The Yoga Tradition

Yoga Bodies, Yoga Minds: How Indian Anatomies Form the Foundation of Yoga for Healing

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Abstract

This paper discusses the importation of Yoga into the West, in the context of Yoga as a healing modality. It is important to distinguish between adapting a system of knowledge, like Yoga, to specific contexts, and altering the system to fit it into another quite different system of knowledge, such as conventional Western medicine. To illustrate this difference, the paper demonstrates how three ancient Indian anatomies (the pañcamaya model, the prāṇa vāyus model, and the subtle anatomy model) are foundational to the practical application of Yoga for healing. The practice of Yoga as a healing modality is based on theory and principles, and not only on methods and techniques.

Violins Are Not Violins

The violin is a popular instrument in South India just as it is in the U.S. However, the way it is played in South Indian Carnatic music traditions is so different from the way it is played in Western symphonic traditions that it is practically unrecognizable as the same instrument. Even though the physical structure and strings of the violins are the same in each place, the systemization of sounds and the combinations in which they are played are so different that the violin is not the same violin. The theories and principles underlying Indian Carnatic and Western symphonic music are so different that, despite the use of similar techniques on a common instrument, the resulting music is very different. The perspective of the one playing the violin completely changes how it is played. So in important ways, a violin is not just a violin—what the violin is depends on who is playing it and how it is played.

Even though external objects (in this case a violin) appear to have fixed realities, in fact what they are is largely decided by what we (as the perceiver of the object) project on to them, which is largely a result of our own training and experience. The same holds true for the importation of Yoga from India into our own countries, and for the practice of applying Yoga for healing. The practitioner’s ideas regarding what Yoga is, and especially what the human system of body, mind, emotions, etc., is, have a profound influence on how Yoga for healing is practiced.

Yoga in the West

As the application of Yoga for healing becomes increasingly prominent in the West, we must remain conscious of how it is happening. Is the application of Yoga for healing remaining true to its origins while being adapted to meet Western cultural contexts? Or, as is seemingly more common, is it being fundamentally changed and recreated by the familiarity of its Western practitioners with Western medi-
cal theories and principles? Is Yoga for healing becoming assimilated into Western medicine, psychology, or physical therapy? Or is it still retaining the essential elements that compose its unique therapeutic perspective?

In musical terms, we might ask: Are we playing Carnatic music in the U.S., or are we introducing a few Carnatic notes into our Western symphonies? And are we claiming to play Carnatic music while actually playing Western symphony in what we imagine to be a Carnatic manner? In other words, are we really practicing Yoga for healing? Or are we just introducing Yoga-esque tools into conventional, Western models of therapy and calling it “Yoga therapy?”

Theory and Principles:
Yoga’s Indian Origins

To answer the question, “Are we adapting Yoga for healing to Western contexts or are we fundamentally changing it into a system founded upon a Western episteme?” we need to look as closely as we can at the therapeutic application of Yoga in its original context. Yoga has been developing in India for at least the last 2000 years, so we know that: (1) The origins of Yoga for healing are Indian; (2) The epistemological foundations of Yoga for healing are Indian; (3) Yoga for healing emerged out of, and in accordance with, Indian understandings of the body, mind, and human system; and thus (4) Yoga for healing is related to, and indeed the product of, these Indian anatomies.

To understand what Yoga for healing is and how it works, we need to know how it views the human system (body and mind), and why it holds these perspectives. The answers to this question can be found, at least in part, by looking for traditional Indian anatomical models that have been influential in India at different times over the past 2000 years as Yoga developed. It is from these anatomical models, and indeed in response to them, that Yoga’s ideas about the body and mind—how to deal with them—were developed.

Three Indian anatomies have been particularly influential in the formation of Yoga for healing as both a philosophical and a practical medical system in India: (1) the pañca-maya model, (2) the prāna vāyas model, and (3) the model of the subtle anatomy. Together, they describe a single very rich and detailed geography of the human system that has important ramifications for the practice of Yoga for healing. By briefly examining these three anatomies, we will see some of the fundamental principles underlying the application of Yoga for healing. It’s worth acknowledging that Āyurveda is also an important and rich source of Indian anatomies that have deeply influenced the application of Yoga for healing. However, a discussion of Āyurveda is beyond the scope of this article.

Yoga’s Holistic Model of Healing:
The Pañcamaya Model from the Taittirīya Upanisad

One of the most important bases for Yoga’s truly holistic model of the human system is presented in the Taittirīya Upanisad, in particular the Brahmānandavālī section. It is called the pañcamaya model. Pañca means “five” and maya means something “pervading.” The term pañcamaya thus indicates that the human system is composed of five fundamental dimensions (physical body, breath/prāna, intellect, personality, and emotions) that are completely interconnected and interrelated. Indeed, as the text says, they pervade each other.

Practically speaking, each of us has a body. The body breathes, and if the body stops breathing, then it becomes a very different body! So body and breath are inseparably related. Also, each of us has an intellect that has been trained in specific ways: a dentist, a carpenter, and a philosopher have received very different training. In addition, each of us has our own way of perceiving and communicating—we each have our own personality. Lastly, and most powerfully, we have emotions. None of these five dimensions by itself can completely describe who we are as individuals, but together they present a complete picture of the individual.

Through experience, the ancient Indians observed that each of these five dimensions is completely and inextricably interlinked with all of the other dimensions. When one changes, all the others change as well. For example, when someone gets angry (an emotional change), the way that person breathes also changes. It may become faster and shallower, or perhaps be held for long periods. The body also changes: the heart rate increases, the blood pressure increases, and the face turns red. The personality changes, too, as the person’s communication becomes more aggressive and perception of the situation gets increasingly negative. The understanding of how these dimensions are related is what is meant when we refer to Yoga as “holistic.”

**a. TKV Desikachar and Kausthub Desikachar, information and translations orally transmitted in workshops and private classes between 2003 and 2007.**
The word the *Taittiriya Upanisad* uses, “*maya,*” is a special word. It indicates that each dimension of our human system (body, breath/prâna, intellect, personality, and emotions) is one hundred percent present throughout the system. It is not that each dimension represents a separate layer distinct from the other aspects, but that all the five dimensions are completely present everywhere in the system at the same time. This interrelationship between the different dimensions of the human system can be approximately represented by the drawing by Mr. TKV Desikachar (shown in illustration 1).

Each *maya* has five components, here represented by separate dots. The interrelationships between dimensions is expressed by connecting each dot to all the other dots.

The interconnectedness described by the *pañcamaya* model is the positive basis of Yoga as a holistic system of healing and health. It is also the theoretical underpinning of almost all Yoga practices. For example, by changing the length of a person’s breath (through *ásâna* and/or *prânâyâma*), we can greatly influence that person’s mental and emotional state. The same is true of working on the mental level. By asking the practitioner to focus on a particular object, we can see that the breathing also changes, and over time do the body and personality. This process takes time, but it is a key mechanism underlying the effectiveness of Yoga for healing.

It is worth noting that this holistic approach is fundamentally different from the emphasis on specialization in Western approaches. Conventional Western medical and psychological models for healing often define specific fields of specialization, which focus on single dimensions of body or mind in great depth with less regard for other dimensions.

Since we see the importance of Yoga’s holistic understanding of the human system, it is also worth making a clarification regarding the terminology of this *pañcamaya* model. Unfortunately, in the United States, the *pañcamaya* model is often referred to as the *kosas,* which in turn is most often translated into English as “sheaths” and graphically misrepresented as a series of ever larger areas surrounding the body as depicted in this diagram.

This presentation (shown in illustration 2) of the *pañcamaya* model is potentially misleading. The first problem is the word *kosa,* which does not appear in the *Taittiriya Upanisad* at all, and which literally means “bag.” The connotation of *kosa* as “sheath” or “bag” is very different from *maya*’s connotation as “pervading.” The former seems to indicate separateness, while the latter indicates inseparability. For example, in Sanskrit the internal organs are called *kosas,* which is correct when applied to the internal organs because the liver, the intestines, bladder, lungs, etc. are all discrete entities separate from one another. Essentially, they are bags containing specialized tissues that perform a function spe-

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**Illustration 1. The *pañcamaya* model.**

**Illustration 2. Common misrepresentation of the *pañcamaya* model.**
specific to that bag. However, when *kosa* is used to describe the interrelated aspects of the *pañcamaya* model, it can easily give the impression that each of the five dimensions is a “layer” or “level” or “sheath” different and somehow separate from the other dimensions.

As we’ve seen above, separateness is an idea inconsistent with the meaning of the text and indeed is nearly the opposite of what the text intended. The *Taittirīya Upanisad* specifically says that the *prānamaya* (breath/prāna), *manomaya* (intellect), *vijñānamaya* (personality), and *ānandamaya* (emotion) dimensions are in the same location as the *annamaya* (physical body). A graphic rendition that depicts the different sheaths as separate from one another, and existing outside of the body in ever increasing rings, is undesirable. This misrepresentation of the *pañcamaya* model is not useful in the application of Yoga for healing because it does not explain how the five *maya* relate to one another. If we are not clear about how they are related, then how can we utilize their interconnection to bring about healing?

This is also why we should not think of any particular Yoga tool as working on only one dimension (*maya*). Take *āsana*, for example. *Āsana* is not merely an activity of the physical body, but also of the breath and mind. In *āsana* we are actively moving the body in particular ways, but in doing so we must account for the fact that the body is already almost constantly moving (since it is breathing). Even if we stay in a single posture for an extended period of time, it is not possible to be absolutely still in that posture. At the very least, we must breathe, and with each breath the chest and abdomen cavities expand and then contract.

The same expansion and contraction of the chest and abdominal cavities occurs when we move in *āsana*: a forward bend contracts the chest and abdomen, and a back bend expands them. So moving the body in *āsana* is actually an extension of the movement already happening in, and created by, breathing. When we put the two together and move based upon our breath, we find that different *āsanas* facilitate different types of breathing. More specifically, some postures emphasize and support inhaling and some postures emphasize and support exhaling. In fact, *āsana* is specifically designed to function in this way. By doing so, it involves and thus affects the *prānamaya* dimension at the same time that it is working on the physical body dimension (*annamaya*).

In addition to working on the *annamaya* and *prānamaya* dimensions, *āsana* also works on the *manomaya* (mental dimension). *Āsana* requires attention and mental focus. If we’re not paying attention, we can’t coordinate the movements and breathing very well at all. In fact, if we don’t pay attention, our breathing changes and we end up with a different result. In other words, even something as seemingly straightforwardly physical as *āsana* was not conceived by the ancient Yoga masters as working only on the physical dimension.

The point is that Yoga’s understanding of the human system is holistic in specific ways. It is not accidental or mysterious, but, rather, concrete and definite. How and why the different dimensions of the human system interrelate to one another are described in texts like the *Taittirīya Upanisad*, and can be used in the application of Yoga for healing. Moreover, the various Yoga tools and techniques are based on, and gain their effectiveness from, these principles.

**Prāna Vāyus**

The second anatomy worth examining is the model of the *prāna vāyu*. This model relates to the *prānamaya* (breath/prāna) dimension of the *pañcamaya* model, as it describes the functioning of *prāna* and breath. However, it
is different from the pañcamaya model in both structure and origin. The prāna vāyus model is not described in the Tāttvādīya Upanisad, but in many other texts, including the Yogājñavalkya Samhitā.3

One way of understanding prāna is “that which supports the physiology of the body.” In this capacity, prāna is sometimes compared to the role of electricity in electronic machinery. Without the electricity, nothing in the machine works, but when electricity is present (assuming the machine is in operating condition) it enables the machine to perform all kinds of different functions.

In the prāna vāyus model, prāna in different areas of the body is known by different names because prāna in different parts of the body supports different functions.4

For example, as shown in illustration 3, prāna in the chest area is called prāna vāyu. This area is considered to be the seat of the mind and the emotions. Prāna in the abdomen is called apāna vāyu and is responsible for reproduction as well as the elimination of bodily waste. The prāna located in the area surrounding the navel is called samāna vāyu and governs digestion. The prāna in the throat region is called udāna vāyu and governs communication. Lastly, the prāna governing circulation and the transportation of nutrients throughout the whole system is called vyāna vāyu, and this prāna is located throughout the body, particularly the joints. These are only the five most important of the ten major prāna vāyus that are most commonly described in texts.

This anatomy is a critically important foundation for explaining how Yoga works on different areas of the body and different functions of the human system through different breathing patterns and Yoga techniques. For example, the ancient Yogis noticed that different areas of the human system strongly respond to different types of breathing patterns. It was noticed that the apāna region responds to breathing ratios with an emphasis on exhalation, and that the prāna area responds to breathing ratios with an emphasis on inhalation. They also noticed that nyāsa and mudrā affected the vyāna vāyu, and that different chanting could affect the udāna vāyu in different and predictable ways.

When we combine the perspective of the prāna vāyus with the pañcamaya ideas about the interrelatedness of the different dimensions of the human system, we can begin to see how these anatomies not only influence, but truly direct our treatment decisions. Different tools can be used to influence different parts of the human system in very specific ways. For example, we can generalize that if there is a problem in the apāna region of the body, then two tools that could be used to influence the apāna area of the body are exhalation and forward-bending āsanas.

Of course, this does not mean that all apāna area problems should be handled with forward bends and exhalation. There are many nuances and principles which a person must know before applying Yoga for healing, and it is not the intention of this article to explain how to apply these principles in depth. Rather, the intention of the article is to show that the application of Yoga for healing is built on Yoga’s understanding of how the human system functions. These models of anatomy provide predictable guidelines for how the human system can be influenced through different Yoga techniques and methods. In other words, applying Yoga for healing is not primarily an intuitive practice, but rather a practical science (and art) following definite, well-defined guidelines.

Subtle Anatomy System

The subtle anatomy model is also related to the prāna vāyus model and the pañcamaya model. Like the prāna vāyus model, it too describes how prāna functions in the human system. According to the subtle anatomy model, prāna circulates in the human system through a series of tubes called nāḍīs. These nāḍīs are the passageways through which prāna is able to get to different areas of the system. Though there are many nāḍīs throughout the human system, three are usually considered the most important.

Illustration 4. The subtle anatomy model.

As shown in the diagram, the susumnā runs from a location near the base of the spine, up the back of the body (approximately near the spine), to slightly above the crown of the head. The pingalā, which originates at the tip of the right nostril, and the idā, which originates at the tip of the left nostril, run up through the forehead, where they cross...
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(but do not intersect), and then down along the back of the body near the spine to the base of the susumnā. As they move down the back, they cross each other (without intersecting) four more times until they join together with the susumnā at its base.

The prāna in the pingalā is called the “ha” prāna and the prāna that is in the idā is called the “tha” prāna. According to this anatomical model, one of the points of a Yoga practice is to help move the ha and the tha prāna from the pingalā and idā nādis into and up the susumnā nādi. This, not incidentally, is where the word “hatha” yoga originates. What complicates this process is that the ancient yogis thought that at the base of the susumnā nādi is a blockage preventing the ha and tha prāna from entering the susumnā nādi.

The material that is blocking the base of the susumnā nādi is called many different names. In some texts, the name given to the material blockage at the base of the susumnā nādi is kundalinī, a word that literally means a circular or winding shape and comes from the idea that the kundalinī is coiled around itself 3.5 times. Another name for the material blockage is mala, which literally means “impurity” and signifies things that are unhealthy for our system and should be eliminated. This mala may be physical (annamaya), as results from bad food or poor digestion; it may be emotional (ānanadamaya), resulting from some difficult experiences; it may be unuseful communication styles (vijñānamaya), or even negative attitudes (manomaya). In other words, the impurity may be in any or all dimensions of our human system.

According to the subtle anatomy model, Yoga practice is the process by which this blockage is destroyed and the ha and tha prāna are thereby able to flow into and up the susumnā nādi. The ancient Yogis thought that the blockage could by eliminated by burning it in the digestive “fire” in the abdomen, and they correlated different aspects of breathing with different cleansing actions on the impurity. For example, exhaling was thought to bring the impurity up to the fire to be burned. This corresponds to the observation that when you exhale fully, the abdomen contracts and rises slightly. Inhaling was thought to blow the flame of the digestive fire toward the impurity at the base of the susumnā nādi, thus burning it up.

So breathing is a fundamental aspect of āsana because it is the mechanism which results in the elimination of the blockage preventing the prāna from flowing into the susumnā nādi. In fact, the classification of postures into paśicimatāna and pūrvatāna is based upon the type of breathing the position supports. Paśicimatāna postures support exhaling since bending forward is so much easier when exhaling, and exhaling brings the impurity toward the fire in the abdomen. Pūrvatāna postures support inhaling since inhaling naturally arches the back and inhaling directs the fire in the abdomen toward the impurity.

This model helps show how the physical practice of āsana is designed to affect the human system on multiple dimensions, in particular the prānamaya dimension. Thus, the ancient Yogis conceived the practice of Yoga as having a focus that is fundamentally different from the typical Western attention to flexibility and alignment of muscle and ligament.

Yoga’s Tools are Extensions of Indian Anatomies

These anatomies describe the functioning of the human system, and in doing so serve as maps showing routes of treatment. They show how to apply Yoga tools and techniques for healing. By understanding their descriptions of how the human system functions, we know how and why various Yoga techniques and methods were conceived. Simply put, these Indian anatomies explain how and why Yoga’s various tools work. Of course, different tools work in different ways and on different parts of the human system. So we can see why different Yoga practices produce different effects, and how to purposefully elicit different effects in ourselves and students. As a result, our Yoga for healing treatments can account for myriad differences in individuals, symptoms, circumstances, causes, times, and so on.

Yoga Therapy is its Own Therapeutic System

Each of these three ancient Indian anatomies describes a specific portion of the human system in some detail. In doing so, they overlap, and some details do not correspond exactly with details from the other anatomies. However, that does not mean that one is right and the others wrong. Instead, if we understand what each offers, we find that they are very compatible with each other. When applied together as a whole, they present an incredibly rich and fertile geography of the human system.

We can now see that what is and is not “Yoga therapy” is determined not by which Yoga tools are used nor by the effects they engender, but rather by the understanding with which the tools are applied. Yoga therapy is not Yoga therapy by virtue of its using Yoga techniques or methods, but rather by virtue of its Yogic understanding of how these tools are used. This understanding is based on Yogic understanding of the human system, ideas that are very different from conventional Western medicine.

For example, a particular position of the body is not, by itself, Yoga therapy (or even Yoga for that matter). Physical therapists also put the body in different positions, many of which resemble āsanas. But unless it is supported by Yoga principles as described above, an āsana is only a position of the body. In fact, an āsana separated from breathing, from mental attention, and from the Indian anatomical understanding from which it emerged, is no longer an āsana, even more so if it is applied according to conventional Western models of the human system.

What differentiates Yoga for healing from physical therapy, psychotherapy, and other Western therapies is the understanding of what we are trying to accomplish and what dimensions of the human system are involved in that process. What we do is not Yoga therapy. How we do it is. The importance of this principle cannot be overemphasized.

Conclusion

We have seen that the application of Yoga for healing is not just the use of specific techniques or methods, but rather a holistic therapeutic perspective towards the human system and the process of healing. It is not just a few techniques or methods that define Yoga for healing, but rather the theory, method, and principles underlying how the techniques are applied.

As practitioners of Yoga for healing, we must be careful to understand and maintain Yoga’s unique, holistic perspective. It is precisely this quality that makes Yoga special, and it is crucial to Yoga’s effectiveness. Ironically, it is also this critical quality that is most readily lost when Yoga for healing techniques and methods are applied according to conventional Western medical principles and assumptions.

Thus, it is of the utmost importance to maintain the distinction between assimilating Yoga tools and techniques into conventional Western medical practice, and practicing Yoga for healing. In the former, applications are solely according to Western anatomies, while in the latter, applications are according to the subtle, pānca-maya, and prāna vāyus anatomies of ancient India.

We need to ask ourselves, what anatomy is underlying our understanding and practice of Yoga for healing? Indeed, what do we think we are trying to accomplish through the practice of Yoga and āsana, prānāyāma, and meditation? Our imagined starting and ending points will strongly influence not only what treatments we can conceive, but also how we apply Yoga for healing.

References


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