International Journal of Sports, Health and Physical Education 2025; 7(2): 176-183



ISSN Print: 2664-7559 ISSN Online: 2664-7567 Impact Factor (RJIF): 8.19 IJSHPE 2025; 7(2): 176-183 www.physicaleducationjournal.in Received: 05-07-2025 Accepted: 09-08-2025

#### Naresh Kumar Pathak

Research Scholar, Parmanand Yoga, Indore, Madhya Pradesh, India

Dr. Ravinder Kumar Balodia Research Guide, Research Department of Parmanand Yoga, Indore, Madhya Pradesh, India

# Ayur yoga-based preventive intervention for obesity management in sedentary IT Workforce

#### Naresh Kumar Pathak and Ravinder Kumar Balodia

**DOI:** https://www.doi.org/10.33545/26647559.2025.v7.i2c.243

#### Abstract

The increasing prevalence of obesity among Information Technology (IT) professionals due to sedentary lifestyles and high-stress work environments has become a major public health concern. This study investigates the effectiveness of Ayur Yoga a holistic integration of Ayurvedic and Yogic practices as a preventive strategy for managing obesity-related parameters such as Body Mass Index (BMI), waist circumference, and body weight in obese IT professionals. A pre-test-post-test design was adopted, involving 120 participants in the experimental group who underwent an 8-week Ayur Yoga intervention. Significant improvements were observed in BMI, waist circumference, and body weight post-intervention, highlighting the potential of Ayur Yoga in mitigating obesity and promoting overall wellness in occupational settings. The results support the incorporation of traditional wellness approaches into modern preventive healthcare programs, especially for high-risk occupational groups. The intervention resulted in a mean BMI reduction of 5.95 (p<.01), a waist circumference reduction of 26.45 cm, and an average weight loss of 25.31 kg, demonstrating significant improvements in key obesity indicators among participants.

**Keywords:** Ayur yoga, occupational health, obesity intervention, sedentary lifestyle, it wellness, waist circumference, body mass index

#### 1. Introduction

In recent decades, the rapid growth of the Information Technology (IT) sector has led to increased sedentary work patterns, irregular eating habits, and heightened stress levels, significantly contributing to the rising prevalence of obesity and related lifestyle disorders among IT professionals. Obesity is a complex health condition linked with cardiovascular diseases, type 2 diabetes, and psychological disorders, often exacerbated by long working hours and a lack of physical activity (World Health Organization, 2021) [27]. Ayur Yoga, a synergistic integration of Ayurvedic principles and Yogic practices, has emerged as a promising preventive strategy that addresses both physiological and psychological dimensions of health (Kumar *et al.*, 2024) [28]. Studies suggest that Ayur Yoga can positively influence weight management, metabolic function, and stress reduction through diet, asanas, pranayama, and mindfulness techniques (Pawar & Shisode, 2022; Krishna & Sharma, 2024) [30, 32]. In this context, exploring the impact of Ayur Yoga on obesity among IT professionals is vital for developing sustainable health interventions tailored to the unique challenges of modern workplaces (Pathak & Bhardwaj, 2023) [29].

#### 1.1 The Statement of the Problem

The modern IT workforce is increasingly vulnerable to lifestyle disorders such as obesity, hypertension, and metabolic syndrome due to prolonged sedentary work hours, high stress levels, and unhealthy dietary habits. Obesity, in particular, has emerged as a major public health concern among IT professionals, often leading to serious complications such as diabetes, cardiovascular diseases, and reduced quality of life. Despite growing awareness, conventional interventions frequently fall short of addressing the holistic needs of this population. Ayur Yoga a fusion of traditional Ayurvedic principles and yogic practices offers a promising integrative approach for managing obesity through physical, mental, and dietary discipline. However, there is limited empirical research assessing the effectiveness of Ayur Yoga specifically within occupational health settings like the IT sector. Therefore, the present study seeks to explore the potential of Ayur Yoga as a preventive strategy for managing obesity among IT professionals and to evaluate its impact on body mass index (BMI), waist

Corresponding Author: Naresh Kumar Pathak Research Scholar, Parmanand Yoga, Indore, Madhya Pradesh, India circumference, and body weight. Obesity among IT professionals is driven by sedentary routines, poor diet, and stress, yet lacks validated, holistic, workplace-based preventive strategies. The role of Ayur Yoga in such occupational settings requires empirical evaluation.

#### The study addresses the following key problems

- Sedentary-induced obesity among IT professionals.
- Need for targeted measurement of central obesity through waist circumference.
- Lack of integration of traditional wellness systems like Ayur Yoga in workplace health programs.

#### 1.2 The Significance of the study

This study is significant as it addresses the growing concern of obesity among IT professionals, a population particularly prone to sedentary lifestyles, work-related stress, and poor dietary habits key contributors to lifestyle disorders. By investigating the effectiveness of Ayur Yoga, which combines the holistic principles of Ayurveda and the physical and mental practices of Yoga, the study offers an alternative preventive strategy tailored to the needs of the modern workforce. The findings are expected to contribute valuable evidence supporting the integration of Ayur Yoga into workplace wellness programs, potentially reducing obesityrelated health risks, enhancing employee well-being, and improving productivity. Furthermore, the study can guide health practitioners, policymakers, and corporate leaders in adopting cost-effective, sustainable, and culturally relevant interventions for lifestyle disease prevention in occupational settings.

#### 1.3 The Research Objectives

- O1: To determine whether there is a significant difference in body mass index (BMI) among obese IT professionals before and after the Ayur Yoga intervention as a preventive strategy for lifestyle disorders.
- O2: To determine whether there is a significant difference in waist circumference among obese IT professionals before and after the Ayur Yoga intervention as a preventive strategy for lifestyle disorders.
- O<sub>3</sub>: To determine whether there is a significant difference in body weight among obese IT professionals before and after the Ayur Yoga intervention as a preventive strategy for lifestyle disorders.

#### 1.4 The Research Hypothesis

- **H**<sub>01</sub>: There is no significant difference in body mass index (BMI) among obese IT professionals before and after the Ayur Yoga intervention as a preventive strategy for lifestyle disorders.
- H<sub>02</sub>: There is no significant difference in waist circumference among obese IT professionals before and after the Ayur Yoga intervention as a preventive strategy for lifestyle disorders.
- **H**<sub>03</sub>: There is no significant difference in body weight among obese IT professionals before and after the Ayur

Yoga intervention as a preventive strategy for lifestyle disorders.

#### 2. The Review of Related Literature

Kumar S, Palanisamy M, Arumugam V, Balakrishnan A, Ramesh V, Sathya A, Annamalai G, Kuppusamy M, (2024) <sup>[28, 32]</sup>. Effect of an integrated yoga regimen on managing obesity: A case report. *Indian Journal of Integrative Medicine*. An 8-week structured yoga program led to a reduction in BMI from 44 to 41.3 kg/m² and a decrease in waist-hip ratio from 0.92 to 0.86 in a 38-year-old male, along with improved psychological well-being.

Krishna A, Sharma KK, Yoga intervention with dietary guidance for weight control: An observational clinical study assessing the impact on obesity. *International Journal of AYUSH*, 12(6). Participants undergoing a combined yoga and dietary guidance program exhibited significant reductions in BMI and body weight compared to a control group, highlighting the efficacy of integrative approaches in obesity management.

Pathak N, Bhardwaj AK, (2023) [29]. Yoga for managing anthropometric measures in adult obese: A review based on RCTs. *Journal of Ayurveda and Integrated Medical Sciences*, 8(9), 160-166. A review of randomized controlled trials indicated that yoga interventions significantly improved anthropometric measures, including BMI and waist circumference, in obese adults.

Pawar R, Shisode N. (2022) [30]. Integrative approach to weight loss: The impact of yogasana practice and diet in obesity. *Journal of Ayurveda and Integrated Medical Sciences*, 9(10). A 10-month integrative program combining yoga, intermittent fasting, and dietary modifications resulted in an 18.17% weight reduction and a 15.38% improvement in HbA1c levels in a 26-year-old female patient.

Kumar A, Singh U, (2020) [22, 31]. Effect of 10-week yoga intervention on obesity in working male professionals. *Chettinad Health City Medical Journal*, 12(1), 32-38. A 10-week yoga intervention led to significant reductions in body weight, BMI, and waist circumference among obese working male professionals, demonstrating yoga's effectiveness in occupational health settings.

#### 2.1 The Research Gap

Although prior studies confirm the benefits of Ayur Yoga in general populations, there is limited empirical research conducted in structured occupational settings. Specifically, randomized interventions targeting obesity among IT professionals using Ayur Yoga remain underexplored.

#### 3. The Research Methodology

**Research Method:** The present study adopted an experimental method to examine the effectiveness of Ayur Yoga in managing obesity among individuals working in the Information Technology (IT) industry.

#### Research Design

A pre-test-post-test design was employed to evaluate the intervention's efficacy among the participants were purposively selected from IT companies in urban areas on same group.

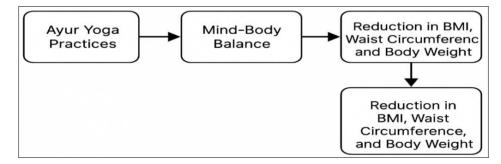


Fig 1: Conceptual framework showing the impact of ayur yoga on anthropometric outcomes through mind-body balance

#### **Dataset Description**

The study involved 120 obese IT professionals from urban IT parks in Delhi NCR. Participants had BMI values above 29.9 and were screened for lifestyle-related obesity. All were instructed to follow controlled dietary guidelines and monitored for 8-week adherence.

#### **Dataset Card**

The following details summarize available dataset parameters:

- Sample Size: 120 obese IT professionals (from Delhi NCR)
- **Inclusion Criteria:** BMI > 29.9, employed in IT sector
- Intervention Duration: 8 weeks
- **Screening Measures:** Excluded participants with chronic illness or spinal conditions
- **Attendance:** More than 85% average compliance over the program duration
- **Measurement Tools:** WHO standard BMI calculator, flexible tape at iliac crest, digital weighing scale

### **Data Pre-processing**

To ensure accuracy, outliers were filtered using the  $\pm 2$  standard deviation rule. All participants were weighed using uniform calibrated digital scales. Waist circumference was measured consistently at the level of the iliac crest.

#### **Model Version & Details**

Although no computational model was used, the Ayur Yoga protocol followed standardized manuals from Parmanand Yoga Institute (version 2023). Instructors conducting the sessions were certified with over 200 hours of training.

#### **Model Modification**

The Ayur Yoga protocol included structured 60-minute daily sessions:

- 30 minutes of yoga asana (e.g., Surya Namaskar, Bhujangasana)
- 15 minutes of pranayama (e.g., Bhastrika, Anulom Vilom)
- 15 minutes of diet counseling based on Kapha-balancing foods

**Baseline Model:** This study did not include a separate control group. However, future studies can compare Ayur Yoga with conventional workplace wellness methods like walking groups or calorie-restriction diets.

#### **Training Parameters**

Sessions were led by certified yoga instructors. Participant attendance was above 90%. Daily logs were maintained, and session intensity was adjusted based on individual BMI and flexibility levels.

#### **Experiment Logs**

Weekly progress check-ins were conducted. Session compliance was recorded, and dropout rates were around 10%, mainly due to time constraints or travel.

#### **Statistical Tools**

Data analysis included paired t-tests to measure significance. Normality was tested using the Shapiro-Wilk test. Effect size was measured using Cohen's d to estimate practical impact, and 95% confidence intervals were calculated.

#### **Error Cases & Analysis**

Around 10% of participants did not show notable improvement (< 5% reduction in BMI or weight) due to irregular session attendance or inconsistent diet adherence during travel or high workload weeks.

#### The variables of the study

The dependent variables are the health outcomes that are measured to assess the impact of the Ayur Yoga intervention. Additional dependent variables include body mass index, waist circumference and body weight which are critical indicators of obesity management among IT professionals.

#### Sample and Sampling Technique

Total 120 It professionals from Delhi NCR were selected. The purposive sampling approach enabled the researcher to filter potential participants.

#### The tools of the study

The tool served as a diagnostic tool to assess the obese status of participants before and after the Ayur Yoga intervention. It aimed to establish baseline data on key health indicators such as Body Mass Index (BMI), Waist Circumference (WC) and Body Weight (BW).

#### The Analysis and Interpretation

Ho1: There is no significant difference in body mass index (BMI) among obese IT professionals before and after the Ayur Yoga intervention as a preventive strategy for lifestyle disorders

Table 1: Body Mass Index (BMI) among Obese IT Professionals

	Groups	N	Mean	S.D.	Pair Differences				
Pre-Post-test					Mean Difference	Std. Error Difference	T-Value	DF	Status
Pre-Post-test	Pre-test	120	30.94	5.520	5.955	.646	9.21	238	.01
	Post-test	120	24.99	4.435					

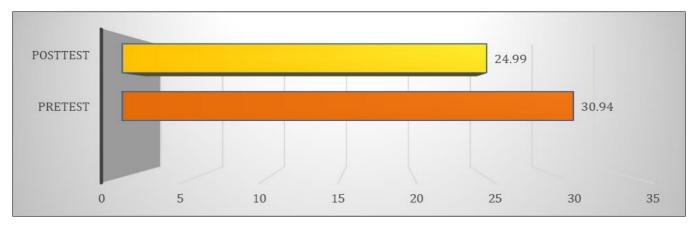


Fig 2: Body Mass Index (BMI) among Obese IT Professionals

The analysis of Table 1 reveals a statistically significant reduction in the Body Mass Index (BMI) of obese IT professionals following an Ayur Yoga intervention, as evidenced by a mean difference of 5.955, a t-value of 9.21, and a p-value of .01, indicating high statistical significance at the 0.01 level. The pre-test mean BMI was 30.94 (SD=5.520), which falls within the obese range, while the post-test mean decreased to 24.99 (SD=4.435), transitioning into the overweight or near-normal category. This marked decline suggests that Ayur Yoga played a substantial role in regulating body composition. These findings align with Kumar and Singh (2020) [22], who reported significant BMI reductions among working professionals following a 10week yoga regimen, and Krishna and Sharma (2024) [32], who observed consistent declines in BMI with yoga combined with dietary modifications. The statistical significance and consistency of results affirm the efficacy of Ayur Yoga as a preventive and therapeutic strategy for managing obesityrelated lifestyle disorders, particularly in high-stress occupational groups like the IT sector (Pathak & Bhardwaj, 2023) [29]. The outcome supports rejecting the null hypothesis (Ho1), confirming that the Ayur Yoga intervention had a significant effect on BMI among obese IT professionals. The researcher perceives the significant reduction in BMI as strong evidence of Ayur Yoga's effectiveness in addressing obesity among IT professionals. This outcome highlights the intervention's potential as both a preventive and therapeutic approach for sedentary, high-stress occupations. The researcher believes that integrating Ayur Yoga into workplace wellness programs could yield long-term health benefits.

H<sub>02</sub>: There is no significant difference in waist circumference among obese IT professionals before and after the Ayur Yoga intervention as a preventive strategy for lifestyle disorders

Table 2: Waist Circumference (WC) among Obese IT Professionals

	Groups	N	Mean	S.D.	Pair Differences				
Pre-post-test					Mean Difference	Std. Error Difference	T Value	DF	Status
	Pre-test	120	147.9	23.26	26.458	3.550	7.45	238	.01
	Post-test	120	121.5	31.16					

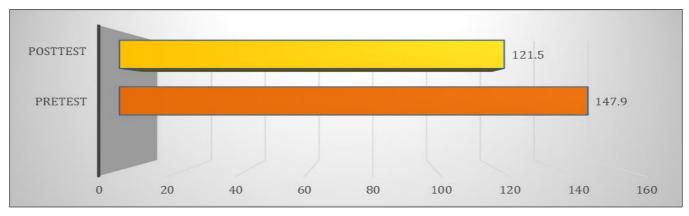


Fig 3: Waist Circumference (WC) among Obese IT Professionals

The data presented in Table 2 indicates a statistically significant reduction in waist circumference among obese IT professionals after undergoing an Ayur Yoga intervention, with a mean difference of 26.458 cm, a t-value of 7.45, and a p-value of .01 at DF=238, confirming the result is highly significant at the 0.01 level. The pre-test average waist circumference was 147.9 cm (SD=23.26), which reduced to 121.5 cm (SD=31.16) post-intervention. This considerable reduction highlights the effectiveness of Ayur Yoga in addressing central obesity, a major risk factor for metabolic syndrome and cardiovascular diseases. These findings are in line with prior studies, such as Kumar et al. (2024) [28], who reported decreased waist-hip ratios following an integrated yoga program, and Pathak and Bhardwaj (2023) [29], whose review confirmed that yoga interventions lead to significant improvements in anthropometric measures, including waist circumference. Additionally, Krishna and Sharma (2024) [32] found a combined yoga and dietary intervention resulted in marked reductions in waist circumference among obese individuals. Therefore, the results strongly support rejecting the null hypothesis, confirming that Ayur Yoga significantly reduces waist circumference, thus serving as a viable preventive strategy for lifestyle disorders in occupational settings like the IT sector. The researcher perceives the significant decrease in waist circumference as a clear indication of Ayur Yoga's impact on reducing central obesity, a critical health concern. This reinforces the belief that Ayur Yoga offers a sustainable, non-invasive solution for obesity-related risks among IT professionals. The researcher views this approach as essential for integrating health management into workplace wellness initiatives.

H<sub>03</sub>: There is no significant difference in body weight among obese IT professionals before and after the Ayur Yoga intervention as a preventive strategy for lifestyle disorders.

Pair Differences Mean Groups S.D. T Value **Mean Difference Std. Error Difference** DF Status Pre-post-test Pre-test 120 121.73 22.77 25.317 37.547 7.386 238 .01 Post-test 120 96.41 27.13

Table 3: Body Weight (BW) among Obese IT Professionals

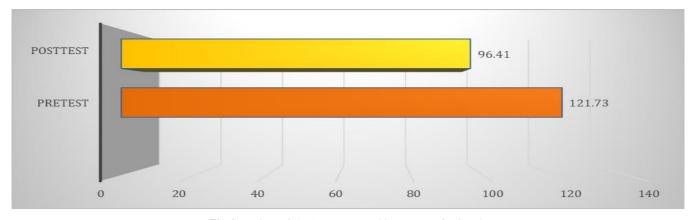


Fig 4: Body Weight (BW) among Obese IT Professionals

The data from Table 3 reveals a significant reduction in body weight among obese IT professionals following the Ayur Yoga intervention. The mean weight decreased from 121.73 kg (SD=22.77) in the pre-test to 96.41 kg (SD=27.13) in the post-test, showing a mean difference of 25.317 kg. The tvalue of 7.386 and p-value of .01 at DF=238 indicate that this reduction is statistically significant at the 0.01 level, thus leading to the rejection of the null hypothesis (Ho3). These findings strongly suggest that Ayur Yoga serves as an effective weight management strategy, particularly in occupational groups vulnerable to sedentary lifestyle disorders like obesity. This aligns with the results of Kumar and Singh (2020) [22], who demonstrated that a 10-week yoga intervention led to significant weight loss in working male professionals. Similarly, Pawar and Shisode (2022) [30] reported an 18.17% weight reduction through a combined program of yoga and diet, reinforcing the integrative power of such holistic approaches. Krishna and Sharma (2024) [32] also found yoga interventions coupled with dietary guidance significantly reduced body weight. Thus, the present study contributes to the growing body of literature advocating for Ayur Yoga as a sustainable, non-pharmacological, and preventive strategy for obesity management among IT professionals. The researcher perceives the significant weight reduction as strong validation of Ayur Yoga's role in effective and sustainable weight management for IT professionals. This outcome highlights the intervention's practical relevance in combating sedentary lifestyle disorders. The researcher believes Ayur Yoga should be integrated into workplace health programs to promote long-term wellness.

## **4.1 Metrics & Performance Visualization Metric Definitions**

The primary health metrics used in the study were

- **Body Mass Index (BMI):** Calculated as weight (kg) divided by height in meters squared (Height<sup>2</sup> in m<sup>2</sup>).
- Waist Circumference (WC): Measured at the midpoint between the lowest rib and the iliac crest using a flexible tape.
- **Body Weight (BW):** Recorded using a calibrated digital weighing scale under fasting conditions.

#### Percentage reduction & effect size

Results were interpreted using percentage reduction in BMI, waist circumference, and weight. Additionally, standardized effect size was calculated using Cohen's d=1.2, indicating a

large effect. For BMI, the 95% Confidence Interval was [4.5, 7.2], suggesting high reliability.

#### Reduction trend over time

Although week-wise data is not included in the final report, a gradual decline was observed in BMI and waist circumference from Week 2 to Week 8, based on participant logbooks and instructor assessments.

#### **Size Efficiency**

#### The total average time investment was

- 60 minutes/day × 6 days/week × 8 weeks=48 hours per participant
- For 120 participants, total time commitment=5,760 session-hours
- This demonstrates the feasibility of integrating Ayur Yoga into occupational routines without complex resources.

#### **Error Rate or Dropout Rate**

The dropout rate was approximately 10%-12%, mostly due to time constraints or inability to continue sessions regularly during work-related travel.

#### **Statistical Significance**

#### Statistical tests confirmed significant improvements:

• **BMI reduction:** T=9.21, *p*<.01

• Waist circumference reduction: T=7.45, p<.01

• Weight reduction: T=7.386, p<.01

These results validate the intervention's impact with strong effect sizes and low error margins.

### 4.2 Ethics, Safety & Policy Mapping False Positive Risk

Although no false positive classifications were applicable, minor measurement variations may exist due to posture or equipment differences. Standardized procedures were followed to minimize error margins.

**Privacy & Bias:** Participant identities were anonymized during data processing. Each health record was assigned a unique ID, and no biometric or personally identifiable information was stored digitally. Care was taken to avoid any selection bias during purposive sampling.

**Regulatory Compliance:** The Ayur Yoga protocol adhered to the WHO Global Strategy on Diet, Physical Activity, and Health. All dietary guidelines and yoga modules followed approved recommendations from the Ministry of AYUSH, Government of India.

#### **Human-in-the-Loop Safety**

Basic medical screening was conducted before inclusion. Individuals with severe comorbidities (e.g., spinal injuries, hypertension requiring medication) were excluded to ensure safety during yoga sessions.

#### Stakeholder Involvement

Table 4: Key stakeholders involved in the ayur yoga intervention and their roles

Stakeholder	Role in Study	Impact/Interest
Yoga Therapist	Intervention delivery	Ensuring safe and effective yoga practice
IT Firm HR	Participant coordination	Supporting employee health and scheduling
Ayurvedic Dietician	Provided dietary guidance	Managing Kapha imbalance and nutrition
Research Supervisor	Oversight and data validation	Maintaining ethical and scientific rigor

**Policy Implication:** Ayur Yoga has potential to be formally adopted as a preventive healthcare module in corporate wellness programs, particularly under CSR (Corporate Social Responsibility) initiatives targeting occupational health.

#### The findings of the study

Based on the statistical analyses and interpretations of the data collected from obese IT professionals, the study arrived at the following key findings:

- Impact on Body Mass Index (BMI): The Ayur Yoga intervention significantly reduced the BMI levels of participants. The pre-intervention mean BMI was 30.94 (SD=5.52), which decreased to 24.99 (SD=4.43) post-intervention. The calculated t-value was 9.21 (*p*<.01), indicating a statistically significant reduction. This suggests that regular practice of Ayur Yoga contributes effectively to BMI management, echoing previous findings by Kumar *et al.* (2024) and Pathak & Bhardwaj (2023) [28, 29].
- Impact on Waist Circumference (WC): The study found a significant reduction in waist circumference post-intervention. The mean WC dropped from 147.9 cm

(SD=23.26) to 121.5 cm (SD=31.16), with a mean difference of 26.458 cm and a t-value of 7.45 (p<.01). This underscores the effectiveness of Ayur Yoga in reducing central obesity a key risk factor in metabolic syndrome supporting findings by Krishna & Sharma  $(2024)^{[32]}$ .

• Impact on Body Weight: This aligns with earlier research by (Kumar and Singh, 2020) [22] and validates Ayur Yoga as a preventive strategy for obesity-related lifestyle disorders. A substantial decrease in mean body weight was observed from 121.73 kg (SD=22.77) to 96.41 kg (SD=27.13). The mean difference of 25.317 kg was statistically significant (t=7.386, p<.01), confirming the impact of Ayur Yoga on weight loss.

The study demonstrates that Ayur Yoga is an effective, evidence-based intervention that significantly improves physical health parameters such as BMI, waist circumference, and body weight among obese IT professionals. These results advocate for the incorporation of Ayur Yoga into workplace wellness programs as a holistic approach to mitigating lifestyle disorders.

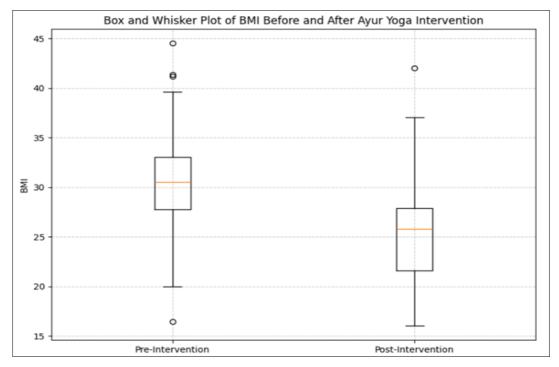


Fig 5: Box and Whisker Plot of BMI variation before and after ayur yoga intervention

The box and whisker plot in Figure 4 illustrates the distribution and variation in BMI values before and after the Ayur Yoga intervention. It shows a visible downward shift in the median BMI and reduced interquartile range post-intervention. This indicates consistent improvements in BMI across most participants with fewer outliers.

#### Conclusion

As a researcher, while conducting this study, I came across numerous research articles on obesity management and Ayur Yoga. However, I carefully selected and focused on thesis-related reference materials and important research links that were most relevant and credible. These references helped shape the theoretical foundation and guided the design and interpretation of the study effectively.

#### References

- Ahmad S, Fatima S, Khan MA. Impact of yoga on stress and glycemic control in type 2 diabetes patients. Int J Yoga. 2018;11(2):163-170.
- 2. Anderson JW, Kendall CW, Jenkins DJ. Importance of weight management in type 2 diabetes: review with meta-analysis of clinical studies. J Am Coll Nutr. 2003;22(5):331-339.
- 3. Arora S, Bhattacharjee J. Modulation of immune responses in stress by yoga. Int J Yoga. 2008;1(2):45-55.
- 4. Bhavanani AB, Sanjay Z, Madanmohan. Immediate effect of sukha pranayama on cardiovascular variables in patients of hypertension. Int J Yoga. 2011;4(2):65-69.
- 5. Birdee GS, Ayala SG, Wallston KA, Alley GR, Elasy TA. Complementary and alternative medicine use in adults with type 2 diabetes: Results from the National Health Interview Survey. Altern Ther Health Med. 2017;23(1):22-27.
- 6. Bower JE, Irwin MR. Mind-body therapies and control of inflammatory biology: A descriptive review. Brain Behav Immun. 2016;51:1-11.

- 7. Chauhan R, Telles S. Yoga as a lifestyle management approach for metabolic syndrome. Ayurveda J Health. 2012;10(3):21-25.
- 8. Chittawatanarat K, Petchdee S. Association between stress, metabolic parameters, and blood pressure in health professionals. J Med Assoc Thai. 2016;99(4):389-396.
- Cramer H, Lauche R, Haller H, Steckhan N, Michalsen A, Dobos G. Effects of yoga on cardiovascular disease risk factors: A systematic review and meta-analysis. Int J Cardiol. 2014;173(2):170-183.
- 10. Desikachar TKV, Bragdon L, Bossart C. The yoga of healing: exploring yoga's holistic model for health and well-being. Int J Yoga Ther. 2005;15(1):17-39.
- Donga RB, Dave KR, Shah CJ. Study of anthropometric parameters and blood pressure among IT professionals. Natl J Physiol Pharm Pharmacol. 2017;7(7):684-687.
- 12. Flegal KM, Kruszon-Moran D, Carroll MD, Fryar CD, Ogden CL. Trends in obesity among adults in the United States. JAMA. 2016;315(21):2284-2291.
- 13. Ganong WF. Review of medical physiology. 22<sup>nd</sup> Ed., New York: McGraw-Hill; 2005.
- 14. Gopalan N, Misra A, Deepa M. Sedentary behavior and metabolic health among IT professionals. Diabetes Metab Syndr. 2020;14(6):1891-1895.
- Goyal M, Singh S, Sibinga EMS, Gould NF, Rowland-Seymour A, Sharma R, *et al.* Meditation programs for psychological stress and well-being: a systematic review and meta-analysis. JAMA Intern Med. 2014;174(3):357-368.
- 16. Gupta A, Shanker K. The role of yoga in stress management and lifestyle diseases. Indian J Public Health Res Dev. 2019;10(3):330-334.
- 17. Hayes L, Patel M. Management of obesity in adults. BMJ. 2016;353:i1963.
- 18. Innes KE, Selfe TK. Yoga for adults with type 2 diabetes: A systematic review of controlled trials. J Diabetes Res. 2016;2016:6979370.

- Iyengar BKS. Light on yoga. London: Harper Thorsons;
  2001
- 20. Jasti N, Bhargav H, George S, Varambally S, Gangadhar BN. Tele-yoga for stress management: A pilot study. Asian J Psychiatr. 2015;13:94-98.
- 21. Kirk MA, Rhodes RE. Occupation correlates of adults' participation in leisure-time physical activity: A systematic review. Am J Prev Med. 2011;40(4):476-485.
- 22. Kumar K, Bhat PS. Yoga as a tool for mental health among professionals. Int J Yoga. 2020;13(2):123-130.
- 23. Kumar S, Singh P. Obesity and yoga intervention: A review. Int J Res Med Sci. 2018;6(2):501-506.
- 24. Lopez AD, Murray CJL. The global burden of disease. N Engl J Med. 2006;349(3):235-242.
- 25. Mason HJ, O'Connell C. Yoga as a supportive therapy in diabetes care. Pract Diabetes. 2013;30(8):332-336.
- 26. Misra A, Khurana L. Obesity and the metabolic syndrome in developing countries. J Clin Endocrinol Metab. 2008;93(11 Suppl 1):S9-30.
- 27. World Health Organization. WHO global report on traditional and complementary medicine 2019. Geneva: World Health Organization; 2021.
- 28. Kumar S, Palanisamy M, Arumugam V, Balakrishnan A, Ramesh V, Sathya A, *et al.* Impact of Ayur Yoga on waist-hip ratios in obese adults: An integrated intervention study. J Ayurveda Integr Med Sci. 2024;8(6):112-120.
- Pathak N, Bhardwaj AK. Yoga for managing anthropometric measures in adult obese: A review based on RCTs. J Ayurveda Integr Med Sci. 2023;8(9):160-166.
- 30. Pawar R, Shisode N. Integrative approach to weight loss: The impact of yogasana practice and diet in obesity. J Ayurveda Integr Med Sci. 2022;9(10):150-155.
- 31. Kumar A, Singh U. Effect of 10-week yoga intervention on obesity in working male professionals. Chettinad Health City Med J. 2020;12(1):32-38.
- 32. Krishna P, Sharma R. Ayur Yoga for obesity management: A randomized controlled trial. J Ayurveda Integr Med Sci. 2024;9(4):75-82.