Parsvottanasana- Flank Stretch Pose

This pose can be taught with several different foot placements as we shall we see below. We shall take the version shown opposite as the standard version where feet are at hip width apart so hips can more easily be square the front, alleviating asymmetrical compression in the lumbar region.

Teaching Points:

Stage 1: Hands to back of chair, wall etc.

- From Tadasana, feet hipth apart step the left foot forwards, turn the back foot a few degrees outwards
- Placing hands to hips, keep both hips facing forwards, towards short end of mat –
 may need to consciously draw rear right hip forwards
- o Inhaling lift and lengthen spine, creating a slight backbend, engaging the core
- Exhaling folding forwards from the hips, if hamstrings/calves/lower back/hips are stiff can bend front knee a little to enable flexion at hips, look downwards to keep the neck aligned with the spine, as both sitting bones are lifted & pressed backwards, keep the whole spine lengthened
- o At halfway, take hands to support
- Adjust position ensuring the front leg hip is drawn backwards, to keep hips facing forwards and equalise the weight between both feet so the weight is not increased into the front foot.
- o Can use arms to gently press backwards, lengthening spine
- O Do not let the outer edge of the rear foot lift, and may need to bend the front knee more deeply or can place a block beneath the back heel.
- To release, bend front knee if needed, take hands to hips and lift up keeping spine long

Stage 2: hands in reverse namaste

- o Keep the chest and shoulders open, can place hands to hips if necessary
- o Inhaling lift and lengthen spine, engaging the core
- Exhaling folding forwards from the hips, which means you may need to bend front knee a little, look downwards to keep the neck aligned with the spine, as both sitting bones are lifted & pressed backwards, keep the whole spine lengthened
- o Can stay halfway or fold forwards completely, front knee bent is possible
- Adjust position ensuring the front leg hip is drawn backwards, to keep hips facing forwards and equalise the weight between both feet so the weight is not increased into the front foot.
- O Do not let the outer edge of the rear foot lift, and may need to bend the front knee more deeply or can place a block beneath the back heel.

To exit.

o Bend front knee if needed, lift up keeping spine long

Benefits:

Tones both legs significantly Tones spinal musculature

Opens chest and shoulder muscles Increases circulation to lower back

Good preparation

Teach anterior tilt of pelvis, i.e. flexion from hips; pada bandha; mula bandha; hamstring, calf and adductor stretches, back and abdominal strengtheners; shoulder and wrist mobilisers

Cautions

- Un-medicated high blood pressure & heart conditions: if necessary place lower hand on to support staying halfway to avoid positioning head lower than heart; work for short briefer periods, without strain.
- General stiffness, Lower back conditions and sciatica: work cautiously using modifications such as bent front knee, lower hand to a support.
- Hyperextension of front knee: keep weight equal between feet, pressing into ball of lead foot, engaging quadriceps, can slightly bend front knee
- o **Pregnancy:** lower hand to support

Variations



Feet forwards

Can lift and lower with arms overhead. There is more weight so more effort needed to stabilise position so is a slight development. Can still stay halfway as a modification, or place blocks beneath hands. Once in the full pose with hands to floor can walk hands forwards and press hands down to help draw hips backwards.

Hands clasped behind

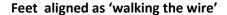
A good variation is to lift and lower with hands clasped. Can help to extend spine. Front knee can still bend. Raised arms can help us out of the pose, reducing effort.



Lift and lower once in pose

Once in the full pose where hands are to the floor can inhale lifting on to fingertips and exhale flexing further down. Practicing this several times and then staying still.

Developments:





This version has a different foot placement where the front leg is externally rotated 90° and the back leg internally rotated to 45°. This is a possibility but it does mean more twisting which can place the lumbar area and sacrum under excessive asymmetrical torque.

Adjustments

Students must avoid rounding the spine so scan for this and when the hamstrings or lower back are tight offer blocks and/or bending the front knee to keep the spine long.

We can indicate that the front hip can be drawn backwards although care with this so that students can protect their lower back/sacrum area – they may feel more comfortable without this adjustment so do ask about their inner experience.