30% reduction in

anxiety and depressive symptoms and a 20-25% decrease in PTSD symptom severity compared to control groups receiving standard care or waitlist placement. These improvements were most pronounced in individuals with mild to moderate baseline symptoms and those participating in longer-duration programs.

The physiological mechanisms behind these outcomes are multifaceted. Yoga has been shown to regulate the autonomic nervous system by increasing parasympathetic (rest-and-digest) activity and reducing sympathetic (fight-or-flight) arousal. Breathing practices and meditative focus contribute to lower cortisol levels and improved vagal tone-both associated with emotional regulation and stress resilience. Neuroimaging studies have also demonstrated that regular yoga practice may influence brain regions involved in mood and trauma processing, such as the amygdala, hippocampus, and prefrontal cortex.

In addition to physiological changes, yoga fosters psychological resilience and self-efficacy. Many individuals with anxiety, depression, or PTSD report feeling disconnected from their bodies, emotions, or sense of self. Yoga encourages reconnection through mindful movement, breath awareness, and nonjudgmental observation, helping patients reclaim agency and a sense of inner stability. For trauma survivors in particular, trauma-sensitive yoga-an adaptation that emphasizes safety, choice, and body autonomy-has shown promising results in reducing hyperarousal and re-experiencing symptoms.

Importantly, yoga was well tolerated across the analyzed studies, with minimal reports of adverse effects. This positions yoga as a safe adjunct to existing mental health treatments. Its accessibility, low cost, and adaptability for diverse populations-including veterans, adolescents, and individuals with chronic illnesses-make it a particularly appealing option in community and outpatient mental health settings.

Despite these encouraging findings, the meta-analysis also identified several limitations. Heterogeneity in intervention styles, frequency, and instructor qualifications make standardization difficult. Additionally, most studies lacked long-term follow-up, limiting conclusions about sustained effects. More rigorous, large-scale RCTs with consistent protocols are

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needed to establish best practices for integrating yoga into clinical mental health care.

CONCLUSION

The integration of yoga into mental health treatment strategies for anxiety, depression, and PTSD offers a promising, evidence-

based approach to support emotional healing and psychological resilience. As mental health professionals and systems seek more holistic and patient-centered models of care, yoga emerges not merely as a complementary practice but as a transformative tool that bridges body and mind in the journey toward recovery.