

Pediatric autism spectrum disorder: Role of yoga prana vidya system as complementary medicine in accelerating patient progress

Mythili R Iyer¹, Venkata Satyanarayana Nanduri²

From ¹Certified YPV Healer and Senior YPV Trainer, Pune, Maharashtra, ²Consultant, Research and Publications, YPV Ashram, Sri Ramana Trust, Thally, Tamil Nadu, India

ABSTRACT

Autism spectrum disorder (ASD) is a complex formative condition, described by tenacious difficulties in social cooperation and correspondence and confined and dreary behavior. There is no solution for Autism and a few treatments are accessible as well as certain drugs to further develop life for impacted youngsters and grown-ups. This paper presents a case of a boy who was treated from the age of 8 years with Yoga Prana Vidya (YPV) healing complementarily to other therapies achieving positive progress. This study uses the case study method by going through the patient's medical records, the healer's records, and the patient's mother's feedback. YPV healing was applied as a long-term intervention spanning 3 years, complementary to home-based "Son-Rise" program therapy. Within the first 15 days of YPV healing, the boy's improvements were noticeable, and progress began after a stagnant condition over the previous 2 years. After 3 months of YPV intervention, the boy became more receptive to faster learning. After a year of healing, the boy's condition improved from Grade 1 to Grade 2 of the "Son-Rise" gradation. At the end of the 3rd year, the boy achieved most of the Grade 3. YPV healing is being continued further. The integrated and holistic system of YPV healing therapy was successfully applied to the autism case as a complementary therapy, achieving the patient's faster progress, and enabling parents to overcome social stigma. Further research is recommended on the application of YPV healing therapy in the treatment of ASD.

Key words: Autism spectrum disorder, Yoga prana vidya system®, YPV®

INTRODUCTION

Autism Spectrum Disorder (ASD)

ASD is a complex developmental condition, characterized by persistent challenges in social interaction and communication and by restricted and repetitive behaviors [1]. Autism is a spectrum disorder, meaning it can manifest differently in each person. Because of this, there is wide variation in the support needs of autistic people. For example, some are non-speaking, while others have proficient spoken language. It affects one in hundred children across the world [1].

Psychiatry has traditionally classified autism as a neurodevelopmental disorder, but the Autism Rights Movement and some researchers see autism as part of neurodiversity, the natural diversity in human thinking and experience, with strengths, differences, and weaknesses. Although there is no cure for autism, early behavioral interventions can help children with speech delays gain self-care and social, and language skills.


Independent living is unlikely in those with higher support needs. So, an intervention for them requires finding and learning alternative modes of communication. Children and adolescents with ASD often use complementary and alternative medicine (CAM), usually along with other medical care [2].

This paper presents a case of Pediatric Autism Disorder in a boy, in which case Yoga Prana Vidya (YPV) played a crucial role as complementary medicine in helping the patient achieve faster progress while undergoing other therapy named the Son-rise programme® (SRP).

An intensive, child-centered approach to autism intervention, the SRP incorporates strategies to encourage child-initiated social interactions. Parent preparation is a significant component of SRP, which is planned to be executed in locally established programs. A study by Theodore *et al.* revealed that children who received SRP intervention from their parents reported significant gains in communication, sociability, and sensory and cognitive awareness, with higher gains associated with high-intensity interventions than with low-intensity ones [3]. These discoveries support the viability of parent-conveyed SRP mediation for advancing social-open conduct in kids with chemical imbalance range issues [3].

Correspondence to: Venkata Satyanarayana Nanduri, Consultant, Research and Publications, YPV Ashram, Sri Ramana Trust, Thally, Tamil Nadu, India. E-mail: vsnanduri@yahoo.com

© 2023 Creative Commons Attribution-NonCommercial 4.0 International License (CC BY-NC-ND 4.0).

Access this article online	
Received- 29 July 2023 Initial Review- 08 August 2023 Accepted- 14 August 2023	Quick Response code 
DOI: 10.32677/ijch.v10i8.4185	

YPV System

YPV is a holistic healing modality where the healer works on the imbalances in the Energy body of humans as well as animals. The energy body in humans houses the chakras and Nadis and with the YPV healing modality, a YPV-trained healer brings about a balance in the chakras and helps in a free flow of “prana” or energies in the energy body. YPV healers and researchers have published over 85 research papers that highlight how this healing modality is used successfully as a CAM to bring relief to patients suffering from various illnesses holistically.

YPV system recognizes that the chakras in the energy body of autistic children are weak and the flow of energy to the brain is minimal. By administering YPV healing protocols, a trained healer can improve the strength of the chakras and help the flow of energy toward the brain and other parts. This helps in the faster recovery and development of the child.

CASE REPORT

Pediatric Patient Details

The boy was resident in New Delhi with his parents. This child was born in April 2012 and was diagnosed with autism when he was 2½ years old.

Pre-YPV Condition of the Child

After the diagnosis, treatment therapies were started under the guidance of a psychologist and therapist team at a Hospital in New Delhi. Initially, he was diagnosed with pervasive developmental disorder, then after 1 year, an early intervention program was started along with therapies such as speech, occupational therapy (OT), special education, and sensory protocol. The therapies used to last from 4 to 6 h. Despite administering such intensive therapies for over 5 years, the boy's autism deteriorated. His parents could not see any improvement in him, and on the contrary, felt its severity increasing. During the therapies, no medicines were given to the boy for autism.

Then, after almost 5 years of aggressive therapies, in 2018 his parents switched to a home-based SRP after which they could see some minor changes. At this point, they stopped all therapies except OT.

The SRP program has gradation from one to five. One is autistic and five being free of autism, signifying a higher grade is an improvement. The parents must undergo training, and therapies are done at home. Here too, it was difficult for the boy to rise from Grade 1 to Grade 2 (from nil to the next level).

As things got worse in 2020 due to the prevailing COVID pandemic, and because of the associated fears and conditions in the family, there was a big regression in the child. He became aggressive, with frequent severe meltdowns. He was showing reflexes of fear. It was as if he was seeing and fearing someone and was very scared. He could not sleep through the night and

used to shout and hit himself. Hence, despite giving all therapies and interventions, they were feeling helpless.

YPV Intervention

This child was then 8 years old when his parents approached for YPV healing intervention for him. Introduced by a friend. The boy's mother contacted the YPV healer who agreed to heal the boy and recommended that the mother too learn the healing modality. In this process, the YPV healer conducted healing sessions for the child starting July 1st, 2020.

The Healing techniques applied were: Standard YPV Psychotherapy with extended protocols for lower chakrams and minor chakrams of the arms and legs. Feedback was obtained closely and therapy was tweaked depending on the child's condition, whether he was being quiet or agitated. The special technique of sublimation or transmutation of energies was used, which is special for such conditions given within the teachings of YPV Level 3. This helped accelerate the learning process of the child as observed by the parents. Thus, balancing all chakrams and additionally channeling energies as required for the brain and upper chakrams is the overall healing process in this case.

The boy's parents and the healer noticed a substantial difference in the first 15 days of healing. The child became calm, and relaxed, and started sleeping well. After a month, the mother felt confident of YPV Level 2 and Level 3 healing modality and she too started healing the child alternately along with the healer.

After 3 months of YPV intervention, they could see the boy more receptive and the learning started happening faster. They stopped all other therapies as the mother could calm the boy on her own. He has been showing tremendous improvement from the time his healing started.

After healing for a year, the boy could achieve Grade 2 of the SRP gradation. The parents could see his sensory perceptions improving, he started learning much quicker, and most importantly, he was found smiling more often. The healer and the parents observed that the YPV intervention accelerated the boy's progress in SRP therapy. During this phase, no medicines were given to the boy for autism, and other conditions such as those suffered from severe dengue, coronavirus, or convulsion attack. They were able to recover the boy through the YPV healing modality alone at these various points.

Condition Post-YPV Intervention

As of May 2023, the parents were continuing the SRP therapy. The boy reached Grade 3 except in speech where he was at the level of Grade 2. YPV healing is being continued for the boy who is improving gradually. The Child was able to eat food on his own, brushing teeth by himself, and started enjoying skating.

During the phase where the mother was learning YPV, she was very receptive and deeply understood concepts of forgiveness, meditation, and the Law of Karma. She followed the guidelines of doing meditation and blessing, practicing forgiveness very

diligently, and used to offer gratitude for every small improvement. She managed to overcome social stigma considerably.

The feedback received from the boy's mother during May 2023 stated that with continuous YPV healing intervention, the boy remained under control, and became calmer and happier (without any medicines). The boy continued making progress with a higher grade in the SRP program.

DISCUSSION

According to the WHO, about 1 in 100 children has autism [4]. A study by the International Clinical Epidemiology Network suggests that ASD prevalence across five States in north and west India was as high as one in 125 children between the 2- and 6-year age group and 1 in 80 among children in 6–9-year age; overall the prevalence in India is estimated to be 1 in 89 [5].

Irritability is common in pediatric ASD patients. This can have major implications for child development, receptivity to behavioral therapy, as well as child and caregiver well-being [6].

There are multiple practices and various interventions currently available in India to help treat a child with autism [7]. The findings of a study by Bharat *et al.* revealed that in India, there are many interventions available. Yet, 90% of the organizations were not able to publish their short or long-term results. Most of the organizations agreed that the main problem they face is that with the use of various interventions, they were only able to control the symptoms for a period, and another problem faced was that the parents of these kids keep moving from one therapy center to another due to which they were not able to see long term results of the interventions provided by them. Under these circumstances, there is little hope for these children and there is a need for a program with a clear outcome-based intervention [7].

Previously, YPV system researchers and practitioners published a study on how successfully a YPV intervention was conducted for mentally retarded children [8], and a case of Status Epilepticus healed successfully by the application of YPV intervention [9].

Other pediatric cases successfully healed by YPV healers reported are - a case of Nocturnal Enuresis by Leelavathi and Nanduri [10], and a case of Congenital Cytomegalovirus by Sumani *et al.* [11].

Parents of children with autism experience a sequential process of stigmatization which begins with negative stereotyping, loss of societal status, separation, and isolation and culminates into discrimination [12]. A study by Patra and Patro [13] revealed that parents experienced social stigma in terms of negative labeling, negative comments, and exclusion from society. Experience of stigma and discrimination has a negative impact on help-seeking behavior [13]. It is observed that YPV protocols helped the parents of the boy, in this case, to erase and forget about the stigma; as stated by the boy's mother, their neighbors and friends welcomed the improvements achieved and were able to dismantle the isolation barriers. It is pertinent to note that other ailments and issues got resolved for the patient, mother, and family.

The evidence gathered from this study has established a *prima facie* suitability of this YPV intervention as a complementary medicine in the case of an autism-affected boy on the recovery

path. Despite its limitation as a single-case outcome, it is expected to encourage other researchers to replicate this method for other autism cases as well.

CONCLUSION

The YPV system has great scope to offer improvements to Autism affected children and adults. Further research with an appropriate sample and methodology is recommended. Frontline health workers and various health-care service providers will be benefitted by acquiring a working knowledge of YPV System protocols which they can successfully apply as complementary to their respective professions.

CONTRIBUTION DETAILS

Mythili Iyer: YPV intervention, data collection. Nanduri VS: Data analysis, writing up of the full article, journal selection, and submission, follow-up till publication.

REFERENCES

1. Penner M, Anagnostou E, Andoni LY, Ungar WJ. Systematic review of clinical guidance documents for autism spectrum disorder diagnostic assessment in select regions. *Autism* 2018;22:517-27.
2. Perrin JM, Coury DL, Hyman SL, Cole C, Reynolds AM, Clemons T. Complementary and alternative medicine use in a large pediatric autism sample. *Pediatrics* 2012;130 Supp 2:S77-82.
3. Theodore J, Schuchard J, Thompson C. Training parents to promote communication and social behavior in children with autism: The son-rise program. *J Commun Disord Deaf Stud Hear Aids* 2016;4:1.
4. WHO. Autism. Available <https://www.who.int/news-room/fact-sheets/detail/autism-spectrum-disorders> 2022 [Last accessed on 2023].
5. Tiwari R, Purkayastha K, Gulati S. Public health dimensions of autism spectrum disorder in India: An overview. *J Compr Health* 2021;9:57-62.
6. Fallah MS, Shaikh MR, Neupane B, Rusiecki D, Bennett TA, Beyene J. Atypical antipsychotics for irritability in pediatric autism: A systematic review and network meta-analysis. *J Child Adolesc Psychopharmacol* 2019;29:168-80.
7. Bharat R, Yadav TU, Niranjana S, Jaiswal S. A study of current interventions for autism spectrum disorder in India. *Int J Indian Psychol* 2022;10:306-14.
8. Rajkumari K, Bembalkar S, Nanduri VS. A Pilot study of the effects of Yoga Prana Vidya (YPV) protocols on social behaviour, cognitive abilities and IQ of mentally challenged children. *Pediatr Rev Int J Pediatr Res* 2021;8:7-15.
9. Rajkumari K, Nanduri VS. Successful management of status epilepticus with yoga prana vidya healing as a complementary therapy: A case study of atypical febrile seizure. *Innov Publication J Paediatr Nurs Sci* 2021;4:73-6.
10. Leelavathi N, Nanduri VS. Treatment of nocturnal enuresis using yoga prana vidya healing protocols: A Case Study. *Int J Pharm Bio Med Sci* 2023;3:45-9.
11. Sumani M, Madhavi S, Nanduri VS. Treatment of a congenital CMV (*Cytomegalovirus*) case in an infant by the application of yoga prana vidya healing methods: An in-depth case study. *J Med Sci Clin Res* 2022;10:39-47.
12. Mukolo A, Heflinger CA, Wallston KA. The stigma of childhood mental disorders: A conceptual framework. *J Am Acad Child Adolesc Psychiatry* 2010;49:92-103.
13. Patra S, Patro BK. Affiliate stigma among parents of children with autism in Eastern India. *Asian J Psychiatry* 2019;44:45-7.

Funding: None; Conflicts of Interest: None Stated.

How to cite this article: Iyer MR, Nanduri VS. Pediatric autism spectrum disorder: Role of yoga prana vidya system as complementary medicine in accelerating patient progress. *Indian J Child Health*. 2023; 10(8):107-109.