

SWINDLE LEATHER

Sounding and Catheters

Sticking Things Down "That"
Hole...

www.swindleleather.com

1

WHY

-  **ENDORPHIN
RELEASE** Reach a new high during play.
-  **PSYCHOLOGICAL
STIMULATION** Psychological stimulation at it's best
-  **HEIGHTENED
SENSSES** Raise the sensitivity of the cock and balls to enhance everything
-  **INTENSIFIED
ORGASM** The journey/torture is well worth the wait - explosive

**SWINDLE
LEATHER**

WWW.SWINDLELEATHER.COM

2



ENDORPHIN RELEASE

Reach a new high during play.

Free your inner masochist! The penis and surrounding area is full of sensitive nerve endings that are just begging to be played with. Stimulating them with CBT causes waves of endorphins (the body's natural painkiller) to be released. The effect is similar to that of morphine or codeine and the result is an incredibly intense 'natural high'. In some cases it can actually lead to an altered and euphoric state of consciousness. So, liberate your manhood!

**SWINDLE
LEATHER**

WWW.SWINDLELEATHER.COM

3

SAFETY



- Buy sterile catheters at your pharmacy.
- Thoroughly clean the sounds before each use. Disinfect them with boiling water. Don't use any disinfectants that could irritate your urethra.
- Wash your hands with soap and rinse your penis off thoroughly in advance.
- Use plenty of sterile lube. Your pharmacy should sell 'katheterpurine', which is made especially for this purpose. An alternative to that is water-based lube. Always discard the first little bit of lube that comes out of the tube since it may no longer be sterile.
- Don't damage your urethra. Start with a catheter or sound of a small diameter. Be very careful when pushing it in or pulling it out, especially at the entrance to the bladder.
- To prevent the spread of STIs, do not share your sound or catheters with your sex partner.

**SWINDLE
LEATHER**

WWW.SWINDLELEATHER.COM

4

DO'S AND DON'TS



• Burning Sensation

- If you have been stimulating your urethra, it is normal to feel a burning sensation after you piss or come. In most cases, it will recover quickly. If the (burning) pain or loss of blood continues for more than a couple of days, consult your family doctor. The sounding may have caused an infection.



• aaa

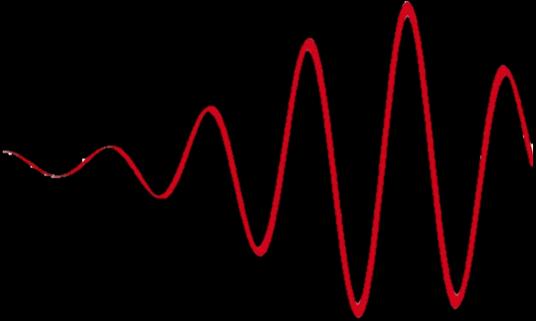
SWINDLE LEATHER

WWW.SWINDLELEATHER.COM

5

SCENE / PLAY JOURNEY

- It's not about a slow ramp to to a final crescendo
- Bring your sub up and down frequently
- By following an increasing sine wave pattern, you can get to new highs and sensitive light touch areas you never thought you could



SWINDLE LEATHER

WWW.SWINDLELEATHER.COM

6

URETHRAL PLAY

We're sure you're getting 'wet' just thinking about this! Urethral play involves inserting something into the urethra at the tip of the penis (please only use a specialized tool); it can be quite uncomfortable, particularly if you've never tried it before so go slowly and apply plenty of lubricant. It is important to sterilize your tools before use, otherwise it could result in infection. Practiced safely this is the perfect choice for those who enjoy some deep exploration.

**SWINDLE
LEATHER**

WWW.SWINDLELEATHER.COM

7

SOUNDING

www.swindleleather.com

8

- Choose a penis plug or urethral sound with a rounded, tapered tip
- Use **PLENTY** of lubricant
- Remove your penis plug or sound before ejaculation
- Wait until your erection subsides before removing a sound with a defined curve

- Use any old object lying around your house
- Choose one of our more extreme styles or sizes of sounds
- Force your plug or sound down your penis

SWINDLE LEATHER

WWW.SWINDLELEATHER.COM

9

ELECTRO

www.swindleleather.com

10

ELECTRO STIM

- We guarantee that the Dominant will get a real buzz out of this play! This really is submissive servitude at its best. Great for orgasm tease and denial, electro-stimulation devices are designed to pass an electric current through the body, delivering shocking results. This remains a firm favorite amongst CBT enthusiasts everywhere. There are so many toys to choose from; some designed to give you an electrifying shock from the inside out. What could be better?

**SWINDLE
LEATHER**

WWW.SWINDLELEATHER.COM

11

SAFETY – IT IS ELECTRIC

- Medical Conditions
 - Heart arrhythmias; pacemakers; insulin pumps; etc – NO
 - Epilepsy; or other unexplained chronic pains – LIKELY NOT
- Above the waist...
 - Avoid creating a pathway across chest (heart)
 - Try use dual pole nipple clamps versus the single pole
- Pregnant – NO
- DIY
 - Electrodes – Make sure they are solid, smooth, clean, good condition
 - Power Boxes – Do you have an EE degree and understand EMS? Is it ground isolated? So many questions... Do you know the questions let alone the answers?

**SWINDLE
LEATHER**

WWW.SWINDLELEATHER.COM

12

PLAYTIME!

- Lubricate electrodes that need it (non adhesive pads) and the area of the body the electrode will be placed
- Install electrode lead wires to electrodes and place on/in body
- Start slow – let your tissue become used to the sensation then ramp up
- Communication – how are they doing, is it time to increase/decrease?
- Everyone responds to e-stim differently
- Join online community to share/learn about play experience:
 - www.socialstim.org currentpleasures.com

**SWINDLE
LEATHER**

WWW.SWINDLELEATHER.COM

13

MORE PLAYTIME

- Power Unit
 - Most have a gain – to make the feeling stronger
 - Most have a control to change speed, some on depth, etc.
 - Most have different pre-programmed patterns
 - If play results in orgasm, some people need the power to go down – lower slowly but quickly. Some don't respond well to just cutting power off, some need it – you guessed it – communication
- Electrodes
 - If lubrication is used – it can dry out (water based) and get hot spots – re-apply
 - Moving an electrode changes the electrical path – this can be good or bad

**SWINDLE
LEATHER**

WWW.SWINDLELEATHER.COM

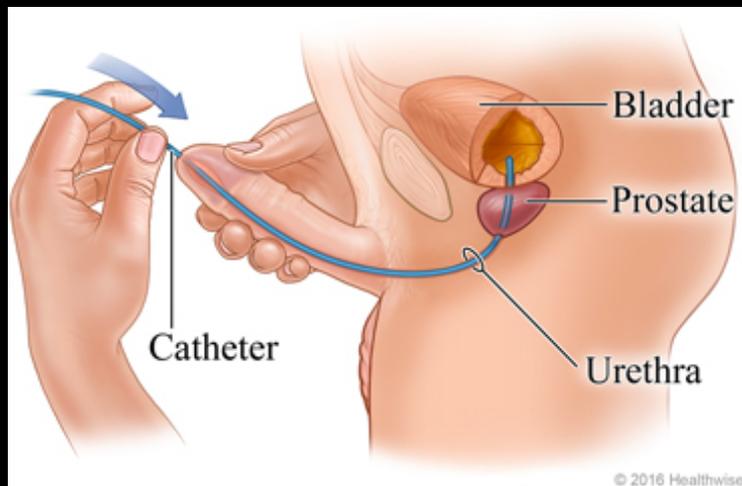
14

<http://www.medicaltoys.com/lib-catheter.htm>

CATHETERS

www.swindleleather.com

15



© 2016 Healthwise

www.swindleleather.com

16

WHY CATHETER PLAY?

- **Catheters** are flexible tubes used in **medical treatment and surgery** for feeding into various body structures to allow access from the outside. The main use of a catheter in BDSM, is the catheters designed for the bladder 'control' scenes.
- Catheter play involves the urethra, the tube that runs between the bladder and the outside of the body, emerging in men at the end of the penis and in women just inside the vagina area (under the clitoral hood). Except for the very end nearest the surface, this tube is sterile, and anything inserted into it deeper than a few millimeters should be sterile too otherwise an infection is easily caused. Serious damage can be done by inserting inappropriate objects or using excessive force or bad technique. The best known forms of urethral play involve catheters and sounds, items of medical equipment specifically designed for use in the urethra.
- So far this class only covers male catheterization. Women's urethras are shorter, and can be difficult to insert or maneuver the catheter. Women are also even more prone to infection. We only recommend properly trained and practiced individuals attempt female catheterization.
- A word of caution: This kind of play is not something you should engage in with someone who is inexperienced or who does not understand all the necessary precautions. Carelessness can result in infection, injury, or other traumatic problems.
- One aspect of catheter play is the physical sensation and psychological effect of having an object inserted into the urethra, which is strangely sensitive. Catheter games can also involve medical imagery and the peculiar penetrative vulnerability of having an object inserted deep inside the body, into what is in actual fact an internal organ.
- The biggest thrill for most people, though, is most likely control. Catheterized people have no control over their urinary function: if the catheter is left open, the bladder will drain completely and continue to drain as more urine is produced. If the tube is clamped off, they cannot urinate, even if they wish and need to.

**SWINDLE
LEATHER**

WWW.SWINDLELEATHER.COM

17

SIZES

| METRIC | | IMPERIAL | |
|-------------------|--------|--------------------|--|
| 1 millimetre (mm) | | 0.0394 inches (in) | |
| 1 centimetre (cm) | 10 mm | 0.3937 inches (in) | |
| 1 metre (m) | 100 cm | 1.0936 yards (yd) | |

| IMPERIAL | | METRIC | |
|-------------|-------|-----------------------|--|
| 1 inch (in) | | 2.54 centimetres (cm) | |
| 1 foot (ft) | 12 in | 0.3048 metres (m) | |
| 1 yard (yd) | 3 ft | 0.9144 metres (m) | |

| | | | | | | | | | | | | | | | |
|----|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|
| in | .223 | .21 | .197 | .184 | .17 | .158 | .144 | .131 | .118 | .105 | .092 | .079 | .066 | .053 | .039 |
| mm | 5.7 | 5.3 | 5.0 | 4.7 | 4.3 | 4.0 | 3.7 | 3.3 | 3.0 | 2.7 | 2.3 | 2.0 | 1.67 | 1.35 | 1 |
| Fr | 17 | 16 | 15 | 14 | 13 | 12 | 11 | 10 | 9 | 8 | 7 | 6 | 5 | 4 | 3 |
| Fr | 18 | 19 | 20 | 22 | 24 | 26 | 28 | 30 | 32 | 34 | | | | | |
| mm | 6.0 | 6.3 | 6.7 | 7.3 | 8.0 | 8.7 | 9.3 | 10.0 | 10.7 | 11.3 | | | | | |
| in | .236 | .249 | .263 | .288 | .315 | .341 | .367 | .393 | .419 | .445 | | | | | |

MedicalToys.com
Sizing Conversion Chart for Metric & French Scale

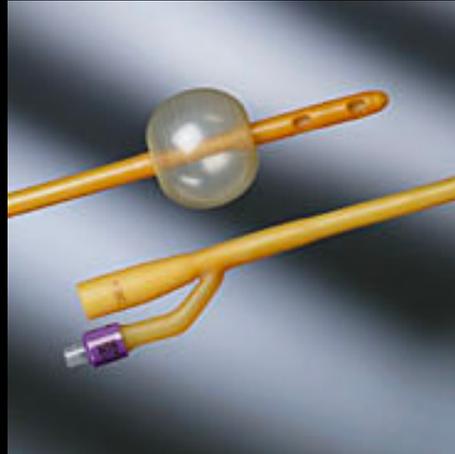
**SWINDLE
LEATHER**

WWW.SWINDLELEATHER.COM

18

TYPES

- There are several kinds of catheters, usually named after their inventor or on the basis of the kind of tip they employ. The best catheters are made of latex rubber coated with teflon, which makes them very smooth when lubricated. Some catheters are made of plastic which becomes very flexible at body temperature; these are usually little more than simple tubes with a slight 'funnel' at one end.
- By far the most common type for use in sexplay, and the type to be preferred, is the Foley catheter. This has a balloon device that allows it to be left securely in place for a significant length of time; others will slip out.



**SWINDLE
LEATHER**

WWW.SWINDLELEATHER.COM

19

SUPPLIES

- As well as the catheter, you will need: (see our Catheter Kits which contain all of this and more...)
 - Sterile hypodermic syringe (of about 10-12ml capacity)
 - If you intend to take total control of the bladder, a sterile catheter syringe. This is essentially a very large hypodermic syringe (60ml or more) with a large plastic tip which fits into the outflow tube of the catheter. This must be sterile, sealed in a factory-sterilized package. Otherwise you will need a spigot or clamp to prevent the bladder emptying unwantedly.
 - Latex gloves
 - Sterile lubricant. Some brands are stabilized with a preservative which can burn slightly when it is in contact with sensitive tissues. Surgi-Lube seems to be the best since they are minimally irritating.
 - Do not use lubricant which contains nonoxynol-9: it is quite irritating to the urethral tissues.
 - A sterile --or at least clean -- towel
 - Washcloth, soap, and water.

**SWINDLE
LEATHER**

WWW.SWINDLELEATHER.COM

20

INSERTION

1. Place the bottom on his back in a comfortable position, legs slightly spread. Wash his penis with soap and warm water, carefully, and rinse with plain water, to reduce the surface bacterial count. Anti-bacterial soap may be efficacious.
2. Put on the latex gloves. Be careful what you touch after this point. Unfold the sterile towel and put it on his belly. Put the unopened catheter on the towel.
3. Open only the valve-end of the catheter package. Attach the sterile catheter syringe or catch bag to the large opening.
4. Put a small blob of lubricant right on the tip of the penis, at the urethral opening. Carefully remove the catheter from its package, setting the syringe end on the towel. Generously lubricate only the first 75mm (3") of the catheter and insert it gently into the penis. Continue to insert slowly, twisting the cath slightly to be sure its passage is fully lubricated. As you insert more of the cath, lubricate it in 75mm sections. (It is too slippery to handle if you lubricate it all at once.)
5. Depending on the length of the person's penis, you will probably be able to insert about 25cm (10") of the cath. At some point you will feel slight resistance, and the bottom will report feeling a 'pinch; in a place he cannot describe. You have reached the bladder sphincter muscle, which keeps the bladder closed. Ask the bottom to relax and try to piss a bit -- the catheter should slip into the bladder. When you have inserted about 35-38cm (13"-14") of the catheter, stop. If the bottom has a short penis, stop sooner.
6. We must now check to be sure the catheter is properly placed in the bladder. We do this by gently trying to withdraw some urine into the catheter syringe. If you do have urine flow, you are in the bladder. If not, you need to insert the catheter farther. Do not go on to the next step until there is evidence of urine in the catheter syringe. The bottom should feel no real pain.
7. If you do not use a catheter syringe, the point where the bladder is reached is obvious, since there is a gush of urine from the catheter. You should clamp the end of the cath or block it with a spigot, then push a further 75cm (3") or so into the bladder to be on the safe side.
8. When the cath is in the bladder, attach the hypodermic syringe to the valve and slowly inflate the balloon with water by pressing the plunger of the syringe. Never over inflate the balloon! On a 30ml balloon, really only needs to be inflated to 12-15ml, or about half its stated capacity. If the balloon breaks, you could have a problem.
9. If the bottom feels any pain at this point, stop. You probably do not have the balloon in the bladder.
10. After the balloon is inflated, note how much water you have put in, then remove the hypodermic syringe from the valve; the balloon will stay inflated. Keep the catheter syringe in place.
11. Alternatively if you are using a ready-filled catheter release the clamp that holds the water out of the balloon.
12. If all has gone well, the balloon is in the bladder. Slowly pull out on the catheter; you will feel resistance, at which point you should stop. The balloon is now at the 'neck' of the bladder, and everything is under control.

SWINDLE
LEATHER

WWW.SWINDLELEATHER.COM

21

CATH PLAY

- You can now withdraw some urine with the catheter syringe, or you can return the urine to his bladder by the same mechanism. If you remove the catheter syringe from the cath, your bottom will piss until he is empty. Even after he is empty, he will have the sensation that he is pissing. Do not disconnect the catheter syringe and then try to reconnect it and refill him. You will get air in the bladder, and you don't want to do that. You may clamp off the catheter to prevent leakage or to prevent him from pissing when he thinks he needs to. (He will probably have some confused feelings.) I did one scene in which the bottom was blindfolded, and reacted very eagerly when some of his own piss was dripped on his lips from the syringe.
- Some people also like to play elaborate piss recycling games by connecting a catheter to a [leg-bag](#) (as supplied for incontinent patients) and the outlet of the bag into a drinking tube or gag or another concept is using a bed-side or table-side [large drainage bag](#) for extended time sessions.
- Be gentle with the penis once the catheter is in place, and avoid disturbing it too much. Resist any urge to masturbate: this will irritate the urethra and if done vigorously it could injure the bladder or sphincter muscles or nerves!
- A Foley cath may be kept in place for awhile, but certainly not with the tube clamped off; you don't want to keep it shut off for so long that urine backs up toward the kidneys. If he really needs to piss, unclamp the tube and let him. Although caths are often kept in place for days in a hospital, I recommend that you do not leave it in place for longer than one to two hours while you play.

SWINDLE
LEATHER

WWW.SWINDLELEATHER.COM

22

REMOVING

- First, deflate the balloon. Re-attach the hypodermic syringe as you did before, and the pressure from the balloon may cause the syringe to refill. Exert a bit of suction with the syringe: be sure you have taken out as much water as you put in; the balloon must be deflated.
- Now slowly withdraw the catheter. The bottom may feel slight discomfort, as the balloon has been slightly deformed and it may not be as perfectly smooth as it was before insertion. Wash off any excess lubricant which may emerge from the tip of the penis.
- The first two or three times the bottom urinates, he may feel a slight burning sensation. This is normal and is caused by irritation of the urethra; it should go away within 12-24 hours. Urge the bottom to drink a lot of fluids so that he urinates a lot: this will give him the chance to flush out any germs before they multiply.

SWINDLE
LEATHER

WWW.SWINDLELEATHER.COM

23

HEALTH PROBLEMS

Incorrect Insertion

- It is very important to put the catheter in *carefully* since there is always a chance it can go astray in the urethra and cause real damage! Go slowly and with great care. Though the bottom will feel strange and uncomfortable, particularly if this is a new experience, there should be no real pain. If there is, something is going wrong. It is also a good idea to make sure the bottom hasn't pissed for half an hour or so before the insertion, so there will be some urine in the bladder to help confirm the cath is in place. When in doubt, withdraw the catheter (as carefully as you put it in) and try again another day with a fresh cath. Do not attempt to re-use a cath once withdrawn.

SWINDLE
LEATHER

WWW.SWINDLELEATHER.COM

24

HEALTH PROBLEMS

Valve or Balloon Failure

- There is a small possibility that the valve will malfunction and you won't be able to deflate the balloon. If this happens, don't panic. Simply cut off the valve with scissors; the water will gush out. Now try to attach the syringe to suck out more. The rubber-plug valves (used with a needle) are less prone to failure than the force-fit valves which do not use a needle.
- There is a smaller possibility that the balloon will break inside the bottom. By under inflating it, you reduce this risk even further. And by using sterile water you ensure that anything that might be introduced into the bladder this way is harmless. Withdraw the catheter very carefully and inspect the balloon to be sure there are no missing pieces left inside (highly unlikely). Then let the bottom piss to rid himself of the water from the balloon.

SWINDLE
LEATHER

WWW.SWINDLELEATHER.COM

25

HEALTH PROBLEMS

Infection

- Bacterial infection in the urethra or bladder is the most common danger of catheterization. The risk of this can never be eliminated totally -- even in hospitals, where caths are inserted in the best of conditions, infections still occasionally occur. The risk can be minimized, however, by following the procedures carefully, using only sterile catheters, and encouraging copious urinating after removal.
- If infection *does* occur, it can be unpleasant, but is rarely a problem if medical help is sought and normally responds well to antibiotics. The symptoms, normally developing within a couple of days of catheterization, include discomfort in the bladder, a constant urge to urinate, cloudy urine and maybe feverishness or a feeling of being under the weather. Visit a doctor or a genito-urinary/STD clinic, swallow your embarrassment and tell them what the most likely cause is. Don't put off going: infections can cause serious problems if allowed to take hold. Make sure you're fully recovered before indulging in catheter play again!

SWINDLE
LEATHER

WWW.SWINDLELEATHER.COM

26



27



28