BDSM
SAFER KINKY SEX
If sexually explicit information about BDSM activities might offend you, then this information is not for you.
This booklet contains practical guidelines and advice on the prevention of Human Immuno-deficiency Virus (HIV), Hepatitis C (HCV), and other sexually transmitted infections (STIs) within bondage and discipline, dominance and submission, and sadomasochism (BDSM) play. It is an introduction to safer BDSM play and is designed to provide you with information to help reduce your risks. There are many detailed resources available to increase your knowledge of, and comfort with, BDSM (see the Other Resources section at the end of this booklet).

**BDSM Etiquette**

**BDSM etiquette is about respect and communication:**

**RESPECT:** Negotiate all the limits and terms (including ‘safe’ words and signals) of a scene before you start to play. A ‘safe’ word (or signal) is used in BDSM play to stop the scene immediately. Some people use green, yellow, and red. These systems are there to protect everyone involved. Respect the limits and feelings of other players (and your own) at all times.

**COMMUNICATION:** Discuss interests, pleasures, perceived needs, physical limitations, past experiences, health needs, and STI status with your partner(s). If you are unsure of a sexual or BDSM activity, then hold off until someone experienced teaches you the safety aspects. Discussion builds intimacy. You and your partner(s) will have more fun!

**BDSM Risk Reduction**

Responsible BDSM has always been about practicing safety, so it’s important to understand the risks involved in BDSM play, and how to minimize them. BDSM activities have generally been classed as **low risk** for HIV transmission. This means that only a small number of people are likely to have contracted HIV, or passed on HIV, while practising BDSM. HIV is not the only sexually transmitted infection (STI), and there are other possible dangers associated with some BDSM practices.

Even if it’s been negotiated, **you should be prepared for a quick end of the scene**, so have good and appropriate emergency equipment nearby, such as safety scissors, bolt cutters for padlocks/chains, and first-aid.
Drugs and Alcohol

If you’re into BDSM, be aware of the risks of using drugs or alcohol while playing. Alcohol and mind-altering drugs can lead to unsafe activities, impair your judgment, and significantly change your reaction speed. Getting high on stimulants can dull physical pain and change your energy levels and mood. Knowing the true extent of your pain or pleasure is part of making good judgments about what you want to do and how far you want to go. If the drugs you are using take away your ability to feel or assess pain, you could easily and seriously damage yourself or your partner(s). You need to know if what you are doing fits with what your body can handle; otherwise, you will not be able to determine if something has gone wrong—and you will not be able to tell your play partner to stop.

Sharing needles, or cookers for some drugs, is a very easy way to pass on HIV and hepatitis. You should use your own works and avoid sharing them.

If being intoxicated or high is not allowed at a fetish event, the Dungeon Master (DM) in charge of it may throw you out.
Sexual Health

People have different levels of understanding of sexual health. Do not assume that your partner(s) know(s) his/her HIV, hepatitis, or STI status. Also, you cannot know another person’s health by looking at them. Assumptions about another person’s willingness or ability to disclose their health issues are only guesses, not protection.

In any sexual activity, protection is key (condoms, gloves, and dams), and it’s important to remember to use common sense, covering open wounds with bandages, and ensuring you have first-aid items readily at hand.

By remembering these basics, you can make any kind of sex safer. By being interested in your health and practising safer sex, you are doing a lot to help stop the transmission of HIV, hepatitis, and other STIs.

HIV

HIV can be transmitted from one person to another through any of the following infected fluids:

- blood,
- semen (cum) or pre-ejaculate (pre-cum, the liquid that can come out of the penis (cock) when a man is sexually excited),
- vaginal secretion (cunt juice),
- mucosal secretion from the anus (asshole), vagina (cunt), or cervix. This is the moist fluid that covers the inside of the rectum and vagina, and
- breast milk—although this has only been observed within the context of a child drinking large quantities of breast milk.

For HIV transmission to occur, infected fluid must reach the HIV-susceptible cells in the blood, usually through a break in the skin, absorption through mucosa (mucosal linings), or through some disruption to the mucosa. Mucosa are the moist surfaces of the body which line most of the body cavities and hollow internal organs, such as the vagina, urethra, inside wall of the foreskin, rectum (ass), mouth, nose, and eyelids.

Hepatitis C (HCV)

HCV is one of several hepatitis infections that can cause major damage to the liver over many years of infection. Like HIV, HCV is transmitted through blood-to-blood contact. Unlike HIV, it is a hardy virus that can exist in blood outside of the body for much longer than HIV. Although most transmission occurs through sharing of drug-use equipment (needles, syringes, and other drug-preparation equipment), it is possible to transmit HCV sexually, when blood is present (in semen, vaginal, rectal, or mucosal fluids), even in microscopic amounts.

Other STIs

Having another STI, such as gonorrhea, syphilis, or genital herpes, can increase the risk of HIV transmission, even if you don’t have any obvious symptoms of that STI. STIs like herpes can be transmitted simply by touching moist skin to moist skin. Other STIs, like HIV, may require more intimate contact involving mucosal membranes, such as the ones in the back of the throat, in the vagina, in the penis, or in the rectum.

The best tools we have to reduce the risk of transmitting HIV and most other STIs are the use of condoms, dental dams, medical examination gloves, and female condoms, and regular testing for and treatment of HIV and other STIs.
The Rectum

The rectum (ass) is delicate. It is located about two to four centimetres inside the opening of the anus and is about twenty centimetres long. Sticking something up it, whether it’s a finger, penis, dildo, fist, or anything else, can tear the mucosal lining of the rectum. Even extremely tiny tears are openings where HIV and other STIs can get into the body.

Fucking without protection is a high-risk activity for HIV and other STIs, since a penis discharges pre-ejaculate (pre-cum) and ejaculates semen (cum) directly onto the mucosal lining of the rectum. You are not likely to notice sores or tears in your anus or rectum, because they are inside and not easy to see. If you have a cut or sore on your finger, or if you have sharp or long nails, don’t finger an anus or rectum. Use a glove when fingering.

As for dildos, make sure they’ve been cleaned before they go up a rectum. Note that clean is not the same as sterile (see the section on Cleaning Toys). Use lots of water-based lube and be prepared to re-apply more lube. Frequently.

The Penis

The head of the penis is a vulnerable area with two mucosal linings, the meatus (the piss slit at the opening of the urethra) and the inside wall of the foreskin. These two areas, in addition to any open cuts and sores due to a variety of things including STIs, can expose you to infection.

Male and female condoms are the most effective means of protecting you and your partner(s) from STIs during sex.

If you are intersex or a trans man, and you have a surgically created penis, you need to be mindful of where your moist membranes are and, if you find a male or female condom does not work for you, to cover them with a barrier (dental dam, cut-up glove, or split condom).
The Vagina

The inner parts of the vagina are mucous membranes, so make sure that your play is careful here. It's easy to bruise, cut, or tear a vagina, so it's important to protect the vagina whenever anything goes into it. Anything inserted into the vagina needs to be clean and have no sharp edges. The vagina can be damaged in other ways too. You can bruise or scrape inner parts, tear the skin between the vagina and the rectum, bruise the tissue between the pubic bones, and/or cut and scrape around the opening of the urethra.

If you are a trans man taking testosterone or a woman who has experienced menopause, be aware of the possibility of vaginal atrophy, the thinning and inflammation of vaginal walls due to a decline in estrogen. Besides making sex uncomfortable for you, this may also create open wounds.

In addition to these risks, which can open up your body to HIV infection or other STIs, some of the vaginal and cervical mucosal membranes can directly absorb HIV. **Unprotected vaginal intercourse with a penis and/or improperly cleaned toys is a high-risk activity.**

The vagina can experience infections that are not STI- or HIV-related, but are a result of contaminating it with feces (shit). Inserting anything into the rectum and then into the vagina can lead to infections that are not associated with STIs. If you are trans and have undergone recent lower surgery to create a vagina, you need to take additional care to keep your vagina dilated but clean, with the appropriate healing time allowed to pass before rough play or play that could lead to infections.
**Lubricants**

Lubricants (lube) for sex can be lots of fun, whether used for play or insertion. You can find your preferred lubricants by asking around or consulting your retailer. A good rule for sticking anything into the body is:

**Too much lubricant is not enough.**

If you don’t use enough, you may cause tears and rips, resulting in openings for diseases and discomfort after play.

Different types of play call for different types of lubricants. If you’re going to insert something into someone, you should only use a water-based unscented brand. Flavoured brands can be used externally or for oral sex.

**Never** use oil-based lube with a latex condom, because oil breaks down latex quickly.

Do not take lubricant from a large shared container. Either buy small portions in disposable packets, or put individual portions of lube into something disposable (like a paper cup or plate) before play.

Some brands come in pump jars, which helps ensure that nobody’s ‘dirty’ hand, penis, or whatever can get into your personal supply of lube. These jars should not be used when play involves more than one bottom, because there is a high-risk of contamination from one bottom to another, as the lube from more than one bottom will mix on the pump handle.

The easiest way to be safe is to ensure that you have more than enough lubricant prepared for each bottom before play starts.
Toys

Sharing your toys carries a high risk of transmitting different infections.

If it’s not properly cleaned and then shared, anything that goes into a person’s rectum and/or vagina could transmit HIV or other STIs. Any toy that draws blood can also be a risk for transmitting hepatitis A, B, and C.

If you want to avoid this risk, try the following: if you’re a bottom, the best course is to have your own toys and get your top to use them on you. If you’re a top, ask your bottom what toys he or she owns and to bring them along. Or, if having sex with various bottoms, you should assign and mark each toy for use with that bottom only. For example, if you spank someone with a sturdy wire brush, you’re going to draw blood. So, tape the bottom’s name onto the back of the brush, maybe even tape the brush to the bottom’s leg, but don’t use it on anyone else. The same applies to dildos, butt plugs, and anything else you insert into someone.

If you put a condom on a toy before you use it, it’s a lot easier to clean after play. When sharing toys, cover each with a condom, then dispose of the condom after the toy has been used on one individual. For large toys, you may find that female condoms are a useful substitute for standard condoms. If you’re a top, you can probably think of lots of ways to make your bottom put the condom on the toy!

Condoms, Gloves, and Dams

You can find a wide variety of latex condoms, as well as condoms made from polyurethane. Polyurethane accommodates those with latex allergies and those who prefer oil-based lubricants. Don’t forget that condoms can also be used to cover sex toys.

Even with the available varieties, some people may still encounter problems finding suitable products. So, if condoms do not fit properly, you may need to explore options such as cutting latex or vinyl gloves to fit, or using dental dams.

It’s important to protect hands when they are used for insertion. Gloves are commonly made of latex and are also available in vinyl and nitrile. Latex gloves are thicker than condoms, but, if you are using latex gloves with oil-based lube, try “double-bagging” them (using a second glove over the first), and change the gloves frequently to avoid breakage. Vinyl or nitrile gloves don’t break down with oil-based lubricant and are usually available through your local pharmacy or medical supply store.

Dental dams are rectangular pieces of latex or polyurethane sheets available from medical supply stores and some pharmacies.
Cleaning Toys

It’s a good idea to clean a toy, even if it’s not shared, not only for basic hygiene reasons, but also to prevent an STI in one part of your body from being spread to other parts. It’s also important not to transfer feces from the rectum to the mouth or the vagina by using a sex toy first in your ass and then in other parts of your body, because this can lead to infections. This is particularly important if you are trans and have had recent surgery to create a vagina and are using a vibrator or dilator as part of the healing process.

Remember: there is no way to guarantee that your toys are completely free of STIs.

There are medical surface cleaners, such as those that contain both isopropanol and butyl cellosolve, that do not provoke skin irritation, so you might want to use one of those instead of hydrogen peroxide. Be sure to check the material safety data sheet of the product before using it. HCV, in particular, is hard to completely remove (should you get blood on a toy). Using medical-grade surface cleaners that expressly indicate they will kill HCV may pose problems when they are used on toys, because it is unclear what these cleaners will do to the materials from which sex toys are made. So, in the process of cleaning the toy, you may also be damaging it. It is not advisable to get these medical grade cleaners onto vaginal, oral, or anal mucosal membranes.

If the cleaner is not properly flushed from the toy, you could end up inflaming these body tissues and aggravating them to the point that they are more susceptible to transmission of HIV, hepatitis, or other STIs.

So, make sure any toy with cum, blood, or feces on it, or anything that’s been in someone’s rectum or vagina, is properly cleaned.

You’ll need these things to clean your toys:

- Soap and hot water,
- One part household bleach to nine parts water (note: bleach does not kill herpes immediately; any surface requires at least ten minutes of exposure to bleach to render herpes inactive. Bleach does not kill HCV at all), and
- 10% hydrogen peroxide solution (hydrogen peroxide kills herpes immediately).

Make sure you get any bleach and soap off the toy by flushing it well with clean water.

Leather toys are a bit different:

There is no way to sterilize leather, but you can clean it.

To clean a leather toy (like a whip, flogger, or leather dildo), first wash the tips or ends with a strong foaming cleaner using a hard bristle brush to get at nooks and crannies in the leather; then spray the tips or ends well with hydrogen peroxide, wipe away the excess with clean towels, and let them air dry for at least a few hours (preferably overnight) before using them. Cleaning dries out the leather very quickly, so your toy should be treated with a leather conditioner immediately after it has dried, or it could become brittle and crack.

If you know the material the sex toys are made of and the material’s properties, you can determine the best way to clean them and how much you can reduce the risk. For example, remember that silicone toys are more expensive, but they are dishwasher safe. Be aware of recommendations and follow manufacturer’s instructions.

Finally, most sex toys are sold as novelties. This means they don’t meet any specific sanitary regulation. It’s a good idea to establish a relationship with a trusted supplier, in order to talk about pros and cons of any toy you may purchase.
Douching and Enemas

Most people into fucking, toys, or fisting feel it is very important to have a clean rectum and vagina. However, douching or enemas before any rectal or vaginal play washes away the surface mucous that’s there to protect you. Incomplete rectal douching can leave fecal matter in the rectum that is likely to cause abrasion, which can make you more vulnerable to infection. For these reasons, it’s important to clean well, to allow around an hour or so before play for the mucosa to recover, and to use lots of lubricant during play.

Never share your douche bag or the nozzles of shower douches. Clean them each time you use them (see the section on Cleaning Toys).

Douching or enemas should not be performed after sex, because they don’t necessarily wash things away—they can push infected semen, blood, or feces farther into the body. Infections and bacteria doused up into a woman’s uterus and fallopian tubes can cause Pelvic Inflammatory Disease (PID), which is painful and could lead to infertility or ectopic pregnancies (the egg growing in a fallopian tube). This can lead to a host of other life-threatening problems.

Rimming

Licking someone’s anus (asshole) is negligible risk for HIV transmission, but poses a risk for the transmission of other STIs, like herpes, intestinal parasites, anal warts (caused by Human Papilloma Virus or HPV), syphilis, gonorrhea, chlamydia, and hepatitis A, B, and C. Using a barrier is your best choice. But, if you want to rim and you have an open sore on your lips, or you find one on the ass, you should definitely use a condom cut lengthwise to form a sheet of latex or use a barrier, like a dental dam.
**Sucking, Blowing, and Licking**

Fellatio (blow job, sucking cock) is considered a low-risk sexual activity for HIV transmission. If you have just flossed or brushed your teeth or if you have just been to the dentist, getting cum or pre-cum in your mouth is riskier. Never brush your teeth or tongue just before playing. Wait at least 30 minutes to 2 hours, and never play when you have cold sores, cankers, or cuts in your mouth. How fast your mouth heals depends on a variety of factors, including oral hygiene and overall health. Even an irritated throat can increase your risk, so, in this case, it’s best to use a non-lubricated or flavoured condom when you suck cock. Cunnilingus (cunt-licking) has similar risks. If you are concerned about the risk associated with this activity, you can use a dental dam as protection. If you can’t find dental dams, you could use non-microwavable plastic food wrap to help reduce the risk. Also, a non-lubricated condom or glove can be cut to produce a flat latex barrier that can be used in the same way. Remember which side of the barrier is yours and which side has someone else’s fluids on it.

While oral sex is considered low risk for HIV transmission, many other STIs (such as syphilis and gonorrhea) can be easily transmitted during oral sex. If genitals have any sores, signs of an STI, or if they look like the skin has been broken, condoms or dental dams are required for play.

The best tools we have to reduce the risk of transmitting most STIs are using condoms, dental dams, and getting regularly tested for STIs.

**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. Light pinching should only be left on for ten to fifteen minutes.

**Temperature**

You can only transmit disease through temperature play if there are cracks in the skin, open blisters, or charring caused by high temperature, so stop at reddening of the skin. Avoid sudden changes in body temperature and permit the player to acclimatize to room temperature. When playing with ice, remember to use common sense.

Cigars and cigarettes should not be allowed to drop ash on the heated area, since the ash may burn the skin and stick to it. This can cause infection later, as the wound heals, and even result in an unwanted ash ‘tattoo.’

For hot wax play, choose cheap, white paraffin candles, because they burn at a low temperature. Don’t use coloured, scented, or beeswax candles, which all burn at a higher temperature.
Fisting

Fisting is the name given to putting a hand into a rectum or vagina, but the hand is not inserted as a closed fist; it goes in with fingers and thumb straight and gathered together into a pointed cone. Once the whole hand is in the rectum, the fingers can be gently brought into a fist. When moving farther, they should be pointed again.

If you get fisted, you’re going to have to treat your rectum and/or vagina very, very carefully, because fists can create more serious tears in the rectum and vagina than most sexual activities. People can take a long time to work up to the point of being able to take a whole hand. Also, pushing too hard or fast can cause damage. So, take your time and enjoy yourself!

If you are going to fist, it’s important to wear gloves. They protect both of you. Latex / vinyl / nitrile medical gloves are the best and need to fit properly. The additional friction caused by creases of excess material can cause increased sensitivity for the bottom, and, eventually damage in the mucosal membrane. For deep fisting, it’s best to use a long, latex ‘opera’ glove or a calving glove. You should be able to get these at your local sex store, veterinary stores, or online kink stores.

Going deep is a high-risk activity, since, among other things, the colon is easily punctured, which can result in an infection that may be rapidly life-threatening. If you’re going to be fisting deeply, make sure your arm is free of nicks and cuts. You can check for tiny nicks that may not be visible by lightly applying rubbing alcohol to the skin. A sharp stinging sensation alerts you of surface abrasions that will increase risks.

Don’t fist if your fingernails are long. Cut them and smooth them down or put soft bandages over the ends of the nails as an added precaution to blunt them. If you have an open wound or hangnails on your hand(s), don’t fist with that hand, even with the precaution of gloves. Be sure the glove stays well lubed while you’re using it (see the Lubricants section to learn how to avoid contaminating lube). As with condoms, when pulling out, make sure to grab the open end of the glove so that it doesn’t slip off.

If you’re living with both HIV and HCV and you want to fist, you need to know that HCV tends to be found in people with higher viral loads. This has led many researchers to think that fisting can spread HCV to sexual partners far more easily than if HIV were not involved. If you get fisted regularly, it’s important to get yourself screened regularly for HCV. Keep in mind that HCV acts like other infections faced by people living with HIV, such as syphilis or HPV. They all tend to progress quickly to secondary stages that cause more serious health issues. Often, these infections are not apparent immediately after infection, and it is very common for people to be unaware they are infected. Most of this can be avoided by using fresh condoms and gloves with each partner.

Hepatitis can be spread by fisting without gloves, using the same glove in more than one person, or using contaminated lube.
Watersports, etc.

Both urine (piss) and feces (shit) with no blood are fine on the outside of intact skin. If there are any cuts on the outside of the skin, don’t urinate (piss) or defecate (shit) near the cut(s). Remember that a pimple (zit) is also a cut.

Urine in your mouth is a negligible risk activity for getting HIV, but if the bladder is infected there is a risk of catching other STIs. Drugs can pass through into urine, chemically unchanged. If you are HIV positive, be aware that HIV drug treatment resistance can be caused by drinking urine from someone who is on HIV treatment drugs different from your own regime. Also, be aware that drinking large quantities of urine from someone who has been taking recreational drugs can also pass the drugs into your system, thereby compromising your ability to assess risk.

If you take feces into your mouth, there is also the possibility of catching intestinal parasites, hepatitis, and STIs. Get checked for parasites as part of your regular STI check up and be on alert for symptoms of a parasitic infection like diarrhea, bloating, cramping, or changes in your appetite, weight, or energy levels (see the Rimming section for more information).

Urethral Sounds

Some men enjoy surgical steel sounds in their penis during play. Since the urethra is a sterile part of the body, it’s best to consider sounds as single-person toys (the cost is not great and having your own reduces your risks). Use lots of lubricant and don’t push the sound in. Let gravity do the work of easing it into the urethra. Stop at the slightest feeling of pain, since pain here is a good indication that damage may be happening. Sterilizing sounds properly requires a medical autoclave.
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 should be made of a flexible material. Also, any restraint that is too tight, especially around the neck or joints (wrists, ankles, elbows, knees, etc.) could damage them. You will need specialized training if you want to try this.

Likewise, you will need mastery for some knots and positions. Workshops on the various types of bondage are a good way to learn how to play in a safe way, so consider attending some before trying bondage at home. More complicated knots and positions can come later. Also, in case you are bottoming, check and 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.

Bad technique can cause nerve damage, inability to breathe, and even death by strangulation or suffocation. Some warning signs for the top are pale skin, blue skin, or cold temperature, all of which indicate a circulation problem.

Tight hoods, when worn for a long time can cause the face to expand, causing pain. Be aware that bottoms, particularly novices, can have sudden, unexpected, and violent panic attacks when in hoods and other forms of bondage. 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 could seriously injure both players, even resulting in broken limbs. The top should not
panic, nor release the bondage for a couple of minutes, i.e. 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 couple of minutes of gentle reassurance. At that point, the bondage can be released and the top can give the bottom the required aftercare.

If you put a gag under a hood, make sure the gag allows for breathing.

Cloth gags, such as socks, should be wet before insertion, to prevent vomiting. Considerations about nerve damages and restriction of blood flow are valid not only for rope, wrap, and tape, but also for handcuffs. For safety, buy only good handcuffs with a double locking feature that meet National Justice standards National Institute of Justice (NIJ Standard-0307.01). This standard specifies that metal handcuffs meet national safety standards, and have serial numbers and a company name visible on the cuff. Always have extra keys available in case of emergencies.

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 if the temperature is high and/or the scene is prolonged. Follow your common sense and the natural needs of the bottom (thirst, urge to urinate, etc.).

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, cystic breasts, abnormal mammograms, or other conditions that might be relevant to your play).
**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, say, punching it; and you should never allow your hands or any percussion toy (e.g. flogger, whip, hand, etc.) to hit around the kidneys, 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.

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 before you play. With a little practice, you can easily provide sensation without marks, and marks without a great deal of sensation. Another thing to watch for is that some people are what we call ‘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 that 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. But, 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 harder and it 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/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.
Safe Disposal of Syringes and Other Sharps

Do not recap syringes after use, as this could lead to a needle stick injury. If you must recap the syringe(s), make sure that the recipient does the recapping. That way, there will be no risk of person-to-person contamination. Once a needle or scalpel blade is used, it should be kept in a ‘sharps’ container until you permanently dispose of it. The container can be a specially designed one or a strong, narrow-necked thick plastic container with a lid. When dropping the sharp into the container, make sure no one else is holding the container, as this can lead to an accidental injury. Place the container on a hard, stable surface and then let gravity take the sharp into it.

When the sharps container is nearly full, you should contact your local pharmacy, injection drug use needle exchange, sexual health info line, or social service referral telephone number. They will either accept your materials to be included in their own disposal system or be able to advise you where to go in your community.

Blood Sports/Piercing

Syringe needles are not only used for drugs. Some people inject products like steroids, fat burners, and polymers for body modification. Others use needles as part of temporary piercing practices and the fetish of having huge testicles (balls) by means of scrotal saline injections. Some use scalpels to create temporary and permanent designs on the surface of the skin.

The surfaces onto which you place your sterile needles and scalpels before play should be as clean as possible. To clean these surfaces, use a medical grade disinfectant, according to the manufacturer’s instructions.

When you starting a piercing, cutting, branding, or shaving scene, the area of the skin should first be wiped clean in a spiral, moving out from the centre. You can use a clean cotton ball that has been soaked in rubbing alcohol or any antiseptic preparation designed for the skin.

Note that alcohol only cleans the skin, it does not sterilize it. So, it’s preferable to use a good antiseptic after wiping away surface dirt with alcohol. Any drops of blood during play should be wiped away in the same way as cleaning the skin: outwards from the source. After use, put the wipes in a plastic bag, tie up the bag, and place it in the garbage.

Sharing needles or blades is a very easy, high-risk way to pass on HIV and hepatitis, and many other STIs. When piercing the skin with needles, make sure only new, sterile ones are used and then only on one person. In Canada, piercings done by amateur piercers with homemade equipment have inadvertently infected individuals with HIV.

So, the golden rule is: Anything inserted into the skin needs to be sterile, not merely clean.
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 when you play with electricity. Don’t use electricity if you have wet skin or hands, nor if you are near flammable materials, because water increases 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 most new toys designed for human use now can be used above the belly button. So, 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.

Branding and Scarification

Both practices are safe for HIV (at publication, it is unclear if this is also true of hepatitis). Disposable equipment is recommended for branding, or it should be used on only one bottom.

Knife-branding and cutting should only be done with a sterile scalpel with a disposable blade (scalpels can be bought at medical supply stores). Use the blade once, and then dispose of it safely (see the section about Safe Disposal of Syringes and Other Sharps). A manual shaving blade should never be shared.
**Other Resources**

BDSM is not a licence for abuse, and the BDSM/kink community organizations exist to help you get a feel for how BDSM relationships work and how to ensure that your consent and limits are respected. Get in touch with the organizations nearby and take the time to get to know them. You’ll be able to meet people and attend workshops on techniques, as well as use their resources. To find out about ones near you, check out your local kink store, community newspapers, and the web. The oldest organizations (some over thirty years old) tend to have best resources, on line and off. Anything that feels a little ‘cheesy’ probably is, so be careful about networking sites, unless you’re sure that the person giving the information is well established as reputable in the community. Try not to confuse erotic sites and networking sites with the sites of BDSM community organizations. The latter will most often have good resource sections, whereas the former are less reliable. In very little time, you’ll notice the references that people respect the most, since they’re mentioned on almost all good sites.

Workshops are delivered by BDSM educators all over the world where there are enough kinky people to gather more than occasionally. Enquire at your local kink or sex store (or search the web) to see what’s coming up in your area. They will be very happy to help you.

If there are no BDSM organizations close to you, and you don’t have internet access, there are still plenty of books that were written to help you learn safer BDSM. You can find these in the usual ways: your local purveyor of kink, sex shops, gay and lesbian book shops (even if you’re straight), and kink and mainstream web stores.

For general and specific information on HIV, hepatitis, and other STIs, you can get in touch with your local community health centres, public health units, doctors’ offices/clinics, or community AIDS organizations, and you can find this kind of information in your local library. The web also has this kind of information, but be sure to use well-known, reputable web sites for this. If in doubt about health information, talk openly about these subjects with your doctor. If your doctor will not talk about these issues, you might seriously want to consider changing doctors.
About this Booklet

This booklet is dedicated to the memory of Douglas Dale McCarthy (1931-2007), one of the founders of the AIDS Committee of Toronto (ACT) and ACT’s Safer SM Project.

It was written by Dale McCarthy and Jay Wagner (first edition), and Trevor H. Jacques (second edition), and it was funded by, and written in consultation with, the BDSM community in Toronto, to provide information for safe, sane, and consensual BDSM activity.

Thanks to:

Brian Denyer, Joe Hunter, Nancy Irwin, Trevor H. Jacques, Duncan MacLachlan, Steve Munro, Rui Pires, and Carlos Rivas for their editorial work for this edition, and to the Whitby Positive Care Clinic and the Lakeridge Health Network for their help and advice.

Thanks also for the many generous donations from supporters of the Safer SM Education Project since its inception in 1991.

Need More HIV and Hep C Information or Resources?

Contact CATIE (Canadian AIDS Treatment Information Exchange) at 1-800-263-1638

e-mail: info@catie.ca
web: www.catie.ca

This booklet was printed in 2009 with assistance from CATIE. The CATIE Ordering Centre Catalogue Number for this booklet is ATI-26131.