

## CHAPTER 3

### 3.0 Scientific review

#### 3.1 Scientific Literature review of Yoga and Substance use

[Table 1]

| S/no | Citation  | Sample Size                                    | Design/Duration                                     | Variable study  | Result  | Summary  |
|------|---|--|---|---|---|--|
| 1    | (Anju et al., 2015)                             | 84 (experimental n = 55, control group n = 29) | Randomized control trial<br>3 days 12 hrs           | i, WHO Quality of life Brief Scale  | Sky has significant increase in physical, psychological and environment domains but urine screen test results were negative when drugs, was not taken | SKY program had effective treatment prognosis in substance abusers |
| 2    | (Hallgren, Romberg, Bakshi, & Andreasson, 2014) | 55 women                                       | RCT<br>8 weeks CBT(3&6 months follow up)            | i, Smoking self-efficacy<br>ii, Anxiety (STAIT)<br>iii, Smoking situation temptation scale<br>iv, CESD- 10 (depression symptoms)<br>v, Fagerstrom tolerance questionnaire | Yoga group had significant reduction in alcohol consumption compared with treatment as usual  | Yoga helps to sustain alcohol cessation                            |
| 3    | (Shahab, Sarkar, & West, 2013)                  | 96 subjects                                    | Randomized control trial                            | i, The Shiffman-Jarvis scale<br>ii, The Fagerstrom test   | Yogic breathing techniques helped to control craving among smokers to smoke in the post intervention period   | Yoga breathing helped abstinent cigarette smoker                   |
| 4    | (Bock et al., 2012)                             | 55 women                                       | Randomized control trial<br>8 weeks (3 and 6 follow | i, Smoking history and nicotine dependence (FTND)<br>ii, Anxiety (STAIT)  | <i>Vinyasa</i> yoga program established higher rates of smoking cessation in women smokers  | <i>Vinyasa</i> yoga helps to sustain smoking cessation             |

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|   |   |  | up)  | iii, Depressive symptoms (CESD-10)<br>iv, Short- form health survey; SF- 36)  |   |  |
| 5 | (Elibero, Janse Van Rensburg, & Drobes, 2011) | 76 daily smokers   | Randomized control trial                                     | i, The Questionnaire of Smoking Urges–brief   | <i>Hatha</i> yoga and aerobic exercise showed positive results in craving and helps to promote positive health  | <i>Hatha</i> yoga & aerobic exercise can reduce cigarette craving among chain smokers  |
| 6 | (Khalsa, Khalsa, Khalsa, & Khalsa, 2008)      | 8 subjects<br><i>Kundalini</i> yoga  | Repeated measure design<br>90 days (3 & 12 months follow up) | i, The Perceived Stress Scale<br><br>ii, Behavior and Symptom identification Scale<br><br>iv, Quality of Recovery Index   | <i>Kundalini</i> yoga treatment showed significant improvement in recovering patients with substance use disorders  | <i>Kundalini</i> yoga practisner achieved flexibility, physical strength, increased energy levels, clearer complexion, more focused & better eye contact |
| 7 | (Bowen et al., 2006)                          | 173 ( 57 VM, 116 TAU)<br>Follow up in 3 Months (29 VM,58TAU ) 6 Months (27 VM, 51 TAU) | Randomized control trial<br>10 days course                   | i, The life orientation test<br>ii, The brief symptom inventory<br>iii, The white bear suppression inventory<br>iv, Drinking related locus of control scale<br>v, The short inventory of problems<br>vi, The daily drug taking questionnaire<br>vii, The daily drinking questionnaire | <i>Vipassana</i> meditation participants showed decrease in alcohol-related problems and psychiatric symptoms as well as increase in positive psychosocial outcomes | <i>Vipassana</i> meditation participants had significant improvement in psychiatric symptoms, controlling alcohol intake and higher levels of optimism   |

|   |                               |             |                                    |   |  |   |
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| 8 | (Vedamurthachar et al., 2006) | 60 subjects | Randomized control trial (3 weeks) | i, Beck Depression Inventory<br>ii, Plasma cortisol, ACTH and Prolactin were measured | <i>Sudarshana Kriya</i> yoga in alcohol-dependent subjects showed reduction in stress-hormone levels (Cortisol and ACTH) along with depression | <i>Sudarshana Kriya</i> yoga showed major antidepressant effects among alcohol-dependent after acute phase of detoxification and had lower plasma level of ACTH |
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### 3.2 Scientific Literature review on Physical exercise based intervention [Tables 2]

| S/no | Citation                  | Sample Size                               | Design                                  | Variable study  | Result  | Summary  |
|------|---------------------------|---|---|---|---|--|
| 1    | (Loprinzi & Kane, 2015)   | 87 young adults                           | Randomized controlled design(12 months) | i, Cognitive assessments<br>ii, Sedentary behavior questionnaires                       | Acute bouts of moderate intensity exercise had significantly higher result in concentration related cognition compared then cognitive assessment without exercise | Acute moderate intensity exercise has positive effect in sedentary behavior, fitness and executive functions |
| 2    | (Nishiguchi et al., 2015) | 48 older adults (exercise 24, control 24) | Randomized controlled design(12 weeks)  | i, Trail Making Test<br>ii, Wechsler Memory Scale<br>iii, Mini-Mental State Examination | Multi model exercise significantly improved memory, executive function and the efficiency of brain activation in older adults                                     | Physical exercise with cognitive program helped to improve the efficacy of brain activity in older adults    |
| 3    | (Lee & Kim,               | 68 males                                  | Single group                            | i, Body Composition   | Physical activity along   | Physical activity had  |

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|   | 2014)                                     | adolescents   | study<br>(16 weeks<br>obesity<br>intervention)   | Analyzed<br>ii, Exercise Self- efficacy<br>Scale<br>iii, The Decision Balance<br>Scale<br>iv, Leisure-Time Physical<br>Activity Scale            | with obesity intervention<br>and behavior based<br>motivation intervention<br>had significant contribution<br>to reduce BMI on male<br>obese  | positive significance<br>among obese adolescents<br>and positively changed<br>their psychological<br>variable  |
| 4 | (Henchoz et al.,<br>2014)                 | 4748 Swiss<br>young men<br>15 months<br>follow up<br>study                              | Cross-sectional<br>study                         | i, Physical Activity<br>Questionnaire<br>ii, Risky Single Occasion<br>Drinking   | Sports and physical activity<br>had positive association<br>with at-risk use of<br>cigarettes, cannabis and<br>alcohol  | Exercise and sports has<br>association to lower<br>prevalence of substance<br>use  |
| 5 | (Hu et al.,<br>2014)                      | 198 mild<br>cognitive<br>impairment<br>subjects<br>(exercise96,c<br>ontrol<br>group102) | Longitudinal<br>study<br>(randomly<br>selected ) | i, The Chinese Mini- Mental<br>Status Examination<br>ii, The Revised Activity of<br>Daily Living Scale<br>iii, Activity of Daily Living<br>Scale | Physical exercise showed<br>significant improvement in<br>cognitive function<br>(immediate memory and<br>delay recall function)<br>physical abilities and body<br>movement capacity | Active exercise can<br>successfully promote<br>cognitive function among<br>ageing people with mild<br>cognitive impairment and<br>decrease the dementia<br>problem |
| 6 | (Martinsen &<br>Sundgot-<br>Borgen, 2014) | 677 athletes<br>& matched<br>controls (n=<br>421 students)                              | Cross-sectional<br>study                         | i, Questionnaire<br>Cigarettes, alcohol & illicit<br>drug performance-enhancing<br>illicit drug use (no,<br>occasionally, every day)             | The study indicates higher<br>prevalence of smoking, and<br>alcohol use in adolescent<br>athletes   | Sports culture helped to<br>reduce the use of drugs  |
| 7 | (Hogan et al.,<br>2013)                   | 30<br>adolescents   | Randomized<br>controlled<br>design               | i, Go/No Go Task<br>ii, EEG Recording  | Physical fitness and<br>aerobic exercise showed<br>significant improvement in<br>cognitive function by<br>increasing the efficacy of<br>attention                                   | Physical fitness and<br>aerobic exercise helped<br>adolescents to be fit and<br>react faster   |

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| 8  | (Magnan, Kwan, & Bryan, 2013) | 354 elite athletes   | Randomized controlled design    | i, Seven days Physical Activity Recall Scale<br>ii, Exercise Self-Efficacy Scale<br>iii, The PAAS (Lox et al., 2000)                              | Bout of moderate intensity exercise showed higher levels of positive effects and tranquility and lower level of negative effects and fatigue on elite athletes                | Bout exercise helps to increase positive effects and reduce negative effects and fatigue in elite athletes                 |
| 9  | (Berg et al., 2012)           | African American light smokers (n = 539)                               | Randomized control design study | i, Smoking self-efficacy questionnaire  | Exercise brought better control in smoking behaviors and improve self-efficacy in light smokers   | Regular exercise and walking helped to reduce risk factors and other health issues   |
| 10 | (Horn et al., 2011)           | High school student (n = 233)  | Randomized control design       | Self-classified, 7 days point prevalence quit rates (3 and 6 months after baseline) and carbon monoxide validation (3-month follow-up)            | The N-O-T +FIT group had significantly higher cessation rates compared with those in the N-O-T and BI group   | Adding physical activity to N-O-T may enhance smoking cessation  |
| 11 | (Taylor-Piliae et al., 2010)  | TaiChi 37, Western exercise 39, and control group 56 in healthy adults | Randomized control design       | i, Digit- Spam Tests<br>ii, Physical Activity Questionnaire<br>iii, Animal-Naming Tests<br>iv, Sit-&-Reach Tests<br>v, The Single-Leg stance Test | Cognitive functioning showed that western physical exercise had better improvement in upper body flexibility than TaiChi and TaiChi had greater results in balancing the body | TaiChi, & western exercise had a positive impact in various functional domains, & cognitive function in healthy adults     |
| 12 | (Luft et al., 2009)           | 30 high level track & field athletes (23 males, 7 females)             | Cross-sectional study           | i, Detection or Simple Reaction Time<br>ii, Identification or Choice Reaction Time<br>iii, Working Memory or One-Back Task                        | High-level track field athletes showed significantly increased in sympathetic modulation and HRV  | Correlation between HRV and cognitive performance among high level track field athletes showed stronger significance after |

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|    |                          |   |                                     | iv, One Card Learning Task<br>v, Continuous Monitoring Task<br>vi, HRV measures  |   | physical exercise   |
| 13 | (Brown et al., 2010)     | Drug-dependent individuals (n = 16)             | Pre-post study design               | i, Time-line follow back (Sobell & Sobell, 1996)   | Aerobic exercise increased cardiorespiratory fitness and abstinence from alcohol & drugs  | Aerobic exercise adjunct for drug treatment of substance abusers  |
| 14 | (Lucas et al., 2009)     | 60 athletes (100 hrs exercise)                  | Pre-post study                      | i, Biodex Isokinetic Dynamometer<br>ii, Monark Cycle Ergometer<br>iii, Recco Cycle Ergometer vertical Jump Tester<br>iv, Stroop Test | 100 hrs of competitive exercise helped on complex decision making during sustained stress and had moderate impact on functional performance on upper and lower limbs      | Exercise helps to reduce stress level and show impact on functional performance                             |
| 15 | (Weinstock et al., 2008) | Drug-dependent individuals (n = 187)            | Randomized clinical trials          | i, Addiction Severity Index (McClellan et al., 1992)   | Exercise related activities had a longer duration of abstinence from substance use  | Exercise had a beneficial outcome for individuals undergoing SUD treatment                                  |
| 16 | (Nabkasorn et al., 2006) | 59 adolescent women mild to moderate depression | Randomized clinical trials (16week) | i, Depressive symptoms CES-D Scale<br>ii, Radioimmunoassay<br>iii, Liquid Chromatography<br>iv, Spirometer                           | Physical exercise with jogging reduced excretions of stress hormones and significantly decrease resting heart rate, increase peak oxygen uptake and improve lung capacity | Physical exercise had a positive result in depressive score, excretion of cortisol and epinephrine in urine |
| 17 | (Hillman et al., 2006)   | 241 community-dwelling individuals              | Cross sectional study               | i, Wechsler Adult Intelligence Scale<br>ii, Erikson Flanker Task<br>iii, Dutch Adaption of the                                       | Physical activity showed beneficial effect on general and selective aspects of cognition in older adults  | Physical exercise had good impact on cognitive function in older adults                                     |

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| 18 | (Werch et al., 2003)            | 465 students                          | Randomized control trials (3groups) | i, The Youth Alcohol & Health Survey<br>ii, Youth Risk Behavior Survey<br>iii, Sport Consultation plus Alcohol Preventive Consultation | Regular physical exercise, and counseling to students about health habits, with and without parents had potentially reduced the length of alcohol use | Regular exercise, healthy well-being, and psychic counseling is effective to reduce alcohol use            |
| 19 | (Kulig et al., 2003)            | High school student (n = 15,349)      | Cross-sectional survey              | i, Youth risk behavior & Cigarettes, alcohol & illicit drug use questionnaire  | Physically active students were less likely to be substance users or engage in sexual risk behaviors  | Physical exercise & Team sports activity were associated with lower prevalence of health risk behaviors    |
| 20 | (Kirkcaldy et al., 2002)        | Adolescents = 1000 (aged 14–18 years) | Cross-sectional survey              | i, Cigarettes, beer & marijuana use questionnaire  | Adolescent with regular physical activity had lower anxiety & depression scores and display much less social behavioral inhibition                    | Exercise provides more positive social feedback and recognition towards society,                           |
| 21 | (Field, Diego, & Sanders, 2001) | High school students (n=89)           | Cross-sectional design              | i, Cigarettes, alcohol & illicit drug use questionnaire  | High level of exercise lowers the frequency of drug use and substance abusers are less depressed  | Regular exercise had positive impact to lower depression and maintain good relationship with their parents |
| 22 | (Collingwood et al., 2000)      | High school students (n = 329)        | Pre–post design study               | i, Questionnaire cigarette, smokeless tobacco, and illicit drug use<br>ii, The general well- beings scale                              | Physical fitness helps to lower substance abuse risk factors and substance use  | Physical exercise had a favorable effect on substance abuse risk factors and use patterns                  |

### 3.3 Scientific Literature review of Substance abuse and Mindfulness

[Tables 3]

| S/no | Citation                           | Sample size                            | Design/<br>Duration                    | Outcomes measures<br>variable study   | Result  | Summary   |
|------|------------------------------------|--|--|---|---|---|
| 1    | (Brewer et al., 2009)              | Alcohol/cocaine use disorder–36        | Comparative study (1 week)             | i, Stress   | Mindfulness training has shown promising result for stress-related maladies and efficacious in targeting stress     | Mindfulness training was better complementary therapy to reduce stress than CBT                                     |
| 2    | (Glasner-Edwards et al., 2017)     | 63 subjects (MBRP=31,HE=32)            | Randomized control study,12 weeks      | i, The Beck Depression Inventory<br>ii, Beck Anxiety Inventory<br>iii, The Addiction Severity Index             | MBRP group had a positive impact on psychiatric severity score among patients with depression and anxiety disorders | MBRP helped to reduce negative affect and psychiatric symptoms among stimulant-dependent adults.                    |
| 3    | (Leigh et al., 2005)               | Under graduate college population–196  | Correlative study                      | i, Freiburg Mindfulness Inventory   | Increased spirituality scores helps to reduce uses of alcohol and tobacco in college students                       | Mindfulness and spirituality were negatively correlated with alcohol, tobacco, smoking and frequent drinking habits |
| 4    | (Britton et al., 2010)             | SUD–55 subjects                        | Correlated study,( 8, 20, & 60 weeks)) | i, Psychological distress<br>ii, Sleep quality<br>iii, Mindfulness practice<br>iv, Substance use questionnaires | Mindfulness meditation is interrelated with sleep duration and has good prognosis for substance abuse               | Mindfulness meditation was found useful in substance abuse adolescent to promote quality of sleep                   |
| 5    | (Davis, Manley, Goldberg, Smith, & | 175 (low socioeconomic status smokers) | Randomized control study               | i, Patient Health Questionnaire<br>ii,The Wisconsin Tobacco Quit Line   | Mindfulness Training compared to novel smoking cessation treatment showed   | Mindfulness training decreases desire to smoke and stress levels and increases awareness which associates           |

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|   | Jorenby, 2014).                |   |                                     |  | significantly lower in measures of urges and perceived stress.  | with smoking relapse  |
| 6 | (Iranshahri & Jenaabadi, 2015) | 30 under treatment male addicts           | Quasi-experimental study            | i, Craving Beliefs Questionnaire<br>ii, Random sampling method<br>iii, Depression Anxiety, Stress Scale  | Mindfulness based therapy was effective in controlling drug craving, decreases stress, anxiety and depression   | Mindfulness based therapy can be the alternative therapy to reduce the craving, stress anxiety and depression                     |
| 7 | (Garland et al., 2016)         | 180 homeless men (MORE=64,C BT=64,TAU=52) | Randomized control study (10 weeks) | i, Penn Alcohol Craving Scale<br>ii, Brief Symptom Inventory<br>iii, The Five Facet Mindfulness Questionnaire<br>iv, Positive & Negative Affect Schedule<br>v, PTSD Checklist Civilian version | MORE showed improvement in substance craving, negative effects and post-traumatic stress than CBT and had positive affect in post-traumatic stress than TAU | MORE is designed as integrative therapy to improve self-regularity affected by substance use                                      |
| 8 | (Bowen et al., 2009)           | 168 adults with substance abuse           | 8 week (2&4 months follow up)       | i, The Acceptance & Action Questionnaire<br>ii, The Five Factor Mindfulness Questionnaire<br>iii, The Penn Alcohol Craving Scale<br>iv, Short Inventory of Problems                            | MBRP program showed lower rates of substance use, reduction in craving and builds acceptance to act with awareness compared to TAU                          | MBRP would be alternative therapy for substance use disorders and it helps to change fundamental maladaptive patterns of behavior |

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|    |   |                               |  | v, The Timeline Follow back   |  |   |
| 9  | (Witkiewitz & Bowen, 2010)                    | 168 Subjects                  | Randomized control design (8 weekly)                   | i, Beck Depression Inventory<br>ii, Penn Alcohol Craving Scale  | Mindfulness-Based Relapse Prevention therapy reduces substance use & craving   | MBRP provides evidence for incorporating mindfulness practice into substance abuse treatment                        |
| 10 | (Imani et al., 2015)                          | 28 outpatients                | Randomized control trial (8 weeks)                     | i, The five factor mindfulness questionnaire<br>ii, The Addiction Sevier index  | MBGT patient group had decreased mean score of alcohol and opium but increased mean score of describing, non-judging and non-reacting  | Mindfulness based group therapy should be the selective protocol in health-care setting for substance use disorders |
| 11 | (Garland, Gaylord, Boettiger, & Howard, 2010) | 53 alcohols depended on adult | Randomized control trial                               | i, Self-report measures,<br>ii. Psychophysiological cue-reactivity<br>iii, Alcohol attention bias   | Mindfulness training significantly reduces stress and thought suppression and increases physiological recovery from alcohol dependence | MT can be used to reduce stress level, thought suppression and improve recovery from alcohol dependence             |
| 12 | (Fishbein et al., 2016)                       | 85 Adolescents students       | Randomized control design (50-min yoga 3 times a week) | i, The physical activity readiness questionnaire<br>ii, Abbreviated Dysregulation Inventory<br>iii, Response Stress Questionnaire<br>iv, Five Facet Mindfulness<br>v, Brunel Mood Scale<br>vi, Behavior Assessment Scale<br>vi, Stress Task | Mindfulness yoga practice helps to decrease alcohol use and enrich social skills   | Yoga had impactful result on substance abuse in context of psychophysiological and psychological risks              |

### 3.4 Scientific Literature review of Substance use and Self-control

[Table 4]

| S/ No | Citation                      | Sample Size                               | Design/Durati on             | Outcome measure/ Variable study  | Result  | Summary   |
|-------|-------------------------------|---|------------------------------|--|---|---|
| 1     | (Pokhrel et al., 2013)        | Subjects– 1040                            | Randomized controlled trials | i, Social self-control<br>ii, Peer substance use<br>iii, Baseline substance use  | Self-control improves interpersonal functioning, their relation with drug using friends and substance use behavior          | Adolescents influenced by drug using friends and their substance use behavior is improved by self-control |
| 2     | (Muraven & Shmueli, 2006)     | Subjects– 160 social drinker              | Pre–post Comparative study   | i, Squeezing a handgrip<br>ii, Self-stopping task  | Alcoholics have worse performance in self-control task  | Self-control reduces negative outcomes after alcohol and high temptation to drink                         |
| 3     | (Malouf et al., 2012)         | Subjects-485 adult jail inmates           | Comparative study            | i, Pre-incarceration substance misuse scale<br>ii, Self-control  | Substance abusers had lower self-control and have more symptoms of substance misuse and influence                           | Self-control has direct relationship with substance-abusing friends                                       |
| 4     | (Wills & Stoolmiller, 2002)   | Subjects- 1526 students                   | Comparative study            | i) Self control<br>ii) Latent growth models  | Good self-control subjects showed lower rate of substance abuse   | Subjects with lower self-control have a higher chance of using drugs                                      |
| 5     | (Allahverdipour et al., 2006) | Subjects– 183, high school student (male) | Comparative study            | i, Self-control scale<br>ii, Resistance self-efficacy scale<br>iii, Behavioral intention not to use drugs scale<br>iv, Substance abuse-related behaviors scale | Subjects involve in drugs by influence of friends and violence from guardians and have poor self-control and smoking habits | Social self-control training skills help to prevent substance abuse                                       |

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| 6 | (Wills, Ainette, Stoolmiller, Gibbons, & Shinar, 2008) | Subjects– 1767, public school students | Longitudinal design                | i, Self-control scale  | Good self-control reduces the risk factors like family life events, adolescent life events, and peer substance abuse                                    | Good self-control reduces risk factors of substance abuse   |
| 7 | (Sureka et al., 2014)                                  | 230 male prisoners                     | Randomized control trial (6 weeks) | i, The mini-mental state examination<br>ii, Global assessment of functioning scale<br>iii, Psychological general well-beings schedule<br>iv, Schedule for clinical assessment in Neuropsychiatry | <i>Sudarsan Kriya</i> yoga has positive impact on anxiety, depression, mood, positive wellbeing, general health, self-control and vitality of prisoners | <i>Sudarsan Kriya</i> yoga can be a supplementary treatment option in patients suffering from non-psychotic and psychiatric disorders |

### 3.5 Scientific Literature review of Yoga based intervention and Sleep

[Table 5]

| S/ No | Citation              | Sample Size                                     | Design/Durati on  | Outcome measure/ Variable study  | Result   | Summary  |
|-------|-----------------------|---|---|--|--|--|
| 1     | (Rao et al., 2017)    | 91 patients breast cancer (Yoga 45, control 46) | Two arm prospective Randomized control trial (12 weeks) | i, Pittsburgh Insomnia Rating Scale  | Yoga-based stress reduction program, education with supportive therapy sessions showed significant decrease in sleep distress and improve quality of sleep in breast cancer patients | Yoga intervention had a good impact in sleep with advanced breast cancer patients                    |
| 2     | (Fang & Li, 2015)     | 120 nurses                                      | Randomized control trial 6 months                       | i, Randomized control trial 6 months   | Staff nurses in yoga group had better sleep quality and lower work stress compared with non-yoga group   | Yoga can be the alternative solution to improve sleep quality and reduce work stress in staff nurses |
| 3     | (Fucito et al., 2015) | 304 patience                                    | Correlative study (8 weeks)                             | i, Athens Insomnia Scale<br>ii, The University of Arkansas Substance Abuse Outcomes Module<br>iii, The Fagerstrom Test for Nicotine Dependence<br>iv, Short Inventory of Problems<br>v, General Health Survey<br>vi, The Time-Line Follow-Back interview | Sleep impairment and insomnia relates with drinking habits and are at risk of abusing more alcohol   | Alcohol had negative effect on sleep latency, continuity, and quality of life                        |
| 4     | (Putnins et al.,      | 60 out  | Randomized  | i, Pittsburgh Sleep Quality  | Insomnia had worse   | Impaired sleep is a predictive   |

|   |   |                                    |                                      |   |   |   |
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|   | 2012)   | patience                           | control design (12 weeks)            | Index<br>ii, Structured Clinical Interview for DSM-IV Axis I Disorders  | outcomes in patients with bipolar and substance abuse disorder  | factor for negative mood outcome  |
| 5 | (Wong et al., 2010)                               | 386 (292 boys/94 girls)            | Comparative study                    | i, Childhood sleep problems<br>ii, Substance (alcohol and drug) outcomes in young adulthood   | Adolescence who were fatigue in childhood have poor response in sleep and drug outcomes   | Preventive programs improve sleep and response inhibition problem in substance abusers                                      |
| 6 | (Stevens et al., 2007)                            | 20 adolescents                     | Analytical study 12 months follow up | i, Global Appraisal of Individual Needs<br>ii, Trauma Severity Index<br>iii, Substance Problem Index<br>iv, Substance Frequency Index                             | Substance abusers treated with integrative behavioral sleep intervention had improved sleep quality and traumatic stress symptoms | Integrated approach of behavior therapy had improved sleep quality and reduce stress problem                                |
| 7 | (Burke et al., 2008)                              | 113 patients                       | Longitudinal study                   | i, Addiction Severity Index<br>ii, Medical Outcome Study<br>iii, Sleep Questionnaire<br>iv, Epworth Sleepiness Scale<br>v, Functional Outcome Study Questionnaire | Opioid-dependent had sleep problems which was directly related with psychiatric stress  | Sleep problem had hostile impact on substance abuse treatment   |
| 8 | (Cousins, Bootzin, Stevens, Ruiz, & Haynes, 2007) | 34 adolescents (17 boys, 17 girls) | Analytical study                     | i, The GAINs Substance Problem Index<br>ii, Global Appraisal of Individual Needs<br>iii, The Gain's Parental  | Lower level of parental involvement showed higher and reverse control in sleep disturbances, psychological distress and           | Family member and home environment played an important role in sleep disturbances, psychological distress and recovery from |

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|    |  |   |  | Activity Index<br>iv, The Gain's General<br>Mental Distress Index<br>v, The Gain's Substance<br>Frequency Index<br>vi, The Gain's Substance<br>Problem Index | recovery   | drug & illicit use and abuse  |
| 9  | (Casden, 2005)   | 48 (22<br>yoga,26<br>wait list<br>control ) | Comparative<br>study<br>6-week                   | i, Autonomic functions<br>ii, Respiratory parameters<br>iii, Cognitive functions<br>iv, Psychological<br>symptoms<br>v, Physical symptoms                    | <i>Astanga</i> yoga on<br>autonomic homeostasis,<br>and respiratory function<br>had significant<br>improvement   | <i>Astanga</i> yoga had significant<br>improvement in breathing,<br>positive mood, energy, quality<br>of life, sleep, concentration,<br>and short term memory |
| 10 | (Khalsa, 2004)   | 20 subjects                                 | Clinical trial<br>study (8-week<br>intervention) | i, Total Walk Time<br>ii, Total Sleep Time<br>iii, Sleep Efficacy<br>iv, Sleep Quality<br>v, Sleep Onset Latency   | Yoga can be the major<br>tools to reduce chronic<br>insomnia, sleep onset and<br>sleep maintenance on<br>insomnia disorder patients                              | Yoga intervention should be<br>the main alternative treatment<br>module for sleep and<br>insomnia disorder patients   |
| 11 | (Sulekha,<br>Thennarasu,<br>Vedamurthachar,<br>Raju, & Kutty,<br>2006) | 67 males                                    | Match pair<br>Two group<br>Pre-post design       | i, Polysomnographic<br>recordings  | <i>Sudarshana Kriyas</i> &<br><i>Vipassana</i> showed<br>positive result in sleep<br>disorder and helped to<br>slow down sleep waves &<br>reduce REM sleep state | <i>Sudarshana Kriyas</i> and<br><i>Vipassana</i> played a beneficial<br>role in sleep-wakefulness<br>behavior   |
| 12 | (Patra & Telles,<br>2009)  | 30 male<br>participants                     | Self as control<br>design                        | i, Whole-night<br>polysomnographic<br>measures<br>ii, Self-rating of sleep   | Slow sleep waves and<br>non-rapid-eye-movement<br>were significantly higher<br>in CM than supine rest  | CM improved objective &<br>subjective sleep quality   |
| 13 | (Al-Zahrani &  | 30 patience                                 | Cross-sectional                                  | i, Insomnia Severity Index   | Drug abusers are more  | Sleep disorder was a major  |

|    |                        |          |  |   |   |  |
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|    | Elsayed, 2009)         |          | study  | ii, Pittsburgh Sleep Quality Index<br>iii, Berlin Questionnaire for sleep apnea and restless legs | likely to have sleep disorder than ordinary people  | comorbid disorder to cause the relapse                               |
| 14 | (Patra & Telles, 2010) | 30 males | Self as control design(CM & SR practice twice a day) | i, Heart Rate<br>ii, EEG, EMG recordings  | CM helps to decrease heart rate variability, lower lipid profile and improve parasympathetic dominance during sleep | Cyclic meditation had a good impact in sleep rather than supine rest |

### 3.6 Scientific Literature review of Yoga based intervention on Anxiety and Depression

[Table 6]

| S/No | Citation                | Sample Size                            | Design/Duration                      | Outcome measure Variable study  | Result   | Summary  |
|------|-------------------------|--|--------------------------------------|---|--|--|
| 1    | (Helmes & Ward, 2017)   | 52 participants (18 males, 34 females) | Randomized control trials            | i, Mini-Mental State Examination<br>ii, Anxiety Sensitivity Index<br>iii, Mindfulness Attention & Awareness Scale<br>iv, WHO Quality of Life Scale<br>v, Montgomery & Asberg Depression Rating Scale<br>vi, Geriatric Anxiety Inventory | MBCT group showed significant improvement on all anxiety & depression measures | Mindfulness-based intervention can be an important alternative treatment module for anxiety and depression |
| 2    | (Koszycki et al., 2016) | 39 persons                             | Randomized control trials (12 weeks) | i, Liebowitz Social Anxiety Scale<br>ii, Clinical Global Impression   | Mindfulness had a better improvement than wait list in social anxiety          | Mindfulness based intervention is equivalent for treatment of anxiety &                                    |

|   |  |                                     |                                       |  |   |  |
|---|--|-------------------------------------|---------------------------------------|--|---|--|
|   |  |                                     |                                       | Severity Scale<br>iii, Beck Depression Inventory-II<br>iv, Social Adjustment Scale self-Report Version<br>v, Self Compassion Scale Short Form<br>vi, Five Facer Mindfulness Questionnaire  | symptom severity, social adjustment, and enhanced the self-compassion                                   | depression   |
| 3 | (Zemestani & Ottaviani, 2016)                          | 74 adults (MBRP 37, TAU 37)         | Randomized control trials             | i, The Beck Depression Inventory-II<br>ii, The Beck Anxiety Inventory<br>iii, Penn Alcohol Craving Scale   | MBRP had significant decrease in depression, anxiety, and craving compared to TAU                       | MBRP may be the effective intervention for depression, and SUDs patients                                       |
| 4 | (Asmaee Majid et al., 2012)                            | 31patients( MBRS16, Control 15)     | Randomized control trials(8 weeks )   | i, The Beck Depression Inventory-II<br>ii, The Beck Anxiety Inventory<br>iii, Penn State Worries Questionnaires  | MBSR showed significant reduction in anxiety, depression, worry symptoms & generalized anxiety symptoms | MBSR can be the acceptable intervention for generalized anxiety disorder symptoms                              |
| 5 | (Khalsa, Hickey-Schultz, Cohen, Steiner, & Cope, 2012) | 121 students (51 females, 70 males) | Randomized control trials( 11 weeks ) | i, The Self-Report of Personality<br>ii, The profile of Mood States<br>iii, The Resilience Scale<br>iv, The Perceived Stress Scale<br>v, The Inventory of Positive Psychological Attitudes | Yoga and physical education showed a significant improvement in anxiety                                 | Yoga intervention is acceptable in school and plays a protective & preventive role in preserving mental health |
| 6 | (Becker &  | Subjects –                          | Cross sectional                       | i, Substance abuse scale   | Depression and substance  | Depression and substance   |

|    |                                 |                                   |   |   |   |  |
|----|---------------------------------|-----------------------------------|---|---|---|--|
|    | Curry, 2007)                    | 106                               | Design                                  | Depression severity<br>ii, Dimensional ratings of illness severity based on adolescent interviews<br>iii, Parent ratings of adolescent behavior | abuse had a negative interactive effect on youth in social capability, and severity was high in depression              | abuse had significant impairment in social competence  |
| 7  | (Sharma, Yadava, & Hooda, 2005) | 33 students(10-day yoga workshop) | Single group repeated measure design    | i, Anxiety<br>ii, Concentration<br>iii, Physical parameter  | Yoga helped to reduce anxiety, lowering excitability, increasing concentration, and self-control                        | Yoga is a combination of stimulation, relaxation, and meditation technique that is directly proportion with the physical, mental, and spiritual well-being |
| 8  | (Berndt et al., 2013)           | Subjects– 244 patients            | Correlative study                       | i, Self-efficacy for smoking cessation<br>ii, Anxiety and depression scale  | Intervention of anxiety and self-efficacy would reduce craving of smoking and substance abuse                           | Self- efficacy intervention plays vital role in smoking abstinence   |
| 9  | (Woolery et al., 2004)          | 28 subjects                       | Randomized control trials               | i, Beck Depression Inventory<br>ii, State-Trait Anxiety Inventory<br>iii, Profile of Mood States  | <i>Iyengar</i> yoga intervention showed a good impact on decreasing self-report, depression symptoms, and trait anxiety | <i>Iyengar</i> yoga supports to decrease negative mood and fatigue   |
| 10 | (Lakkireddy et al., 2013)       | Subjects - 36                     | Single-center, pre-post study           | i, Atrial fibrillation Burden<br>ii, Quality of life<br>iii, Depression and anxiety scores  | Yoga practice decreases atrial fibrillation and reduce heart rate variability   | Yoga practice reduces systolic and diastolic blood pressure, anxiety & depression scores and improve quality of life                                       |
| 11 | (Vedamurthach ar et al., 2006)  | Subjects - 60 (30 experimenta     | Randomized control trial with two group | i, Beck Depression Inventory<br>ii, Morning plasma cortisol<br>ACTH, and prolactin too were   | <i>Sudarshana Kriya</i> helped to reduce stress hormone levels along with   | <i>Sudarshana Kriya</i> yoga showed good impact in depressive alcohol  |

|    |                          |  |                   |                     |  |  |
|----|--------------------------|--|-------------------|---------------------|--|--|
|    |                          | 1, 30 control)                               |                   | measured            | depression   | dependent subjects   |
| 12 | (Nuttbrock et al., 2014) | Subjects– 230 Transgender women (six months) | Prospective study | i, Depression scale | Depressive symptoms in transgender women was strong risk factor of substance abuse | Complimentary therapy can play vital role to reduce depressive symptoms in transgender women |

### 3.7 Scientific Literature review of Yoga based intervention on Response inhibition

[Table 7]

| S/n<br>o | Citation   | Sample<br>Size                      | Design/Durati<br>on                                 | Variable study  | Result   | Summary  |
|----------|--|-------------------------------------|---|---|--|--|
| 1        | (Purohit & Pradhan, 2016)                            | 72 (yoga - 40,32 wait list control) | Randomized controlled trail (3 months yoga)         | i, Trial Making Test<br>ii, Stroop Color-Word Task<br>iii, Digits Span Test<br>iv, Digit Symbol Substitution Test                     | Yoga programme on orphan adolescents showed improvement in executive function & had significant progress in Stroop color-word task | Yoga programme on orphan adolescents improved cognitive functions  |
| 2        | (Telles, Singh, Bhardwaj, Kumar, & Balkrishna, 2013) | 98 children                         | Randomized controlled trial                         | i, Euro fit, physical fitness test battery<br>ii, Stroop color-word task for children<br>iii, Battle's self-esteem inventory          | Yoga and physical exercise has shown better result in Stroop color-word naming test scores   | Yoga and physical exercise can improve fitness, cognitive appearances and self-esteem in school children |
| 3        | (Mitchell et al., 2013)                              | 16 cocaine depended                 | Comparatively two group study                       | i, Stroop task  | Cocaine use had relatively good performance in fMRI stroop intrinsically rather than healthy subjects                              | Cocaine addicts showed positive impact on midbrain & basal ganglia                                       |
| 4        | (Hariprasad, Koparde, et al., 2013)                  | 87 (yoga 44, waitlist 43)           | Randomized Single-blind controlled study (6 months) | i, Rey's Auditory Verbal Learning Test<br>ii, Rey's complex figure test<br>iii, Wechsler's Memory Scale<br>iv, Digit and spatial span | Yoga based interventions have a positive result in Stroop color-word task score  | Yoga based intervention improves cognitive function in elderly living in residential care homes          |

|   |                              |   |  |   |  |   |
|---|------------------------------|---|--|---|--|---|
|   |                              |   |  | v, Controlled Oral Word Association test<br>vi, Stroop Color Word Interference Test<br>vii, Trail Making Test A and B   |  |   |
| 5 | (Froeliger et al., 2012)     | 14 hatha yoga practitioners                               | 2 group Correlative study (Mindfulness 7 days Hatha yoga 45-min a day) | i, Center for Epidemiological Studies-Depression scale<br>ii, Beck Anxiety Inventory<br>iii, Positive and negative affect schedule<br>iv, The Affective Stroop Task | <i>Hatha</i> yoga practitioners showed better score in neurocognition, emotion and activation in the ventrolateral prefrontal cortex during Stroop trials task | <i>Hatha</i> yoga practitioners have shown reactivity to negative emotional stimuli and improve cognitive functions |
| 6 | (Dixit et al., 2012)         | 30 males  | Single group pre & post design   | i, Stroop color-word task   | Caffeine had positive result in processing information & Stroop color word task score  | Caffeine had reduction in Stroop interference & increase facilitation   |
| 7 | (Silveri et al., 2011)       | 32 adolescents  | Comparatively study  | i, Stroop Color Naming<br>ii, Word Reading, and Interference  | Children and adolescents with positive family alcoholism history had brain functional activity affected and showed negative performance in stroop color naming | Influence on family alcoholism had positive effect on brain activation during the response inhibition task          |
| 8 | (Al-Zahrani & Elsayed, 2009) | 254 patients (100 control group with the healthy subject) | Two groups, comparative study  | i, Benton visual retention tests<br>ii, Color trail making test<br>iii, Stroop colors-word test<br>iv, Symbol digit modalities                                      | Drug addiction had impaired cognitive control and Stroop color-word task score was less during behaviour disturbances  | Specific brain region controls cognitive function which is impaired in drug addiction patients                      |

|    |                                  |                                       |   |   |  |  |
|----|----------------------------------|---------------------------------------|---|---|--|--|
|    |                                  |                                       |   | test<br>v, The 5 dots cognitive flexibility test<br>vi, Tam verbal flexibility test   | and hospitalization  |  |
| 9  | (Streeter et al., 2008)          | 74 (Cocaine treatment trail)          | Correlation study   | i, Stroop task subscale scores<br>ii, Hamilton depression rating scale  | Cocaine dependent has more chance to dropout from treatment session & barrier to recovery  | Stroop color-word task is used to recognize the risk in cocaine dependence subjects  |
| 10 | (Kulaif & Valle, 2008)           | 60 (30-illiterate,30-basic education) | Correlation study   | i, Stroop Color-Word Test<br>ii, Colored Numbers Test   | Educated subjects performed better than illiterate in Stroop color-word test   | Colored Numbers Test is used to evaluate selective attention   |
| 11 | (Oken et al., 2006)              | 135 (men & women)                     | Randomized, controlled trial (6 months, yoga, walking, wait-list) | i, Stroop Color-Word Test<br>ii, Electroencephalogram<br>iii, Quality of life<br>iv, Profile of Mood States<br>v, Multi-Dimensional Fatigue Inventory | Yoga intervention had good impact on stroop color word task, quality of life, physical activity, fatigue and sense of well being | Yoga group showed significant improvement in quality-of-life and physical measures compared to exercise and wait-list control groups |
| 12 | (Houx, Jolles, & Vreeling, 1993) | 247 volunteers                        | Cross-section design  | i, Stroop Color-Word Test   | Ageing hampers biological life, environmental factors & brain function which leads to poor performance in Stroop color-word task | Education & ageing had a significant role on cognitive performance   |

### 3.8 Scientific Literature review of Yoga on Attention task

[Table 8]

| S/n<br>o | Citation                   | Sample Size               | Design/Durati<br>on                   | Variable study   | Result  | Summary   |
|----------|----------------------------|---------------------------|---------------------------------------|--|---|---|
| 1        | (Mishra et al., 2016)      | 24 (14 boys,10 girls)     | Comparative study                     | i, Digit–Letter Substitution Test<br>ii, Six Letter Cancellation Test  | Yoga increased attention, visual search and mental speed in adolescents   | Yoga helps to improve selective attention   |
| 2        | (Pradhan, 2013)            | 36 (21male,15 female)     | Self as control design (3 month yoga) | i, Digit–Letter Substitution Test<br>ii, Six Letter Cancellation Test  | <i>Kapalbhati</i> practice had no impact on attention and concentration   | <i>Kapalbhati</i> had no effect on cognitive function   |
| 3        | (Pradhan & Nagendra, 2010) | 57 males                  | Self as control design                | i Wechsler memory scale<br>ii, Digit span forward and backward<br>iii, Spielberger's State-Trait Anxiety Inventory | State anxiety score was significantly decreased on CM rather than supine rest and memory score was increased immediately after CM | CM had a positive impact on memory and state anxiety  |
| 4        | (Kumar & Telles, 2009)     | 35 males                  | Comparative study with control group  | i, Six Letter Cancellation Test  | Meditation <i>Dharana</i> or focusing on symbol “ <i>OM</i> ” had a good result on six letter cancellation tests                  | <i>Dharana</i> “ <i>OM</i> ” had significant result on cognitive function rather than <i>Canalata</i> session |
| 5        | (Chattha et al., 2008)     | 108(premeno pausal women) | Randomized control study              | i, Six-letter cancellation test<br>ii, Punit Govil Intelligence Memory Scale                                       | “IAYT” showed positive improvement in verbal retention, memory and cognitive function   | “IAYT” showed improvement on hot flushes, night sweats, mental problem & selective attention                  |
| 6        | (Sarang &                  | 69 males                  | Self as control                       | i, Six-letter cancellation test  | CM had good result in   | After CM wrong  |

|  |               |  |        |  |  |                                |
|--|---------------|--|--------|--|--|--------------------------------|
|  | Telles, 2007) |  | design |  | motor response, visual capacity, selective attention and it leads to increase SLCT score | cancellation score was reduced |
|--|---------------|--|--------|--|--|--------------------------------|

### 3.9 Scientific Literature review of Yoga based intervention on Memory

[Table 9]

| S/no | Citation                            | Sample Size                      | Design/Durati on                                    | Variable study   | Result  | Summary   |
|------|-------------------------------------|----------------------------------|---|--|---|---|
| 1    | (Purohit & Pradhan, 2016)           | 72(40-yoga,32-wait-list control) | RCT design (3 months)                               | i, Trail making test<br>ii, Digit span test<br>iii, Digit symbol substitution test<br>iv, Stroop color-word task   | Yoga intervention showed improvement in digit span test and stroop color word task in young orphans | Yoga program was significant in young orphan to improve their executive functions                           |
| 2    | (Hariprasad, Koparde, et al., 2013) | 87 (yoga 44,wait-list 43)        | Randomized Single-blind controlled study (6 months) | i, Rey's Auditory Verbal Learning Test<br>ii, Rey's complex figure test<br>iii, Wechsler's Memory Scale<br>iv, Digit and spatial span<br>v, Controlled Oral Word Association test<br>vi, Stroop Color Word Interference Test<br>vii, Trail Making Test A and B | Yoga based intervention have positive result in digit span score                                    | Yoga based interventions have positive result on working memory in elderly living in residential care homes |
| 3    | (Prakash et al., 2010)              | 15 practitioners of Vihangam     | Two group correlative study                         | i, Stroop test<br>ii, Trail-Making,<br>iii, Digit Symbol Substitution  | <i>Vihangam</i> yoga had significant increase in cognitive tools rather than                        | <i>Vihangam</i> yoga meditation helps to improve selective  |

|   |  |                                    |   |   |   |  |
|---|--|------------------------------------|---|---|---|--|
|   |  | yoga                               |   | tests<br>iv, Digit span tests   | the control group   | attention and memory   |
| 4 | (Pradhan & Nagendra, 2010)                     | 57 males                           | Self as control design                    | i, Wechsler memory scale<br>ii, Digit span forward and backward<br>iii, Spielberger's State-Trait Anxiety Inventory   | State anxiety score was significantly decreased in CM than supine rest & digit spam score was increased immediately after CM                      | CM had positive impact on immediate memory span and state anxiety  |
| 5 | (Subramanya & Telles, 2009)                    | 57 males                           | Self as control design                    | i, Wechsler memory scale<br>ii, Digit span forward and backward<br>iii, Spielberger's State-Trait Anxiety Inventory   | CM had a better result in attention, concentration, immediate memory and reduced state anxiety than <i>savasana</i>                               | CM had a positive impact rather than <i>savasana</i> on immediate memory span and state anxiety                                |
| 6 | (Dolan et al., 2008)                           | 38 substance dependence inpatients | Comparative study                         | i, Wisconsin Card Sorting Test<br>ii, Trail-Making Test<br>iii, Stroop Color Word Test<br>iv, The Wais-II Digit Span<br>v, The Iowa Gambling Task                               | Family history with substance abuse have poor performance in digit span scores, executive and functional cognitive tools                          | Family history with substance abuse showed as increase risk factor for cognitive impairment in substance dependence inpatients |
| 7 | (Sharma, Das, Mondal, Goswami, & Gandhi, 2006) | 30 patients with major depression  | Randomized control trial design (8 weeks) | i, Letter cancellation test<br>ii, Trail making test 'A'<br>iii, Trail making test 'B'<br>iv, Ruff figural fluency test<br>v, Forward digit span<br>vi, Reverse digit span test | <i>Sahaj</i> yoga improves executive function, anxiety, depression, immediate memory and attention span   | <i>Sahaj</i> yoga showed better improvement in cognitive functions   |
| 8 | (Casden, 2005)                                 | 48 (22 yoga, 26 wait-list)         | Randomized control trial design           | i, Breathe holding time, abdominal style breathing, positive mood, fatigue, energy, quality of life<br>ii, Digit Span subtest<br>iii, Trail Making Test                         | <i>Ashtanga</i> yoga practice showed positive result in mood, fatigue, positive energy, quality of life, sleep concentration and immediate memory | <i>Ashtanga</i> yoga practice had good impact on insomnia and immediate memory   |

### 3.10 Scientific Literature review of Yoga on Dexterity

[Table 10]

| S/N<br>O | Citation                                       | Sample size                | Design/Durati<br>on                    | Variables   | Result  | Summary   |
|----------|--|----------------------------|--|---|---|---|
| 1        | (Nitin Gosewade, Vinod Shinde, & Chhaya, 2015) | 60 healthy adults          | Pre–post with control design (8 weeks) | i, Finger dexterity test  | <i>Kapalbhati</i> and eye exercise showed significant result in motor skills, finger dexterity task time & hand to eye coordination                                 | <i>Kapalbhati</i> and eye exercise showed good impact on balance and co-ordination  |
| 2        | (Asakawa & Sugimura, 2014)                     | 33 children                | Longitudinal study design              | i, Finger dexterity   | Performance on additional tests in children was strongly supported by their finger dexterity  | Calculation skills in children was associated with finger dexterity                 |
| 3        | (Telles, Balkrishna, & Singh, 2012)            | 140 subjects               | Correlative study between two groups   | i, O'Connor finger dexterity task<br>ii, Shape and size discrimination task | <i>Kapalbhati</i> and breath awareness showed significant improvement in fine motor skills, visual discrimination and reducing error in finger dexterity task score | <i>Kapalbhati</i> showed improvement on finger dexterity task than breath awareness |
| 4        | (Subramanya et al., 2009)                      | 108 (60 boys, & 48 girls ) | Pre–post design (10 days)              | i, O' Connor tweezers dexterity<br>ii, Minnesota manual dexterity apparatus | After 10 days of yoga intervention children showed significant decrease in manual and task tweezers dexterity scores  | Yoga intervention in children helps to improve balance and co-ordination            |

|   |                            |             |                           |  |  |  |
|---|----------------------------|-------------|---------------------------|--|--|--|
| 5 | (Kornatz, 2005)            | 10 adults   | Pre-post design (2 weeks) | i, Index finger acceleration<br>ii, Manual dexterity | Finger task and steadiness improving intervention was very useful to reduce the rate of variation of motor function output, hand muscle and manual dexterity | Regular practice of finger movement helped to improve motor function |
| 6 | (Manjunath & Telles, 1999) | 80 subjects | Pre-post study            | i, Tweezers dexterity                                | Yoga intervention significantly increase tweezers to place metal pins in spaced holes  | Yoga practice would be preferred for improvement of motor function   |

### 3.11 Scientific Literature review of Yoga on Finger tapping task

[Table 11]

| S/ no | Citation  | Sample Size                         | Design/Durati on                     | Variable study         | Result   | Summary  |
|-------|---|-------------------------------------|--------------------------------------|------------------------|--|--|
| 1     | (Wylie, Tanabe, Martin, Wongngamnit, & Tregellas, 2013) | 19 healthy subjects                 | Single-blind, crossover design       | i, Finger-tapping test | Healthy subjects with nicotine treatment improved neuronal response in the cerebellar vermis compared to placebo | Nicotine treatment helps improve co-ordination and reduce fatigue  |
| 2     | (Da Silva et al., 2012)                                 | 1169 patients, 689 healthy controls | Comparative study with control group | i, Finger-tapping test | Index finger taping measured motor speed and procedural learning in schizophrenia patients                       | Finger tapping can be used to test motor speed, routine and technical learning in schizophrenia patients |

|   |                             |   |  |   |   |   |
|---|-----------------------------|---|--|---|---|---|
| 3 | (Aoki & Fukuoka, 2010)      | 28 (14 elderly, 14 young adults)                | Comparative study                          | i, Finger-tapping test  | Young adult significantly perform finger tapping test rather than an elderly adult  | Age was the main factor of slowness on motor function   |
| 4 | (Dash & Telles, 1999)       | 243 (53 adults, 152 children (38 adult control) | Pre–post with control design (30 days yoga | i, Finger-tapping test  | Yoga intervention in youth & children had significant result in motor speed   | Motor speed reduces after successive repetitive sessions  |
| 5 | (Ruff & Parker, 1993)       | 360 normal volunteers                           | Stratified design                          | i, Finger Tapping<br>ii, Grooved Pegboard Tests   | Finger tapping test had significant gender differences, as women were slower than an older age group  | Young and good educated subjects have better motor function   |
| 6 | (Chavez et al., 1983)       | 56 (28 males, 28 female)                        | Comparative study                          | i, Finger Tapping,<br>ii, Trial Making (A & B)<br>iii, Digit Span<br>iv, Digit Symbol tests | Neuropsychological and finger tapping test scores are affected directly by anxiety and gender   | Men performance was better than females on finger tapping and motor function  |
| 7 | (Rabinowitz & Lavner, 2014) | 170 (83 men, 87 women)                          | Correlative study between two groups       | i, Mini-Mental State Examination,<br>ii, Forward digit span test<br>iii, Finger tapping     | Mild cognitive impairment or dementia significantly increases the length and variability of the finger touch compared with non-cognitive impairment | Finger tapping showed better sensitivity to compare cognitive functions among dementia and non-cognitive impairment individuals |

### 3.12 Scientific Literature review of Yoga and Mirror-tracing task

[Table 12]

| S/no | Citation                                     | Sample Size              | Design                       | Variable study   | Result  | Summary   |
|------|--|--------------------------|------------------------------|--|---|---|
| 1    | (Hagins et al., 2013)                        | 30 (17 males,13 females) | Comparative study            | i, Mental arithmetic<br>ii, Mirror tracking<br>iii, (BP, HR) | Yoga intervention compared to physical education had similar improvement in children to cope with psychological stress, physiological response and behavioral stressors | Yoga and physical exercise showed no difference on stress reactivity    |
| 2    | (Telles, Praghuraj, Ghosh, & Nagendra, 2006) | 52 (26 yoga,26 controls) | Pre–post with control design | i, Mirror tracking task                                      | Yoga intervention showed progress on reversal ability, eye-hand coordination, speed, accuracy, and better performance on mirror tracking scores                         | Yoga showed better results on a mirror tracking task and motor function |