

CHAPTER - V

SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.1 SUMMARY

The purpose of the study was to find out the effect of static and dynamic hatha yoga sadhana practices on Gynecological and socio environmental factors among polycystic ovary disordered teenage girls and Gynecological and socio environmental factors were dependent variables and a. Static hatha yoga sadhana b. Dynamic hatha yoga sadhana practices were taken as independent variables.

To facilitate this study (45) forty five polycystic ovary disordered teenage girls from yoga mission, Chennai were randomly selected as subjects and the total duration of the training was 12 weeks (5 days in a week). They were divided into four groups which were as follows.

- a. **Experimental Group – I** - Static hatha yoga sadhana
- b. **Experimental Group - II** – Dynamic hatha yoga sadhana
- c. **Group III** - (Control group, No training was provided).

The significance of the difference between the experimental groups I, II and Group III were found out by the pre test and post test. They were determined through analysis of covariance (ANCOVA). The adjusted post test means were also computed by scheff's post hoc test. Thus the following results were obtained after the statistical analysis.

5.2 CONCLUSION

Within the limitation and delimitations set for the present study and considering the results obtained, the following conclusions were drawn.

For the purpose of this study it was hypothesized that the Static hatha yoga sadhana (Experimental Group – I), Dynamic hatha yoga sadhana (Experimental Group II) would significantly show changes in the selected Gynecological and socio environmental factors as compared to control group (group III).

1. The Gynecological variable Gonadotrophin-releasing hormone (GNRH) showed significant improvement due to Twelve weeks of Static hatha yoga sadhana (Experimental Group – I) & Dynamic hatha yoga sadhana among Polycystic ovary disordered teenage girls compared to the control group.
2. The Gynecological variable Luteinizing hormone (LH) showed significant improvement due to Twelve weeks of Static hatha yoga sadhana (Experimental Group – I) & Dynamic hatha yoga sadhana among Polycystic ovary disordered teenage girls compared to the control group.
3. The Gynecological variable Dehydroepiandrosterone (DHEA) showed significant improvement due to Twelve weeks of Static hatha yoga sadhana (Experimental Group – I) & Dynamic hatha yoga sadhana among Polycystic ovary disordered teenage girls compared to the control group.
4. The Gynecological variable Follicle stimulating hormone (FSH) showed significant improvement due to Twelve weeks of Static hatha yoga sadhana (Experimental Group – I) & Dynamic hatha yoga sadhana among Polycystic ovary disordered teenage girls compared to the control group.

5. The Socio environmental factors like Internet addiction showed positive changes due to Twelve weeks of Static hatha yoga sadhana (Experimental Group – I) & Dynamic hatha yoga sadhana among Polycystic ovary disordered teenage girls compared to the control group.
6. The Socio environmental factors Sedentary behavior showed positive changes due to Twelve weeks of Static hatha yoga sadhana (Experimental Group – I) & Dynamic hatha yoga sadhana among Polycystic ovary disordered teenage girls compared to the control group.
7. The Socio environmental factors peer pressure showed positive changes due to Twelve weeks of Static hatha yoga sadhana (Experimental Group – I) & Dynamic hatha yoga sadhana among Polycystic ovary disordered teenage girls compared to the control group.
8. The Socio environmental factors Computer vision syndrome showed positive changes due to Twelve weeks of Static hatha yoga sadhana (Experimental Group – I) & Dynamic hatha yoga sadhana among Polycystic ovary disordered teenage girls compared to the control group.
9. The post hoc analysis of the results proved that Static hatha yoga sadhana practices (Experimental Group-I) was slightly effective than Dynamic hatha yoga sadhana practices (Experimental Group-II) in gynecological and socio environmental factors such as Gonadotrophin-releasing hormone (GNRH) , Luteinizing hormone (LH), Dehydroepiandrosterone (DHEA) and Follicle stimulating hormone (FSH) and internet addiction , sedentary behavior, peer pressure and computer vision syndrome.

5.3. RECOMMENDATIONS

The following recommendations have been derived on the basis of the study for practitioners.

1. It was found that Static hatha yoga sadhana and Dynamic hatha yoga sadhana should be useful for the Polycystic ovary disordered teenage girls.
2. It was found that the combination of both also Static hatha yoga sadhana and Dynamic hatha yoga sadhana are more suitable for the Polycystic ovary disordered teenage girls.
3. Static hatha yoga sadhana and Dynamic hatha yoga sadhana may be recommended for Polycystic ovary disordered teenage girls for all other diseases for better treatment.
4. Static hatha yoga sadhana and Dynamic hatha yoga sadhana may be recommended for management as well as coping the peer pressure and computer vision syndrome.
5. Static hatha yoga sadhana and Dynamic hatha yoga sadhana may be recommended for the improvement of the Polycystic ovary disordered teenage girls for general health.
6. Static hatha yoga sadhana and Dynamic hatha yoga sadhana may be recommended mainly for prevention of pain and disability for all.
7. The government can encourage Static hatha yoga sadhana and Dynamic hatha yoga sadhana as a part of health centers.
8. Static hatha yoga sadhana and Dynamic hatha yoga sadhana may be included in academic curriculum.

9. Static hatha yoga sadhana and Dynamic hatha yoga sadhana may be done by all the people in their daily routine for regular work.

5.4 SUGGESTION FOR FURTHER RESEARCH

During the course of the research study, the investigator came across a number of ideas, based on which the following suggestions are made for further research in this area.

1. Similar study can be undertaken to find out the changes on Static hatha yoga sadhana and Dynamic hatha yoga sadhana.
2. Similar study can be undertaken for Polycystic ovary disordered teenage girls.
3. Similar study can be undertaken for Polycystic ovary disordered teenage girls.
4. Similar study can be undertaken for rural and urban Polycystic ovary disordered teenage girls.
5. This type of study can be undertaken on different age groups.
6. Since the research was selected on two experimental groups, more experimental groups can be compared for Polycystic ovary disordered teenage girls.
7. Similar study can be conducted on other gynecological and socio environmental factors also.
8. Similar study may be conducted for an extended period of experimentation by selecting a large sample.
9. Similar study may be conducted for other health problems faced by women.
10. The present study needs to be strengthened or supported by more relevant research studies.