

Combined HT7 Acupressure (Shenmen) and Murattal Therapy for Depression and Insomnia in Elderly: A Case Report

Afnani Aquino^{1*}, Raini Diah Susanti², Iqbal Pramukti³

¹Faculty of Nursing, Padjadjaran University, West Java, Indonesia

^{2,3}Department of Community Nursing, Faculty of Nursing, Padjadjaran University, West Java, Indonesia

Abstract: Older adults are vulnerable to psychological disorders such as depression and insomnia, which are often interrelated and can affect both physical and emotional well-being. This study aimed to evaluate the effect of combining HT7 (Shenmen) acupressure and murattal therapy on reducing depression and insomnia in the elderly. A case report design was used, involving a 68-year-old woman residing in a social care facility who experienced severe depression and insomnia. The intervention consisted of 12 sessions over four weeks (10 minutes per session), in which the client performed self-acupressure at the HT7 point while listening to murattal as a visual-auditory calming stimulus. Depression and insomnia levels were assessed using the GDS-15 and KSPBJ-IRS instruments. Results showed a reduction in GDS-15 score from 12 to 5 (mild depression) and in KSPBJ-IRS score from 30 to 23 (mild insomnia). The client also reported emotional calmness and motivation to continue the therapy independently. This study suggests that the combined intervention is a safe and effective non-pharmacological option. Further research, such as experimental studies, is recommended with more diverse subjects and varied clinical conditions.

Keywords: Depression, Elderly, HT7 Acupressure, Insomnia, Murattal

Received: 20 July 2025

Revised: 2 July 2025

Accepted: 4 August 2025

Published: 12 August 2025

Corresponding Author: Afnani Aquino

Author Name*: Afnani Aquino

Email*: afnani20001@mail.unpad.ac.id

DOI: <https://doi.org/10.63166/3ee4h086>

© 2025 The Authors. This open access article is distributed under a (CC-BY License)



Phone*: +62 852-2020-7439

Introduction

Aging is a natural process that involves various physiological and psychological changes, such as cognitive decline and sleep disturbances. Depression and insomnia are common psychological disorders among the elderly and are often interrelated, leading to diminished quality of life and increased vulnerability. According to the World Health Organization (2023), these conditions significantly affect emotional and physical health. Conventional treatments, such as pharmacotherapy and psychotherapy, have limitations including side effects and potential dependency (Slee et al., 2019).

Complementary and Alternative Medicine (CAM) is increasingly explored as a safer and more accessible option. One such method is HT7 (Shenmen) acupressure, known to influence the autonomic nervous system and regulate mood and sleep (Son, 2019). Another is murattal therapy—listening to Qur'anic recitation—which offers spiritual and emotional calming effects, especially relevant in Muslim-majority populations (Purwandari, 2024). This study aims to evaluate the combined effect of HT7 acupressure and murattal therapy on depression and insomnia in an elderly individual.

How to Cite: Aquino, A., Susanti, R. D., & Pramukti, I. (2025). Combined HT7 Acupressure (Shenmen) and Murattal Therapy for Depression and Insomnia in Elderly: A Case Report. *Nursing Case Insight Journal*, 3(2), 38-40. <https://doi.org/10.63166/3ee4h086>

Method

This case report involved a 68-year-old female resident of a social care facility experiencing severe depression and insomnia. The intervention combined HT7 acupressure and murattal therapy across 12 sessions (10 minutes per session) over four weeks. The participant performed self-acupressure on the HT7 point while listening to murattal recitation. Specifically, Surah Al-Hujurat from the Qur'an was played at a medium volume using the client's Android smartphone. Each session was supervised by the researcher.

Depression was measured using the Geriatric Depression Scale 15-Item (GDS-15) (Snellman et al., 2024), and insomnia using the Kelompok Studi Psikiatri Biologi Jakarta–Insomnia Rating Scale (KSPBJ-IRS) (Putra et al., 2017). Subjective emotional responses were gathered through interviews after each session. The study was conducted from April 8 to May 3, 2025, and followed ethical guidelines including informed consent and data confidentiality (Riley et al., 2017). To ensure confidentiality, all collected data were anonymized by assigning a unique code to the participant, and personal identifying information was stored separately and securely in a password-protected file, accessible only to the primary researcher.

Result and Discussion

After 12 sessions, the subject's GDS-15 score decreased from 12 to 5, indicating improvement from severe to mild depression. The KSPBJ-IRS score dropped from 30 to 23, showing improvement from severe to mild insomnia. Subjective reports noted enhanced emotional calmness, reduced anxiety, and a more regular sleep pattern. The participant expressed confidence in continuing the therapy independently.

The positive impact is likely due to a synergistic effect. HT7 acupressure may stimulate serotonin and melatonin production, aiding relaxation and sleep (Li et al., 2022). Simultaneously, murattal therapy provides spiritual comfort and emotional grounding (Permatasari et al., 2024). This holistic approach aligns with the Roy Adaptation Model (Roy et al., 2009), which views individuals as biopsychosocial systems adapting to internal and external stimuli. The cultural relevance of murattal also enhances intervention acceptance among elderly Muslims (Purwandari, 2024).

These findings are consistent with prior literature suggesting that both interventions are effective independently. Their combination may offer a more powerful approach, especially when tailored to the individual's preferences and cultural context (Sangani et al., 2023).

Conclusion

The combination of HT7 acupressure and murattal therapy significantly reduced symptoms of depression and insomnia in an elderly subject. This case report highlights the potential of culturally aligned, non-pharmacological interventions in geriatric nursing practice. Further research involving larger samples and diverse settings is recommended.

Acknowledgments

Authors gratefully acknowledge the support of all individuals who contributed to this study, with special gratitude to the client involved for their invaluable participation.

Author Contributions

All authors made substantial contributions to the conception, design, intervention, data analysis, and writing of this manuscript.

Funding

This research received no external funding.

Conflicts of Interest

The authors declare no conflict of interest. The funders had no role in the design of the study; in the collection, analysis, or interpretation of data; in the writing of the manuscript; or in the decision to publish the results.

References

- Li, Y. W., Li, W., Wang, S. T., Gong, Y. N., Dou, B. M., Lyu, Z. X., Ulloa, L., Wang, S. J., Xu, Z. F., & Guo, Y. (2022). The autonomic nervous system: A potential link to the efficacy of acupuncture. *Frontiers in Neuroscience*, 16(December), 1–17. <https://doi.org/10.3389/fnins.2022.1038945>
- Permatasari, L., Syarah, M., & Hidayani. (2024). *Perbandingan Pemberian Terapi Murottal Al-Quran dan Senam Lansia terhadap Kualitas Tidur pada Lansia di TPMB L Kabupaten Garut Tahun 2024*. 4(6), 3421–3430.
- Purwandari, K. P. (2024). *Efektivitas Terapi Murottal terhadap Intensitas Nyeri pada Perawatan Ulkus Diabetikum di Wound Care Rumah Rara*. 13(2), 1–23.
- Putra, W. Y. D., Hadiati, T., & As, W. S. (2017). Perbedaan Tingkat Stres Dan Insomnia Pada Mahasiswa Fakultas Kedokteran Universitas Diponegoro Yang Berasal Dari Semarang Dan Non Semarang. *Jurnal Kedokteran Diponegoro*, 6(2), 1361–1369.
- Riley, D. S., Kienle med, G. S., Schoen-Angerer med, V., Kaszkin-Bettag, M., & Gagnier ND, J. J. (2017). *CARE 2013 Explanations and Elaborations: Reporting Guidelines for Case Reports*. 16. www.equator-network.org

6. Roy, C., Whetsell, M. V., & Frederickson, K. (2009). The Roy adaptation model and research: Global perspective. *Nursing Science Quarterly*, 22(3), 209–211. <https://doi.org/10.1177/0894318409338692>
7. Sangani, N. J., Rahimi, H., Mirzaei, S. M. M., BahramiTaghanaki, H., & Vagharseyyedin, S. A. (2023). Effect of Acupressure on Anxiety, Stress, and Depression Among the Primary Family Caregivers of the Patients with Stroke. *Journal of Holistic Nursing and Midwifery*, 33(2), 113–121. <https://doi.org/10.32598/JHNM.33.2.2303>
8. Slee, A., Nazareth, I., Bondaronek, P., Liu, Y., Cheng, Z., & Freemantle, N. (2019). Pharmacological treatments for generalised anxiety disorder: a systematic review and network meta-analysis. *The Lancet*, 393(10173), 768–777. [https://doi.org/10.1016/S0140-6736\(18\)31793-8](https://doi.org/10.1016/S0140-6736(18)31793-8)
9. Snellman, S., Hörnsten, C., Olofsson, B., Gustafson, Y., Lövheim, H., & Niklasson, J. (2024). Validity and test–retest reliability of the Swedish version of the Geriatric Depression Scale among very old adults. *BMC Geriatrics*, 24(1), 1–11. <https://doi.org/10.1186/s12877-024-04869-7>
10. Son, C.-G. (2019). Clinical application of single acupoint (HT7). *Integrative Medicine Research*, 8(4), 227–228. <https://doi.org/10.1016/j.imr.2019.08.005>
11. World Health Organization. (2023). Retrieved from Mental health of older adults: <https://www.who.int/news-room/fact-sheets/detail/mental-health-of-older-adults>