If sexually explicit information about BDSM activities might offend you, then this resource is not for you.
About This Resource

This resource contains practical guidelines and advice on the prevention of, hepatitis, Methicillin-Resistant Staphylococcus aureus (MRSA), Human Immuno-deficiency Virus (HIV) 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 for men, women and transfolk.

*BDSM: Safer Kinky Sex* is designed to provide you with information to help reduce your risks. This edition contains updated and expanded information throughout with new information on hepatitis C, HPV, MRSA, cleaning toys, condoms, lubricants, shaving, cutting and harm reduction. We have also strived to make this resource more trans inclusive. Some transmen or people on the trans masculine spectrum call their genitals their front hole, and not a vagina. To acknowledge this important difference, we will use vagina and frontal hole. More information about BDSM resources is available in the Other Resources section.
**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.

If you need to visit an emergency department, be as honest with them as possible. This will help ensure you get the help you need. They have almost certainly heard it all before, and it’s in the interests of your health to give them detailed, accurate information. Plain-language descriptions of what you were doing will do just fine, no matter how embarrassed you may feel about using it.
Drugs and Alcohol

If you’re into BDSM, be aware of the risks of using drugs or alcohol while playing. Substance use with play increases risk. Alcohol and drugs can impair your judgment, change your reaction speed and lead to unsafe activities. 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, cookers, or any item that comes in contact with blood for drugs, (including hormones, steroids, Botox and medications) is an easy way to pass on HIV and hepatitis. You should use your own drug equipment (works) and avoid sharing them. If being intoxicated or high is not allowed at a fetish event, the Dungeon Master (DM) in charge of the event may tell you to leave.

We recognize that for some people substances are one of the ways they enhance a scene. Establishing a ‘sober’ baseline is a good strategy, especially for novices. If you are using drugs or alcohol another good strategy is for the top to be the “designated driver.” At least that way, if there is a safety issue, a “sober” top can provide control and appropriate responses. All of our recommendations including being prepared for a quick end to a scene, should be followed if you are using substances with play and want to minimize risks.
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, contact your local pharmacy, 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.

Sexual Health

People have different levels of understanding of sexual health. Do not assume that your partner(s) know(s) their HIV, hepatitis, or STI status. You cannot know another person’s health by looking at them or depend on criminal laws which make disclosure mandatory. 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 can be transmitted from one person to another through any of the following infected fluids:

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

For people living with HIV, the measurement of the level of HIV in blood is part of routine medical care and is referred to as “viral load.” Note that an undetectable viral load level in blood is a good thing and diminishes the likelihood of transmission. Undetectable does not mean an absence of HIV, only that HIV levels are so low that they cannot be detected with standard testing, and “undetectable in blood” does not mean that the level of virus will necessarily be the same in all the other fluids mentioned above. For example, the presence of an STI can raise the level of HIV in vaginal or front hole fluids, mucosal secretions, and semen.
Staphylococcus bacteria (sometimes known as “flesh-eating bacteria”) are found on the skin and in the noses of many people. Unfortunately, some types of staphylococcus bacteria have grown resistant to some antibiotics. If left untreated, MRSA infections can develop into serious complications. People with compromised immune systems are more vulnerable to this bacterial infection, while others can carry the infection, not experience any ill effects and still transmit it.

MRSA is spread by skin-to-skin contact and by objects recently in contact with an MRSA infected person. This can include benches, clothing, and utensils.

To prevent infection, practice consistent hygiene such as washing touched skin with soap and water or using an alcohol-based hand sanitizer after play, and between partners during play. Keep any cuts and skin breaks covered with bandages or dressing. Avoid sharing sex toys or objects used on the body, and anything worn or used to wipe the body, such as towels during a play session. Using disposable paper towels is a useful no-fuss technique, and regular laundering of clothes and towels will also deal with the MRSA. Many types of antiseptic wipes and sprays sold in grocery and retail stores can be used to wipe-down any surfaces that a partner’s skin is likely to touch. Just read the label to find out if MRSA is mentioned. (Think of what you would do to clean off gym equipment.)

Full spectrum wipes and soaps sold in medical supply stores are a step up in terms of killing a wide variety of bacteria, viruses, and microbes, and they offer more alternatives such as alcohol- and bleach-free formulas. Just be sure to follow the manufacturer’s instructions. All cleaned surfaces should be allowed to dry thoroughly before being used again. It is important to seek medical attention for any skin infections, particularly if they begin as a reddish rash with lesions and then progress to worse conditions, such as boils or abscesses.
Hepatitis C

Hepatitis C is one of several hepatitis infections that can cause major damage to the liver over many years of infection. Like HIV, hepatitis C is transmitted through blood-to-blood contact. 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 hepatitis C sexually, when blood is present (in semen and vaginal, rectal, and other mucosal fluids), even in microscopic amounts. Sexually transmitted hepatitis C is an issue of increasing concern, especially during heavy anal play.

For folks who are already HIV positive, hepatitis C is also a concern. Care needs to be exercised in rough or prolonged anal play between two people living with HIV where one partner is also co-infected with hepatitis C. Co-infection of HIV and hepatitis C makes treatment for both infections more difficult.

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 or second stage syphilis exhibiting a rash can be transmitted simply by touching skin to 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.

It is noteworthy that treatment resistance in some STIs have increased around the world, including Canada. Gonorrhea is an example of an STI that has evolved to a point of drug resistance. The medical community is worried about running out of treatment options for this bacterium in the near future. Treatment resistance does not mean that there is no cure, but that conventional treatment may not be successful.

The best tools we have to reduce the risk of transmitting HIV and most other STIs are the use of condoms, medical examination gloves, dental dams, insertive (female) condoms, vaccinations, and regular testing for and treatment of HIV and other STIs. Undetectable viral load and Pre Exposure Prophylaxis (PrEP) also reduce the risk of HIV transmission.
The Vagina or Frontal Hole

The inner parts of the vagina or front hole are mucous membranes, so make sure that your play is careful here. It’s easy to bruise, cut, or tear a vagina or front hole, so it’s important to protect the vagina or front hole whenever anything goes into it. Anything inserted into the vagina or front hole needs to be clean and have no sharp edges. The vagina or front hole can be damaged in other ways, too. You can bruise or scrape inner parts, tear the skin between the vagina or front hole 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 or front hole atrophy, which is the thinning and inflammation of vaginal or front hole walls due to a decline in estrogen. Besides making sex uncomfortable for you, this may also create open wounds.

In addition to these risks, some of the vaginal and cervical mucosal membranes can directly absorb HIV. Unprotected vaginal or frontal intercourse with a penis and/or improperly cleaned toys is a high-risk activity.

The vagina or front hole 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 or front hole can lead to infections that are not associated with STIs. If you are a trans woman 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.
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.

Condoms are the most effective means of protecting you and your partner(s) from HIV and other STIs during sex.

If you are intersex or a trans man, and you have a surgically created penis, be aware of where your moist membranes are and, if you find condoms do not work for you, cover them with a barrier (dental dam, cut-up glove, or split condom).

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.

The pre-cum that discharges from the penis can also contain enough virus to infect another person with HIV. Putting your penis into another person’s ass even a little and even for only a short time is a high-risk activity for HIV, in the same way that fucking without protection is a high-risk activity for HIV and other STIs. The mucosal lining of the anus (and of the penis and vagina or front hole) can absorb HIV directly through cell walls, so in anal sex consider that the penis puts semen directly onto the mucosal lining of the rectum.

You are not likely to notice sores or tiny tears in your anus or rectum, because they are inside, not easy to see, and may not produce any pain. Most tiny tears and abrasions will not produce blood you can 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, even 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 silicone lube or lots of water-based lube and be prepared to re-apply more lube.
Lubricants

Lubricants (lube) for sex can be lots of fun, whether used for play or insertion. A good rule for sticking anything into the body is: too much lube is not enough. If you don’t use enough, you may cause tiny tears and abrasions, which are openings for infections, and can cause discomfort after play.

Different types of play call for different types of lubricants. Silicone-based lubes are more expensive, but you’ll need less and they remain slicker longer than water based lubes. Good for rough or extended sex. On the other hand, be careful not to use silicone lube with silicone sex toys. It can dissolve the surface of the toy and make it sticky and hard to clean.

Some people are sensitive to the scents added to some lubes. To be sure, use unscented lubes when inserting anything into somebody. Flavoured brands can be used externally or for oral sex. You can learn more about lubricant options by asking around or consulting your retailer.

Never use oil-based lube with a latex condom, because oil breaks down latex quickly. Oil based lube can be used with most non-latex condoms. (See more in the Condoms section.)

Whatever lube you choose, when playing with more than one bottom, there is a high-risk of contamination from one bottom to another via the lube container. This can happen in the same scene or in subsequent scenes and is believed to be the way in which some people acquire hepatitis or MRSA. It’s easy to avoid this risk with a little preparation.

During play, do not take lubricant from a large shared container. Either use small portions in disposable packets or, before play, put individual portions of lube into a disposable container, such as a paper cup. The easiest way to be safe is to ensure that you have more than enough lubricant prepared for each bottom before play starts. For certainty, dispose of contaminated portions following play so that you start with fresh lube each time you play.
Condoms, Gloves, and Dams

Condoms are a good way to reduce the risk when you’re getting it on. They can be used for oral, vaginal, frontal, and anal sex. A condom drastically reduces your risk of HIV and other STIs, by creating a barrier to semen and blood.

You can find a wide variety of latex condoms, as well as ones made from other materials, such as polyisoprene or nitrile. These materials accommodate people with latex sensitivities and those who prefer oil-based lubricants. You can also find thin condoms, for increased sensitivity. Don’t forget that condoms can also be used to cover sex toys, which provides additional protection and also makes clean-up easier.

In addition to male condoms, the insertive condom (or “female” condom) is an option for both men and women. The first generation of insertive condom is polyurethane or polyisoprene, while the newer generation is made of nitrile. Both are a sheath in the shape of a round, upside-down baggie designed to be inserted into the vagina or front hole before sex. They can also be inserted in the anus. An insertive condom provides a robust barrier between partners, which prevents the sharing of bodily fluids like semen, blood, and saliva. Some gay men we know refer to the insertive condom as the “pig” bag. While the material is durable and suitable for rough sex, multiple top partners are not protected if they come into contact with semen from another already deposited. Ideally, the bag is changed between partners.

Some men and women find the insertive condom a carefree way to enjoy anal intercourse. Insertive condoms can be put in place up to eight hours before intercourse and are only effective when in place prior to intercourse. They do take a bit of getting used to. The polyurethane or polyisoprene material becomes more comfortable after body heat has softened it, while the nitrile warms in quicker time. The nitrile version also has the added benefit
of less noise from crinkling. Insertive condoms can also be used for large toys inserted to the vagina or anus, because their size makes them a useful substitute for standard “male” condoms. Male and insertive condoms remain your easiest and best protection from STIs.

Even with the available male and insertive condoms, some people may 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 most commonly made of latex, but they are also available in vinyl and nitrile. Latex and nitrile gloves are often preferred for fisting and are usually available through your local pharmacy or medical supply store. If you use latex gloves, do not use oil-based lube with them (as it will break down the latex), and change gloves periodically to avoid breakage. Oil-based lube can be safely used with vinyl and nitrile gloves.

Dental dams are thin rectangular pieces of latex that can be used to prevent the spread of STIs during oral sex or rimming (ass licking). Dental dams act as a barrier between someone’s mouth and partner(s) genitals; they can be bought in some pharmacies and most medical supply stores, or you can make your own using a non-lubricated condom or a latex glove (split it lengthwise down the middle). They are called “dental” dams because they were originally designed as a protective measure for dentists working on a patient’s teeth. Some people use non-microwavable plastic wrap because it’s cheaper and easier to find, but it hasn’t been proven scientifically to act as a barrier against STIs. Whatever barriers you use, be sure to mark one side of it so if you drop it, you’ll know which side was yours!
Toys

Sharing your toys carries a high risk of transmitting infections.

If it’s not properly cleaned before being shared, anything that goes into a person’s rectum and/or vagina could transmit HIV or other STIs, particularly in a situation where one person uses the object right after another has used it. With the exception of used syringes, inanimate objects do not easily transmit most STIs, including HIV. The few STIs that have been known to ‘hitch a ride,’ rarely stay alive on an object long enough to be successfully transmitted. Examples of ones that fail to transmit are Trichomoniasis or LGV. Infections not traditionally classed as STIs are another story. The hepatitis viruses are very difficult to clean off objects, so any toy that draws blood can also be a risk for transmitting hepatitis B and C. The emergence of MRSA means you should be aware of how it catches a ride on objects, too.

If you want to avoid these sorts of risks, 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 more than one bottom, you should assign and mark each toy for use with its associated 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 insertive condoms are a useful substitute for standard ones. If you’re a top, you can probably think of lots of ways to make your bottom put the condom on the toy!
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, vagina or front hole 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 a trans woman and have had recent surgery to create a vagina or front hole and are using a vibrator or dilator as part of the healing process.

Make sure any toy with cum, blood, or feces on it, or anything that’s been in someone’s rectum, vagina, or front hole is properly cleaned. There are medical surface cleaners available at medical supply stores (such as those that contain both butyl cellosolve and isopropanol) 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.

Hepatitis C, 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 hepatitis C and MRSA 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. This is because manufacturers haven’t tested them on sex toys. Try applying on a small test area first.

It is not advisable to get these medical grade cleaners onto vaginal, frontal, oral, or anal mucosal membranes. If the cleaner is not properly flushed or evaporated from the toy, you could end up inflaming these body tissues and making them more susceptible to transmission of HIV and other STIs.

Read a manufacturer’s instructions for cleaning a toy. Electrical parts need to be protected by removing before cleaning. To clean your toys as thoroughly as possible, we suggest that you:
1. Wash the toy with soap and hot water followed by a rinse;

2. Soak the toy in one part household bleach to nine parts water for at least 10 minutes, because you’ll need that long to render herpes inactive. (We have few reported cases of STIs being readily transmitted on inanimate objects. Hepatitis viruses are the exception and can be transferred via objects that have come in contact with bodily fluids);

3. Rinse off the bleach and let air dry;

4. Because bleach does not kill hepatitis B or C, it is advisable to take a fourth step which involves carefully using a medical grade cleaner, following the product’s instructions. A medical grade disinfectant that evaporates can be left to dry thoroughly and then rinsed with water.

**Note:** Some medical grade cleaners cover a broad spectrum of pathogens, such as herpes, hepatitis, HIV, and MRSA, among others. They can eliminate the need to clean with bleach and water described in step 2.

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 (or a medical grade disinfectant, such as one with butyl cellosolve), 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, so your toy should be treated with a leather conditioner immediately after it has dried, or it could become brittle and crack.

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. Incomplete rectal douching can leave fecal matter that is likely to cause abrasion in the rectum; this can make you more vulnerable to infection. However, douching or enemas before any rectal or vaginal play washes away the surface mucus that’s there to protect you. 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. For the most comfortable and safest douching experience, use warm water at low pressure and take your time. Use only plain water without soap. For some, the douching experience is a foreplay ritual, or it can be enjoyed as the main course of a scene.

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 douched up into a woman’s uterus and fallopian tubes can cause Pelvic Inflammatory Disease (PID), which is painful, could lead to infertility or ectopic pregnancies (the egg growing in a fallopian tube). An ectopic pregnancy can be life threatening.
Watersports, etc.

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

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. Drinking large quantities of urine from someone who has been taking recreational drugs or prescription medication can pass the drugs into your system, producing unintended consequences.

If you take feces into your mouth, you may catch 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. Consider being vaccinated for hepatitis A, and hepatitis B. There is no vaccine for hepatitis C.

Urethral Sounds

Some men enjoy surgical steel sounds and other insertables (catheters, Prince’s wands, etc.) in their penis during play. Since the urethra is a part of the body that should remain sterile, it’s best to consider sounds as single-person toys unless you can sterilize them. Sterilizing metal sounds properly requires a medical autoclave. 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. Be extra cautious if you are using an insertable with ribs or edges. Risk of damage is greater.
Rimming
Licking someone’s anus (asshole) is negligible risk for HIV transmission, but poses a risk for the transmission of intestinal parasites, hepatitis A and B, and STIs like herpes, anal warts (caused by Human Papilloma Virus or HPV), syphilis, gonorrhea, and chlamydia. If there is blood involved, hepatitis C becomes a risk as well. You should use a condom cut lengthwise to form a sheet of latex, or use a barrier like a dental dam. Vaccination against hepatitis A and B is a good idea, but you should have your immunity checked occasionally because natural and vaccine immunity to hepatitis does not, as was once thought, last for your lifetime. If you have a compromised immune system, getting vaccinated needs to be followed up carefully, to determine if the vaccine has provided immunity. The HPV vaccine is also recommended for women and gay men. Gardasil protects against the strains of HPV that can cause cervical or anal cancer.

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 that it can have sharp edges until it melts and that prolonged contact with skin or mucous membranes can do damage.

Don’t drop cigar or cigarette ash on a 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. The greater the distance of the candle to the skin, the cooler the wax will be when it lands on the skin. Don’t use coloured, scented, or beeswax candles, which all burn at higher temperatures.
Sucking, Blowing, and Licking

Fellatio (blow job, sucking cock) is considered a low-risk sexual activity for HIV transmission. However, you can get or pass on other STIs during oral sex. Having an STI can create lesions and can cause an immune response that concentrates the cells that HIV likes to target. Both of these conditions will increase your risk of getting HIV during unprotected oral and anal sex. If you are living with HIV, an STI can potentially increase your risk of transmitting HIV not only because of the issue of the presence of lesions and blood, but also due to the possibility that an STI can cause higher amounts of HIV in anal secretions, semen, or vaginal fluids.

Cuts and sores increase your risk for STIs during oral sex, and can increase your risk for HIV. So, flossing, brushing your teeth, going to the dentist, or having recently eaten “sharp” foods (like popcorn or chips) which can create tiny nicks or cuts in your mouth, increases your risks when you get cum or pre-cum in your mouth. Never brush your teeth or tongue nor use alcohol-based mouth wash just before or after playing. Wait at least 30 minutes and never play when you have cold sores, cankers, or cuts in your mouth. Rinsing with salty water is one way to check—any stinging or soreness is a good indicator that you should take special care. How fast your mouth heals depends on a variety of factors, including oral hygiene, smoking tobacco, and overall health. Even an irritated throat can increase your risk; in this case, it’s best to use a non-lubricated or flavoured condom when you suck cock.

Cunnilingus (cunt-licking) or front hole oral sex has similar risks. If you are concerned about the risk associated with this activity, you can use a dental dam or other barrier.

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 the genitals have any sores, discharges of fluid, signs of an STI, or if they look like the skin has been broken, then condoms or dental dams are necessary for safer play.

The best tools we have to reduce the risk of transmitting most STIs are condoms, gloves, and dams, and getting regularly tested and treated for STIs.
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 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.
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.
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 stroke 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 harder 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.
Fisting

Fisting is a name given to putting a hand into a rectum, vagina, or front hole. The hand is not inserted as a closed fist, unless the bottom is experienced and already prepared. Commonly, the hand goes in with fingers and thumb straight and gathered together into a pointed cone. Once the whole hand is inside, the fingers can be gently brought into a fist. When moving deeper, they should be pointed again.

If you get fisted, you’re going to have to treat your rectum, vagina, or front hole very carefully. Fists can create more serious tears in the rectum, vagina, or front hole than most sexual activities. People can take a long time to work up to the point of being able to take a whole hand. Pushing too hard or fast can stretch the tissues to the point of pain and damage and bring the scene to an end. So, take your time and enjoy the journey!

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.

Going deep is a high-risk activity, because the colon is easily damaged or punctured, which can result in an infection that can 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. For deep fisting, some people use a long, thicker latex ‘opera’ glove, but remember, sensitivity for the top will be reduced and these gloves can only safely be used on one ass. Various toys that serve as ass openers like speculum are also one ass toys unless they are disinfected.
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 HIV, consider that you are at a higher risk of contracting other STIs because of your compromised immune system. If you are also living with hepatitis C co-infection (in addition to the HIV), there is some evidence that a partner living with HIV is at increased risk for contracting hepatitis sexually from you. This has led many researchers to think that fisting can spread hepatitis C 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 hepatitis C. Keep in mind that hepatitis C 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 immediately apparent, 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.
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 or 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 (please refer to the Cleaning Toys section for more information).

When you start 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: Alcohol only cleans the skin, it does not sterilize it.

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, 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.

Anything inserted into the skin needs to be sterile, not merely clean.
Shaving, Cutting, and Branding

Because these activities break the skin (the largest organ of the body), you should think in terms of ‘What would a surgeon think about when preparing for an operation?’ Not only can infections enter broken skin, they can exit onto the tool you use. So, because shaving can unintentionally cut the skin, you should never share a manual shaving blade.

‘Cutting’ is intended to break the first few layers of skin, which can usually repair themselves without leaving long-lasting marks (the full healing process would take about a week or two to fade), whereas scarification is intended to go deeper, leaving permanent marks even though the surface has healed. Both practices break the skin, so they should only be done with a sterile scalpel that has a disposable blade. Sterile scalpels can be bought at medical supply store. Use the blade once, then dispose of it safely (see the section about Safe Disposal of Syringes and Other Sharps).

Disposable equipment is recommended for branding, or it should be used on only one bottom, until the equipment is sterilized. The brand should not have surface ‘flaking’ that might enter the wound it creates.

After play, you should treat the area as you would any other cut or burn. To clean any residual blood in the area, wipe gently with a sterile swab soaked in hydrogen peroxide, using a spiral motion outwards from the wound; use the swab for only one spiral. Dress the wound with sterile swab(s) and bandage, so that air can reach the wound to promote healing. Replace the dressing as needed. If the wound becomes infected, visit your physician or a hospital.
Other Resources

BDSM is not a licence for abuse. BDSM/kink community organizations and social gatherings 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 the best resources, on line and off.

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 purveyor of kink or search the web to see what’s coming up in your area. Even if you are straight, don’t be afraid to inquire with local gay and lesbian retailers, they will be 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 may be able to find these through your local library, health centre, AIDS service organization, or online. Don’t feel shy about asking.

For information on HIV, hepatitis, and other STIs, get in touch with your local community health centre, public health unit, doctors’ office/clinic, community AIDS organization, local library, or CATIE, Canada’s source for HIV and hepatitis C information. The web also has this kind of information, but be sure to use well-known, reputable web sites. 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 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 BDSM Education Project.

We would like to thank the many players, educators, and kink community members who have contributed to the development of this resource over the past two decades.

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