Midori Yama Budokai: Hanshi’s Corner
Written by Ron Rogers  Hanshi Meiyo Kyōju
December 2009
Ichigo, ichi e: One life, one meeting

Tatami or Rush Matting
Traditional tatami is comprised of two major pieces. The entire section is approximately six feet by three feet and two inches thick. Floor space is measured by how many tatami it takes to fill the area. The inside, or bottom, of the mat is known as toko, and is made of rice straw, sewn in eight or nine lines. This is tightly covered with rush matting, known as ryukyu. (Yes, the matting is known by the same name as the islands.) This is tightly sewn to the bottom with ten or fifteen lines of thread. This outer covering is sometimes called the omote. The edges are neatly bordered with cloth. Those used in judo are much more strongly made than the standard. At the Kodokan, tatami is placed on flooring supported by steel springs. The entire floor will give perceptibly in response to the least pressure from above.

Jigoro Kano
Although usually presented as a small, frail man, Kano – in his prime – was much more formidable looking. I give the following description by E. J. Harrison from his Fighting Spirit of Japan [originally published in 1913; revised 1950’s]: “Dr. Kano himself was then a middle-aged man perhaps 5 ft. 4 in. in height, but with a thickness of neck and a depth of chest which denoted great strength. Very notably his calves were of abnormal thickness. … In those days Dr. Kano still did a certain amount of practice and would have been an ugly customer to tackle in a serious encounter. His name was one to conjure with throughout Japan.” The frontispiece of the book shows Kano in his prime. He does indeed have a “thick neck” and “depth of chest.” Hardly the frail man we imagine. In another portion of the book, we are advised: “No modern teacher of judo despises strength. Other things equal it is almost certain to turn the scale in favour of its possessor. The vital consideration is that a knowledge of judo enables the student to distinguish between the right and wrong use of strength.”

From: An Encyclopedia of Judo by Ron Rogers, Kudan, Yudo
DAI ROKU SHO CHAPTER SIX
Kappō are injury methods (usually translated resuscitation) for restoration of vital signs. This includes katsu (sometimes used as a synonym for kappō) or resuscitation techniques, shiatsu or finger pressure, amma or massage, do in or the gentle approach to the Way and sekotsu or bone setting. Kappō is a derivative of katsu. Katsu – tsu (which becomes p) + ho (ho becomes po for phonetic reasons) = kappō. Although shiatsu is derived from Chinese acupuncture (Japanese: Shinjutsu) and ancient massage (amma or amma) techniques, it is actually modern. The term was coined in the first half of the 20th century. It was originally known as shiatsu rygho or finger pressure way of healing. Later, it was known as shiatsu ho or the finger pressure method. Shiatsu has been referred to as man-to-man Zen. Amma is over 300 years old, dating back to at least the Edo period. Do-in is even older, having been derived from the ancient Chinese tao-yin.
6 Kappo or resuscitation techniques (also know as fukkatsu). Today, jinko kyoku (ho), or artificial respiration, is the preferred method. This is taught is most first aid (okyuteate) classes. All kappo were considered jimmei kyujo, or life-saving techniques.

6.1 Kappo san yoso or three maxims for resuscitation.

- Always check and clear the throat before beginning any katsu.
- Attend to joint or bone injuries and bleeding before katsu is applied. Today, icepacks (hyono) may be applied first.
- Be sure contact lenses are removed.

NOTE: These are not to be used today, but only included for historical purposes! Although a layperson may never pronounce a person dead, historically three methods were used to establish a person’s mortality. First is to squeeze the thumb between two fingers and if there is no change in color the person is dead. Second, if the pupils do not contract in light, there is nothing to be done. Third, a finger was inserted into the anus and if there were no contraction, the person was presumed dead. It was recognized that the eyes told the most important story. Even if the thumb were squeezed and showed no color, there may have been some reaction of the eyes. Other methods from another school (Shindo Tenshin Ryu) are as follows: (1) if the pupils of the eyes are clear, revival may be possible. (2) In the case of drowning, check the color of the fingernails; if they have remained red or pink, there is a chance of revival. (3) If a person has accidentally drowned, the face may retain a red color, which indicates a good chance they may be revived. (4) In the case of hanging, the position of the pupils indicates if the hanging was suicide or homicide. If the hanging is a suicide the pupils roll upward; if homicide they roll downward. If the mucus from the nose has a regular color they may possibly be revived. (5) In the case of poisoning, the body will appear swollen. In most instances of poisoning, revival may be possible. (6) Try to bend the fingers or toes. If they can be bent there may be a chance of revival. Other indications included a drop in body temperature. This was considered a signal that death was imminent. Also, if the eyes were without movement, the system had shut down and death was inevitable. If a person has been unconscious for a long period of time, or the victim of a severe blow to the head, you may use a feather to tickle the nose or throat. This should cause sneezing or coughing, which should simulate a breathing response.

6.2 Okoshi katsu or fukkatsu. Resuscitation techniques for restoring consciousness. Kassei-ho are means of resuscitation, particularly after strangling, using katsu.

6.2.1 Suriage (shita) katsu or se katsu. Uke is supine. Tori kneels above uke’s head on the right knee. Tori slips the arms under uke’s shoulders and grips the lapels, sitting up uke. Tori places the tip of the middle finger on the large vertebrae at the base of uke’s neck (7th cervical vertebrae), and uses the handspan method to find soda, a kyusho between the 5th and 6th thoracic vertebrae. Cup the hand and hit a glancing blow upward. Uke’s head will snap back if struck correctly. Uke may remain on the stomach, rather than being raised to a sitting position. If uke is groggy and not unconscious, strike downward. Tori may use teisho, tegatana or nakadaka ippon ken to strike the blow.

NOTE: Se katsu is done lightly against uke’s back between the shoulder blades with a loosely clenched hammer-fist or palm heel.
6.2.2 **Ashi katsu.** From *uke’s* right side, take hold of *uke’s* right ankle with the left hand and lift it upward. With *uke’s* leg lifted, slap the bottom of the foot just across the arch and below the ball of the foot and middle toe (*sokon*).

6.2.3 **Murasame katsu** or **nuki katsu.**

- **Ikkyo:** Kneel on both knees with *uke’s* head on the abdomen. Cross the index and middle fingers and place them in the hollows of *uke’s* collar bone (this is one of the *shinkei chusu*). Jab downward and inward.

- **Nikyo:** For brain concussion or head injury, *uke* is placed in a sitting position against tori’s upraised knee. *Tori* places the fingertips on the top of *uke’s* shoulders and rolls the hands forward, striking with the first and second knuckles, then with the knuckles at the base of the fingers. *Tori* is striking the middle of *uke’s* collarbones as s/he rolls the fingers across the trapezius muscles. Tori then uses *shofu shiatsu* (massage to the side of the neck). If choked unconscious, massage upward, and then use *ikkyo*. Follow this with *zukatsu* (fingertips at the jawbone articulation). Finally, use *atama shiatsu* (head massage) from the temples to the back of the head. This last is the barber’s “dry massage.”

6.2.4 **Kikai tanden shiatsu** – manipulation of an area about three to four inches below the navel. This is between two acupuncture points; seize the skin and twist. This is effective for someone who has lost consciousness, or is in a coma. It is also used to treat typhus and cholera.

6.2.5 **Sancho shiatsu** – massage on the area slightly to the left of the fifth dorsal vertebrae. This is good for accidents that cause unconsciousness. Press with the knee, keeping *uke’s* body bent backward.

6.2.6 **Koson shiatsu** – pressure to a point in the middle of the sole of the foot. Very strong pressure must be exerted. Acupuncture or moxa is recommended.

6.2.7 **Yubi tsune katsu, yubi katsu** or **tsume katsu.** Pinch the base of the nail of the thumb or of the big toe.

6.2.8 **Futo koro katsu.** Prick the nipples with a pin or needle, or place a lighted match or cigarette against them. **NOT RECOMMENDED! This is included for historical purposes only.**

6.2.9 **Shiri katsu.** Cross the index fingers and insert them deeply into the rectum. Pull them sharply out. This will cause the rectum to tear and bleed. **NOT RECOMMENDED! This is included for historical purposes only.**

6.2.10 **Hiza katsu.** Drive the knee, or the top of the thigh, into *uke’s* back, just above the 5th and 6th thoracic vertebrae. This stimulates the pneumogastric nerve.

- **Katate hiza katsu.** *Uke’s* left arm is brought across the chest and under the right arm as *tori* holds *uke’s* left shoulder with the left hand and *uke’s* left wrist with the right hand. *Tori*’s right knee is placed in the middle of *uke’s* spine (*soda*). *Tori* is in right *takakyoshi*. *Tori* pulls with both hands, pressing with the knee. This is used primarily to restore heart action, using two to thirty movements.

- **Ushiro kumitsuki hiza katsu.** *Uke’s* arms are crossed in front of *uke’s* chest with the arms parallel and the right arm on top. *Tori* embraces *uke* and holds *uke’s* right elbow with the right hand and *uke’s* right wrist with the left hand. *Tori* draws *uke* backward, then releases. This is used primarily to restore breathing.
6.2.11 **Haikatsu Yudoh.** Tori is seated at uke’s head as though to enter for kami shihō gatame. Tori slides the hands beneath uke’s armpits and raises him or her to a seated position. Both tori and uke face forward. Tori first removes his or her left hand from uke’s left armpit and turns uke’s chin toward his or her left shoulder. Tori then withdraws the right hand from beneath uke’s right armpit, regripping the armpit from the front. Uke’s back is supported by tori’s left leg as the right foot is placed against the center of uke’s back. Tori’s foot pushes gently forward as the arms pull uke back. Pushing and pulling should be synchronized with tori’s own breathing. This should be repeated two or three times.

6.2.12 **Kin Kappatsu Shinpo.** The relative positions of tori and uke are as for haikatsu yudoho. Tori kneels on the right knee with uke’s back against his or her chest. The left leg, which is up, supports uke’s chin, immobilizing his or her head. Tori’s right palm is placed flat against uke’s spine with the index finger on the spinal column. Tori takes a deep breath, raising the heel of the hand slightly away from uke’s back. As s/he exhales, s/he firmly strikes uke’s back with the heel of the palm. The shock of the blow should restore breathing by sending a vibration through the body to stimulate the nervous system.

6.2.13 **Haikatsu Kyukih.** Uke is prone with the head turned to one side. Tori kneels astride uke, avoiding too much pressure on uke’s body. Tori strokes uke from shoulder to waist with the palms. This is done gently but firmly several times. Tori then places the heels of both hands on either side of the spine at the ninth vertebrae. Tori applies pressure with a strong pushing motion and immediately releases it. If not immediately released, the pressure may impede rather than assist the breathing reflex.

6.2.14 **Sokatsu Kikaih.** In this instance, uke is lying with his or her back on the mat. Tori kneels astride uke’s body. Tori’s left knee is against uke’s right thigh. The right foot is placed against the ground close to uke’s chest. Tori strokes uke from shoulder to stomach several times. Tori then places the left hand beneath uke’s neck and raises uke’s head. Immediately release the pressure with both hands and repeats it with a natural breathing rhythm. The key factors are performing the technique quickly and coordinating the pressure of both hands.

6.2.15 **Shindenno Kakki Shinpo.** Uke is lying on the back. Tori raises uke to a seated position. Tori moves to the right side of uke’s body, supporting uke with the raised left leg. Tori presses the right fingertips against uke’s temples and the left fingertips against the back of uke’s head. Equal, steady pressure is applied toward the center of uke’s head for fifteen to thirty seconds. Relax the pressure then reapply. This may be done several times without risk to uke.

6.2.16 **Ninin katsu or two person (man) resuscitation.**

6.2.16.1 **Jokatsu Kokyuho Ikkyo.** Uke is placed upon his or her back. The first tori is at the head of uke and takes hold of uke’s arms. The hands are then lifted toward uke’s head, and then placed back down to the sides. The second tori kneels at the side of uke’s body, placing both hands on uke’s lower abdomen. As the first tori lifts uke’s arms, the second tori pushes gently upward toward uke’s chest. As the hands/arms are lowered, pressure against the abdomen is released. This should be performed fifteen to twenty times a minute until uke begins to breathe on his or her own.

6.2.16.2 **Jokatsu Kokyuho Nikyo (Jokatsu Kokyuho Henka).** In this instance, the second tori bends and extends uke’s legs as the first tori raises and lowers uke’s arms. If
uke’s mouth is closed, his or her head is tilted back by lifting the chin to clear the passageway. If only one person is available, s/he places a cushion or pillow beneath uke’s back and works the arms up and down.

6.3 Tsurigane katsu or relieving discomfort in the testicles.

NOTE: If the pupil of the left eye is dilated, it is the right testicle that has ascended and vice versa.

6.3.1 Kin katsu if uke is doubled up in a fetal position. Tori uses the right hand to press and push the testicle to the scrotum from the back or lightly pull it from the front.

6.3.2 Kogan katsu (kicking coccyx resuscitation) when uke is not doubled over. Uke is brought to a sitting position with the legs extended. Tori lifts uke approximately three inches from the mat then lets uke drop back to the mat. This is designed to jar the testicle(s) back into position.

6.3.3 Bitei katsu or kogan katsu. Uke bends forward with the legs outstretched. Tori slaps or kicks (lightly) with the ball of the foot in the sciatic nerve area, or the lumbar vertebrae at the base of the spine. Also referred to as kokatsu kashoh, uke is raised from the mat until the legs are straight before the kick is applied. One should realize that the kick is firm but light, not hard. If the testicles do not return to their natural position, haikatsu yudoh and sokatsu kikaiho should be applied.

6.3.4 Manaka shiatsu or manaka oshi. Draw the fingertips from the pubic bone to the solar plexus until the discomfort is gone.

6.3.5 Inno katsu. Tori holds uke’s (right) arm upward with both hands and lightly kicks the (right) waist bone with the sole of the foot. This is for an ascended testicle on the right.

6.3.6 Se katsu (see NOTE after 6.2.1). Uke is on the hands and knees (yotsubai) as tori slaps uke’s lower back (lumbar vertebrae/coccyx) with the palm.

6.3.7 Tobi katsu or inno katsu. Uke jumps up and down in place until descension of the testicle(s). Tori may use kin katsu, pushing downward with his fingertips.

6.4 Kokyu katsu or breath resuscitation.

6.4.1 Tsuri koshi katsu or hon katsu. With uke doubled up, tori straddles uke from the front. Uke is lying with his or her back to the mat. Tori extends uke’s arms and legs – which may be enough to restore breathing. Tori then lifts uke’s hips by pulling upward on uke’s belt until uke’s shoulders leave the mat. This is repeated until uke can breathe easily.

6.4.2 Eri katsu or resuscitation (against the) lapels.

• Eri katsu (Ikkyo). Tori is kneeling behind uke, who is sitting with both legs extended. Tori reaches beneath uke’s arms and grasps both sides of uke’s collar. Tori rocks back and stretches uke’s chest then rocks forward. Repetition of this movement expands and contracts uke’s diaphragm until breathing is reestablished.

• Eri katsu (Nikyo). Tori is standing behind uke who is in the same sitting position as for Eri katsu Ikkyo. Uke’s body is leant backward at an approximately 30o angle with tori’s right knee against the backbone (soda). Tori places the hands over uke’s shoulders, fingers pointing downward and thumbs inside lapels. Tori presses lightly
downward, then relaxes. The bases of *tori*'s hands rest on the lower ends of *uke*'s collarbones with the fingers lightly covering *uke*'s breasts.

- **Eri katsu** (*Sankyo*). This form of resuscitation may be used for all stages of unconsciousness. These may have been caused by shock, fainting fit or drowning. It is based on nerve application, which tends to stimulate the heart, the pneumogastric center and the auditory nerves of the brain. *Tori* is standing behind *uke*, who is sitting upright, legs extended. *Tori*'s thumbs are placed in the hollows at the back of the clavicle bone. The palms are against the chest, fingers pointed downward. The thumbs and fingers are pressed downward. Following the downward thrust, pull the fingers up on the diaphragm and press the thumbs down the pectoral arch. This stimulates the nerves of the heart and causes it to dilate. While supporting *uke* with the right knee, deliver a blow with the left knee on the seventh dorsal vertebrae. This stimulates the pneumogastric center. This blow with the knee is delivered as the pressure of the thumbs and fingers is continuing their movement. As the blow is delivered, shout. In this way the auditory nerves of the brain are stimulated and complete resuscitation is brought about. In the case of drowning, water should be removed from *uke* prior to resuscitation. *Uke* is lying face down. *Tori* clasps his or her hands together beneath *uke*'s relaxed abdominal muscles. *Tori* pulls against *uke*'s abdomen, forcing water from the lungs. *Uke* is lifted from the ground as this is done.

- **Eri katsu** (*Yonkyo*). With *uke* on his or her back, *tori* straddles *uke*’s waist with one knee up. *Tori*’s hands are placed flat on *uke*’s chest. *Tori* places weight on the hands and presses from the chest to the stomach. When done correctly, *uke*’s head will raise from the mat.

### 6.4.3 Tachi katsu or standing resuscitation.
- **Tachi katsu Ikkyo or kururunfa katsu.** *Uke* clasps the hands behind the head as *tori* reaches under *uke*’s arms as for a “full nelson.” *Tori* grasps each of *uke*’s wrists from the rear and stretches *uke* backward, arching *uke*’s spine. As *uke* is lowered, *tori* may “pop” the hands upward to stretch *uke*’s spine.

- **Tachi katsu Nikyo or ushiro uwate kumitsuki katsu.** *Uke* crosses the arms as *tori* grasps over *uke*’s arms (*uwate kumitsuki*) in a “bear hug” and stretches *uke* backwards. This is also used to straighten the spinal column.

- **Tachi katsu Sankyo or ushiro shitate kumitsuki katsu.** The same as *uwate kumitsuki* but with *tori* grasping underneath (*shitate kumitsuki*) *uke*’s arms.

### 6.4.5 Suigetsu katsu or tanden katsu.** Opening a blocked airway. *Uke* may be standing or sitting. *Tori* embraces *uke* with the arms, the right thumb (lower joint) pressing against the solar plexus of *uke*. *Tori* grasps his or her own left wrist (or fist) with the right hand and forcefully pulls backward. The object should be dislodged from *uke*’s throat. **NOTE:** This has recently been rediscovered and is known as the Heinlech Maneuver or abdominal thrust.

**NOTE:** The spot pressed is directly opposite that of *soda*, and *soda* may be struck to cause *uke* to regain his breath when struck in the solar plexus.

### 6.4.5 So katsu.** *Uke* is placed on the back with the head turned sideways. *Tori* kneels at *uke*’s right side, placing the right palm halfway between the navel and xyphoid
process. The fingers are pointed toward *uke’s* head. *Tori* drives the palm down and toward *uke’s* head, allowing the elbow to fall smartly against *uke’s* body.

6.5 *Hen naoshimatsu.* If the person is choking on a fishbone, part of the fish (traditionally the backbone) is placed on the person’s head. The person is then told not let the (backbone) fall off. Psychologically, their attention is directed away from the restricted throat muscles, allowing them to relax and swallow. **NOT RECOMMENDED! Included for historical purposes only!**

6.6 *Suishi katsu* or reviving a drowned person.

**NOTE:** If you are not sure a victim’s condition, insert a finger into the anus. If there is no muscular contraction, it can be taken that the person is beyond human aid.

6.6.1 **Suisei katsu.** *Uke* is prone and *uke’s* head is resting on *uke’s* hands, which are folded beneath his or her head. *Tori* kneels at *uke’s* head, placing the palms at the highest point of *uke’s* back on either side of the spine. *Tori* rocks forward, pushing down hard, then grasps *uke’s* elbows, lifting and rocking back. *Tori* replaces *uke’s* elbows on the mat and repeats the sequence.

6.6.2 **Dekishi katsu.** Again, *uke* is lying prone with the head on the hands. *Tori* kneels across *uke* as for *jinzo katsu* and reaches under *uke’s* arms. *Tori* grasps both of *uke’s* wrists (or shoulders or pectoral muscles) and pulls forward, arching *uke’s* back. *Tori* then lowers *uke* gently, placing the palms below *uke’s* rib cage on both sides of the spine. *Tori* pushes downward toward *uke’s* head, continuing the cycle until *uke* shows signs of life.

6.6.3 **Jinzo katsu.** *Uke* is prone with the back uncovered. *Tori* kneels across *uke’s* body, facing in the same direction as *uke*. *Tori* places the palms over *uke’s* kidneys with the fingers to the outside. *Tori* slides the fingers outward then upward then outward again. This is continued until breathing is restored.

6.6.4 **Suigetsu shiatsu** or massage of the solar plexus. Also, known as *kokoro shiatsu* (massage of the heart), as it is named for the area massaged. This stimulates the diaphragm when a person’s respiration has gradually weakened; s/he may be dying. You massage the solar plexus from the bottom up, then massage the heart area with both hands. This is also good for shock, drowning or a bad blow.

6.6.5 **So katsu** or composite resuscitation.

- **So katsu Ikkyo, mune oshi katsu or deguchi katsu.** With *uke* on his or her back, *tori* faces *uke’s* head while kneeling across *uke’s* waist. *Uke’s* head should be turned to the right side. *Tori* places the palms on the lower part of *uke’s* rib cage, pressing firmly down and toward *uke’s* head. *Tori* relaxes and repeats the cycle. A variation known as *suikatsu tosuiho* may be done with one or two persons. First, *uke’s* mouth and nose are cleared of any mucus or obstacles that may prevent breathing. A cushion or pillow (rolled up coat) should be placed beneath the middle of *uke’s* back to raise it. If alone, *tori* may push against *uke’s* stomach for about two seconds and gradually release the pressure. If there are two persons, the first should tilt *uke’s* head upward as the second person pushes against the stomach with the palms. This should cause expulsion of water that *uke* may have swallowed. Once this is accomplished, continue with *haikatsu kyukiho*. 
• **So katsu Nikyo** or **katate so katsu.** Tori kneels on the right knee while supporting uke with the left arm. Tori’s right hand is placed on uke’s lower abdomen and pressed in and upward.

• **So katsu Sankyo.** Uke is brought across uke’s raised right knee, stomach facing downward. Tori pushes downward on uke’s upper back (soda), forcing uke’s stomach downward onto tori’s knee.

• **So katsu Yonkyo** or **ninin so katsu.** A second person bends at the waist as though to touch the toes. Uke is on the second person’s back with uke’s stomach supported by the second person’s raised buttocks. The first person’s right hand steadies uke’s waist as the left pressed own against uke’s back.

• **So katsu Gokyo.** As for Yonkyo but the second person is on the hands and knees with uke placed across this person’s back from right to left – that is at right angles to the second person.

6.6.5 **Sekizui shiatsu.** With uke on his or her stomach, tori used the palm heel to massage from the seventh vertebrae to the nape of uke’s neck. Tori’s hand moves in circles.

6.7 **Sekotsu** or setting broken bones and dislocations. Also known as **seikatsu,** or bone-setting methods.

• Grip the joint nearest the injury (wrist if the forearm is injured). If even the slightest motion causes pain, the joint is probably broken.

• Put it in splints.

• If the finger is dislocated, twist the finger slightly inward and pull gradually, then stabilize and chill it with an ice pack (hyo). A person with a broken bone is usually kept in splints for up to six weeks.

• If the shoulder is separated or dislocated: 1) Place the injured arm across uke’s chest and push towards the opposite side of uke’s body; 2) Tori grips uke’s (right) arm at the wrist with both hands (as for innomatsu) and places the right sole of the foot on uke’s right thigh. Tori then pulls upward at an angle.

6.8 **Shiatsu** or finger pressure techniques. This includes **kempeki** or massage. Today, massage is known as **amma.**

6.8.1 **Atama shiatsu** or relieving discomforts in the head and eyes.

6.8.1.1 **Hanaji tome** or **hana katsu;** stopping a nosebleed.

6.8.1.1.1 **Yubi osae** or finger pressure.

• **Yubi osae Ikkyo.** Tori kneels at the left side of uke’s body, placing the left thumb against uke’s left nostril and the left index finger against uke’s right nostril, just above the flare of the nose. Tori presses in with the left thumb and finger as the right thumb and index finger lift the “short hairs” at the nape of the neck (keichu). This should stimulate, but not hurt, uke.

• **Yubi osae Sankyo.** If uke is bleeding from the right nostril, tori places the back of the left hand under uke’s chin and against uke’s throat. Tori separates the index finger from the other fingers and places it against uke’s right nostril. Tori has uke “hum” until the sound becomes nasal.

6.8.1.1.2 **Ashi katsu.** Tori slaps the bottom of uke’s foot with his fingers or tegatana as described in okoshi katsu.
6.8.1.1.3 **Suriage katsu.** Tori holds the nape of *uke*’s neck with the left hand and slaps *uke*’s forehead with the right palm-heel. Tori lightly strikes a glancing blow upward.

6.8.1.1.4 **Yoko kami** or *yoko kami*. Tori pulls up on the “short hairs” of *uke*’s sideburns.

**NOTE:** The preceding six techniques are all for a nosebleed. The next seven are for relieving headaches. The last two are for eyestrain.

6.8.1.2 **Zutsu shiatsu** or *totsu shiatsu*; finger pressure for relieving headaches. It should be noted that “finger pressure” is used generically. There are methods that use other than the fingers. However, as *shiatsu* was the most common method the classification has been fixed, though not literally correct.

6.8.1.2.1 **Zu katsu, no kappo** or *komekami oshi*. Tori or *uke* places the palms on the temples and slowly increases pressure. If done by *tori*, *uke* signals when the pressure is too great, and *tori* slowly releases the pressure. This is repeated three times. Though *uke* may use this method, the tendency is to stop before the pressure is strong enough to alleviate the pain. Consequently, it is better to have a second person perform *kappo* whenever possible.

6.8.1.2.2 **Mimi oshi.** This is the same for *komekami oshi* but with the fingers spread over the ears. If the hand and fingers are “cupped” a vacuum will be created, and can damage the eardrums.

6.8.1.2.3 **Zengo oshi.** The heel of one palm is place where the spine meets the skull (*keichu*) and the second is placed between the eyes (*miken*). Pressure is applied as for *komekami oshi* and *mimi oshi*.

6.8.1.2.4 **Hiza jime katsu** or resuscitation using the knee.

- **Hiza jime katsu Ikkyo** or *hiza oshimasu*. With *uke* lying on the back, *tori* kneels at *uke*’s head. *Uke*’s head is between *tori*’s knees, which touch *uke*’s shoulders. Pressure is applied with the knees as for *komekami oshi*.

- **Hiza jime katsu Nikyo.** This is the same as for the preceding but *tori* uses the fingers to help push the knees in and control the pressure

6.8.1.2.5 **Komekami shiatsu, komekami katsu** or *ishi katsu*. With *uke* on the stomach, *tori* massages *uke*’s temples with the palms.

6.8.1.2.6 **Yubi shiatsu Ikkyo** or *atama ni katsu*. With *uke* on the back, *tori* lightly places the palms on *uke*’s temples and the fingers on the sides of *uke*’s neck. *Tori* massages in circles.

6.8.1.2.7 **Uchi jowan shime.** For migraine headaches, place the fingers inside the arm, pressing on the artery for one minute. This will relieve the migraine. The pressure is the same as for stopping blood flow in first aid.

6.8.1.2.8 **Gokoku shiatsu** or massage of the *gokoku* point. This is the webbing between the thumb and first finger. *Tori*’s thumb is placed on the top of the hand and his or her first finger on the palm side of the hand. Long, strong pressure is exerted. The author has found this excellent for headaches, pressing until *uke* feels pain, then releasing, for a total of three times. This is also recommended for fainting, stopping of the heart, and a hangover.

6.8.1.2.9 **Meyami shiatsu** or relieving eyestrain with massage.
6.8.1.2.10 **Yubi shiatsu Nikyo or me oshimasu.** With *uke* on the back, *tori* kneels at *uke*’s head, both thumbs at the top of *uke*’s nose. *Tori* slides the thumbs along the top of *uke*’s eyebrows, over the ears and down the back of the neck. *Tori* then gently rubs the eyelids with the fingertips. **BE SURE CONTACTS ARE REMOVED!**

6.8.1.2.11 **Teishoatsu or me katsu.** *Uke* rubs his or her own eyes with the heels of the hands, moving in slow circles.

6.8.1.3 **Jinzo shiatsu** or relieving discomforts in the kidneys.

6.8.1.3.1 **Jinzo katsu.** *Uke* is prone with the back uncovered. *Tori* kneels across *uke*’s body, facing in the same direction. *Tori* places the palms over *uke*’s kidneys with the fingers to the outside. *Tori* slides his or her fingers outward then upward then outward again. This is continued until discomfort is relieved.

6.8.1.3.2 **Hiki koshi katsu or ura katsu.** *Uke*’s and *tori*’s positions are as for *jinzo katsu*, with *tori* kneeling on the right knee. *Tori* lifts *uke*’s hips, then gently lowers *uke* and firmly pushes the palms over *uke*’s kidneys.

6.8.1.3.3 **Itsu shiatsu** or relieving discomforts in the stomach.

6.8.1.3.3.1 **To ho shiatsu or mukatsuku kimasu.** *Tori* places the thumb and index finger on either side of *uke*’s larynx. *Tori* should feel the pulse of *uke*’s carotid artery. Massage is done with slow, large circles. *Tori* then has *uke* lie prone and applies *shiatsu* with the thumbs between the 7th and 8th, then the 10th and 11th, thoracic vertebrae.

6.8.1.3.3.2 **Sasoi katsu** or inductive resuscitation.
- **Sasoi katsu Ikkyo.** *Tori* places the index finger down *uke*’s throat (or his or her own throat) to cause regurgitation.
- **Sasoi katsu Nikyo.** *Tori* may press the fingers into *uke*’s (or his, or her own) hollow of the throat.

6.8.1.3.4 **Kyuyo** or general relaxation.

6.8.1.3.4.1 **Nakadakaatsu or ashi oshimasu.** *Uke* is prone with *tori* kneeling across *uke*’s thighs and facing *uke*’s feet. *Tori* picks up *uke*’s left foot with the left hand and twists the knuckles of the right fist back and forth into the bottom of *uke*’s foot just below the ball of the foot.

6.8.1.3.4.2 **Ashiatsu.** *Uke* is prone with the toes turned inward as for *uchi hachiji*. The heels are turned outward. *Tori* stands with the toes on *uke*’s toes and his or her weight on the heels. *Tori* pulls his or her body weight up the bottom of *uke*’s feet using his or her own toes. *Tori* moves from *uke*’s toes to *uke*’s heels.

6.8.1.3.4.3 **Sukui tegatana.** With *uke* on the stomach, *tori* kneels at *uke*’s feet. Using *tegatana*, *tori* slowly moves up the bottom of *uke*’s feet with small scooping motions. *Tori* begins with the hand horizontal and continues from the toes to the heels.

6.8.1.3.4.4 **Kuchi dori katsu** or lip “pinch” resuscitation.
- **Kuchi dori katsu Ikkyo or kokyu katsu.** This may be done for you or for another person. Sit – or have them sit – in *anza* or in *agura wo kamae*. Inhale deeply and hold the breath. Pinch the upper lip just below the nose until it hurts. Release the pinch and breathe deeply. **NOTE:** You or *uke* may feel faint upon exhalation!
• **Kuchi dori katsu Nikyō.** For cramps in the feet or legs, pinch the upper lip as in *Ikkyo* and pull forward **slightly**. This will stop the cramps.

6.8.1.3.5 **Sokatsu Seigyohō.** This is resuscitation for a person who has been hanged. It can be performed alone but it is much safer when two persons are present. To release the person, place a support beneath the feet of the victim and lift beneath the armpits from behind. If present, the second person should cut the rope, taking care the neck does not move suddenly. If the person has been hanging a short time (if known), *kin kappatsu shinpo* should be attempted. If for a long period of time, *sokatsu kikaihō* should be used.

6.8.1.3.6 **Seiho** is a form of massage, which stimulates the flow of energy through the body to improve health.

6.8.1.3.7 **Amma, tai shiatsu or suru katsu.** Massaging *uke*’s whole body to treat for shock and hypothermia.

6.8.1.3.8 **Kempeki** – massage.

6.8.1.3.9 **Seitaihō** or curing heart ailments by body arrangement methods.

6.8.1.3.10 **Jisatsu katsu** or treating for suicidal depression. Use *nodo katsu*. With *uke* sitting, *tori* stands behind *uke* with the left hand around *uke*’s head and on *uke*’s forehead. *Tori*’s right thumb and forefinger are on either side of *uke*’s trachea above the larynx. *Tori* pinches firmly and pulls the hand down *uke*’s throat to *uke*’s collarbone. This *katsu* is based on displacement of irritation or anger.

**Shinden Tokatsujunbihō.** This *kappō* is self-administered and is intended to protect one from injury. It also helps in concentrating the spirit and ridding the mind of fear. *Tori* sits in *zazen* with the toes overlapping. Hands are placed at the side, back straight as one breathes deeply. The breath is held for a while and with exhalation, chant the following (*jumon*) nine words: *Rin-Hei-To-Sha-Kai-Jin-Retsu-Zai-Zen*.

As you chant each word, focus *ki* (energy) into the *seika tanden* (lower abdomen) for one second. Relax for one second before chanting the next syllable. Perform this technique nine times. Repeat the process for the legs, fists and chest as you focus *ki* into the abdomen.

When you have finished, place a pinch of salt on the tongue. The protective power will last for four hours. This is a form of *kotodama* (martial arts chant) and is considered a highly advanced method of spiritual fortification.

Any or all of this information may be copied for students if desired. All that’s asked is that acknowledgment of authorship be given.