The Sacred Art of Fisting

By Larry R. Shockey

Practical tips & considerations for men who engage in anal fisting
On St. Valentine’s Day 2004, my colon was ruptured during a fisting scene. The injury and resulting four surgeries resulted in 30 days hospitalization over the course of the next eighteen months, and over $300,000 in medical bills which, thankfully, were covered by insurance. What insurance did not cover was the loss of income and the emotional devastation which resulted.

During my recovery, I realized that I was not alone. There were many others out there who either were, had been, could or would be in my shoes for the same reasons. I was determined to regain my health and to get back to enjoying my beloved activity, but with a new set of eyes and a deeper understanding of the risks, as well as of the safety precautions which could be followed.

Not wanting others to follow my footsteps, I began teaching, giving programs on safer fisting techniques, including a section on fisting-under-the-influence. Because there was so much material to cover, I developed a handout which started out as front and back of a single page. That handout has developed into this booklet. Although geared toward the curious or novice fister, I believe there is something in these pages for everyone.

Much gratitude is due all those who have encouraged and supported these efforts—those who cared for me when I was recovering from my injuries, all of the men who attend the parties, who come to the programs, or read these pages. But none of this could be possible without the loving support of my partner, Loy, who is always there beside (and sometimes behind) me. I am also very grateful to my fisting mentor who, through much patience, escorted me into the world of fisting play many years ago. Since that exquisite evening, in addition to the many skilled tops and bottoms I have played with, I have been privileged to play with many novice tops and bottoms, educating them on the skills necessary to accomplish a successful scene.

– Larry Shockey
San Francisco, February 2009

This booklet has been printed through a generous grant from STOP AIDS Project
www.stopaids.org
# The Sacred Art of Fisting

## Table of Contents

### Getting Started
- Is Fisting Safe? ................................................................. 2
- Anatomy of the Colon .................................................... 3
- Supplies ........................................................................... 4
- Choosing Your Lube ......................................................... 5
- To Glove or Not to Glove .................................................... 5

### Preparing for Play
- Your Diet ........................................................................ 7
- Cleaning Out ..................................................................... 7
- Creating Head Space: The Body-Mind Connection .......... 8
- Headspace During Play ...................................................... 9

### During the Scene .......................................................... 9
- Hands Off Your Dick, Mister! .......................................... 10
- Know Before You Go ...................................................... 10
- Seeing Red ....................................................................... 11
- Go Slowly .......................................................................... 11

### Concluding the Scene and Aftercare ............................. 12

### Disinfecting Your Play Space: Coming Clean ............... 12
- Soft Surfaces ................................................................... 12
- “Hard” Surfaces ............................................................... 13

### A Few Words about “Enhancements” .............................. 14

### What You Should Know about HIV, Hepatitis, MRSA and Syphilis
- HIV ................................................................................. 15
- Hepatitis A, B, and C ...................................................... 16
- MRSA ............................................................................... 17
- Syphilis ........................................................................... 18

### Resources: ........................................................................ 20

---

**Disclaimer**

This booklet was prepared in its entirety by the author as a teaching aid for those wishing to learn more about the art of fisting, including risk and safety issues as well as practical tips, precautions and advice. For this handout, he has drawn on his years of experience in fisting as well as the resources referenced at the end of this booklet. There are many schools of thought when it comes to fisting. The viewpoint presented in this booklet is but one of them. The reader is encouraged not to rely solely on this booklet if he is venturing into fisting for the first time. The foregoing should not be considered to be medical advice. Before engaging in any risky sexual behavior, he recommends that you consult your physician about potential health risks, precautions, and preventative measures.

To request permission for reprints of this booklet, please contact Larry R. Shockey at: info@handballheaven.com.
Is fisting safe?

First off, any sexual activity carries a risk of transmission of HIV and STDS. However, fisting is, in my opinion, one of the safest forms of sex—if you follow proper guidelines. The colon is lined with millions of tiny capillaries, which are extremely close to the surface of the intestine. They are extremely susceptible to bleeding during play. Overly rambunctious play, sharp fingernails or an inexperienced top can and do increase the likelihood of bleeding.

Once the colon wall is ruptured, fecal matter (and it doesn’t matter how well you’ve cleaned out) gets dumped into the abdominal cavity resulting in the beginning of what will become a fatal infection if not treated quickly. Should this happen, get to the nearest emergency room as soon as possible—at least within a couple of hours. A simple x-ray will either confirm or rule out a tear in your colon.

Symptoms of a rupture (meaning a hole in your colon and not just a scratch on the surface) include: upset stomach or queasiness, cold sweat, clamminess, an extended abdomen (similar to bloating) and light-headedness or feeling faint. You might expect to see signs of rectal bleeding, but that doesn’t always happen and the absence of that should not put your mind at ease.

The initial surgery involves dissecting the colon to bypass the rupture to allow it to heal. This means that you’ll be wearing a colostomy bag for about 11 weeks. After that, you’ll return to the hospital for a second surgery during which the doctor will reconnect the colon and remove the colostomy bag. So be careful!

There is a risk of hepatitis A, B and C infection, as well as for HIV and syphilis. For a discussion on transmission and prevention see the information at the end of this booklet.
When you eat, food travels down into your stomach where the absorption process begins. It then travels through your small intestine, and into the large intestine, first into the ascending colon (on the right side), up into the transverse colon (which runs along the top), down into the descending colon (on the left side), and finally into the Sigmoid colon. The Sigmoid colon then holds bile until there’s enough to push it into the rectum, and we have a bowel movement.

Going the other direction (which is what we’re all about here), first you find the sphincter. This is an elastic muscle, which expands to allow us to have a bowel movement. It also expands to accommodate a dick or a toy or a hand. The first cavity we encounter is the rectum, which varies in size from person to person. The next opening, fingers call the “second sphincter.” It is not really a sphincter at all (according to my surgeon). Rather, it is a rigid muscular opening, which leads to the Sigmoid colon. Unlike the sphincter at the rectum, this rigid muscle doesn’t give easily and must be coaxed into relaxing. It’s why a really big dick or a toy may be difficult to take as deeply as we’d like.
**Supplies:**

- Nail clippers
- Gloves
- Emery boards
- Paper towels
- Disposable tubs for lube
- Newspapers/floor covering
- Hand sanitizer
- Masking Tape
- Trash bags
- Permanent Marker
- Dawn Dishwashing Liquid
- Simple Green cleaner
- Bleach 10% solution

*What’s All This Stuff For?* Nail clippers and emery boards are for trimming nails. Paper towels for wiping hands and butts and generally cleaning up messes. Newspapers or some sort of pads are used to protect the flooring and to help prevent slipping. Soapless hand sanitizer is used with or without gloves to further clean hands and arms. Trash bags, because you’ll make lots of trash. Dawn for cleaning your body and Simple Green for cleaning up other surfaces.

Disposable tubs, masking tape and permanent markers?? Probably some of the most important supplies you can have on hand. Why? Because you NEVER share lube. Let’s say you are using Crisco and you’ve bought the standard size can for your little party so everyone will have plenty of lube. NOTHING but a clean spoon should ever go into that can and nothing should touch the spoon other than the Crisco or a clean paper towel. The spoon dips into the Crisco can and dispenses lube into the individual disposable tubs. Put a strip of masking tape on the tub and use the marker to write your name on it. That’s YOUR lube—the lube that others will dip into to use on you, not for you to use on other people. Using the same disposable tub of lube to grease up several other people results in cross-contamination, which is something you want to avoid. If you run out of lube, get a clean tub to dispense it into.

*Where To Fist.* A sling is the most common platform for fisting, but let’s face it, not everyone has one, and there aren’t a lot of sex clubs anymore where it’s really conducive to fist. So what to do if you don’t have a sling? Where can you fist? A rope or a leather strap attached to ankle restraints and run under the bottom’s shoulders works equally as well. As far as positions go, use your imagination.

Just remember that if you’re going to be in your living room, you need to cover the carpet, your couch, chairs, etc with plastic to prevent lube from getting on them or you’ll be living with the stains and the smell for a long, long time. Same thing goes for your bed.
Choosing your lube.

What kind of lube, or mixtures of different lubes, is a matter of personal preference. You’ll decide what works best for you after experimentation. Personally, I like a blend of Safeway brand shortening and J-Lube or J-Pax, but the Elbow Grease with Cloves is nice too.

- **Slam Dunk.** A great choice. Comes in scented and unscented and linens clean up easily using mild soap and warm water.
- **Shaft.** A relatively new product from Mr. S Leather. It’s odorless, is water soluble (meaning easy cleanups) and it’s very slippery. I’ve used it and like it, and I’ve heard good reports from others.
- **Crisco.** Comes in cans and in single serving, foil wrapped bars. (If you don’t mind smelling like you’ve been baking cookies all day.)
- **Grocery store brand shortening.** Just as slick as Crisco without having to smell like a bakery.
- **Elbow Grease (Plain or with Clove Oil)**  
- **J-Lube.** Can be a little messy and is a definite slipping hazard if it gets onto a solid flooring surface such as finished concrete, tile, or wood. BE CAREFUL. For J-Lube recipes, see the Resources section.

**Mixing tip:** Get one of those protein drink shakers from your vitamin store. They have a grate in the lid that facilitates mixing the J-Lube and water!

- **J Pax.** Yup the veterinarians are up to it again! Much like J-Lube, but comes with a bottle that’s just the right size and little single serving packets. Just empty the packet or packets to desired consistency, into the bottle, fill it with water and shake it until all the powder has dissolved. My only criticism is that the bottle could be just a little bigger to facilitate mixing the powder. The same use precautions for J-Lube apply. It’s slick!

To glove or not to glove?

From a strictly safer sex standpoint, you should always wear gloves when you top, and you should insist that your top wear gloves. From a harm prevention standpoint, here are some tips and pointers, as some prefer to fist or be fisted without gloves.

If you are not going to use gloves, tops should make certain that: 1) fingernails are clipped and filed almost to the point of non-existence. You can tell if your nails are short and smooth enough by running your tongue over them. If you feel sharp edges, get back to the emery board; and,
2) Make sure that the skin on your hands, fingers and forearms is completely intact. If you have a recent scratch, cut, or even a hangnail, you should wear gloves. Unbroken skin is a barrier to HIV and Hepatitis. Any breaks in the skin make the risk of transmission much higher. To check for cuts, thoroughly “wash” all pertinent areas of your hands and arms with hand sanitizer (not soap). There is enough alcohol in the sanitizer that if you have a cut, you’ll know it. Glove up.

The following kinds of gloves are available at any Walgreens or Rite Aid or other drug store as well as those warehouse discount stores. To find “opera” length, you’ll have to go to a specialty store.

- **Nitrile.** Two thumbs up. They have become readily available in recent months. They used to be an atrocious color, and one-size-fits-all, but can now be found in ivory and black in small, medium and large. They fit very snugly and don’t tend to roll, wrinkle or bunch like latex. Also there is much more tactile feeling with them.
- **Latex.** Readily available. Come in three sizes: small, medium and large. Good idea to have one of each available.
- **Vinyl.** I’ve used them a few times. Don’t like them, but will work in a pinch.

**REMEMBER:** The reason you are using gloves is to protect both the bottom and the top from harm. Your hands (or your gloved hands) are only as clean and sanitary as the last thing they have touched. The last thing you should do before touching a bottom’s butt is to sanitize your hands and to put on gloves. I’ve seen lots of tops glove up, put the bottom’s feet into the stirrups, adjust the chains, arrange the papers on the floor, and then reach for the lube. NO! NO! NO! I’ve even had tops drop a glove on the floor and bend down to retrieve it to put it on. NO! Gloves are cheap. It’s easy to forget. Just throw away the contaminated glove and get a clean one.
Preparing for Play

Your Diet.

Eat very lightly the day before. Vegetables move through your system in about 12 - 18 hours. Meat takes about 24 hours. This is what you’re going to be dealing with on play day. The day of, consider skipping breakfast. Have a light lunch consisting of mostly proteins. For dinner have some carbohydrates such as pasta or rice, as you’ll need some energy to get you through the evening. Have some munchies, including yogurt to replace digestive microbes, for after-play relaxation with your buddies. It’s a great way to relax and debrief.

Cleaning Out.

This is very important, and something that bottoms many times overly stress out about. While it’s good to be clean, don’t overdo it. This should be a slow, gentle process, so allow plenty of time. Don’t wait until the last minute or you may feel rushed and be unable to relax enough to do a good, thorough job. If you are just getting into fisting, allow at least 3 hours–2 hours to clean and one hour to rest. As you become more experienced, your prep time should decrease.

Your goal should never be to get out the last bit of fecal matter because you won’t be able to, and besides, you don’t need to. Most of us only need to clean so far as the sigmoid or descending colon. The “to the shoulder” guys have more work to do.

When you clean, the water should be between 98.6F and 100F. Any colder and your colon may tense up and any warmer could cause injury. Of the devices listed below, I prefer the shower shot. They attach easily to any showerhead. Once you’ve adjusted the temperature, set the flow so that, with the nozzle pointed toward the ceiling, the stream is no higher than the width of the palm of your hand. People have actually ruptured their colon by setting the water stream too strong. You are not steam cleaning a sidewalk. Take it easy.

Shower Shot ($40) 🌊 Turkey Baster ($5 or $6) 🌊 Enema bottles (Fleet) ($3) 🌊 Hot water bottle with hose ($15 - $25)
Creating Head Space: The Body-Mind Connection

Try to have as relaxing a day as possible. If you can’t spend the day chilling by the pool with an umbrella drink, then make sure you set aside plenty of time prior to play to relax. That means quiet time, not time folding your laundry, setting up your play space, selecting music or videos, cooking, or cleaning. I mean spend some time contemplating your navel.

A happy, quiet, relaxed mind translates into a happy, relaxed, calm colon. When you’re tense, so is your colon. It’s more difficult and takes longer to clean out. And guess what? When your colon is tense, it takes longer to relax your sphincter, your body is less receptive, and it can lead to frustration, which leads to more tension. A vicious cycle.

I have jokingly told novice fisters, “Where you mind goes, your butt hole will follow.” But it’s true. In a perfect world, I’ll have a nice, quiet relaxing day. Realistically, though, I know that can’t always be the case. Life happens. I like to have at least 30 minutes of quiet time before I head off to the shower. I’ll try to clear out my mind of all the tensions and worries that I might have been thinking about. I try to sit quietly, and yeah, “center” myself. I know it sounds very California new age, eat-your-sprouts mumbo-jumbo, but it’s important, and more importantly, IT WORKS.

I also like to spend as much time in a “contemplative” mode as possible—at least an hour—between cleanup and the time company arrives. This serves two purposes. First, it helps me relax. Second, I have time to find out if I need to return to the shower for a touch up before play. You see, as I relax my mind, and my body relaxes, so does my colon, and that last little bit of retained water gets released.

When my company arrives, we don’t (usually) rush to the playroom and get down to business. We’ll sit and talk, have a glass of wine, exchange pleasanntries, and catch up on each other’s lives since we played the last time. This also serves two purposes. We get our chitchat out of the way and get to spend a little quality time together. Second, he gets a chance to let his motor idle a bit, relax and re-focus his thoughts from “getting there” to play.
Headspace during play

**Turning off the tapes.** We all have them. Even veteran fisters. What are they? They’re the stumbling blocks to a great scene. They are the “What if?” messages our mind dwells on: “What if I’m not clean?” “What if I can’t relax?” “What if he can’t get in easily?” “Will it hurt?” “Will he want to play with me again?” “What if he doesn’t respect my limits?”

Turning off these tapes requires you to overcome your own fears about fisting. It also helps if you **trust** your play partner. Where there is trust, it is much easier to overcome your fears and turn off your tapes. To some extent, trust becomes easier the more confident you are in your own abilities. Trust comes with experience, but it must also be earned on a partner-by-partner basis. I never fall into the sling with someone on a moment’s notice. Sometimes (usually) I’ll correspond with someone for a couple of weeks before playing, and always, **always** there’s 30 - 60 minutes of conversation in the living room with new partners just before play just to make sure we’re all on the same page.

**During The Scene**

For a fisting scene to be ultimately successful both parties must communicate openly and honestly—and they must listen to each other. Guys get into trouble when they don’t listen to their gut and continue with a scene when they’re not feeling entirely comfortable with what is happening or how their body is feeling. Unusual sensations that are not pleasurable can be a cause for concern. There is absolutely nothing wrong with calling for a timeout, or even entirely stopping a scene if you’re not comfortable. A top can also (and should) call a scene to a halt if he feels it is in the bottom’s best interests or if he is uncomfortable with continuing. Tops have the best view. Tops know if the bottom needs to take a quick rinse, or if there is any blood involved.

This is not Broadway. There is no rule in fisting that “The show must go on.” Neither party should allow a scene to continue if he is not comfortable with it. A few years ago, a friend gave a fisting presentation to a leather group with another friend as a co-presenter. The presentation concluded with a brief demo during which my friend climbed into the sling. As he was sometimes prone to do, he invited a few novice tops to experience what it was like to fist someone. One guy had **enormous** hands. Shortly after he started, my friend was really
uncomfortable, but was determined to conclude the scene, and although he ultimately took the guy’s hand, my friend’s butt was sore for a week. Know your limits, but more importantly, know that it is absolutely okay to say, “I’m sorry. No.”

**Hands Off Your Dick, Mister!**

How many times have you seen a top with one hand inside someone while simultaneously stroking his own dick with the other hand? What generally happens next? The top switches hands and all those lovely dick juices, mixed with lube covering the top’s gloved hand get shoveled into the bottom’s ass. It also means that those juices go into the bottom’s lube, which can spread them to other tops, especially if those tops prefer not to wear gloves. Please don’t do this. I know many bottoms who insist their tops cover their dicks during play to prevent this from happening.

Remember, the idea in safer play is to protect each other. While the glove protects the wearer of the glove; whatever is on the outside of the glove goes up the bottom’s ass. Cross-contamination is something we want to avoid at all costs.

**Know Before You Go.**

Some bottoms like to have their holes teased for a long time, enjoying the sensuous pleasures associated with slowly expanding their sphincters. Others like to go faster, enjoying the sensation of having a hand inserted fairly quickly. You should discuss this before you start. Those who like it slow and easy will feel raped if you go too quickly and those who like more assertive play may become bored. If your bottom asks you to “Go slowly”, or says to you, “Just put it in!” listen to him!

Likewise, some guys like to be punch fisted (the “rapid” withdrawal of the hand followed by quickly putting it back in. This can be accomplished with one or both hands, i.e., pulling out the right hand, then inserting the left, and so on, or for really talented bottoms, using both hands at the same time.) Some can take it to the shoulder and some only to the wrist. We are all built differently and derive our pleasure in different ways. There is no good or bad, right or wrong as it depends on the needs and desires of both parties. Bottoms should never apologize because they can only take a hand to the wrist, or feel like they are less experienced than someone who can take it to the elbow. Just remember how many people can’t take a hand at all! If you can take an entire fist up your butt, you’re an accomplished fistee!
Seeing RED.

As mentioned previously, capillaries are very close to the surface of the colon and the presence of blood is always a concern. If a top withdraws his hand and finds that it is a light pink in color, he should pause the scene and allow the bottom to rest—usually for about 20 minutes—regardless of whether the bottom encourages him to continue or tells him, “Don’t worry. I’m always a little pink in the beginning.” This will give the capillaries time to heal, as they repair themselves very quickly. Sometimes the bottom will want to rinse with cool water (inside).

If the top sees spots of blood that are bright red, or if there is a lot of blood, he should immediately halt the scene, politely tell the bottom that he’s finished for the evening, and not resume. Bottoms sometimes insist that they are okay and that you can continue. Use your best judgment. You don’t want a serious injury on your shoulders, if you could have prevented it. Just explain that you’re not comfortable continuing and you feel it is in his best interest to stop. Then stand by your decision. After a substantial amount of time goes by (60 - 90 minutes) you might try again, but if you see even pinkness, I would stop and go no further.

Go SLOWLY.

Remember that fisting is a game of millimeters. Even the slightest turn of your hand can result in significant stimulation for the bottom. GO SLOWLY, especially at first. Allow the bottom and his colon to get used to your hand. Take time to allow your hand to gently explore the terrain. Locate his second sphincter. Gently probe and prod. If you are going to turn your hand, tell him before you do it.

Surprises are no fun! An experienced bottom knows how he is built inside, how best to position your hand for entry and which way his colon turns. He also knows if he needs toys to help open him up or if he likes to start with long teasing fingering in the beginning. Ask him.

If you are asked to pull your hand out . . . do it slowly. We’re not trying to start a lawn mower here. These are very intense feelings.

Be respectful and keep your communication going. This is a very intimate act.
**Concluding Your Scene and Aftercare**

Don’t immediately pluck the bottom out of the sling when his turn is over. He may have just cum or perhaps even experienced a body orgasm. Most likely his endorphins will be spinning out of control. Let him gather himself together physically, mentally and emotionally. You can use this time to take care of some of your duties.

Talk to your bottom. Ask him how he’s doing. It is also your duty to make sure his butt is clean. Wipe off the excess lube. Put extra papers on the floor under the sling, so when he does climb down, he won’t bust his ass (or worse) from slipping on a big glob of Crisco or whatever.

Assist him out of the sling by standing in front of him and grabbing one of the chains in each hand. Bend forward. Allow him to hold onto you as he slides out and puts his feet securely on the floor. Hug him and hold him close for a few seconds until you are certain that he has his balance. It is not uncommon for the bottom to be a little lightheaded when he gets up. You don’t want him to faint and hurt himself. A trip to the emergency room will put a real damper on your evening—believe me.

**Disinfecting Your Play Space—Coming Clean**

In the paragraphs below, I’m going to discuss many of the mean nasties you need to be concerned about—not just in a fisting scene, but in any edgy scene where there is a possible exposure to blood. In those paragraphs, I’ll talk at some length about prevention, safer sex practices and risk reduction during play. In this section, I’ll discuss overall cleanliness of the play space, and proper techniques for cleaning and disinfecting your play platforms (i.e., slings, benches, mats, linens and other surfaces) as well as your chains and toys.

**Soft Surfaces.**

Let’s face it, not everyone has a sling or a playroom. Lots of guys fist on their beds. Here are some simple steps you can follow to help minimize the risk of contamination.

Buy a cheap set of white bed linens you can use for play. Buy a sheet of plastic that is large enough to completely drape your mattress.
Don’t tuck it in, but tie it (or use gaffer’s or painter’s tape to attach it—duct tape can pull off finishes) to the legs of your bed. It is important that the plastic sheet not have any seams in it. Seams can leak fluids onto your mattress—exactly what we’re trying to prevent.

Put your cloth play sheets over the plastic sheet. Tie or tape in place. Cover your pillows in drawstring trash bags and cover them with those inexpensive pillowcases so that the closure of the trash bag is at the bottom of the pillowcase. You can even double bag pillows if you want. If you are going to play in your living room, all of the above applies. Cover all your furniture and your carpet in plastic sheets with a cloth sheet overlay. You’d be amazed at the places lube can get into.

If you see blood on the sheets, remove them from the bed. If a clothes washer is not immediately available, put them in a trash bag until you can get to the laundry. You can use towels, or if necessary, stop the scene. If you have a washer/dryer immediately available, dump all your play sheets in the wash right after play and add a generous amount of chlorine bleach (like Clorox) into the wash. If you’ve used Crisco or another brand of shortening, there will be a residual smell. There are lots of recipes for removing the stains and smell, so I’ll leave you to the links at the end of this brochure to find the one that suits you best. (If you are using dedicated play sheets, this is not usually as big an issue.)

**NOTE:** It is *always* a good idea to wear gloves when handling soiled play sheets, equipment and toys, or when emptying the trash!

The plastic sheets can be sprayed down with either a 10% solution of bleach and water (10% bleach) or with a four-way quarternary disinfectant that’ll kill HIV, Hepatitis, MRSA and just about everything else. See the link to KinkyMedical.net in the resources section.

**“Hard” Surfaces.**

Ahem. I’m talking about slings, benches, tables and the like. These are generally much easier to clean since they are not porous or as porous as sheets. As far as disinfecting goes, I use the four-way quarternary disinfectant from Kinky Medical. It is safe, very effective, and it has no odor (unlike the bleach solution). I keep a quart spray bottle in the playroom and spray down all surfaces before and after use—even in between uses during a night of play. At my play parties, there’s a spray bottle at every play station.
Toys (dildos and other inserted non-electrical or battery operated objects that are to be reused) can be soaked in the same solution. I usually soak mine overnight, but the directions on the bottle say 10 minutes is sufficient. Be your own judge.

For de-greasing, I like Simple Green. You can buy it as a concentrate and dilute it to your own liking. It seems to be nice to leather slings and to other surfaces, while doing a great job in removing grease. Chains can be removed and soaked in a bucket of warm water containing a combination of Dawn dishwashing liquid and Oxi Clean overnight. You’ll still have to wipe them down thoroughly to remove any excess. I’ve found that for canvas slings, you can work some Dawn into the greasy parts using a small brush and soak them overnight in the washer in a combination of laundry soap and Oxi Clean, then agitate on gentle cycle—especially if there are metal parts that cannot be detached—then laid out to dry.

**How do I get Crisco off me?** Dawn dishwashing liquid. Shower with it. Honest. Nothing works better. (A bottle of Dawn in the shower stall is a great way to tell if your potential boyfriend is into fisting!). Salt easily removes J-Lube.

**A Few Words About Enhancements**

My best advice is DON’T. Aside from its addictive qualities crystal meth, which is most often used by fisters, deadens your nerve endings. You don’t feel pain, and by the same token, you don’t experience the pleasure that fisting can give you. Furthermore, you’re not as likely to realize when something wrong is happening. Judgment is blurred and you’re less likely to take care of yourself or know when to. If you need Tina to get fisted, maybe you’re better off not getting fisted.

Any enhancement, when taken in conjunction with edge play, alcohol and marijuana included, can impair judgment and increase risk of injury. Be sure to discuss your tolerance with your partners, and please don’t over do!

Also remember that use of amyl (also known as poppers) in conjunction with medications for treatment of erectile dysfunction (e.g. viagra, cialis, levitra, and others), or with nitrates, which are commonly prescribed for various heart conditions can result in serious injury or death.
HIV

HIV is transmitted when blood or semen from an infected person comes into contact with the blood of an uninfected person. Unlike Hepatitis C, HIV is a very fragile virus and once exposed to air (and many other things) dies very quickly. There are still risks of HIV infection among fisters. The most common routes are:

- Colon-to-hand (and vice versa) through small cuts, tears or scratches in the colon or hands.
- Sharing lube among bottoms.
- Unprotected fucking and fisting.

Prevention:

- **Always wear gloves.** If you are not wearing gloves, make sure your fingernails have been clipped short and filed smooth. Make sure you don’t have any small cuts on your hands (including hangnails) and arms. You can do this by liberally applying hand sanitizer or rubbing alcohol on your hands and arms before play. If you get a stinging sensation, glove up. As there is a possibility of transmission even with gloves, if you have any large or recent cuts, I suggest you postpone play until they are sufficiently healed.

- **Don’t share lube among bottoms.** Every bottom should have his own container, which is clearly marked with his name on the container (not on the lid). As fragile as HIV is, it can live in lube long enough to be transmitted to others.

- **Don’t fist and fuck in the same scene.** Even if you’re using gloves and condoms it is not good practice. It is kind of like playing Russian roulette with a completely loaded gun. Most of us don’t have Cisco-friendly rubbers lying around, and even if you do--which ones are they?? In the heat of the moment it is not always easy to tell--or to remember. Latex condoms break down quickly. It is practically impossible fist (or to fuck) someone without causing some internal abrasions and a little bleeding, so why tempt fate by adding semen to the mix. We all know that fucking is the most common means of transmitting the virus. So don't do it.

Need more resources? Start with Stop AIDS Project and Project Inform.
Hepatitis A, B, and C

Hep A is transmitted through ingestion of something that has been contaminated by fecal matter. Washing hands thoroughly and use of hand sanitizer is not only recommended, but also mandatory.

Hep B is transmitted through contact with infectious blood, semen, and other body fluids, from having sex with an infected person, sharing contaminated needles to inject drugs, or from an infected mother to her newborn.

Hep C is most commonly transmitted when the blood of an infected person enters the body of an uninfected person—during fisting—through small scratches in the colon and open wounds in the top’s hands. Hepatitis C, unlike HIV, which is a very fragile virus, is extremely hearty. Hep C can live—and be contagious—for up to four (4) days in dried blood on an exposed surface such as a sling, counter top, floor, or bed sheets.

Vaccines are available to prevent transmission of Hepatitis A and B. There is currently no vaccine to prevent transmission of C. If you are sexually active it is an excellent idea to take the Hepatitis A and B vaccines and to add the test for Hepatitis C to the battery of tests for HIV and STD’s. Current experts in the field of prevention recommend testing every three months if you are sexually active with multiple partners. There is a high degree of success of cure for Hep C (between 50% and 80%) if the infection is caught early. Unlike other forms of hepatitis, exposure to C does not result in the development of antibodies to the virus. This means that even though you have been exposed, you may continue to be contagious to others and to carry the active virus in your body. GET TESTED!

Remarkably, there is currently considerable debate among doctors and public health officials as to whether Hepatitis C is sexually transmitted! As fisters, we know (or should know) that at least through fisting, it can be. Currently, neither the SF City Clinic, nor Magnet, offer testing for Hepatitis C to anyone other than intravenous drug users (or others who inject drugs), so unless you are willing to put yourself into that category to get tested at one of these sites, the only alternative is through your private physician.
Unfortunately, testing for Hep C is completely off the radar for most physicians, unless you happen to be HIV+ in which case your doctor is probably recommending an annual Hep C test. If you are negative, insist that your doctor include testing for Hepatitis C the next time you get your regular HIV and STD screening. You may be carrying Hep C—and exposing other people—and not even know it.

Even using a condom, I don’t recommend having anal sex (with a dick) during or after a fisting scene. Make fucking foreplay.

**MRSA (Methicillin-Resistant Staphylococcus Anreus)**

You’ve heard a lot about this skin-eating virus in the news lately, and you should be concerned about it as well, especially if you are having sex in public where many people are using the same equipment. My sources say that cleaning equipment with a 10% bleach solution between uses greatly decreases risk of transmission. The four-way quarternary solution is also effective.

**What are the symptoms of a MRSA skin infection?**

Signs of a skin infection include redness, warmth, swelling, and tenderness of the skin. Some people with MRSA might think they have a "spider bite." For most people, it isn't serious. Others may develop boils, blisters, pustules or abscesses. The infection can cause a fever and/or chills. People with fever and/or chills should see their health-care provider.

**How is MRSA spread?**

Staph, including CA-MRSA, is primarily spread when someone's skin comes in contact with the skin of someone who has Staph. That sort of skin-to-skin contact can happen when someone is playing sports, having sex, or doing other things. It can only be spread with skin-skin contact or skin-contaminated object contact.

**What should I do if I think I have an active MRSA infection?**

If you notice any of the symptoms of a Staph infection, you should contact your health-care provider. You may need antibiotics or other treatment. Your healthcare provider will discuss treatment with you. Do not try to treat yourself. Whenever antibiotics are prescribed, take all of the medication even if you think the infection has gone away. This will help prevent the Staph germ from becoming more resistant to antibiotics.
Is MRSA a sexually transmitted disease (STD)?
Data do not exist to determine whether sex itself - anal, oral, or vaginal intercourse - spreads MRSA. But we do know that skin-to-skin contact, which occurs during sex, can spread MRSA.

How do I protect myself from getting and spreading MRSA?
Practice good hygiene:
- Wash your hands frequently with soap and water. If soap is not available, use hand sanitizer instead.  
- Showering or washing after contact sports, gym use, or sex may reduce the risk of skin-to-skin transmission.  
- Practice safer sex. Always use gloves and condoms.  
- Thoroughly clean & disinfect equipment and surfaces after each use.  
- Keep wounds covered with clean, dry bandages.  
- Take antibiotics only as prescribed by a healthcare provider  
- Do not share personal items such as used towels, clothes, razors, or anything else that makes contact with skin.  
- Clean and disinfect items that are shared before and after every use (athletic/workout equipment, slings, benches, tables, etc.) with disinfectant or detergent. A list of products approved by the Environmental Protection Agency that are effective against MRSA is available. Check the link in the resources section. These products should be used only as directed. NOTE: At Hell Hole parties, we provide a quarternary disinfectant spray at every station, which should be applied before and after every session.  
- Use lotion to keep skin moist; damaged skin can provide an opening for infection.

SYPHILIS

What are the symptoms?
Syphilis infection occurs in four stages, named primary, secondary, latent and tertiary (late).

Primary Syphilis
Symptoms usually show up 2-12 weeks after being exposed. The first sign is often a skin sore called a chancre (shank-er). You may have more than one, or you may have chancres and not notice them because they are inside your anus or vagina. Chancres can also appear on your scrotum, penis, vaginal lips, and anus or in your mouth. They are usually not painful. The sores will go away after several weeks without treatment, but you would still be infected.
Secondary Syphilis
Most people who have secondary syphilis notice a skin rash covering their body 4 to 12 weeks after infection. The identifying feature of this rash is that it shows up on the palms of the hands and soles of the feet. Often it is not itchy. Other common symptoms of secondary syphilis are swollen glands in various areas of the body, fever, fatigue, patchy hair loss, weight loss, and headache. Since these symptoms are so similar to those of many other health problems, syphilis has sometimes been called "the great imitator." Additional symptoms during secondary syphilis that are particularly important are syphilis warts and white patches (condylomata lata and mucous patches, respectively). These warts and patches are highly infectious and can occur in moist areas of the body like the mouth, side of the tongue, anus, etc. Secondary syphilis symptoms usually last anywhere from 1 to 3 months, but sometimes they last longer, and once in awhile the symptoms come and go over a year or two. But even after the symptoms of secondary syphilis clear up, if left untreated, the infection continues in your body.

Latent Syphilis
Latent syphilis causes no symptoms. The infection can be detected only by a blood test. If not treated, latent syphilis continues for life. Many people with latent syphilis never have serious problems, but some progress to the final stage, called tertiary syphilis.

Tertiary (late) Syphilis
About one-third of untreated people with syphilis experience serious damage to various organs and body systems. Tertiary syphilis can appear any time from a year to 50 years after becoming infected; most cases occur within 20 years. The brain, heart, liver, and bones are the most commonly involved organs. Tertiary syphilis can cause paralysis, mental problems, blindness, deafness, heart failure, and death.

How do I avoid getting syphilis?
The risk for syphilis is directly related to the number of sex partners you have: The more sex partners, the greater the risk on contracting it. Having more sex with fewer partners reduces your risk of getting syphilis. Abstinence is the only surefire way to avoid getting syphilis or other STDs. If you're sexually active, using condoms consistently and correctly for oral, anal and vaginal sex is your best bet for staying sexually healthy. Also, regular STD checkups at least every six months if you’re sexually active with more than one monogamous partner is recommended. Syphilis and other bacterial STDs are curable with proper diagnosis and treatment.
RESOURCES

Community Resources
- San Francisco Leathermen’s Discussion Group, www.sfldg.org
- San Francisco Citadel www.citadelsf.org
- Handball Heaven: www.handballheaven.com
- Hell Hole SF (monthly fisting parties in San Francisco) www.HellHoleSF.com
- Center for Sex & Culture: www.sexandculture.org
- National Coalition for Sexual Freedom: www.ncsfreedom.org/
- Woodhull Freedom Foundation: www.woodhullfoundation.org

Health Related
- Kinky Medical Antiseptics and Disinfectants: www.KinkyMedical.net. Click on “antiseptics” and scroll to the bottom of the page for the four-way quarternary disinfectant. (My favorite. A 2 oz. bottle makes four gallons and it only costs $5.00!)
- CDC Fact Sheet on Hepatitis A: www.cdc.gov/ncidod/diseases/hepatitis/a/fact.htm
- CDC Fact Sheet on Hepatitis B: www.cdc.gov/ncidod/diseases/hepatitis/b/fact.htm
- CDC Fact Sheet on Hepatitis C: www.cdc.gov/ncidod/diseases/hepatitis/c/fact.htm
- EPA Products recommended for disinfecting against MRSA: http://epa.gov/oppad001/list_h_mrsa_vre.pdf
- SF Dept of Public Health Info on MRSA: www.sfcdcp.org/mrsa.html
- Personal Risk Assessment for Hep C: www.epidemic.org/theTest/personalRisk/
- Vast info on gay health with a database of gay-friendly healthcare providers: www.gayhealth.com
- San Francisco StopAIDS Project, www.stopaids.org
- Project Inform, www.projectinform.org
- San Francisco Department of Public Health, www.mrsasf.com

Reading
- FIRST HAND, *an erotic guide to fisting*, by Tim Brough, with an introduction by Jack Fritscher, PhD.
- The Intelligent Man’s Guide to HANDBALL (the sexual sport) by R.A. Fournier

Just For FFun
- For an interesting discussion on fisting and Christianity, see www.sexinchrist.com/fist.html (They’re in favor of it!)
- More J-Lube FAQs: www.anus.org/SEX/jlube.html
- Slam Dunk at www.slamdunk.com
- Fisting Facts: www.winternet.com/~redright/aimght.htm#anchorTOP
About the Author

Larry Shockey. Larry has been a member of the kink and fetish communities for more than ten years, and for almost that long, he has been leading discussions, workshops and presentations on safer fisting techniques. Larry has led programs for Leathermen’s Discussion Group, The SF Ring, Leather Levi Weekend, The Citadel, led discussions on creating the proper headspace for fisting bottoms and tops, developed a hands-in 4-hour workshop for intermediate players and has facilitated discussions for advanced players.

While serving on the LDG Steering Committee, Larry became a catalyst, bringing the community together to produce LDG’s annual fundraiser, Fetish Fair. The concept behind Fetish Fair was simple: expose as many people as possible to as many different forms of play as possible within the two hour format; raise awareness; demonstrate safer sex techniques; increase curiosity; raise comfort levels; and encourage everyone to come back to learn more. In addition, Larry has served as the Chair for the planning committee for Leather Levi Weekends 2007 and 2008, as well as serving as a member of the Advisory Council for Leather Leadership Conference XII, which was in San Francisco in April 2008. In 2007, 2008 and 2009, he organized and coordinated the BDSM demonstration area at Leather Alley during SF’s Pride Festival following the Pride Parade. He has also done numerous public demonstrations of flogging, chest and nipple play and other forms of impact and temperature play for the Stop AIDS Project, SF Citadel, The Society of Janus, and the SF Leather Daddies. He is now focusing his efforts on strengthening and enhancing the fisting community in SF.

In 2008, Larry began organizing weekend fisting retreats, known as Spring Fling. In September 2008, after a months-long search for a host site, Larry brought a public fisting venue back to the SF sex scene for the first time since the closure of The Sling. Known as Hell Hole, this monthly play party has been widely and well-received by men not only in San Francisco, but from across the US and around the world. And finally, plans are currently underway to establish a fisting discussion group, which will provide a forum for those seeking to share or gain information about fisting in an informal, non-sexual setting.

This booklet has been printed through a generous grant from STOP AIDS Project
www.stopaids.org
KINK: Daddies, boys, Doms, subs, Tops, bottoms - We’re all tied together.

STOP AIDS Project is hitting the streets with new activities and events. We are going where the men meet -- and you’re going with us.

Safe, Sane and Consensual are hallmark values in the leather BD/SM community. STOP AIDS Project is supporting a team of fetish, kink and leathermen to uphold these values and promote our community’s health with play parties, events, media campaigns, workshops on leather BD/SM.


For info on events or to get involved, contact
Jorge Vieto, Jr.
415.575.0150 ext 208
jvieto@stopaids.org
www.stopaids.org