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The Effect of Slow Alternate Nostril Breathing on Respiratory Efficiency and Saturation of Peripheral Oxygen (SpO2) in Asthma Patients.

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Introduction : Asthma is a chronic lung disease caused by inflammation and muscle tightening around the airways making it harder to breathe. Alternate nostril breathing has been reported to improve cardiovascular, respiratory, mental, and physical health; and this research aims to prove the benefit of alternate nostril breathing in increasing respiratory efficiency and SpO2 in asthma patients. Aim and objectives : To measure the effect of 3 weeks of slow alternate nostril breathing on respiratory efficiency and SpO2 in asthma patients. To compare the outcomes with the results of the control group. Methods and materials: \$tudy Design : Interventional study \$tudy place : Velammal Medical Hospital Sample Size : 40 Asthma patients (20 Patients for test and control groups each) Study duration : 3 weeks Study population : Asthma patients Inclusion criteria: Exclusion criteria: Patients with COPD Both genders 1. 1. Patients with diabetes mellitus and 2 2. Age: 20 to 40 years 3. Patients with controlled asthma hypertension Procedure: The following parameters are assessed in Test and control groups : 1.Breath holding time. 2. Airway patency by peak expiratory flow rate. 3. SpO2 by using a pulse oximeter. Patients in the test group are made to practice slow alternate nostril breathing daily, while no intervention is done for the/control group. Outcomes of both the groups are compared on re-evaluation after 3 weeks and results are analysed using SPSS software. Result: Breath holding after normal inspiration Breath holding after normal expiration Mean Std.Dev Mean Std.Dev Pre - Test Post - Test 11.95 13.4 1.791 1.667 5.65 6.55 1.387 1.356 0.00069 P value P value 0.02008 PEFR SpO2 Mean Std.Dev Mean Std.Dev Pre - Test Post - Test 93.35 96.50 1.424 0.319 333.25 375.50 24.402 21.879 P value 0.0032 P value 0.0011 The data was entered into MS Excel and Mean, standard deviation and p- values were found for the test group. All the results are statistically significant. On comparing with the control group, there was no significant change. (p = 0.0603) Discussion: П 1. Decreases alveolar dead space PEFR 2. Increases alveolar ventilation Slow alternate 3. Strengthens the respiratory muscles nostril breathing holding time 4. Increases perfusion of the lungs and SpO2 Conclusion: Alternate nostril breathing has an advantageous effect in asthma patients by increasing their overall respiratory efficiency and SpO2 and improving airway patency in the asthmatic group. References: Dinesh T, Gaur GS, Sharma VK, Madanmohan T, Kumar KH, Bhavanani AB. Comparative effect of 12 weeks of slow and fast pranayama training on pulmonary function in young, healthy volunteers: A randomized controlled trial. International journal of yoga. 2015 Jan;8(1):22.