

# **Sadistic Reflexology Primer**

## ***What is Reflexology?***

Reflexology is the application of pressure, stretch and movement to the feet and hands to affect corresponding parts of the body. Reflexologists view the feet and hands as a mirror image of the body. By using the right technique a reflexologist can break up patterns of stress in other parts of the body.

Reflexology is based on a biological phenomenon. The reflexologist applies pressure to the nerve endings in the hands or feet. The pressure applied causes nerves elsewhere in the body to behave differently.

## ***What is Sadistic Reflexology?***

Therapeutic Reflexology is usually a bit painful. This moderate pain can be increased until you generate an endorphin response, and the whole experience can be enjoyed like any other SM technique.

I began to call it Sadistic Reflexology when I was asked to present it at the Black Rose annual convention in 1998. The program director needed a name for the program guide. Until then I simply called it *that foot torture thing I am experimenting with*. I developed it in 1997 to help a friend who had Fibromyalgia and was struggling to enjoy impact play like flogging and paddling. She loved to fly from the endorphins but hated needles, and impact play left her sore for days.

## ***Is Sadistic Reflexology for everyone?***

The actual technique of giving the pain is pretty simple. Anyone should be able to learn it. However, if you are shy about giving pain, you will be ineffective at topping this. In a normal SR scene, you can expect to deliver a "stroke" of pain several hundred times. If you think of this as hurting your partner, you will not be comfortable with it.

Almost everyone responds well to Reflexology, but some people have tougher feet than others. Some people react to the sadistic version with enjoyment, others get little out of it. All of the submissive masochists I have worked with responded well enough to want to do it again.

People with no endorphin response to speak of are not candidates for this type of scene although they may enjoy the sensation.

If you have a foot fetish, you can enjoy that alongside the SR experience. This affects the whole body, while it focuses on the feet.

### ***Safety!***

Although normal Reflexology is safe for everyone, SR is not universally safe.

- Avoid being a subject for it if you have a back injury involving the spinal column, because the "map" of the points on your feet to the various areas of your body may vary significantly from those indicated on the charts.
- If you are taking muscle relaxant drugs, the results of Reflexology can be hard to predict.
- If you are pregnant, there are special precautions: some areas of the feet are off limits due to risk of miscarriage.
- Diabetics often have neuropathies in their feet and should avoid unusual pressures there.
- Common sense dictates special care be taken if you have injuries to the foot. Be aware of fractures, sprains, and bruises. If the two of you don't feel comfortable navigating around the injuries, don't take chances.
- Bunions and calluses can usually be worked around.

### ***Doing Sadistic Reflexology***

While no one can learn all about Reflexology in one session, you can learn the sadistic version of it in one session. This is because we focus on only the most sensitive and safest areas of the feet, and ignore the rest.

### ***Preparation***

To prepare, I trim my nails and wash my hands. I never use lotion or powder; tactile feedback is important and slick surfaces make a slip more likely. I also need to know about any medical conditions that may make it dangerous before I begin.

You might want to study a Reflexology Chart and use the information on it to know what areas of the foot to avoid.

The bottom should be comfortable, bound or not, perhaps lying on a soft padded surface. I use a towel to keep the foot that I am not working on warm.

I hold the first foot for a while to get it used to my touch. Then I knead and poke at it, to increase the blood circulation, and to stimulate endorphin release. There should be only enough pain to put the body on alert. Some subjects become drowsy, others sigh, and some become very quiet. A few actually sleep.

### ***Special preparations for ticklish feet***

If the person has ticklish feet, I start by placing the towel in between my hands and the foot. I warm the foot through the towel, and wait. After a while the foot will seem more relaxed. Then I lift a corner of the towel and test the acceptance of the foot to my touch. Once accepted, I slowly explore the foot with my fingertips, keeping unused skin covered with the towel, using light but firm pressure. Eventually I remove the towel and have the toes sandwiched between my clasped hands. The foot is warm, and used to my touch at this point.

### ***Maintaining touch***

Maintain touch with at least one hand the entire time. This is especially important for ticklish feet. If you lose touch, you run the risk of surprising the foot when you touch it again. This can be disruptive to the flow of the scene.

### ***Find the sensitive spots***

Next, find the sensitive places on both feet and remember them. Communicate with the subject to find how much pain is too much. Pressing on a sensitive place until their limit is reached is fine. Think of this limit as a ten, on a scale, where zero is no pain at all.

This handout was intended to supplement a live demonstration. For this reason, most of the specific advice on where to press and where not to press has been omitted. If you are reading this without ever seeing a demonstration, for the sake of safety it would be wise to keep your explorations to the area at the base of the toes, in between the ball of the foot and the toes, and along the inside of the big toe.

### ***Use the spots you found***

The third stage consists of pressing rhythmically on sensitive points until you reach 5-9 on that scale of 0-10. The endorphins will come up, and the subject should become reactive. The more sensitive a point is, the better. You can use surprise to increase the intensity of the scene. At this point, you are managing expectations, much as you would be in any other SM scene.

Now you should switch from whatever area of the foot you were working with to the inside of the big toe. Most people are very sensitive there, and will react to moderate pressure with twitches, gasps, or moans. Because of the higher sensitivity, you can deliver dozens of rhythmic strokes with relatively little effort.

### ***Switch to the other foot***

As you work, you will eventually find the sensitivity of some or all of the places you have been pressing have decreased. Eventually you will likely find the entire foot has become almost unreactive. At that point you can let the foot rest and start on the other foot. Cover the foot with a towel before you start working on the other one.

### ***How long does all this take?***

The whole thing for both feet takes as little as fifteen minutes or as long as an hour. The body takes a little time to react to some things. Everyone has their own speed. The tempo of the scene is based on reaching a plateau of intensity and sustaining it. Because so little effort is required of the top, one of these scenes can go on as long as the top has patience and the bottom can endure it. In some cases hand strength is a factor.

### ***Ending the scene, and aftercare***

There are several ways to end the scene.

- The intensity and rhythm can be reduced gradually until the endorphins fade.
- The top can end the scene by hitting "tens" repeatedly, then pressing "over the top" to purposefully expand the limits of endurance (if the bottom has consented to this sort of thing).
- If the bottom reaches subspace, stopping the stimulation and waiting a short while will bring them back. In such a session, the bottom can be taken into and out of the subspace trance at will in many cases.

- A soothing touch, light squeezing, and gentle folding the toes back and forth to wind things down signals the bottom that no more pain is coming.

Consider covering your bottom with a blanket and allowing some quiet time. The feet should be covered as they will have some sweat and be unusually cold. At least several minutes are needed to clear some of the endorphins. Watch for dizziness. Don't let your bottom try to stand without assistance. Walking may not be possible at first. The full relaxation effects are better felt if the entire scene happens while the bottom is lying down and then remains in that position until ready to walk.

### ***Using a chart***

If you search online for *Reflexology Chart* you can easily find one to download. None of the charts is in complete harmony with any other. Several quality books are available from the library and in larger bookstores. I own several and don't recommend one over the other.

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A PDF version of this handout is available from <http://plkstables.org>