Fourteen days struggling to deal with COVID-19 using Su Jok Therapy: A case report

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ABSTRACT The resources to deal with COVID-19 are lessening, while health professionals are increasingly vulnerable in helping people with COVID-19. The close contact between health professionals and patients with COVID-19 increases the already high risk for transmission. It is time to find another form of therapy to help people with COVID-19 which is effective, inexpensive, easy and safe that can be done both for the well-being of patients and health professionals. In 2020, a male patient who was in his middle age, was seeking treatment from health professionals by sending messages through WhatsApp since he tested positive for COVID-19 the day before. We assessed him and found that he had complaints of fever, shivering and difficulty in breathing. We immediately replied with Su Jok protocol therapy and asked him to do the treatment by himself. After 27 minutes, there was no difficulty in breathing anymore. Since then, we kept monitoring his condition closely and provided instructions every day to treat each symptoms, including meditation therapy (Triorigin Smile Meditation/TSM), colour therapy, massage therapy, twist therapy and seed therapy. The most prominent symptoms associated with COVID-19 were shivering, difficulty in breathing, fever, excess mucus and pain in the lungs. Psychological symptoms also appeared and Su Jok was applied to treat his emotional problems. Symptoms attacked him less frequently and with less severity day by day. His swab test showed negative result after two weeks. In this case study, Su Jok therapy helped a patient in quarantine to deal with the physiological and psychological symptoms of COVID-19. Su Jok therapy can also help to prevent transmission of COVID-19 to health professionals, since they still can help patients from a distance with telehealth.

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1. Introduction

After more than sixteen months have passed, many countries are still struggling to deal with COVID-19. Protecting the citizens and providing the intensive treatment have been done in all countries, with the result that resources are getting less and less. In regard to finding the cure for COVID-19 through complementary alternative therapy, this article will report a case of a patient with confirmed COVID-19 during a 14 day quarantine treated using Su Jok. This article only reports one case since in 2020 there was only one patient who contacted the researcher to ask for help for dealing with COVID-19. This patient voluntarily asked for help and decided not to consume any medicine to be able to find out the effect of Su Jok on his COVID-19 symptoms.

Su Jok is a terminology from the Korean language. Su mean hand and Jok mean foot. The founder of this therapy was Professor Park Jae Woo, a scientist, in 1987. He designed this healing method to stimulate the hands and/or feet through massage, putting magnets or seeds, putting color, needles or others items on the skin.1 In this case study, the researcher who is also a Su Jok therapist was asked to help a patient to deal with COVID-19, and provided information and guidance to reduce the symptoms of COVID-19 using Su Jok therapy.

Literature shows that Su Jok therapy has been used for several health problems such as elbow hygroma in one patient, where after 7 days treatment, the patient felt no more symptoms.2 Su Jok was also
effective in the treatment of an autonomic disorder of 22 patients with migraines. In another study, comparative research was conducted to evaluate Su Jok therapy on 68 patients with bronchial asthma compared to 44 patients as a control group. The period of exacerbation was 1.7 times longer in patient without Su Jok therapy.

One study on 128 randomly selected patients with pain in their heels also showed that Su Jok interventions were effective to reduce the level of pain due to heel spurs. Meanwhile, in another study, a survey from as many as 258 patients with cancer showed that Su Jok can reduce fatigue and weakness as side effects of therapy. In this case study, therapy was performed without direct contact between the researcher and the patient because all communication was only done through social media (WhatsApp).

### 2. Method

Ethical clearance was not applied in this study, since this study was not planned by the researcher. However, for the purpose of publication, ethical approval from the Institutional Review Board was sought for this publication and this manuscript was approved by the Medical and Health Research Ethics Committee (MHREC) of the Faculty of Medicine, Public Health and Nursing, Universitas Gadjah Mada – Dr. Sardjito General Hospital, Yogyakarta, Indonesia number: KE/FK/1254/EC/2021. The researcher was not recruiting any respondent at that moment in time. The respondent voluntarily contacted the researcher, asking for help and the researcher responded (by using Su Jok therapy) and each day documented the course of the therapy and progress of symptoms and wrote these results for the case study after the patient recovered from COVID-19.

#### 2.1 Case presentation

A middle-aged man took a mass rapid test and swab test in 2020 and on day-1, he was informed that he was positive for COVID-19 and he chose to stay at home. He was treated with Su Jok therapy and the results are shown in Table 1.

<table>
<thead>
<tr>
<th>Date in 2020</th>
<th>The most prominent symptoms</th>
<th>Therapy applied</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day - 1</td>
<td>Difficulty breathing and the excess mucus production</td>
<td>Therapy for lung correspondence /TKP (Fig 1) and Therapy for Airway correspondence/TSN (Fig 2)</td>
<td>No more difficulty breathing after 27 minutes Scale 10 to 0</td>
</tr>
<tr>
<td>Day - 2</td>
<td>Similar with day-1 but less severe</td>
<td>TKP, TSN and added with Therapy to reduce the power of Virus (TMV) (Fig 3) and Therapy to Improve Immunity (TPI) (Fig 4)</td>
<td>Scale 2 reduced to 0</td>
</tr>
<tr>
<td>Day - 3 to 4</td>
<td>No information – no contact</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Day - 5</td>
<td>The same symptoms on day-1 and day-2 but less severe</td>
<td>TKP, TSN, TMV, TPI and added with Therapy for harmonizing energy (TMH) (Fig 7)</td>
<td>Scale 2</td>
</tr>
<tr>
<td>Day - 6</td>
<td>No contact – no information</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Day - 7 to 11</td>
<td>No severe symptoms associated with COVID-19</td>
<td>Therapy only was conducted when necessary</td>
<td>-</td>
</tr>
<tr>
<td>Day - 12</td>
<td>Feeling sad as his family shown dry cough</td>
<td>Therapy for reducing sadness (TES) (Fig 8)</td>
<td>Scale 6 reduced to 1 in 36 minutes</td>
</tr>
<tr>
<td>Day - 13</td>
<td>No severe symptoms associated with COVID-19</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Day - 14</td>
<td>Swab test</td>
<td>-</td>
<td>Negative</td>
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Table 1. The symptoms or problems experienced, therapy, and the results

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Instruction for TKP, in these red zones:
1. Find pain point.
2. Moxibustion the pain point.
3. Massage (by following arrow direction).
4. Put red color.
5. Put seed.

**Figure 1.** Therapy for lung correspondence (TKP).

Instruction for TSN in these green zones:
1. Find pain point.
2. Moxibustion the pain point.
3. Massage (by following arrow direction).
4. Put red color.
5. Put seed (in this case: green bean).

**Figure 2.** Therapy for air way (TSN).

Instruction, put dot color in sequence:

**Figure 3.** Therapy to reduce the power of virus (TMV).

Instruction: Put green color in number 1, 2 and 3.

**Figure 4.** Therapy to improve immunity (TPI).

Instruction: Put yellow color in the nail with 🌼.

**Figure 5.** Therapy for pain in all joints-A (TSS-A).

Instruction: Put yellow line on following the arrow direction.

**Figure 6.** Therapy for pain in all joints-B (TSS-B).

Instruction:
1. Being relax; 2. See the hand in the picture; 3. Palm facing the sky; 4. Pray; 5. Open or close eyes (as a choice); 6. Smile; 7. Do it in 10 minutes.

**Figure 7.** Therapy for harmonizing energy (TMH).
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Su Jok Therapy for COVID-19 patient

Instruction:
1. Twist (on skin surface) gently on the number 17 (of knuckle) following arrow direction in two minutes or 120 times; 2. Massage; 3. Put seed.

Figure 8. Therapy for reducing sadness (TES).

home for the 2 weeks quarantine. On the day-2, he contacted the researcher who is a nurse as well as a Su Jok therapist and asked whether Su Jok can be applied for people with COVID-19. We responded that Su Jok theoretically is able to help people with COVID-19. We then assessed more information regarding the most prominent symptoms experienced by the patient at that time. He said he had a fever and shivering as well as difficulty in breathing. We then sent pictures of Su Jok protocol as well as the instructions. This type of interaction lasted for 14 days, in which we were monitoring and providing instructions based on the symptoms he experienced day by day. After each of the interventions was applied, the patient took a picture of the result of the therapy and then sent it to the researcher. This activity was done to make sure that the patient did the correct application of the therapy and when there was a mistake then the researcher could correct it. Our patient did not use any other method of treatment because he wanted to find out whether Su Jok can help in dealing with COVID-19. The reason was that if he consumed any medicine then he could not see whether the result of Su Jok therapy is because of the Su Jok therapy itself or because of the medicine’s effect.

3. Result

The results of Su Jok therapy can be seen in Table 1, in which each therapy is explained and also the duration of evaluation after treatment was applied, as well as the scale of severity of symptoms before and after each Su Jok therapy. The researcher found that the symptoms that attacked him were mostly difficulty in breathing, shivering, excess production of mucus and fever reoccurring every 1-2 hours on the first and second day since he contacted the researcher. The symptoms were less severe and occurred less day by day after that. The symptoms or problems experienced, therapy and the result can be seen in Table 1.

4. Discussion

Su Jok therapy is able to deal with almost all symptoms (physically and psychologically) that occur in people who suffer from COVID-19 and we highlight how that therapy can be divided into priority therapy and secondary therapy. As can be seen from the table, the severity of symptoms was systematically reduced after Su Jok therapy. Considering there was no type of medicine consumed by the patient, it may be predicted that the resulting reduction of the level of severity symptoms was because of the effect of the Su Jok therapy. This information, however, was based on patient’s subjective measurement, since there was no instrument or tools available to measure his symptoms objectively, in that present situation.

As the general Su Jok method, there were two types of therapy applied to the patient; the first was the correspondence therapy and the second was the energy therapy. Recent research showed that the combination therapy had better results for patients’ outcome. While the correspondence therapy is applied to trigger points on the body including the hands and feet, the energy therapy is targeted to the meridian flow in the body.

Priority therapy is therapy which is related to the most common symptoms that threaten patients with COVID-19 which is mucus blocking the airway clearance. Other forms of priority therapy involve decreasing the virus’s power and also improving the patient’s immunity state. The methods of therapy that can be considered as priority therapy are: TKP, TSN, TMV, TPI and TMH. Secondary therapy is therapy which is related to other symptoms which are less life-threatening, such as pain in all joints and also the emotional state, which also can be experienced differently by different people with COVID-19. Some
may become sad, anxious or possibly angry. Those emotional states can be treated using Su Jok, and the methods depend on which emotional state disturbs the patient at the specific time.

TKP, TSN are namely correspondence therapy, while TMV, TPI and TMH are called energy therapy. Correspondence therapy is the simplest therapy since it only targets the organ or part of the body on the hand or foot. Even though this is a very simple therapy, it can be very powerful especially if there is a problem with an organ, and as we learned later, the patient previously suffered from bronchitis. One case study also showed that correspondence therapy was able to reduce chest pains by using massage on the pain points and putting red color in the heart correspondence point.

Difficulty in breathing is connected with nasal congestion and excess mucus production in the throat, while the pain in his lungs is related to the damage occurring in the lung organ. Massaging, putting red color and seeds helped to warm the respiratory track and clear the airway. Finding specific pain points is important in the process of therapy. If the problem is in the anatomy of an organ, then that area of pain needs to be stimulated in order to help the auto-regulation to be activated and return the body to the health condition.

Moxibustion in the second day also helped to relieve his difficulty in breathing quicker since it makes the mucus less sticky and easier to be spit out. This moxibustion is also very important when saliva or mucus has formed very quickly, and this mucus was sticky and can be very dangerous if it stayed in the respiratory track, since it can block the airway.

TMV, TPI and TMH appears to be very easy by only using color, but it is considered as an advanced treatment based on Triorigin theory. Triorigin is another method of therapy founded by Professor Park Jae Woo. It was developed after Su Jok therapy was introduced. The targets are still the same, which are the hands and/or feet, but the ways and the pathways to put the color and seeds or other methods are following specific Triorigin’s rules.

5. Conclusion

This case study was based on the patient's subjective measurements. Su Jok therapy could reduce the level of severity of breathing problems, pain in all joints (myalgia) and sadness emotion. The fact that there was no medicine consumption by the patient and that the level of symptoms' severity was reduced in a short time show that there are benefits experienced by this patient in the reduction of the symptoms. The more rigorous study, however, needs to be conducted in the future.

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Conflict of interests
The authors have no conflicts of interest to declare.

References