Reviewer's report

Title: Community based yoga classes for type 2 diabetes: An exploratory randomised controlled trial

Version: 1 Date: 4 September 2008

Reviewer: Lisa M Bernardo

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minor essential reviews are needed, in particular with clarifying yoga therapy vs yoga practice. This is a very interesting report that describes the perils and pitfalls in conducting yoga research. The aim of this study was not so much to determine the effectiveness of yoga on markers in T2D but to determine the fidelity in using such an intervention in this population. As a yoga teacher and researcher, I have a number of comments in relation to the use of yoga in this study.

In this study, yoga therapy was initiated, in keeping with the description in box 1. If this was the case, then why did you screen for exercise tolerance? If you were conducting a yoga practice, then screening for exercise tolerance/cardiac risk factors would have been appropriate. But, since this was therapy, I'm not sure the these risk factors should have been included, and you may have enrolled more subjects.

When determining inclusion into the study, did you utilize standardized criteria for exercise prescription, such as the American College of Sports Medicine criteria? The inclusion criteria for exercise were vague. The recruitment was slow from the surgery practices; why didn't you enroll directly through a faith-based organization, newspapers, etc? This is how we enroll, and while our enrollment is just as slow, there is a freedom of being away from the medical model that is appealing to people.

What were the qualifications of the yoga teachers? Did they have training in yoga therapy? Of course, with this or any special population, modifications must be made, and that is why the subjects are in yoga therapy. What kind of incentives/assistance were given to subjects to practice at home--audio tapes of their practice sessions, a booklet, email reminders, etc? I disagree that a promise to practice at home should be a study inclusion criteria. Remember, by simply breathing and focusing the mind one is practicing yoga! As for the trade-off of personalizing vs standardized yoga intervention, well you said this was yoga therapy, and therapy is individualized and is not a yoga group class. So, in this venue, you DO have to be individualized! Then, each subject should have served as his/her own control. I didn't see where you compared each subjects' pre/post scores. Maybe something would turn up if this were done? Again, you make reference to the subjects treating the yoga practice like 'going to the gym'. Did they realize they were in therapy? You seem to go back and forth with yoga as exercise and yoga as therapy; if you aren't clear, perhaps your subjects weren't
clear? I, too, have taught yoga classes in the most precarious situations (noise, dust, etc); however, part of yoga is focusing the mind despite the environment, so people can learn to do this at home. Another recommendation for future research should be to explain the difference between yoga therapy and yoga practice as exercise. It is not necessary to practice yoga or any exercise for 90 minutes at a time--where did you get this number? Current research shows that even 10 minutes of exercise (or therapy?) is enough to see changes in mood and metabolism and 3, 10 minute sessions/day are helpful (Jakicic's work a few years back). No one has 90 minutes a day to devote to anything, let alone yoga! No, the yoga kit won't motivate people--perhaps an audio tape or something like that. Good luck with your next study!

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** Yes, and I have assessed the statistics in my report.

**Declaration of competing interests:**

I declare that I have no competing interests.