### **Percussion Play**

Percussion play covers many types of play, from light spanking to heavy, single-tail whippings, so preparation depends greatly on what you're about to do. Percussion play should be restricted to muscled parts of the body, since the joints are both sensitive and easily injured, and the torso has fragile areas on both the front and the back. The hands and feet are so complex that any form of percussion on them can be risky, particularly the upper sides and their joints. The stomach should be well tensed before punching it.

You should never allow your hands or any percussion toy (e.g. flogger, whip, hand, etc.) to hit around the kidneys (including the spine), because the kidneys are attached to the spine, which transmits the force of the percussion to these sensitive organs. The head, neck, and spine are also areas that are sufficiently fragile that it's best to stay away from percussion play in those areas, except, perhaps, light slapping. If you hit the side of the face, be sure to brace the head with your hand on the other side. Be aware that hitting someone could trigger memories of abuse. Know your partner. Discuss beforehand.

The best areas for percussion are the buttocks, thighs, calves, upper back, and chest muscles.

Consider the flexibility, weight, contact surface, and the stroke used for the percussion. Heavy, flexible toys (like rubber floggers) that are allowed to fall completely on the skin can transmit a great deal of energy that can be perceived as 'thud' or 'sting,' depending on the stoke used.

Different people tend to prefer one sensation over the other, so check before you play. Also, there are those who like marks, such as bruises and healed cuts, from percussion play; but, not everyone does. So, again, it's best to ask or tell before you play. With a little practice, you can easily provide sensation without marks, and marks without a great deal of sensation. Some folks are 'dermagraphic,' in that their skin goes red with even the slightest percussion. This is not a problem, but it could surprise you as very red marks can appear quickly, even though you've only been tapping lightly.

Thin toys and pointed tips of toys can easily split the skin if applied too hard. So, watch for this if you're using canes, thin rubber tube, rubber floggers with sharply cut tips, single-tail whips, and the like. If your play breaks the skin, see the Blood Sport/ Piercing section for cleaning the skin and surfaces onto which the blood has fallen, and the Cleaning Toys section for cleaning your whips. On the fun side, the sound of percussion play is very much part of the play, so have fun experimenting with the sound as well as the sensation.

#### Whipping

Prior to a flogging or whipping scene, both players should cover any open sores or cuts they may have. Whips, quirts, cat-o'-nine-tails, etc., and the way they are used, can draw blood. If there's no break in the skin during whipping or flogging, then there's no problem at all. If blood is involved, avoid using whips on more than one person, because a whip cannot be sterilized (see the Cleaning Toys section).

It is highly unlikely that someone could be infected with HIV by a whip. Hepatitis, however, is much hardier and can pose risk if it is present on a whip (including a flogger, quirt, etc.). Keep in mind that long bull whips drag on the floor or ground, and you may not want your skin broken by something that has been there (think dirty, rusty nail...). When in a public forum, you should avoid breaking the skin, because, during the return of the stroke, blood droplets can be flicked into the air from the flogger/whip.

# Electricity

Electricity can create reactions as mild as tingling to violent muscle contraction. The latter is dangerous to both top and bottom; for example, both can sustain broken limbs. Given this, it's important to start slowly and to pay attention to a player's reaction during play. Pre-existing health problems involving the heart should be discussed prior to a scene. A player who has a pace maker or takes nitrates cannot wear electric dog collars and should be extremely careful when participating in other electrical play.

Electrical toys probably won't break skin, so there's not much risk of getting HIV from them. If they do break skin, follow the general procedures for first-aid.

Since flexible, sticky electrical contacts pick up dirt from the skin, use them on one person only. If you get bodily fluids on them, throw them away and get new ones. There is no way to clean them.

Avoid water and flammable materials when you play with electricity. Wet skin or hands, including from sweat, increase the unpredictability of where electricity will go, as well as the perceived sensation.

Older electrical toys shouldn't be used above the belly button; however many new toys designed for humans can be used above the belly button.

Always carefully read the instructions that accompany your toy. Unfortunately, many manufacturers don't provide information about the electrical current produced by a toy. In addition, some products are not initially sold as toys; for example, electric dog collars.

# **Restraints and Bondage**

Restraint is not likely to cause a risk of disease transmission. Just be aware that anything that can wrap around or encase the body is best made of a flexible material, and that any restraint that is too tight, especially around the neck or joints (wrists, ankles, knees, etc.), could easily damage it/them.

Before starting a scene, it's a good idea to take into consideration the bottom's health conditions (e.g., before binding, ask if your partner has poor circulation, low blood pressure, cystic breasts, abnormal mammograms, or other conditions that might be relevant to your play).

Never leave anyone who is bound alone. Also, be sure to have good rope cutters and bolt cutters nearby, ready for any emergency. Best practices include regularly checking-in with, and being no more than a few steps away from, a bound player, particularly if the player is wearing a gag. Cloth gags, such as socks, should be wet before insertion, to help prevent vomiting, and any gag under a hood should allow breathing.

Bad technique or leaving someone restrained for too long can cause nerve damage, inability to breathe, and even death by strangulation or suffocation.

Some warning signs for the bottom include persistent tingling, pressure pain, or numbness. Warning signs are pale or blue skin, or cold skin temperature, all of which indicate a circulation problem.

You will need mastery for some knots and positions. Bondage workshops are a good way to learn how to tie these safely, so consider attending some before trying bondage at home. More complicated knots and positions can come later. If you are bottoming, evaluate the ability of the top prior to being in the scene (see BDSM Etiquette section). In short, be aware of your limits and just try what you can currently manage. Bottoms, particularly novices, can have sudden, unexpected, and violent panic attacks

when in hoods and other forms of bondage. Tight hoods, when worn for a long time, can cause the face to expand, causing pain. If you are the bottom and feel the panic coming on, give your top as much warning as possible. As a top, you should be prepared to react quickly to calm the bottom.

If a panic attack happens, it may be a 'fight or flight' response. In this state, the bottom has little control over their own violent attempts to be released. This scenario could seriously injure both players, The top should not panic, nor release the bondage for a couple of minutes, until the bottom has calmed down, because an injured top may not be able to release the bottom. The bottom will come out of the panic with a few of minutes of gentle reassurance. At that point the bondage can be released and the top can give the bottom the required aftercare.

Considerations about nerve damages and restriction of blood flow are valid not only for rope, wrap, and tape, but also for handcuffs. Cheaper handcuffs can be dangerous. Cuffs that use a lever locking mechanism are prone to accidental tightening if the lever is knocked out of the locked position. So, you should avoid these if at all possible, or put a small piece of tape over the lever to help keep it in the locked position during use. Better quality cuffs avoid the problem, by using a second, recessed locking mechanism instead of the lever. Best practice is to use only double locking cuffs that meet the US Department of Justice NIJ Standard-0307.01, with a marking to that effect visible on the cuff.

Improperly applied handcuffs can cause damage from accidental tightening of the cuffs, delaying release from them. Place cuffs in position so that keyholes are easily accessible. It's good practice to use the second lock, and to become comfortable locking and unlocking it. As an additional precaution, some people store handcuffs and other locking devices in the locked position, so that a key is necessary to open them. To make sure your keys are always handy, it's

a good practice to attach the keys to a ring you can wear during a scene. Having a back-up set of keys available is also a good idea. You can easily have extra keys available for padlocks, by buying all your locks of the same size with the same key. Most places that sell locks can provide same-keyed locks and many kink stores have started to sell only same-keyed locks. Just ask to be sure.

If using adhesive tape (e.g. duct or insulating tape), do not apply it directly to the skin. It will rip off hair and skin when it is removed, which increases the risk of transmitting STIs.

When using "non-breathing" materials such as duct tape or plastic wrap, be careful of environmental conditions, because mild dehydration can occur quickly with high temperatures and/or in prolonged scenes. Follow your common sense and the natural needs of the bottom (thirst, urge to urinate, etc.).

### **Pinching**

You can pinch, lightly slap, and rub the skin, including the nipples. Provided there is no broken skin involved, there's no risk of transmitting HIV or other STIs when playing this way. If the skin is broken, follow the advice in the Blood Sports/ Piercing section. If you have a history of cystic breasts or abnormal mammograms, keep to light play on your breast and nipples.

Clothes pegs, nipple clamps, and ropes can be used to put tight pressure on the skin. To avoid circulation problems, if skin goes blue or white, immediately take off the pressure. For most people, pinching devices should only be left on for ten to fifteen minutes.

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