Breathing for Health®
with Biofeedback
by Erik Peper, Ph.D.

- Easy breathing is the key to letting go of fear and anxiety.
- Learn "diaphragmatic" breathing to enhance your mental and physical performance.
- Use innovative breathing and visualization techniques to improve your concentration and health.
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Thanks to Michelle Roland for her significant contribution in writing this manual.

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Purpose

Breathing is an essential process for human life. Breath patterns influence our physiology, our psychological state and our unconscious. We are, however, most often unaware of our breathing.

Breath patterns contribute significantly to health and illness. Learning to breathe slowly and effortlessly enhance our health and sense of well-being. This audio series focuses on teaching slow diaphragmatic breathing and on generalizing that skill into all our activities. The exercises in this program were developed from the diaphragmatic Breathing Protocol, the companion training manual, Breathe In, Breathe Out (Peper and Roland, Plenum) and computer biofeedback protocol (Peper and Smith) Easy Breathing.

The audio program is designed to explain the importance of breathing and teach effortless diaphragmatic breathing. The program includes instructions to recognize and transform unhealthy breathing patterns. The guided exercises will enable you to become quiet and relaxed, control stress, enhance wellness, and optimize performance.

Because breath reflects both your emotional and physical state, quieting your breath will soothe your emotions and mental processes and quiet your physiological state. Many performers, including athletes and musicians, use diaphragmatic breathing as an essential part of their training to perform at a peak level. Diaphragmatic breathing will affect all areas of your life, some subtle and some very obvious.
### Instructions: How to use the audio track

<table>
<thead>
<tr>
<th>CD # / Track</th>
<th>Topic</th>
<th>Instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 /1</td>
<td>Background Information &amp; Introduction</td>
<td>Listen at least once. May be repeated for deeper understanding</td>
</tr>
<tr>
<td>1/2</td>
<td>Introduction to Optimum Breathing</td>
<td>Listen at least once. May be repeated to deeper understanding.</td>
</tr>
<tr>
<td>1/3</td>
<td>Learning Slow diaphragmatic Breathing</td>
<td>Listen many times until you have mastered the skills.</td>
</tr>
<tr>
<td>2/1 – 2/6</td>
<td>Breathing Training</td>
<td>Listen many times, as often as needed to support Breathing Training.</td>
</tr>
</tbody>
</table>

**Note:** Many of the exercises can be practiced several times in a variety of situations.

Breathing for Health was originally produced on tape cassettes. Due to continuing demand we have transferred it to newer media. The program has been edited and re-mastered. There are some minor references to tape that could not be removed without altering the meaning of the program.

Current technology has allowed us to segment the program more effectively than when the program was first recorded on cassette.
I. The Physiology of Breathing

Breathing is a natural process which occurs without conscious control. Babies and young children breathe effortlessly. Most of the movement associated with their breathing occurs primarily in the lower abdominal area. As they exhale, their abdomen (stomach) goes in slightly. When they inhale, they abdomen expand outward and to the sides. Most adults, however, no longer breathe in this healthy pattern. Instead, they hold their stomach rigid or slack and use a significant amount of upper body muscular activity to inhale.

The major muscle involved in proper breathing is called the diaphragm. This is a dome shaped muscle located beneath the ribs and above the stomach. In order to inhale, the diaphragm tightens and flattens. This activity displaces the liquid contents of the abdomen and thereby creates a larger space in the chest. As this space is created, the pressure in the atmosphere exceeds the pressure in the chest and air flows in to balance these pressures out.

To exhale, the diaphragm must relax and be raised upward, compressing the air in the chest and allowing the air to be expired. Thus, inhalation requires that the abdominal area relax and expand, while exhalation requires the abdominal area to decrease in diameter. The chest and shoulders should stay relaxed throughout the breathing cycle.
II. Dysfunctional (Unhealthy) Breathing Patterns

There are two major breath patterns which are associated with a sense of breathlessness and/or illness, thoracic breathing and hyperventilation. Both patterns occur with episodic breath holding. These patterns may be very obvious or quite subtle. Even the subtle forms, however, can be deleterious of health.

The pattern, thoracic breathing includes shallow breathing punctuated by breath holding or gasping. This unconscious pattern involves the alarm and startle reactions. This means that the abdomen tightens and the person inhales into the upper chest. The physiological effects of this pattern include increased heart rate, increased blood pressure, gastro-intestinal distress symptoms, asthmatic symptoms and neck and shoulder tension. Habitually breathing in this pattern fosters illness.

The second pattern, hyperventilation is characterized by rapid, shallow breathing punctuated by frequent sighs. When one hyperventilates, too much carbon dioxide (CO2) is expired, and increases the alkalinity of the blood. Anxiety, phobia, dizziness and hypertension are all associated with hyperventilation. One commonly thinks of hyperventilation as an acute and very noticeable state. However, hyperventilation is often subtle and chronic.

<table>
<thead>
<tr>
<th>SOME SYMPTOMS OF CHRONIC HYPERVENTILATION</th>
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<tbody>
<tr>
<td><strong>Respiratory</strong></td>
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<tr>
<td>Asthma, light chest, dyspnea (breathlessness), excessive sighing or yawning, inalile cough, shortness of breath.</td>
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<tr>
<td><strong>Cardiovascular</strong></td>
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<tr>
<td>Palpitations, tachycardia (rapid heart rate), chest pain or angina, Raynaud’s syndrome (Blood vessel constriction in the hands and or feet).</td>
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<tr>
<td><strong>Neurological</strong></td>
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<tr>
<td>Dizziness, faintness, migraines, numbness, intolerance of bright lights or loud noise.</td>
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<tr>
<td><strong>Gastrointestinal</strong></td>
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<tr>
<td>Dysphagia (difficulty in swallowing), dry throat, gas, belching, globus (lump in the throat), abdominal discomfort.</td>
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<tr>
<td><strong>Muscular</strong></td>
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<tr>
<td>Cramps, tremors, twitches, muscle pain.</td>
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<tr>
<td><strong>Psychic</strong></td>
</tr>
<tr>
<td>Tension, anxiety, phobias.</td>
</tr>
<tr>
<td><strong>General</strong></td>
</tr>
<tr>
<td>Fatigue, exhaustion, weakness, lack of concentration and memory, sleep disturbances, nightmares.</td>
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</tbody>
</table>

adapted from: Lon (1976)
III. Advantages of diaphragmatic Breathing and Disadvantages of Thoracic Breathing

All our physiological processes are controlled by the nervous system. One branch of the nervous system, called the Sympathetic nervous System (SNS), is strongly affected by how we breathe. When we breathe rapidly, shallowly, and in our chests thoracically, the sympathetic nervous system becomes activated. This results in increased heart rate and blood pressure, cold hands and feet, sweaty palms and other symptoms. People who habitually breathe this way may experience a sense of panic, symptoms associated with hyperventilation, and even an increased risk of heart attacks.

Slowly diaphragmatic breathing, on the other hand, decreases the sympathetic nervous system activity and encourages regeneration. Slow diaphragmatic breathing has been shown to reduce the occurrence of a coronary event in people who have already suffered a heart attack. (Van Dixhoorn et al, 1987). It also results in lowered blood pressure and heart rate, warm hands and feet, a decreased sweat response and a general sense of relaxation and well being.
IV. The Alarm Reaction

Emotions have a profound effect on breath patterns. When we are started, we often gasp and/or hold our breath. The startle or alarm reaction then loads to increased sympathetic nervous system arousal and all the physio-stimulation.

Often just imagining a stressful situation has a profound effect on breath patterns. It is common for the inhalation volume to decrease significantly and for breathing to become more rapid and shallow when one imagines a stressful situation. This pattern mirrors the effect on the breath when one exhibits the alarm reaction in an actual stressful situation.

From: Tibbetts and Peper (1988)
V. Breathing While Lying Down vs. Sitting Up

The muscular efforts involved in breathing are different depending on whether you are lying down or sitting up. When you are lying down on your back, gravity acts to push the abdomen outward. This is perceived as effort. Exhaling is effortless because gravity pushes the abdomen down and thereby pushes the diaphragm upward into the chest.

When you are sitting or standing, a slight effort is required to pull the abdomen in so that the diaphragm is pushed back up at the end of the exhalation. Inhalation in the vertical position is effortless since you just relax the abdominal wall and allow the diaphragm to down.
A helpful Exercise to Demonstrate the Importance of Abdominal Movement

There are many exercise throughout the program that will help you learn and practice slow diaphragmatic breathing. After listening to the introduction section begin by practicing the following exercise*

Lie down on your back on a comfortable surface. Place a book on your abdomen, near your belly button. As you inhale, allow your stomach to push against the weight of the book. The book should lift with the inhalation. As you exhale, allow the pressure of the book to push your stomach in. Continue to exhale and let your stomach fall until you have expired the air. Repeat for ten minutes. Allow the air to flow evenly and slowly. Be sure you observe the book rising and the abdomen expanding during inhalation and the book sinking and the abdomen decreasing during exhalation. Allow this breathing to go slowly. You may observe that the breathing rate decreases (breathes per minute). If your attention drifts, bring it back to observing the breath and the movement of the abdomen. As you practice this slow breathing and the movement of the abdomen. As you practice this slow breathing, record your observations on the daily logs provided. Observe how over time your skill improves in breathing slowly and effortlessly. Observe also how your attention and mindfulness is becoming trained, a skill which is applicable in all phases of our lives. This slow breathing encourages regeneration.

Log 1: Daily Breathing Observation of Book Breathing
Instructions: For each practice, record the date and subjective experience of breathing, mindfulness, and relaxation. In addition, report how this practice affected your daily activities and emotions.

<table>
<thead>
<tr>
<th>Date</th>
<th>Subjective experience (activities and emotions)</th>
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Notice how your breathing works in the supine (lying down with face up) position. The muscle which tightens during inhalation is the diaphragm. Tightening this muscle causes the abdomen to expand. During exhalation, you just relax and allow gravity to push the abdominal content against the diaphragm as it relaxes. The exhalation is done by gravity. On the other hand, when you are sitting or standing, the process is reversed. The expansion of the abdomen during the inhalation requires little muscular effort. However, you must actively pull the stomach in slightly at the end of the exhalation to push the diaphragm upward (tighten the rectus abdominal muscles).

**WARNINGS**

- Never alter the use of your medications without consulting your health care provider.
- If you feel faint as you practice any of these exercises, stop the practice. Allow yourself to gently focus on the very slow exhalation.
- Don't try too hard at any time. Practice all exercises at a 70% effort rather than 100%. The purpose is to learn at your own pace, not to be perfect.
- Don't expect instant success. Be patient. The skills to be learned in this tape series may take many weeks or even months to master. When you first begin breathing diaphragmatically, you may experience a reduction of skill in some areas. Remember that you are relearning the skill now coupled to the new breath pattern. Don't be alarmed; you'll find that your new skill level will exceed the previous level in time.
- Be gentle with yourself and remember that it is normal to have emotions surface when you slow your breathing down. In rare cases, you may find that you experience strong emotions when you allow yourself to breathe diaphragmatically. This may be an uncomfortable or positive experience.
Instructions: Biofeedback Equipment

There are three biofeedback devices which you may want to use as you listen to this program. They are:

1. GSR2 (Galvanic Skin Response, also called Electrodermal Response)
2. Temperature Sensor for the GSR2

The audio program can be used “stand-alone” or preferably with the GSR2 biofeedback device. And optional temperature probe can be plugged into the GSR2 and is a useful device to use in diaphragmatic breathing training. An EMG is another optional feedback tool.

Biofeedback equipment simply measures common physiological process and amplifies them. It then feeds back the amplified physiological process to you by an audio or visual signal. Biofeedback equipment allows you to see changes in your physiology of which you would normally not be aware. Eventually, when you become very quiet, you can learn to recognize these changes even without using the equipment.
The GSR (Electrodermal Response)

The GSR2 measures your sweat response on your fingertips. When you become aroused or stressed, the sympathetic nervous system becomes activated. Because the sympathetic nerves innervate the sweat glands in your hand and fingertips, this arousal causes an increase in the output of these sweat glands. The GSR uses two sensors to measure the level of your sweat response.

When you inhale deeply in your chest and then exhale rapidly, the pitch of the tone will increase. This is because thoracic inhalations cause activation of the sympathetic nervous system, thus an increase in your sweating response. As you learn to breathe slowly and effortlessly, the tone will tend to decrease.

The following graphs demonstrate how the tone will most likely change when you breathe very rapidly and shallowly (hyperventilation) punctuated with sighs (graph 1), mildly thoracically (graph 2), and diaphragmatically (graph 3).

The pattern on graph 1 reflects hyperventilation and sighing. Note that the pitch increases and it does not have a chance to return to the starting level.
Your physiology becomes increasingly aroused when you hyperventilate. This chronic arousal makes it very difficult for your body to become quiet and relaxed. Learning to breathe diaphragmatic quiets your sympathetic nervous system.

The pattern on graph 2 reflects slow thoracic breathing, that is, primarily chest breathing. However, without breathing very rapidly and shallowly, the arousal level. The tone goes up a little, then comes back down, then goes back up, and so on.

The pattern on graph 3 reflects slow diaphragmatic breathing in which, your state of arousal gradually decreases over time. Thus, the sympathetic nervous system activity continues to quiet as you breathe. This is the ideal pattern, reflecting slow diaphragmatic breathing which promotes deep relaxation and self healing.
The Temperature Unit

It may seem strange at first, but an additional sign of relaxation is the warming of hand and feet. Any part of the body feels warm when a relatively large amounts of blood flows through that area. When a person is startled or alarmed, the body prepares itself in what is called the “fight or flight” reaction. In order to fight or flee from danger, blood must be pumped by the heart to the deep muscles. Therefore, it is shunted away from the periphery, that is, the hand and feet. However, the more relaxed you become, the more blood flows into the periphery, thereby warming it up. Hence, hand and foot warming is a measure of relaxation. Hand temperature usually increases as you practice very slow diaphragmatic breathing.

EMG (Personal Muscle Training) – visit www.thoughttechnology.com for available models

The electromyography measures tension in the skeletal muscles. It can be used to help you learn to keep your chest and shoulders relaxed as you inhale, thereby encouraging diaphragmatic breathing. In addition the EMG can be used to encourage tensing and relaxing of the abdominal muscles.
**EMG Electrodes Chest Placement**

There are two electrode placements you may use to learn to keep you chest and shoulders relaxed as you inhale. You may either place the electrodes on the scalene muscle on the side of the neck (see diagram 1), or on the trapezius muscle of the shoulder (see diagram 2).

The scalene is lateral to the sternocleidomastoid muscle and above the collar bone. You can find the placement by draping your hand over your shoulder. You thumb should touch the side of the neck. If you press into the neck at this point, you find that this muscle is sensitive. This sensitivity may be the result of chronic thoracic breathing (the unnecessary tightening of upper body muscles while breathing). The goal will be to learn how to breathe while keeping these muscles as relaxed as possible.

The trapezius is the large muscle on the back of the shoulder. The electrode should be placed midway between the back of the neck and the tip of the shoulder.
The following graph illustrates both healthy and dysfunctional breathing patterns. The goal of slow diaphragmatic breathing is to breathe with less and less thoracic efforts while continuing to inhale large volumes.

**EMG Electrode Abdominal Placement**

This placement (diagram 3) is useful if you are having difficulty allowing your abdomen to expand as you inhale or tightening during the last phase of exhalation (in standing position). Place the electrodes midway between the public bone and the bellybutton, in the middle of the abdomen or place the electrodes next to the top of the hip bone, about one inch towards the belly button.
The graph represents the ideal signal while standing/sitting or lying down: quiet during the inhalation and the beginning of exhalation. In the vertical position there should be less muscle tension during inhalation, as the abdominal wall relaxes and more muscle tension during the later phases of exhalation, as the abdominal wall tightens, expelling air.

In the lying down position the abdominal EMG is quiet in all phases of breathing.
INSTRUCTIONS FOR AUDIO INSTRUCTION, LOGS, GSR2 AND EMG

INSTRUCTIONS: CD 1 TRACKS 1 & 2

Get the GSR2 ready before you begin listening to the program. Listen to the tracks one at a time. You will be instructed to use only the GSR during CD 1, not the temperature probe. There are several exercises on CD 1. You may wish to repeat some of them two or more times until you feel comfortable. Do them sometimes with and other times without the GSR2.

You will also be asked on CD 1 to observe over the next few weeks when and in what situations you find yourself holding your breath or gasping. Use the following log to help keep track of these events.
### Log 1.1: DAILY OBSERVATIONS OF BREATH HOLDING OR GASPING

<table>
<thead>
<tr>
<th>Date</th>
<th>Describe the situation: where you are, how you are with, what you are doing, thinking and feeling</th>
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INSTRUCTIONS: CD 1 TRACK 3

CD 2 focuses on learning how to breathe slowly and diaphragmatically. Repeat this CD as many times as necessary to master the skills.

In order to breathe diaphragmatically, it is essential that you are able to expand your abdominal area. For this reason, always loosen your belt, pants or skirt buttons and zippers, and remove your pantyhose or any other restrictive clothing before you begin this CD.

Remember throughout the CD to focus on the exhalation. Exhale slowly and completely. Let you shoulders and chest stay relaxed through the entire exhalation and inhalation phases. Remember the mechanics of breathing are different when you are lying down than when your are sitting or standing. In the supine position, you must expand your abdomen out as you inhale, whereas in the sitting position, you must pull your abdomen in at the end of exhalation.

Continue to practice the slow diaphragmatic breathing using the GSR2 and temperature biofeedback. Record your experience with the training and observe the situations, thoughts and emotions effect the training. Practice this both formally and informally at home and at work. Observe how the continued slow breathing affects you health.

Optional: If you have access to an EMG, record the threshold settings and your success in decreasing upper thoracic muscle efforts.
Log 2.2 Daily Observation

Instructions: Practice slow diaphragmatic breathing and record your experiences. Report how this breathing effected your emotions, thought, reactions to others, and general well being. Also, note what happened to the GSR, Temperature and Muscle feedback. Finally observe your breathing rate for 1 -2 minutes.

<table>
<thead>
<tr>
<th>Date</th>
<th>Breathing Rate</th>
<th>Subjective Experience</th>
<th>Feedback Data</th>
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<th>Date</th>
<th>Breathing Rate</th>
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To develop an objective measure that you are affecting physiology, plot your physiological data on a graph. GSR2 pitch decrease / increased (decrease indicates success). Hand temperature at the end of the slow breathing session. EMG threshold while breathing (lower EMG levels indicate success). Breathing rate up/down (lower rate indicates success).

INSTRUCTIONS: CD 2 TRACK 1 & 2

The purpose of these tracks is to teach you to breathe slowly and diaphragmatically under all circumstances. First, become aware of the activities, situations and circumstances in which you grasp or hold your breath. Refer to the Log 1.1 practice sessions on page 20 where you were instructed to keep track of these patterns. Think of any other activities you have noticed where you hold your breath or gasp. The next step is to practice the activity while you continue to breathe diaphragmatically.

Complete the following logs in conjunction with CD 2, tracks 1&2.
Log 3.1  Self Observation
Instructions: Refer to log 1.1. Notice any patterns which relate to your breath holding. Record four of the common experiences from log 1.1 below. Describe what you were doing, who you were with, and your thoughts and feelings during the episode where you noticed breath holding or gasping. Some of these may be simple activities, odors, emotional episodes or social situations.

Situation 1: __________________________________________________________

Situation 2: __________________________________________________________

Situation 3: __________________________________________________________

Situation 4: __________________________________________________________
Log 3.2 Breathing During Activity

Instructions: Pick one of the situations or activities from Log 3.1 and perform this activity while continuing to breathe. Do this once a day for at least five days or choose a different activity every day. Describe your experience: physical sensations, thought feelings, and rate your success in continuing to breathe during an activity.

Rate your success from zero (no change in gasping or breathe holding) to five (continued breathing).

<table>
<thead>
<tr>
<th>Day 1</th>
<th>Rate (0-5)</th>
<th>Describe the situation</th>
<th>Describe your experience</th>
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<table>
<thead>
<tr>
<th>Day 2</th>
<th>Rate (0-5)</th>
<th>Describe the situation</th>
<th>Describe your experience</th>
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<table>
<thead>
<tr>
<th>Day 3</th>
<th>Rate (0-5)</th>
<th>Describe the situation</th>
<th>Describe your experience</th>
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</table>
Day 4
Rate (0-5)__________
Describe the situation
Describe your experience

Day 5
Rate (0-5)__________
Describe the situation
Describe your experience

Plot your rating and
graphically observe our skill acquisition
The following graph illustrates the point in the breath cycle at which activity should be initiated. For example, if you are going to stand up, start exhaling and about a third of the way through your exhalation begin to stand. Remember to keep exhaling as you continue the activity.

The one activity we engage in almost every day and in which we tend to gasp and breathe shallowly is talking. Remember to take the time to inhale diaphragmatically as you talk. Practice talking until you run out of air, then allow time to inhale diaphragmatically before you resume speaking. Are you interrupted? Do you feel strange pausing? Or do you speak forcefully? Do the people to whom you speaking seem to be paying extra attention to what you are saying? Keep practicing breathing easily and deeply while speaking.

Practice effortless breathing while talking. During the first week, begin by counting out loud and saying simple phrases. Be sure to let the abdominal wall come in as you are speaking. After mastering eh skill, practice talking to a friend or on the phone. Finally, practice while talking to your family and at work. Record your observations on the log. As you master talking from the abdomen and inhaling diaphragmatically, increase the difficulty of the speaking situation. Record your observations on Log 3.3. BREATHING WHILE TALKING.

Use the GSR2 and EMG while talking. The increase in the GSR2 tone can indicate that you have gasped. The EMG recorded from the upper chest and shoulders is also very helpful to indicate gasping. Learning to talk while keeping the EMG and/or the GSR2 lower increases mindfulness.
Log 3.3 Breathing While Talking

Instructions: Practice counting out loud, talking on the phone, or actual talking at the job or at home. Do this five times a day for at least five days. Describe your experience: (physical sensations, thought feelings), and rate your success in effortless inhalation and diaphragmatic breathing during talking. Rate your success from zero (no change – gasping or breath holding) to five (continues breathing).

Day 1
Describe the situation
Describe your experience
Rate (0-5)__________

Day 2
Describe the situation
Describe your experience
Rate (0-5)__________

Day 3
Describe the situation
Describe your experience
Rate (0-5)__________
Day 4
Describe the situation
Describe your experience

Day 5
Describe the situation
Describe your experience

Plot your rating and graphically observe our skill acquisition
INSTRUCTIONS: CD 2 TRACKS 3-6
This program contains two elements. Learning new skills via rewriting of past experiences and developing mindfulness for internal growth and mediation. Our thoughts and images have profound effects on our breath patterns and other physiological processes. Simply imagining a stressful situation often results in a significant decrease in inhalation volumes. In fact, we can even become conditioned to react physiologically to certain set of circumstances. Most of us have read about Pavlov’s dog. Pavlov ran a bell and gave his dog food for several days. Eventually, the dog came to expect food after hearing the bell and he would salivate when he heard the bell even when he was not given food.

Similarly, we may react by hyperventilating or wheezing, to an image, thought, substance or situation as a conditioned stimulus or an actual allergen. This response is conditioned because we first experience that the substance situation at a time of stress. The substance or situation itself might not have caused an allergic reaction, but we now expect such a reaction and our physiology is conditioned to act in the previous learned manner.

For example, in an early study, Mackenzie (1886) reported that a woman became very allergic when exposed to roses. She was shown a paper rose in the doctor’s office and began to sneezing and sniffing her eyes watering. The physiological reaction was real. The flow was not!

The purpose of the last tracks of CD 2 is to help you change the thoughts and body response by rewriting some past event while you continue to breathe slowly and diaphragmatically. It is possible to break the conditioned link between stressors or allergens and deleterious breathing patterns. Athletes do this all the time. When an athlete is trying to perfect a skill, the athlete will imagine over and over in his or her mind doing the activity perfectly. Often, this imagery helps the athlete improve the skill.
However, if the imagery consists of repeating the failure, it will be nearly impossible to overcome the mistakes associated with the failure.

**Log 4.1 Rewriting a Past Event**

**Instructions:** Imagine a past stressful situation for a few minutes and think of how you would have handled it differently given the wisdom / hindsight you have now. For example, if you were in conflict with someone, imagine yourself reacting differently to that conflict. If you felt fear or anger or frustration, imagine approaching the situation with positive anticipation, with awareness that this is a challenge, an experience to grow from, rather than a negative situation. Continue to breath slowly and diaphragmatically as you imagine this situation in a new way.

**Write your new response to the situation in the space below**
Now practice the new imagery while continuing to breath.

How do you feel in the rewritten situation? Were you more in control? Did you breathe more easily? Describe you felt:

Now repeat this while being attached to the GSR2 and/or the EMG

Remember that there are some things you will chose not to change. It is also important when you do this exercise to remember that you often cannot change the situation or how other people behave. You can only change your own behavior and emotional reactions to the situation. Some of the most powerful growth comes when we choose to change our perspective such as forgiveness instead of resentment. On the other hand, we may develop awareness and autonomy by removing ourselves from situations which are not healthy for us, whether they be relationships or work.
MEDITATION

Meditative breathing techniques have been used in many traditions over the centuries. Meditation enables one to learn to control your attention and to direct your mental focus. The last track in the program is instructions on right-left nostril breathing which encourages the balancing of emotions and development of mindfulness.* Practice this meditation every day for 4 or 5 weeks. If you find your attention drifting, gently bring it back to the breath. Keep a record of your experience on log 4.2

Log 4.2
Instructions: Practice right and left nostril breathing and record what you experienced. Report how this breathing and imagery affected your emotions, thoughts, reactions to others, general well being, and mindfulness. If attached to the biofeedback devices, note what happens as you practice more and more.

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<tr>
<th>Date</th>
<th>Subjective Experience</th>
<th>Feedback Data</th>
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Conclusion

We hope that you will find this program informative, helpful and relaxing. Over the years, we have found the skills taught in this program to be instrumental in the health and well-being of ourselves and many of the clients and friends with whom we have worked.

We would appreciate feedback on the usefulness of this program. Please use the following format to write or email us.

1. **Purpose for using the program:**

2. **Which procedure did you use.**

3. **How was it helpful.**

4. **Comments.**

Mail to: Dr. Erik Peper

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2180 Belgrave Ave.

Montreal, Quebec, Canada H4A 2L8

[epeper@sfsu.edu](mailto:epeper@sfsu.edu)
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BREATHING FOR HEALTH™ is an excellent program to teach healthful breathing patterns...

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Breathing for Health is integral to the mind-body connection. This program is a breath of fresh air for self-regulation and biofeedback. You can learn to recognize and transform unhealthy breathing patterns. The guided exercises enable you to control stress, reach deeper levels of relaxation, enhance wellness, and optimize performance.

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The hand-held GSR 2 turns itself on automatically at the touch of your fingertips and emits a tone. Tension raises the tone, relaxation lowers it and you quickly learn to relax deeply and maximize the imagery processes.

Breathing for Health by Erik Peper, Ph.D., is a product of Thought Technology Ltd. leaders in the development of stress control products and programs used by medical, educational, business, and sports professionals worldwide.

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