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0: Introduction

"Jeder Atem der in mich geht Schenkt mir das Leben Mit jedem Atem, der aus mir geht Schenk ich mein Leben Mein kleines Stirb und Werde Im großen Atem der Erde"	"Every breath that enters me Grants life to me With every breath that leaves me I give my life away My small death and become Part of the great breath of the world"
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'Atemlied' / 'Song of Breath' from the Album 'Womyn in Spirit'.

Carien Wijnen, 2009. Words and music: Luis Zett.

To breathe means to pulse, to expand, to contract. Every human being breathes in their own rhythm. Breath is connected directly to sensations, it brings us into contact with our emotions and with our bodies. It is both the expression of current impressions, and the result of accumulated experiences. Emotional conflicts or negative experiences in life can lead to blockage and disruption in the natural flow of breath. Chronically disrupted muscular tensions influence this flow. It is a central component of Psychotherapeutic work to support people in opening their natural energy flow – including breath – within their own bodies, to make them aware of their own blockages, to work on them and to resolve them. Working with breath allows for the possibility of gaining access to certain parts of 'bodily thought'.

Throughout the course of my extensive professional engagement in the field of holistic body-, voice- and song therapy, I have encountered many individuals that posited questions concerning their so-called 'breathing space'. Some of them reported unsatisfactory experiences gathered from different fields, such as from song therapy or the psychotherapeutic treatment of somatic issues. Their practical experiences often did not reflect what they theoretically should (or had hoped) to expect. Additionally, complaints were raised about a persistent feeling of being out of breath, having a weakened voice, fatigue, hoarseness, back pains, and other psychosomatic complaints. I found myself frequently pondering the underlying cause of this dissatisfaction -these apparently unsolvable issues- and the reason behind the persisting nature of these problems and complaints. I took to searching for solutions to the difficulties these individuals were experiencing, reviewing the extant body of research on these issues, and putting various different approaches and therapeutic practices to the test. Many of these attempts did not bear fruit, or resulted in little perceptible change in the experience of the subjects. Yet, these issues, these blockages, had to have persisted for a reason.

Until that point I had applied the classic understanding of breath-, body-, and song systems. Resulting from this, I focused on -as was usual- emphasized exhalation. For a long period, I believed this to be working effectively and successfully, as I felt content in my application of regular -tendentially solar-breathing techniques, which rely mainly on 'belly breathing' and Diaphragm impulses. In this fashion, through hip gyrations and by keeping my knees flexible, I managed to give my (singing) voice a stronger impulse. However, practical experience showed me again and again, that such a one-sided approach was not sufficient to adequately respond to the needs of all my course participants and clients.

The perpetually mounting number of questions and experiences put forth to me in private sessions, seminars, courses, workshops, and choir sessions challenged me to engage with SBT on a deeper level. It had become clear to me that, if I wished to help, I would have to allow for other approaches than the ones I had taken thus far. This resulted in attending seminars held by Renate Schulze-Schindler and Romeo Alavi Kia, intensive auto-experiences, and thorough research into relevant material, such as the book *Sonne, Mond und Stimme (Sun, Moon, and Voice)*. A key experience that ultimately led me to SBT occurred in the first seminar held by Renate Schulze-Schindler, during which I experienced the chest cavity-focused lunar breathing as an absolute liberation. To my great surprise, I concluded that I was a so-called 'question mark type', with a slight leaning towards the lunar breathing type. Additionally, I recalled to have had a typically

lunar posture with a sole-focused stride¹. From this point onwards, I *discovered* many aspects in my lifestyle, rhythm, compulsion to move, etcetera, to be typically lunar.

Additionally, I also increasingly came to acknowledge, how elementary yet existential knowledge of SBT is to my line of work. I began observing others with increased awareness and increasingly began to integrate my observations and findings into my work. Nowadays, SBT is a major and irreplaceable cornerstone of my practical work, which encompasses song therapy, somatic therapy, and psychotherapy. Because of my extensive and multifaceted experience -as well as the visible effects and changes within participants and clients- I am thoroughly convicted as to the usefulness of the practical application of this polar approach to breath. I consider it to be an alternative-supplementary instrument that allows for adequate and effective guidance and support of therapeutic processes.

1 Study of Breathing Types (SBT)

1.1 What is SBT?

"The study of breathing patterns (also termed as Terlussology® by Hagena) is the study of the opposing influences of sun and moon on an individual's nature, and the resulting effects on the brain or breath. The sun has a constraining, vertically pulling effect, whereas the moon has an expanding, horizontally pulling effect. Immediately upon birth, the center in the brain that controls breathing starts operating.

The dominant energy -either that of the sun or that of the moon- from this moment onwards impresses itself on our brain for the duration of our lives. If the sun's energy is dominant, this results in constricting impulses. If the moon's energy is dominant, this results in expanding impulses. This results in the distinction between an 'inhaling type' (or 'lunar breathing type') when lunar energy is dominant, and 'exhaling type' (or 'solar breathing type') when solar energy is dominant.

In the exhaling type, the active part of breathing is the exhalation through an active and constricting impulse, whereas inhalation occurs passively. In the exhaling type it is the other way around. Here, the active impulse is an expansion (both are described through movement of the breast). Hagema states that "these two types of breathing or constitution differ in their way of breathing, and thus in body stance, motor skills, metabolism and circulation" (Translated. See <http://hagena.info>). The western cultural hemisphere has musician Erich Wilk to thank for the rediscovery of the bipolar SBT. Doctor Hagena and her son then further developed this theory, which was already known in ancient India. I will now briefly discuss some of my own thoughts on polarity.

Breathing, like the coming and going of the tide, shapes the rhythm of life. To breathe means to take and to give, to give and to take in a natural flow. The Greeks use the same word for both breath and spirit: 'Pneuma'. In Yoga, this vital life strength is called 'Prana'. Without breath, there can be no life. Our world is filled with polarity: Light and Dark, Yin and Yang, Earth and Sky, Eb and Flood, Man and Woman. SBT is much the same, with its distinction between the lunar (moon), and the solar (sun). Millennia ago, Asian cultures already understood the polarity of breathing to be dependent on natural laws pertaining to solar and lunar influences. This becomes obvious, amongst other sources, in 'Hatha-Yoga', where 'ha' stands for 'sun', and 'tha' for 'moon'. Traditional Chinese medicine has passed down to us the 4000 year-old Yin (Moon) – Yan (Sun) – sign, which calls attention to polar influences in nature. The flow of Yin-energy in our bodies flows upwards through the meridians and comes 'from the earth', whereas Yang-energy flows 'downwards from the heavens'.

1 See table on pages 5-7

Craniosacraltherapy teaches us, that the body contains vertical and horizontal liquor-pulses. When we also take into account the many different varieties of Yoga, both of these directions are present and accounted for. Kundalini Yoga emphasizes an energy flow that moves from downwards to upwards and emphasizes lunar influences with arm impulses. Hatha Yoga, on the other hand, employs many 'asanas' with emphasized exhalation. A 'full breathing' is generally described thusly in Yoga: 'first belly, than flanks, than breathing through the area of the collar bone, and finally connecting all three areas of breathing'. The muscles between the ribs within the chest cavity allow for two-directional movement, making several types of breathing (both towards the inside, as well as towards the outside) possible.

1.2 Breathing Types According to SBT

The dominant energy type can be calculated, and as a result the breathing type can be determined. Full Moon receives one hundred percent, whereas a New Moon receives zero percent. Sun receives one hundred percent in Midsummer (June 20th), and zero percent at Midwinter (December 20th)². In addition, there is a table describing this scale, which has been included in several books on SBT. If someone, for instance, is sixty percent solar and forty percent lunar, this makes them 'solar'. Or, as I prefer to call it, 'solar dominant'. In addition to this, there is a category of 'hybrids', where the percentages of lunar and solar energy are almost (or completely) equal. These often experience both tendencies in successive waves. The basis of SBT encompasses a complete life system, encompassing type of breathing, nutrition, sleeping position, stature, hot- and cold zones on the body, etcetera.

	<u>Solar / Exhaler / Sun</u> Yang-energy is stronger	<u>Lunar / Inhaler / Moon</u> Yin-energy is stronger
Type	Static, 'Standing Type'	Dynamic, 'Moving Type'
Active Breath	Exhalation	Inhalation
Passive Breath	Inhalation, intake	Exhalation, release
During Activity (Pickle Jar Test)	Active exhalation during the activity	Active inhalation before , holding breath during
Sleeping Rhythm	Lark: Early to sleep, early to rise	Owl: Late to sleep, late to rise
Center of energy in the body	Belly Downwards energy flow	Heart Upwards energy flow
Sleeping position	On the belly On the left side	On the back On the right side
Chest cavity	Contraction	Expansion
Belly – Hip	Expansion	Contraction
Functional exercise	On the belly: active exhalation, passive inhalation. Breath flows in.	On the back: active inhalation through chest cavity, passive exhalation, Breath flows out
	Exhale audibly through the nose, pause, then inhale through the mouth	Inhale audibly through the nose, pause, then exhale through the mouth
Singing	Chest cavity remains tight Belly and Hips wide Exhaling emptiness	Chest cavity expanded Belly and hips wide Inhaling stretching

² This, it should be noted, has nothing to with astrology, and is concerned purely with astronomy.

	Air flows during tonal exercise	Hold air upon inhaling
Tone of voice	Warm, subdued, deep, flowing	Clear, high pitch, rich in overtones, plosive
Developing sound	From head to feet	From feet to head
Main Impulse	Diaphragm, flanks	Chest cavity and side ribs
Expression	Wailing woman, blues singer	Diva
Lifestyle is negatively impacted by:	Hectic business	Internal stagnation
Life dynamic	Needs quiet and time	Needs movement and stimulation
Goal	To flow, to give, to let go To 'pass along forward' Impulse in hip area	To occupy and command space, to take To lean back Joy and Space in chest area
Spinal Column	Straighten	To lean back, lean on
Head	Lower, let loll forward Lower jaw opened actively	Raise head with upper jaw Tilt backwards
Walking	Right leg goes first. Left leg is strongest and the supporting leg	Left leg goes first. Right leg is the strongest and the supporting leg
	Downward swagger (cowboy style) Arms bent Downward impulse Balance on front feet, shoes with profile	Straight walk (soldier) Arms swinging Upward impulse Balance on heels, flat shoes
Standing	Knees kept loose, head slightly lolling	Legs straight, head slightly raised
Face, throat, neck, hips	Stretch zones Need warmth and soft touch <i>Scarf</i>	Contracting zones Need cold and forceful touch <i>Cleavage</i>
Rest of Body	Contracting zones Need cold and forceful touch, pressure	Stretch zones Need warmth and soft touch, stroking
Dominant side (supporting leg, dominant hand)	Left, left half of body, left-handed	Right, right half of body, right-handed
Impulse controlling side (mentally dominant)	Right	Left
Optimal sleeping position	On the belly or left side	On the back or right side
Optimal sitting position	No back support, back straight. Hips forward, stomach resting. Sitting on the ground.	Leaned back, back resting, legs stretched. Belly and hips tensed. Sitting on a chair.
Eating	In-between meals	Three square meals

	Vegetarian food	Hearty, include meat
Nutrition	Vegetable fat, lots of proteins, noodles, wheat bread, sweet fruit, sugar is allowed. Several smaller meals each day, less focus on fluid intake. Coffee can be tolerated.	Animal fats, little proteins, potatoes, corn, rye bread, sour fruits, little sugar, three square meals a day, lots of fluids. Tea can be tolerated.
Nature	Arid (desert) Mountains	Proximity to water, moist and warm, wooded, islands
Sports	Skiing, vaulting, breast stroke swimming, Afro dance, Swing.	Rowing, Tennis, Cross-country Skiing, distance jumping, backstroke swimming, Salsa, Rumba

Solar breathing (Abdominally focused) is defined by the following principles: to let flow, to let go, to be lively in the belly, to give; to also be allowed to become very empty and still. *Here, the pause comes after exhalation.* Lunar breathing (Thoracically focused), on the other hand, is defined by the following principles: to hold in, to open, to invite, to be lively in the chest cavity, to also be allowed to become very empty and still. *Here, the pause comes after inhalation (!)*

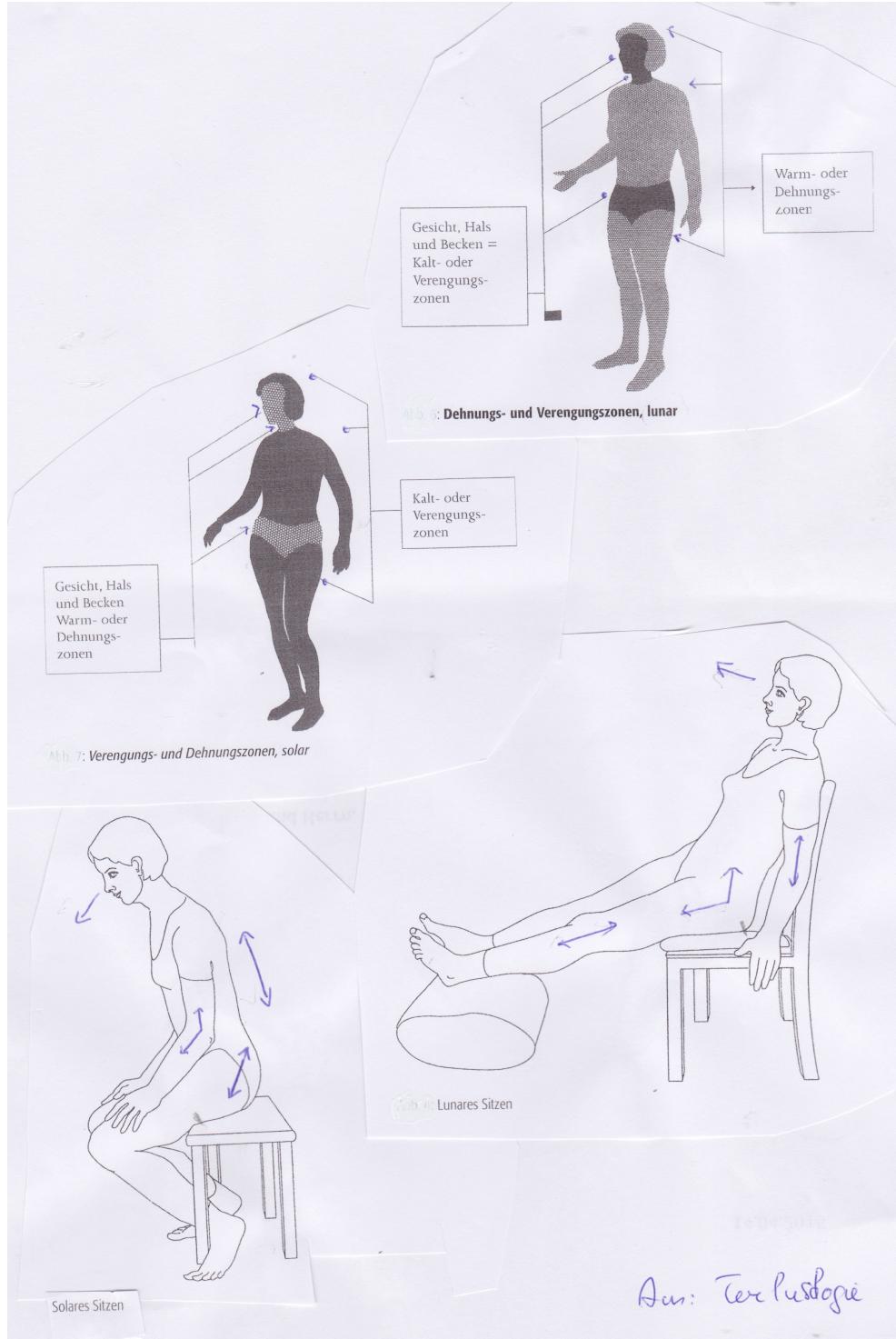
The exhalers (solar) are for example *more likely* to be early risers (larks), whereas the inhalers are *more likely* to be late risers (owls). Several recent articles in scientific journals (i.e. in *Chronobiology International* and the 15.10.15 edition of *Apotheken Umschau*) have pointed out that Germans get up too early in the morning, putting half of the population at risk of a burn-out due to being 'Owls'. The terms of 'Owls' and 'Larks' are also terms well known to the general populace.

Some additional remarks:

Solar individuals are more likely to be left-sided, whereas lunar individuals tend towards being right-sided. Our educations strengthens the right-sidedness.

However, it has been observed that with primates, 50% is right-sided, whereas the other 50% is left-sided. I have observed how people –solar as well as lunar individuals- place their feet (placing their weight on their soles or the pads of their feet), and made note of their differing habits in walking, sitting, and standing. For example, lunar individuals seem to prefer laying back into a soft sofa and putting their feet up, whereas solar individuals have no problem keeping the lotus position with straightened backs.

The following copies originate from Hagemann's "Terlussology". The arrows are my own additions.



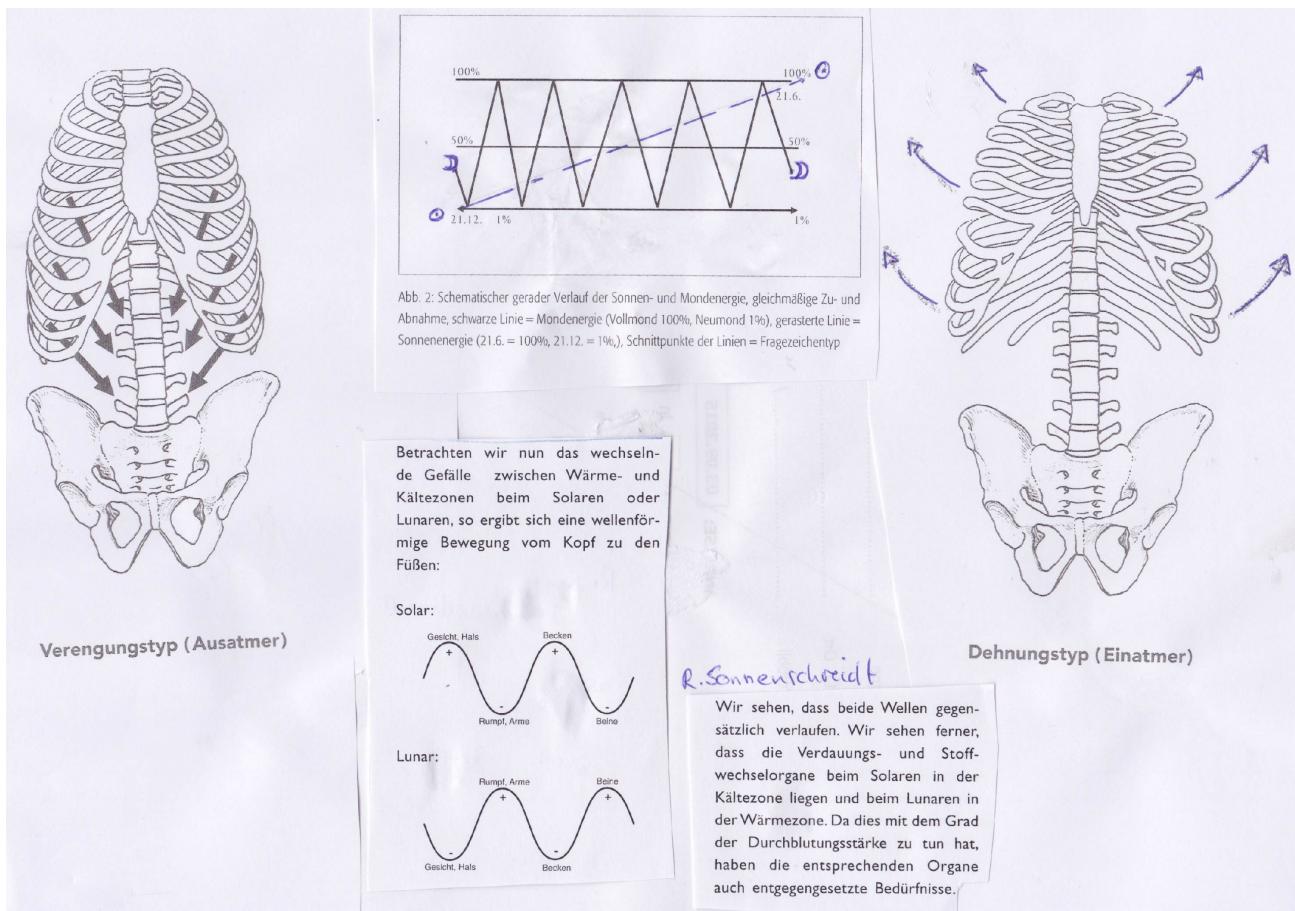
1.3 SBT and Body: Importance of SBT in Touch, Movement, and Breath.

In my profession, I have determined again and again how different people prefer or 'need' to be touched: strong or soft, fast or slow. For the face, for example, this means: too treat lunar individuals gently and slowly, and to treat solar individuals more firmly (It should of course be noted that this is subject to change, depending on the individual).

There are also differentiating hot- (stretching) and cold (contraction) zones.

In the case of throat related complaints (including ailments to the thyroid gland), lunar individuals should be treated with the application of cold, whereas solar individuals should be treated with heat. The same goes for the belly and the rest of the lower body, including, for example, menstrual cramps. The transitional areas between cold and hot zones are located on the HWS7 Line and the LWS Collar Bone. This, as shown in the image from Sonnenschmidt below, creates the image of an 'Energy Wave' through the body. SBT labels the concrete difference between both types.

Image 'expansion zones' from Hagen's "Terlussology". Image 'Wave' from Sonnenschmidt.



I assume that many therapists are not quite so liberal in their approach to their clients that they are allowed to follow *their own impulses*. Therapists, singing coaches, physical educators, etcetera often operate on the basis of *what works for them or what they think is correct* rather than what works best for their client. For my own work, I believe this 'polar approach' to be absolutely essential, as it allows me to tailor my treatment to each clients' personal needs and preferences.

2 Applied Study of Breathing Types

2.1 My Holistic Approach

Early in my career, I developed an interest in different types of healing and therapy. Apart from studying medicine, I also took an interest in (and studied) various types of natural healing, as well as breathing- and singing therapy. I later worked as a doctor in the fields of Psychiatry and Psychosomatic treatment. In my daily practice, I combine this holistic knowledge with my own career as a singer and in my Institute of Singing Therapy (ISGT).

My training in physical psychotherapy and its content have widened, increased, and enriched my professional development, and as such has provided me with a meaningful addition to my occupational repertoire.

In my seminars and professional practice, I try to allow my participants and clients to freely act on their individual needs and impulses as far as breath, body, movement, and voice are concerned. I often notice the ‘rightness’ of their own impulses. In accordance with SBT, I then support these impulses, so the client or course participant can better experience and understand their own ‘energy flow’.

I find the voice to be a wonderful medium: It is directly connected with all manner of feelings and experiences. The sounds of the voice reflect an individual’s experiences and biography. The voice can mirror traumatic experiences. From someone’s voice, their sadness, rage, anxiety, and fragility can be determined. From this perception one can, under certain circumstances, also gain entry to an individual’s current mental and emotional state, and gain glimpses of their life’s story.

It is perceptible –during talking, vocalizing, or singing– where the voice ‘swings’ in the body and where it does not. In other words; which part of their body a person ‘inhabits’, and which parts it does not. Through physical work and psychosomatic processes like crying, a person’s vocal inflections can *audibly* change. It is an indicator of how ‘the life energy flows’. The opening of the mouth for vocalization (such as for shouting), can open ‘floodgates’ in the throat and diaphragm to release deeply rooted emotions. The several segmental armors in the body (according to Wilhelm Reich there are a total of seven such segmental armors) receive direct impulses through use of the own voice.

These notions are a cornerstone for my work. It is exactly because of my professional occupation with the human voice that I became convinced of the value of SBT, as the way that assuming a different stance or the adherence to a particular breathing type (solar or lunar) can greatly impact the sound of an individual’s voice.

2.2 Practical Example: Inhaler Diana (Lunar)

From the course “Singe dich Frei” (“Sing yourself Free”), June 2012.

I conduct a warm-up exercise for this weekend course, using elements from the theory on solar and lunar breathing. I notice that one of the participants, Diana, has a closed body stance: She keeps her arms at her sides, her head is tilted downwards. I learn that she suffers from allergies and asthma. She informs me that she had been sleeping poorly for years, and that she has recently started to suffer from coughing fits. Up until this point, she had hardly partaken in the singing.

As it turned out, she could be classified as an ‘inhaler’, a lunar type. We work on her body and her

breath. I encourage her to claim more space; to lean back more, open her arms, expand her chest cavity, raise her chin up, to let her voice and breath flow, to focus on inhalation rather than exhalation during her singing and vocalizing. We vocalize, we sing, we dance. She is clearly amusing herself.

She has changed visibly the next day. She reports having slept through the night without any coughing fits for the first time in months. She has assumed a more upright stance and takes up more space with her movements. She has a lovely singing voice that becomes more expressive as the day progresses. At the end of the weekend, she has gained the courage to sing solo.

After the weekend seminar her friend, who had also participated, reports to me that Diana continued singing, laughing and prattling cheerfully on the way home, which she states is highly unusual for her. She had also slept soundly for the past week, without being woken by any further coughing fits. I see Diana again after four weeks have passed. Visible changes have been affected since the weekend seminar. She expresses herself differently, speaking her mind more honestly and directly. She seems less restrained. She has joined a singing group and now sings regularly. Every time she feels the onset of an asthma attack, she performs lunar breathing exercises, after which she sings and vocalizes. The attack usually abates and passes after that. I notice that she no longer speaks in a small, shrill voice, but expresses herself clearly and loudly. In her case, it became readily apparent that a wrong breathing habit and body stance had attributed to the persistence of her ailment. The holistic effect of singing on the body also provided health benefits.

3 Study of Breathing Types and Somatic Therapy – Debates

In connection with my work as a singing therapist and professional activity in the area of somatic (psycho) therapy, I have been able to experience just how vital SBT is, and the way it can be practically applied to various therapeutic activities. During my training in somatic psychotherapy, I noticed that SBT is still virtually unknown within this field.

I keep encountering and counseling people that state they “don’t breathe through their belly, even though they should”, or “hold their breath, and cannot exhale properly”, despite having worked on these issues for years under supervision of (physical) therapists. I then determine, that these individuals are lunar-dominated. I motivate them to move and breathe in accordance with their nature: To allow space in the chest cavity is to create a ‘free space’ for these individuals, without any suppression (something that is often incorrectly labeled as ‘pathologic breathing’). It is often hard for these clients to allow space in their chest cavity, often out of fear for being perceived as arrogant or overly self-confident because of their stance. It would be a mistake to treat belly-centered breathing as the single correct way of breathing, as this can hinder the natural flow of breath and under certain conditions create or aggravate blockages.

Generally, physiotherapy and rehabilitative sports take solar breathing as the gold standard, ignoring that many lunar individuals (including myself) prefer to start their active movements upon inhalation, and prefer to hold their breath in afterwards for a brief period of time. Lunar Being is particularly underrepresented in our society, particularly in northwestern Europe and the USA. The upper body often remains rigid. The dynamic chest movements demanded by for example belly dancing and salsa become difficult, if not impossible, as a result.

It appears to me, that somatic psychotherapy also focuses primarily on solar breathing and body stance, as it prescribes that all active movements during the breathing process should occur after exhalation. Bioenergetics for example, gives the following (completely solar-centric) instructions for breathing: “hold knees loose, [...] breath comes ‘from the belly’”. However, lunar-focused individuals prefer to stand with their legs straight, their breathing pattern emphasizes the chest cavity and inhalation. Lunars lose strength when they focus overly on exhalation, for example by blowing or puffing. They are more dependent on collecting their energy through inhalation.

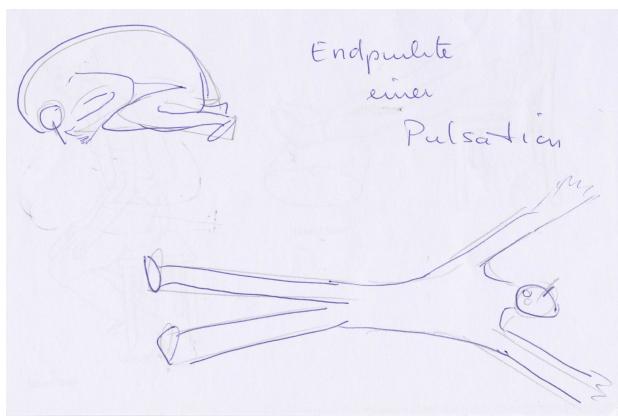
At this point in time, I am able to perceive almost immediately whether someone primarily has

lunar or solar tendencies. Through this, I am able to determine and support this individual's natural impulses.

During therapy, I employ SBT to determine a client's needs:

- In the case of a burn-out, does the client need tranquility, to let go (solar), or do they need freedom, movement, and impulse (lunar)?
- When someone is sad, I know how to reach them, so that their energy can be allowed to flow more effectively. If 'giving away' is more important, letting breath flow downwards and forwards or assuming a solar stance can help. If 'opening up' is more important, it might help a client to lie with their backs on a medicine ball, arms outstretched and head tilted backwards, to better let out a cry or shout.
- Where mental issues are concerned, solar and lunar individuals also tend to behave differently: Tendentially, solar individuals tend to lean towards depression, and the melancholy of life is a common thread. Lunar-leaning individuals on the other seem to tend more towards a desire for craziness, flying, and freedom.

The pulsating life energy is of vital importance to both somatic psychotherapy and SBT, and knowledge of the polarities presented by SBT can lead to new insights. The following two images clarify the differences in where the ending points of this pulsating energy are in the purest forms of both breathing types. Both types are, in the final phase of each pulse, somewhat similar to the movement of for example a sea anemone.



4 Summary

Even now, there remain controversies and differing stances on the topic and relevance of SBT. A part of the yoga movement has opened itself to the core tenants of SBT, and allows participants a large degree of liberty in how choose to breathe, sit and move during certain exercises. In physical therapy, the principles of SBT are typically either ignored or frowned upon. Discussions on the subject also rage in singing schools. The last word on the issue definitely has yet to be spoken. Even SBT is itself still a recent development, and as such is under constant development and revision.

As every human being is singular and different in their biography, there cannot be a tailor-made solution that can be applied to everyone. Rather, with the benefit of the client in mind, one should pick the best and most applicable out of a flexible and wide-ranging variety of therapeutic measures. Despite my conviction as regards to the practicality and applicability of SBT for and during therapeutic work, there still remains a need to be critical, and to put it into practice only after careful situational consideration. No matter which approach one favors, SBT as an alternative method can provide a valuable contribution to any therapeutic process.

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