8: LIMITATIONS

Adult population was studied as only one young boy gave consent. Researcher physiotherapist had no control over other measures used. Sampling was convenience sampling. Patients served as their own controls. All sessions could not be supervised except the knee club group.

Clinical Implications: Practice of yogasanas is a safe and effective method for preventing and managing knee dysfunction. Instructions need to be followed. Yogasanas can be used as an important adjunct to physiotherapy. Through assessment is necessary to include this practice as a part of therapy. Extra time is needed to explain the asana procedure, sequence and progression.

Further scope:
Younger children start yogasanas practice. Longitudinal study on this population should be made. To check effects of yogasanas on Total knee replacement (TKR) has already been in process. As the effects on flexibility, pain and symptoms in cases with OA have been found, controlled trials can be undertaken. Further longitudinal follow up is going to be continued with participants’ consent.

Effect of various yogasanas, joint flexibility and its influence on vascular supply of the joints can be undertaken.