



The complete Manual of Breathplay



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Disclaimer

The goal of this manual is to provide information; not to encourage or discourage people from doing breathplay. I do not take any responsibility in any practice inspired by this manual. This is not a training guide, reference manual or compendium. Any of those below mentioned practices can lead to serious injuries, or death. I truly believe you will find this book informative regarding some of the most deadly BDSM practices, and this can help you, or your community, see the dangers in those activities.

Word from the Author: Who I am, and why I wrote this book

Firstly, I am not a doctor, not a black belt martial practitioner and not, in any way, a professional at breathplay. Do not take any of this knowledge for the truth; also conduct your own research. I am someone who has lost many friends due to breathplay-related activities. I want to share my knowledge with the goal of saving lives. I did lots of research before giving breathplay classes to provide awareness on the dangers of this practice. I am also someone who has been doing BDSM for a long time; I saw many things as I was travelling, through conventions across Canada and the United States; I learned from many people and through classes on many topics related to this domain. As an ex military personnel and martial arts enthusiast, I learned about things that are not that common, and therefore are great to share.

I truly believe that sharing my knowledge is better than saying: “Don’t do it”. It’s better to understand how and why something is dangerous so we can explain how to mitigate risks as best as possible

Introduction

What is Breathplay?

Breathplay represents different kinds of activities involved in BDSM. For the purpose of this manual, I will define breathplay as the control over the flow of air or blood. From choking to strangulation, breathplay is an umbrella term of activities where most of them are dangerous. You are playing with what keeps your body alive, and some of these activities have killed many people in the past.

What are people are seeking by doing it, and why do people do it? Breathplay, or erotic asphyxiation, has been a known activity for a long time in the kink community, but also outside of fetish environment, young and less young do it. People engage in erotic asphyxiation for different reasons. From playing with fear to more psychological reasons, others will aim on more physical sensations. For example: just having a hand on the throat can give lots of sensation for some, but for others it’s the feeling of passing out that they want to feel. Also, others seek the effect provided by hypoxia. Some will search for the pass out effect and after effect: for example: the confusion of that comes with waking up. So, from physical sensation to simple mind games, people are doing it to fulfil different needs.



What's the danger, and what's the safe way? The first thing is to understand that breathplay is dangerous and can be in no way safe. Even if you know what you are doing, accidents can happen. Bodies can react differently and can be damaged after intensive practice of those activities. Accidents can arise from direct or indirect application of those techniques. The body can also become damaged by cumulative use. One of the feelings people will seek during those activities is hypoxia. The air we breathe is a mix of gases, the most important one being oxygen. The concentration of oxygen is about 20%. When the concentration of O₂ (oxygen) in the air we reaches 10-15%, we get a drunkenness kind of effect. The judgment is impaired - and it's important to know this fact. So when people are beginning to experience it, their judgment is being affected. So, if they think they can take more, most of the time, they cannot. Also, the person begins to have coordination issues. Many of the cases in which a person has died in relation to this activity happened when the person was doing it alone. With judgment and coordination impaired, it's an accident waiting to happen.

FIRST RULE: NEVER DO THOSE THINGS ALONE. At lower than 10% of oxygen, we may experience a loss of consciousness; lower than 8% is equal to death. Please keep that in mind, especially those who play with bagging and rebreather techniques. The "passing out" can be provoked by different methods: a change in blood pressure can trigger this effect. The lack of oxygen can also cause the body to react in order to try to save itself by shutting down most non-vital activities. Some people will enjoy the come back effect more - the confusion. The sensation of passing out under control is something very intense: tunnel vision, loss of all senses, and then muscular control let go.

This is the definition of edge-play: you play with someone's life, and according to the law, in Canada, you cannot give permission to be injured. So, if you die during those activities, even if you have provided consent, this will be considered manslaughter. If you have children or loved ones, please take them into considera-

tion when you decide to engage in those activities - receiving or giving. Also, most fetish events, such as Dungeons, do not allow edge-play because of the danger it represents. Please see local rules to establish whether or not edge-play and breathplay are welcome at that venue.



Before trying!

Before trying! Questioning is an important part of the negotiation for breathplay: questions about medical issues are common sense, from knowing blood pressure issues to breathing issues or even heart conditions; always ask the sought type of activity and the effect the other person is seeking; limits that the person has; as well as how to communicate the safe word or their sign to stop. If the person has ingested either alcohol or caffeine based beverages, this can change their blood pressure, or impact on the body. The same can be true if the person has not eaten or slept for the past few days. It is important to ask if the person has had any experience with these activities before. The person's age is also important: engaging in edge or breathplay between the ages of 20-30 is not the same as doing it at 50-80. If you come across anything that can increase the risks related to those activities, do something else.

Before doing any kind of risky activity like breathplay, taking a class on First Aid and CPR can also be a good thing. Better be prepared for the worst than not be ready if something goes wrong. This is the kind of play that needs all your attention: be focused at all times, no pee break allowed during those activities. Leaving someone alone is considered a predicament; if they cannot help themselves, you are legally responsible for anything that happens to them. These activities require you to always be monitoring consciousness, which is defined by 'thinkable reactions', such as giving an answer to a question or holding a limb in a certain position, the movement of the eyes, breathing and holding something in the hand - especially if light can be misleading.



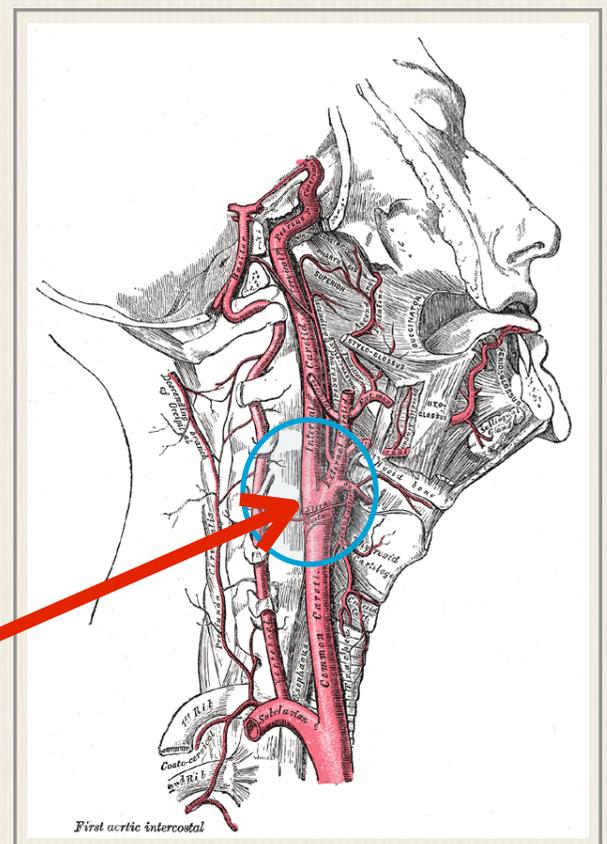
Anatomy

The larynx - our air pipes - is made of cartilage, which can be damaged by pressure. A foreign object in the mouth can trigger the gag reflex, which can lead to light coughing or even to throwing up and other not so great sensations. The Adam's apple is also a place where you should not put pressure; it does not create a good kind of pain there. On both sides of the air pipes, we have the main

artery: the carotid artery that leads blood to the brain. On those carotid arteries we have a sinus (the sinus of the carotid). This is a split where we have a baroreceptor, which controls the pressure of the heart. This one can be tricky: when compressed it believes that the pressure is too high and it asks the heart to

slow down. Putting a continuous pressure there can lead to the heart stoping.

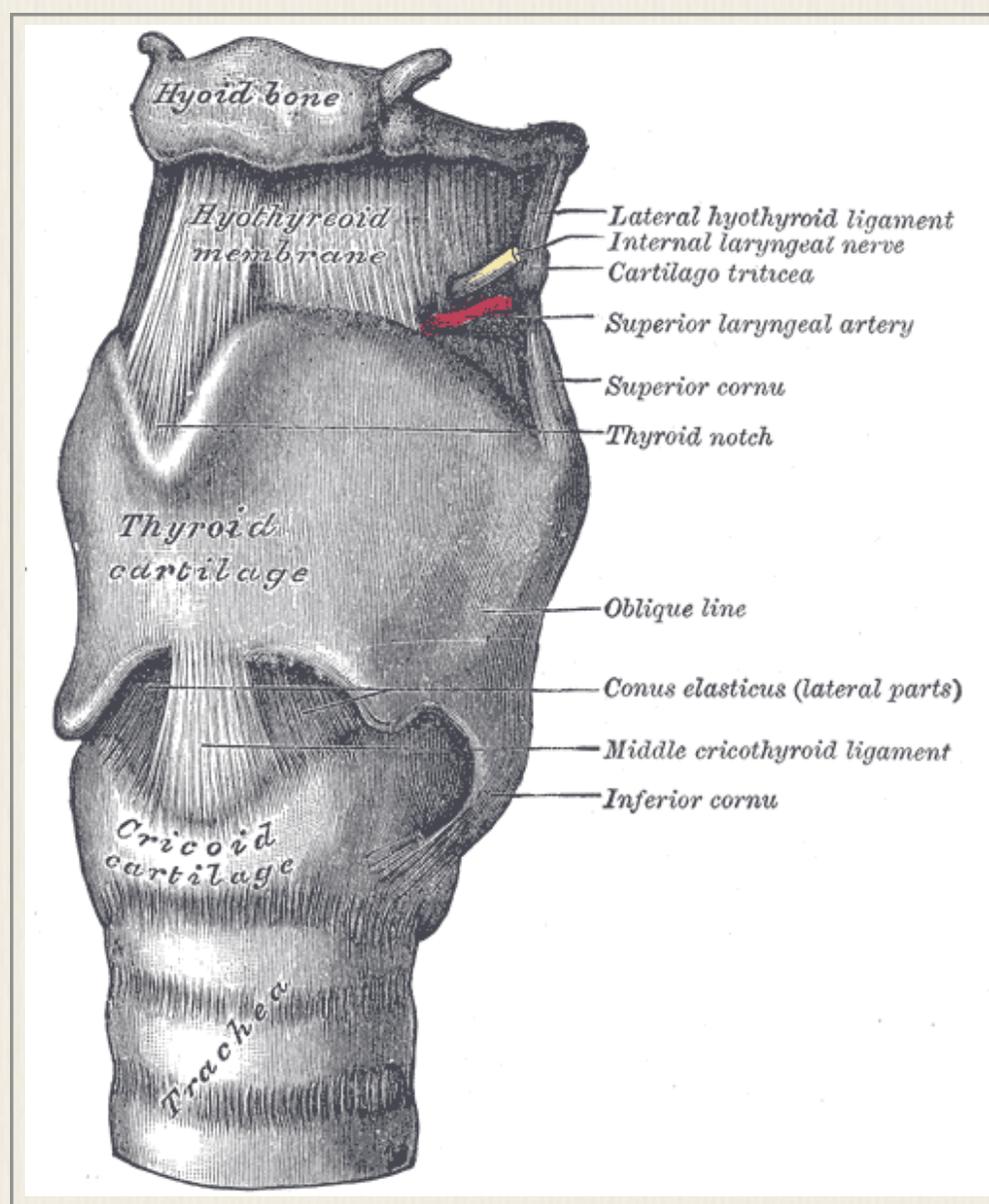
In the back of the neck, in the spine, we have some backup arteries. Those provide 30% of the blood flow to the brain. Understanding how the lungs work, and how a pressure on the belly can lead to make respiration harder is an important thing to learn. Be careful of body modifications, such as implants, surface piercings, dermal piercings, and other things that can cause an issue with this type of play. The body has two types of nervous systems that facilitate its functioning: sympathetic and para-sympathetic.



When conscious, you can control some parts, for example breathing; when you pass out, the nervous system falls back on the other type, which uses mechanical information to continue to work. Example: under water, you can hold your breath; but if you pass out, the nervous system will try to make you breathe in the water.

Every body is different and individual differences can account for up to 15% of variance, from the difference in the shape of an ear to a complete inversion of side of the internal organs. Not because you know on someone where some things are, will you be certain that the same points are located at the exact same place on others.

Always acquire the proper tools for your activity: safety shears and the equipment needed to solve any issue that can arise by your actions. A charged cell phone is a good thing to have handy in order to get medical assistance rapidly. Have a first aid kit and some common sense. It is important to recognise which effects that accompany breathplay can be seen has indicators to stop or to take a break from it. Headaches can be an indicator that it is time to take a break. Petechia is the most known effect of breathplay, which is characterised as blood traces in the white of the eyes. Petechia can also be seen over the skin: it means that some blood vessels have exploded. If there appears to be a loss of memory or another effect that seems atypical for the person's usual behaviour, stop the play and go and consult a healthcare professional.





Breathplay: Air Control

Air Control Cycle of respiration: most marksmen have learnt about the cycle of respiration and how to control it for a better aim. When someone takes air in, they can hold their breath for some time. Then they will release the air, and if you prevent them from taking another breath in, for example, by smothering them, then panic and fear will overtake them. Also, it is important to understand that those cycles of respiration will go faster and faster when the cardio quicks in due to stress and fear. Using that knowledge is the primordial part of breathplay. Remember that they need to breathe, but you will also know when to block the action or not. Never block too hard on exhales - see Valsalva manoeuvre. Try to play with mind games, and not with the sensation of hypoxia or hyperventilation.

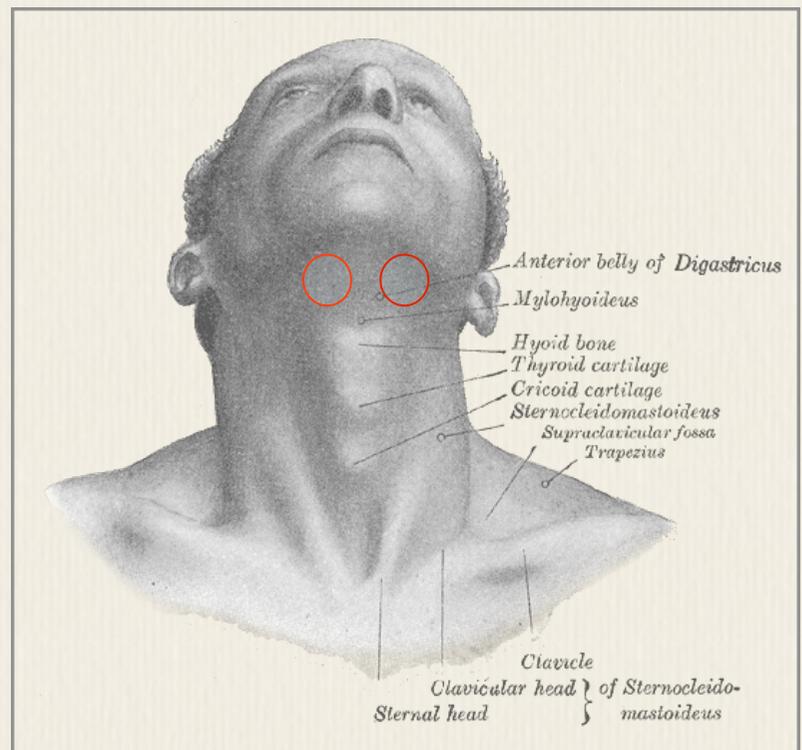
Techniques

-Valsalva manoeuvre: This technique known to people who dive, or use aeroplanes. The goal is to balance the pressure in the ears, by blowing in an obstructed nose when the mouth is close. This technique pushed to the extreme can have negative effects. So, never block the exhale of air of someone.

-Gag reflex: The gag reflex is activated when a foreign object, which represents a risk to the safety of the breathing, is detected by the body. The reflex can go

from coughing, to vomiting and so on until the obstruction is cleared of the way. This is important to understand when you are playing with insertables in the mouth like ball gags or other toys of that type. Some ball gags have holes in the ball that allows saliva to flow out, but some don't.

-Thumb versus tongue: a swinger who likes breathplay during sex taught this technique to me. It shouldn't leave any marks. You place both hand as if you were strangling someone, with fingers on each side of the neck. You then raise your thumbs in order to place them where the tongue is: under the chin and one inch below it. Then you push up in that direction toward the throat. This will make breathing more difficult, but not impossible. You put no pressure on the neck or trachea.



-Face sitting: This can be a very dangerous thing to do, since you cannot see the face of the person. You should always use other ways to verify your partner's consciousness. The obstruction can be done from the front (vagina smothering) or even with the behind of a person. It can be done clothed or naked, and some materials like latex can add a layer of fun to this kind of play. Also the weight of the person doing the sitting is something to take into consideration.

-Nose Blowing: I always see this one as a punishment. Blowing in the nose of someone, like canine mouth to mouth, can give some people no enjoyable sensations. Be careful to not over pressurize your blow.

-Bathing cap: Putting a layer of latex on to the face of the person in order to prevent them from breathing. I recommend letting the person take a deep breath before applying the layer over latex over their face. This can be very effective for fear play. Most caps are pretty opaque, so it is blocking the sense of sight as well. The exhale is less of an issue since the air will come out of the sides of the cap. This play lasts only a few seconds at a time; put on and put off.

-Smothering: Smothering with a hand over the mouth and letting the person breathe through their nose can be a light play; however during intercourse the need to breathe increases and the amount of air getting in is small. This type of play provides an effect of oxygen deprivation. You can also feel the breathing on your fingers, which are right under the nose. If you also block the nose, be sure to not block the exhale; you can also play by cutting from time to time the breath-in breath-out process for a few seconds. Some people who love leather or latex will enjoy smothering with gloves.

-Positional asphyxia: It was used in the past to torture and kill people, so it's a very dangerous thing to do. An example of a rope tie that can be done to achieve this effect is the ebi-tie, where the resulting compression of anyone with a belly can lead to difficulty to breathe. Full body suspension by the wrist is also one tie from which breathing becomes harder and harder over time. Crucifixion was a cause of death by positional asphyxiation where the body was held by the hands tied to the cross, and the pressure of gravity on the body was making it harder and harder to take some air in. Another known position that can lead to positional asphyxia is the hogtie, where the bottom is on their belly and tied up; the weight of the person plays against them and causes issues to breathing.

-Compression: Breathplay by compression can be done in many ways. Sitting or putting a knee on the belly of someone can lead to difficulty to breathe. Some compression ties, which compress the thoracic cage, have the same effect, but take more time to do and/or to undo. A corset for some people can also do the job

when it comes to breathing. Take note to remember when to undo is also very important. In some choking games, kids force hyperventilation before getting their chest compressed against a wall, and when they release, the change of pressure makes them pass out, which is very dangerous due to the fall that will follow.

-Belly compression with legs or scissors-legs: The compression of the belly makes the breathing more difficult. In some ancient cultures, putting rocks on the belly was a torture that led to death. This practice can be as dangerous as any other, but it is very fast to undo. Be careful not to put too much pressure on the ribs or on the bladder. Try to aim for mid-belly.

-Gas Mask: As ex-military, I know that gas masks can be part of breathplay, it makes respiration more difficult due to a filter. You can add a hose to help you play with it. Blocking the intake is easy. You can see the mask getting closer to the face, caused by the vacuum. Also some people will use the hose to play with odours, or will use it for its suction, which can be used for sensation play. Masks give a limited visibility on the face of the person wearing it: be attentive and find ways to monitor consciousness.

-Re-breather: Those are bags going in pair with some gas masks. This allows the recycling of the air, which gets lower and lower in oxygen concentration. This creates the buzz procured by hypoxia. These games are also very dangerous. Some re-breathers are designed in a part of latex equipment, which makes the visibility of the face not always optimal.

-Tape: Tape used for smothering is very popular for play, pictures and videos. You need to be careful of an indirect element: sometimes people can react to the glue. Also, the tape can be hard to remove. I recommend trying '3M Microfoam' tape. This foam tape, which is also used in the medical field, is comfortable for the lips as it's very soft. It's easy to remove and the glue is less toxic than on duct tape.

It's possible to use non-adhesive tape that sticks to itself; however even with those tapes be sure to have your safety shears close by.

-Saran wrap (plastic wraps): Those can be wrapped around the head. I recommend doing this from the nose up, so the person can still breath through their mouth. You can use tape to make a blindfold over the Saran wrap. Then, if you want to have full control over the other person's breathing, you can cut a little square that you can apply and remove at will. To remove the head wrap, you can cut it or pull it up. If you want to cut it, I recommend doing so on the side of the head. Be careful with hair.

-Bagging with hard bag: Using a plastic bag over the head can be very overwhelming. The hard bags are like giant zip lock bags. You can put some air in it to make it look bigger. To secure it over the head, you can tape the base of it or you use non-sticky tape. Like with re-breathing, the circulation of air lowers the concentration of oxygen in the bag. Hard bagging allows you to cut a hole on the top corner of the bag to let some air in, or to suck the air out. Also, the hole can be used to blow smoke from a cigar or can be used to fill the bag with water; this can be very scary. If an issue arises, the bag can be easily opened up. Be careful of the condensation that can build inside the bag and make you lose some visibility of the subject.

-Bagging with a soft bag: The best bag I have found is the one used in hotels for the mini garbage cans. Those are the strongest. You put it over the head, and force it to stick to the face for a scary effect. You can also inflate a little before putting it over the head, and then close the base to the neck so the air can't come in/out. It's a scarier sensation to see the bag getting closer and closer. Rebreathing is dangerous; play with caution.

- Gag: Gags are the bread and butter of many sex-shops. Some are very basic such as ball gags, while others look like a small penis. Most of them do not have holes for drooling. Some have big holes that allow breathing. The important thing to watch for is mostly the gag reflex. You should always be able to monitor any issue that can arise with these implements.

-Kiss of death: The Kiss of death is probably the most romantic way to do breathplay. When joining the lips, you seal the other person's mouth with yours. You can kiss with tongue or not. Using a hand you block their nose. Now you control the flow in and out of the air. You can breathe through your own nose and give the other person some of that air. You can also steal some breath from that person. In that position you don't want the other person to panic, so it's something you do only for a short moment - sensation play.

-Hyperventilation: Hyperventilation can lead to passing out. Some school choking games are about hyperventilation where you get into a ball position and then you rise up to your feet fast. This is very dangerous due to the fall.

-Nose plugs: Similar to the one used for swimming, the purpose of these is to simply block the use of the nose. It became breathplay when the mouth is also obstructed by kissing or by fellatio.

-Latex band: Sizes can vary. The Top uses a piece to block the breathing for a moment. The latex will take the shape of the face and seal the region that it is used on.



Breathplay: Blood

Breathplay: Blood Strangulation in this sense is about changing the amount of pressure of blood the brain will receive. The variation in pressure will make most people pass out. When a person passes out, you let go. The person should come back as soon you let go. When playing with either blood or air, both are as dangerous. Most of these techniques are call bi-lateral carotids compression.

Techniques

-Pinch of death: A simple pressure from a finger and a thumb on each of the carotids. Your other hand turns the neck and lifts the head by holding the hair; this will block the pressure from the backup arteries. Don't forget that a person who passes out has no muscular control, so they fall. It is your job to avoid injuries - so protect them at all cost.

-Rope neck: This a very controversial topic. Rope neck can be as simple as a rope that passes in front of the neck like some Hojo-jutsu ties. It can be like a leash with a non-collapsing loop or a single column around the neck. It can be decorative or for sensation. Be careful also for rope marks around the neck. Keep in mind that marks can be seen by others and can lead to undesirable misunderstandings. Pressure applied on the carotids can induce sensations or lead to passing out. Also, be careful with the tracheae. Even pressure on just one side of the neck can lead to passing out. Never attach the noose to a solid object around the neck.

-Fake choke: Some people will love a hand on their throat to feel the passion, but not any of the sensations. If you put the palm of your hand over the hollow in the middle of the two collarbones, with fingers and thumb on each side, you are low on the neck. You can apply light pressure and this will have no effect. It's more effective when pushing against something: in bed it's safer for the head, which can hit something.

-Rope and scarf choke: This is a good way to minimize a direct pressure on the baroreceptor and give an overall better sensation. Place the middle of the scarf on the front of the neck; pass each side of the scarf behind the neck so the compression is all around uniformly. Also during coitus, the person can hold it for themselves and apply the pressure that they want. The partner can look at them and make sure that they don't go too far.

-Belt: They can be used as a tool for strangulation. The main issue here is the locking by the pin of the belt or the pinching of the skin. I recommend putting the top of the bite in the direction of the pulling. That way a little space still exists. From behind or the front this can be seen as very hot, but also as dangerous. Play with holding, not squeezing, the neck.

-Rear naked choke: This is a technique, borrowed from the martial arts, applies a bi-lateral pressure on the carotids using the bicep and forearm, and it's very effective to make most people pass out in less than 15 seconds. For some people they call it the 'sleep-holder'. Be sure to take a class on those techniques with a professional. Even if no accidents are noted in the records of judo and jiu-jitsu for this practice, that does not mean it's 100% safe. Be sure to hold the person well: a person who passes out has no muscular control. Also, if after 10 seconds the technique is still not working, let go. You may be holding it the wrong way, or the anatomy of the person is different with their carotids placed further back, or their backup arteries are bigger. I have met three people out of a thousand who cannot pass out, so no need to try harder than normal.

-Leg triangle choke: Since the most powerful group of muscles is used for this technique, this can be very dangerous. Even well trained practitioners can contract those powerful muscles too much. This can be seen as a very erotic activity, since the head of the person is close to the other person's genitals. Some techniques call it the 'triangle choke'. Seek advice and classes from a professional to learn this technique.

-Recreational hanging: An activity which looks like the well known lethal punishment. Those are made normally with a non-collapsing noose and a pulley. In many countries, and as late as the 17th century, this kind of activity could be seen, from France to the monks in China. I will not recommend these activities in any way: the neck is not designed for this kind of stress, and this represents a very dangerous threat of compression on some vital organs.

-Water boarding, drowning, and wet towel: For many years water was used to torture people, and it's effective: remember they found many witches. When you play with those more advanced techniques I recommend taking a class on it. Also, breathing through a wet towel is very difficult. When it comes to water boarding, I would recommend using very, very cold water. The effect will be obtained more effectively, combined a thermal shock. The goal is to play with the mind, and the sensation of a make-believe drowning, without killing the person.



Last part

In the “Don’t” section:

-Arm bar: The arm bar was a technique used by police forces for a long time, but due to many deaths they decided to use ‘the naked choke’ technique instead. The arm bar is a compression of the trachea using the forearms, which can lead to damaging to the air pipes - and it doesn’t help to calm anyone down.

-Over pressure: Applying too much pressure with any technique will lead to injuries, and you don’t want that.

-Solid hanging: Never attach a noose or a loop to anything over your head that can lead to hanging. Never attach the neck to something that can move or fall.

-Other: Never engage in any of these practices alone; never mix these activities with drugs, alcohol, fatigue, or in exacerbated negative emotional states. Remember that even if it’s safer when you know what you are doing, it does not mean in any way that knowledge will make this practice safe.

Death cases: Every year, many people die from these practices. But not enough education is provided to help people mitigate the risks of edge and breathplay. So, I endeavour to make a step forward.

-Auto erotic asphyxiation: 'Kill Bill' lead actor, David Carradine, was found dead from what appeared to be autoerotic asphyxiation. This kind of death is most common, and happens, sadly, when people do it alone, and then as a result, make bad decisions.

-Obstruction, an incident in St-Julie: A paramedic, who was doing heavy bondage and also using a ball gag with his wife, never noticed that during the sex she vomited and was choked to death by her vomit. This case was ruled as an accident, since no breathplay was intended.

-Alone, St-Bruno: a fireman who was doing an intense session with his partner, left her in a predicament alone. She was standing, unable to move, with a metallic solid collar that was loose around her neck. The woman suffered orthostatic syn-
drome that made her pass out; with all the weight of her body pulling down, the collar choked her and resulted in her death.

-Vagbed, Toronto: a friend of mine was working on a vagbed, with a small opening for his head. The latex collar was pressing on his baroreceptors, which slowly made his blood pressure drop until he fell unconscious; even then the pressure continued to send a message to the heart to have it slow down until it stopped. Never do it alone; never apply continued pressure there.

-Predicament, Italy: in the rope community, this incident is well known. The rigger tied two intoxicated girls by the neck to each other. The predicament was that in order for both of them to not get choked, they had to stay on their toes, but one

of them collapsed. This choked the other one. Both girls passed out, choking each other to death. The rigger, who was also intoxicated, left his safety shears in his car. It took too long to cut the ropes, sadly.

-Bag of death: in many countries, the 'exit bag' used in conjunction with with the help of a neutral gas, like helium is used for the purpose of death. It puts the person unconscious quietly and the re-breathing inside the bag does the rest. This is sometimes used for legal suicide.



Appendix

Glossary:

- Erotic asphyxiation: The intentional restriction of oxygen to the brain for the purposes of sexual arousal.
- Auto-erotic asphyxiation: Self induced effect of erotic asphyxiation.
- Passing out, syncope, also known as fainting: Defined as a short loss of consciousness.
- BDSM: Bondage, discipline, dominance and submission, sadomasochism.
- Safe word: A code word to communicate an official instruction to stop the play.
- Edge-play: activity that endangers the life or health of the person receiving the play.
- Ball gag: Fetish sex toy, which consists of a mouth insertable object with textile or rope to hold it in place.
- Vacbed or vacuum bed: envelope spanned by a frame, and a suction pump or a floor vacuum removes most of the air from the envelope. It's a restriction device.
- Top: The person who will administer.
- Bottom: The person who will receive.
- Hypoxia: A condition where the body or a region of the body is deprived of an adequate amount of oxygen.
- Adam's apple: The structure of the Adam's apple forms a bump under the

- skin. It is typically larger in adult males.

This book was inspired by:

TSURUMI, Wataro. The Complete Manual of Suicide, Japan, 1993.

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References:

KOIWAI, E Karl. *Deaths allegedly caused by the use of «choke hold» (Shime-Waza)*, Judo Info, Online publishing date unknown (original paper publishing 1987), (Online), <http://judoinfo.com/chokes6/>

KNIGHT, Bernard and Pekka Saukko. Knight's Forensic Pathology Third Edition, CRC Press, United States, 2015.

ISBN-10: 0340760443

LYLE, Douglas P. Forensics For Dummies, For Dummies, United States, 2016.

ISBN-10: 0764555804 ,ISBN-13: 978-0764555800

<http://bayeux.datensalat.net/howto/atem/index.html>

Images from: Gray Anatomy, 1918.

This book is dedicated to all people who touched my heart and left too soon.

This book is the work of many friends,