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Pressure Points: Selecting The Right Ones



Anyone seriously interested in self defense should consider "pressure point" training to add another tool to their toolbox. "Pressure points" can compliment any self-defense system and in many cases has already been incorporated into most of them. As anyone who made a study of "pressure points" can tell you, there are many points, they take a certain amount of skill and accuracy to perform and they can produce different results on different

people. The question is how many do we need and how should they be selected. Understanding that they may be required to be performed under great stress, the reliability of fine and complex motor skills come into question. Up to now, most martial artists considered pressure points to be good if they hurt and little consideration was given to the medical implications of using pressure points. As you can see, there are lots of things to consider in selecting the "right ones."

What are "pressure points?" "Pressure points" is not a medical term. When the word is mentioned, almost everyone knows what you mean but it is not as clear cut as one might think. Instead "pressure points" include a broad variety of sensitive areas around the body which could respond to a minimum amount of pressure. While knowing the exact type of tissue affected is not necessary to their operation, for an instructor or the inquisitive mind it is of interest. One area that might be called a "pressure point" is a "trigger point." This is an area of increased irritability in a tissue, which when compressed is tender and refers pain in a specific pattern. A second area is a motor point which is the location of entry of a motor nerve into a muscle. Motor nerves activate either muscles or glands. A third area is vascular tissue or blood vessels. It is known that arteries have neurovascular bundles that are often richly supplied with pain receptors. When these are pinched or struck, great pain or incapacitation could result. Additionally, bone being living tissue is also sensitive to being hit or pressured. Completing the list we could add connective tissue like cartilage, tendons, ligaments and muscles. Knowing where the sensitive areas are

located and how to apply force is knowledge that has been accumulated over time and passed down through the generations.

Because the subject of pressure points is so broad, it had to be simplified if it were to be effective in the fluid, fast passed and dynamic encounters often found in combat. More isn't always better. In fact, more is often worse. Too many points require too much practice and might even confuse the brain in making the appropriate selection during a combat situation. Enter the law enforcement community. The martial arts are the basis of all movements performed in police defensive tactics. However, the law enforcement community has more encounters with "bad guys" on a daily basis than most. As a result, they provide a good testing area for what is needed and how things work. Defensive tactics has specific requirements which when reviewed are very much the same criteria that a martial artist serious about practical self-defense would require. They want something that is effective, that is reliable and that is simple to apply. We must also add that which is medically documented. We want to know the medical implications of applying these pressure points for two reasons. First, we are likely to practice these techniques on each other. Can we hurt our partner or ourselves in training? Second, in the street, confrontations are governed by a concept called the "force continuum." This is a set of legal guidelines established by the criminal justice system. It establishes reasonable force in response to threats. We shouldn't be responding with a lethal response to a non-lethal threat. Some situations require a low level force for compliance.

Enter Dr. Les Knight of the Defensive Tactics Newsletter and a system called ISC Control Points. In the early 1990s, Dr. Knight assembled a team that included police defensive tactics instructors, martial artists and the medical community. They attempted to review all pressure points being used by the martial arts and law enforcement communities. From this large selection of pressure points, they eliminated many which were difficult to locate or apply. Remember, clothing can be a factor in making some difficult to apply or in-effective in street encounters. They selected a small number of effective points distributed around the body that met their needs. After conducting a number of studies with hundreds of participants, they found none were 100% and some were not reliable enough to be counted on and so had to be eliminated. They were searching for a success rate of about 90% or better. They then reviewed these points in a medical symposium composed of a broad number of disciplines including neurology, cardiology, chiropractic, pain management and acupuncture etc. Some were eliminated because of the danger of either practicing in class or the serious medical consequences that could result in actual use. From all of these they selected a small number of points, approximately 17 to be exact, that could be effectively used and reasonably justified. These points are continuously being evaluated as new data from the street or the medical community come in.

Dr. Knight and his team found that some commonly used "pressure points" presented serious medical risks when practiced on a training partner. This included the commonly used mandibular angle, a pressure point located below the back of the ear. It was discovered that a large percentage of the population suffered from some form of Temporal Mandibular Joint Syndrome (TMJ). This debilitating syndrome could be made far worse by practicing on the mandibular angle. In one case, a young woman, months after attending a seminar, was unable to bite into a sandwich. The problem doesn't always appear immediately and is extremely difficult to treat.

Another point that raised some serious concerns was the knockout strike to the neck. As we age, plaque begins to build up in the artery walls. The strike to the neck which impacts on the carotid artery could knock plaque loose. Since the blood from the carotid artery feeds directly to the brain, this could result in a stroke or even death depending upon what part of the brain is affected. So repeatedly knocking each other out during practice could have serious or lethal consequences.

Additionally, a spot called the "jugular notch" located in the throat area just above the collarbone is another popular pressure point that was removed. A medical review suggested that the blood vessels in this area could be easily damaged and cause bleeding which could result in a laryngeal spasm. While under life and death combat conditions this target might be justified, the risk of injuring a training partner during practice was enough to get it eliminated.

A fourth commonly used pressure point that was removed attacks the nasalis nerve at the base of nose. Care must be given when practicing on many people in class because the finger becomes a dangerous germ carrier. As more information becomes available about the risk of blood borne pathogens, this is a very serious concern that could easily spread a contagious disease. An added concern was that having fingers so close to the mouth might enable your opponent to bite them. Biting could have serious implications even if you win the battle. While any of these four points might be justified and effective in a street encounter, they can not be justified if they injure a training partner.

Here are some additional tips concerning pressure point training. Control points are only one tool to accomplish a plan and are seldom a plan all by themselves. They should be worked in to compliment your current self-defense training. It is important to recognize that practice makes permanent, not perfect, only "perfect practice makes perfect." It is suggested that this type of training be acquired under the supervision of competent instructors. While books and videos can help refresh your knowledge, they can't correct your mistakes.

Since it was developed, the ISC Control Point program was exclusively taught to the

law enforcement community. Now this research and training is available to members of the martial arts community. Judging from how quickly the program has been spreading; there appears to be great interest in the martial arts community.