

EFFECTIVENESS OF SU JOK ACUPUNCTURE IN COPING WITH PAIN SYNDROMES OF VARIOUS ETIOLOGY

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Su Jok acupuncture worked out by Professor Park Jae Woo is a new stage in the development of Oriental medicine. Highly effective for treatment, easy and accessible to learn, simple to apply, Su Jok methods have attracted much attention to and interest in this system in Russia.

For the past three years in this country hundreds of medical doctors have been trained at seminars held by Professor Park, and they began to apply Su Jok acupuncture in their practice. All physicians who start working with the Su Jok system pay attention to one of the important features of this system. That is, the fast-coming effect of the method. Su Jok therapy extremely quickly arrests pain syndromes of various etiology. Moreover, there has been gathered a considerable bulk of observations that the Su Jok method quickly copes with critical states - shocks, preinfarctions, preinsults. Under such extreme conditions, needling was not always used. It was enough to massage correspondence points for a victim to become conscious or to remove intolerable pain. Proceeding from these observations and taking into account that Su Jok acupuncture is a new treatment method, we decided to carry out statistical research in effectiveness of this method of treatment for coping with the pain syndrome.

The research was conducted in Su Jok Academy clinics in Moscow. In our clinics physicians use only Su Jok acupuncture to treat patients. The work of twenty three physicians was analysed which ensured reliability of the study. The degree of coping with the pain syndrome was assessed for one treatment session.

Having come to a session, a patient assisted by a physician filled in a statistic check-list if he was troubled by pain. Patients assessed intensity of the experienced pain subjectively, using a numerological scale with levels from 0 to 10. Since the Su Jok method has a fast effect, the rate of pain-killing was studied during the treatment session. Within different time periods since the beginning of the session, the patient assessed the percentage of decrease of his pain sensations as compared with the initial state which was accepted as 100%.

At the session the physician used any of the treatment methods employed by Su Jok acupuncture: treatment through correspondence systems, through byol-meridians, or Six Ki therapy. The study of various techniques of Su Jok acupuncture was beyond the scope of the present work, leaving their selection to the physician.

During the three-month work, 361 patients - 108 men and 253 women - filled in check-lists. The age-group distribution of the patients was as follows: 32 persons below 20, 249 persons from 21 to 60 years old, and 80 persons over 60.

Then follows the distribution of cases according to the pain origin. Most of all were headache cases (21.4%), then come spinal pains related to osteochondrosis (19.7%), then follow joint pains (14.7%), abdominal pains

(11.4%), urogenital pains (9%). The sixth group comprised all other cases.

The pain intensity distribution along the numerological scale (from 0 up to 10) looks like this:

- 1-2 scores (mild pain) - 3.6% of cases,
- 3-4 scores (moderate) - 20.2% of cases,
- 5-6 scores (tolerable) - 32.4% of cases,
- 7-8 scores (severe) - 38.5%,
- 9-10 scores (intolerable) - 5.3% of cases.

Therefore, in more than 90% of cases studied the patients assessed their pain intensity by 3 to 8 scores, i.e. the pain was from moderate to severe.

In the statistical check-list the patients specified the duration of the pain syndrome manifestation. Pains lasting less than 2 weeks were assessed as acute; from 2 weeks to 2 months as subacute; over 2 months as chronic pains.

Distribution data concerning acute, subacute and chronic pains are presented for two basic groups - that of patients with complete disappearance of pains after the session and that of patients with residual pains. The number of patients with subacute pains is approximately equal in the both groups (20 and 18%); as for acute and chronic pains: in group I acute pains were prevailing (50%), and in group II chronic pains were reported by those patients in whom pain was not completely removed after one session.

As regards the general effectiveness of treatment, the results are as follows. One treatment session was enough for 211 persons to report of complete disappearance of their pains. This amounts to 58.4%. The remaining 150 persons reported that the pain was at least twice as less. Among them 22.2% of patients assessed the residual pain as 10% of the initial state; another 12.2% as 20% of the initial state. Therefore, in 92.8% of cases during one session at the doctor's office pain was completely arrested or reduced by over 80%. And only in 7% of cases the intensity of residual pain was from 30 to 50% of the initial level. There were no cases of ineffective therapy (Fig. 1).

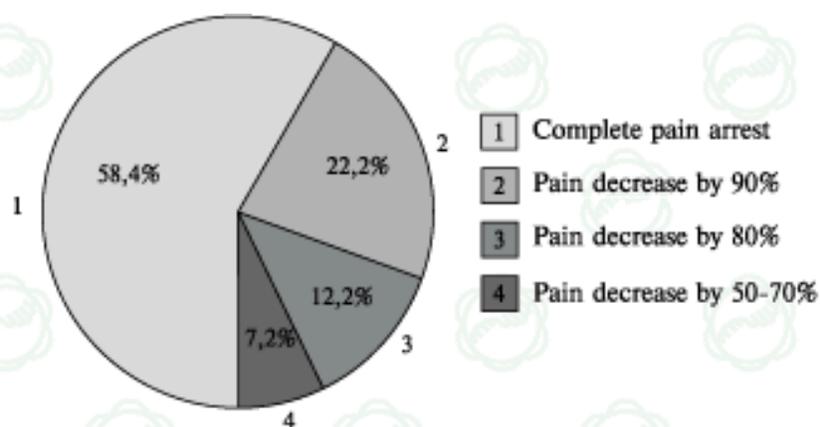


Fig. 1. Effectiveness of one Su Jok therapy procedure for coping with the pain syndrome

Besides, we analysed how quickly the pain subsided during a Su Jok acupuncture session. In the statistical check-list the patients were asked to note within how many minutes after the beginning of treatment painful sensations disappeared completely. In the group of 211 patients in whom pain was arrested completely during one session, in 10% of cases pains disappeared within 2 minutes after the treatment began, in 12.3% - within 5 minutes after the treatment began. In 25% of cases pains went off within 10 minutes, and in 25% within 20 minutes. In other cases there was observed a gradual decrease of pain intensity during the session, after which the patients reported of complete disappearance of pain.

Therefore, the results of research work demonstrate that Su Jok acupuncture is an extremely effective and fast-acting method in treatment patients with pain syndromes. Independently of pain etiology and duration, in 92.8% of cases one 30-minute session resulted in decrease of pain by 80% and more, of which in 60% of cases - completely. A fast and effective removal of the pain syndrome makes the treatment period shorter and the patient's cure quicker.
