Highland Wado - Kai
Karate-Jujitsu-Kick Boxing
Organization of Canada

‘The Nerve Centres’

An Explanation Of The Sixty Four Nerve Centres Of The Body And Their Proper Application In Self-Defense

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‘The 64 Nerve Centres’

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Nerve Centres For Self Defense

FRONT VIEW NERVE CENTRE #1

The area for the first nerve centre is located in the eye and also underneath the eyelid. Pressure at this point whether one uses the thumb or fingers is very excruciatingly painful, due to the close proximity of the ciliary ganglion of nerve cells, which lie on the upper surface of the eyeball, just under the eyebrow.

Due to the delicacy of the tissue in this region, and to the amount of pain and injury one can inflict on another, this should be first practiced on one’s self in order to be able to govern the amount of pressure one can use without great injury to an opponent, or to a friend while practicing.

Techniques used to cause injury or pain in this region can be used either by applying a constant pressure or a snapping technique. This pressure can be used effectively to free one’s self from the hold of an antagonist regardless of their strength or your weakness.

Applied pressure techniques: one finger, two finger, two finger & thumb, fist with extended thumb, straight thumb, tiger claw hand, ridge hand with bent thumb, one finger or two finger foreknuckles with augmented thumb, back knuckles and elbow.

Most of these techniques can be used in a snapping action but must have accuracy and knowledge of gauging the injury. Snapping is must more difficult to practice with a partner, and if you do so be sure to keep a safe distance from the facial area with your techniques.

Other techniques would be difficult to use in this region. The surface of the striking area would probably bridge the area of the cheek bone and the forehead. Although it may be effective in causing pain and some damage it may not get the results you are looking for when trying to escape.

NERVE AREA EASILY SENSING PRESSURE WARNING THAT THE EYE COULD BE INJURED.

There are also many smaller nerves attached to the retina of the eye connecting to the optic nerve at the back of the eye that pressure on the eye will cause receptors at the back to sense intense pain also.
The second nerve centre area is located just under the nose and close to the upper lip. Constant pressure technique or a blow delivered close under the nose will render the largest bully insensible and incapable of further combat. The blow should be directed up and back directly under the nose, close to and against the upper lip. Direct the blow back at such an angle that the hand will not tend to slip off the end of the nose, but rather to drive the base of the nose up and back into the face, as it were. Take the edge of a book or you can use the karate ridge hand and press on yourself at this point. It may take a few attempts but you will perceive the angle with which to deliver this pressure or blow. Upward pressure will cause extreme pain, a striking technique at the blow point will render an opponent insensible and might even cause death, if applied without control or reason. In executing this blow accurately, both in aim and pressure, control is very necessary. One should practice the strikes with a partner with extreme distance control and striking a practice target until complete accuracy of a strike is acquired.

Techniques that can cause pain and injury in this region can be used either by applying a pressure technique or a striking technique.

Applied pressure techniques: extended thumb, tiger claw hand, two fingers, palm hand.

Striking techniques: knife hand, ridge hand, tiger claw hand, fore knuckle hand and palm hand.
The area of the 3rd nerve centre is located in the lower jaw or chin bone. Proper pressure on this spot, hits the exit of the mental nerve from the mental foramen. This is a small hole in the lower jaw or chin bone, where the nerve exists. Pressure here or a sharp strike will quickly open the mouth of a person biting you or attempting to do so.

Due to the delicacy of the nerve in this region, and to the amount of pain and injury one can inflict on another, this should be first practiced on one’s self in order to be able to govern the amount of pressure one can use without great injury to an opponent, or to a friend while practicing.

Techniques used to cause injury or pain in this region can be used either by applying a pressure technique or a sharp striking technique.

Applied pressure techniques: thumb, one finger, two fingers, and second knuckle one and two fingers. Pressure technique can be applied to both sides of the jaw simultaneously for desired effect.

Applied striking techniques: closed fist thumb knuckle or second knuckle one finger strike or 2nd knuckle two finger strike.

Secondary centre is the infra-orbital nerve that exists the maxilla by the infra-orbital exit. This centre can be used separately or affected by nerve centre #2 techniques also.
The area for the fourth nerve centre is located in the throat region. Specifically the cricoid or Adam’s apple. A direct strike, punch or pressure front to back, directly over the prominence of the Adam’s apple, will cause a disarrangement of the cartilage in this region, thus deforming the larynx in such a way as to make inhaling virtually impossible. One can inhale, but it is impossible to exhale under these conditions. Any technique should not be executed to the point of completion. Only the motion should be gone through in practicing techniques. Any technique used here for a defensive purpose should only be done in a life threatening situation.

Due to the delicacy of the area in this region, and to the amount of pain and injury one can inflict on another, this should be first practiced on one’s self in order to be able to govern the amount of pressure one can use without great injury to an opponent, or to a friend while practicing.

Techniques used to cause injury or pain in this region can be used either by applying a pressure technique or a sharp striking technique.

IN THE DIAGRAM BELOW WE CAN SEE THE REGION WHERE PRESSURE OR A STRIKE COULD BE USE TO CAUSE INJURY TO AN ATTACKER. REMEMBER, CARE SHOULD BE EXERCISED WITH PRACTICING IN THIS AREA.

Applied pressure techniques: tiger claw hand and forearm.
Striking techniques: closed fist punch two knuckle, knife hand strike, ridge hand strike, upward ridge hand strike and tiger claw hand strike.

The nerves directly affected in this region are the laryngeal nerves and the vagus nerves.

The laryngeal nerves both leave the brain at the base of the skull and pass down the neck. One hooks around an artery behind the right clavicle, the other around the aorta of the heart; both return to the larynx. Damage to one or both nerves causes vocal cord paralysis, resulting in loss of voice and sometimes obstructing breathing.

Branches of the vagus nerve supply the muscles of the larynx and trachea and are involved in the action of swallowing and coughing and speech quality.
The area for the fifth nerve centre is located on the side of the neck, the common carotid artery. It can best be located at the upper border of the thyroid cartilage to form internal and external branches. The internal carotid continues upwards to the base of the brain, the central nervous system that will be effected.

A moderately steady pressure, applied to the arteries on both sides of the neck at the same time for a period of ten seconds or more, will render an opponent unconscious the same as if they had fainted. This pressure applied to these two points amounts to the shutting off of the blood to the brain flowing through the carotid arteries. Nature was wise in providing a double supply of blood to the brain inasmuch as either of the carotid arteries will carry enough blood to the brain for emergencies, when the other may be shut off by pressure. But by using pressure on the spots indicated on both sides of the neck, at the same time, the entire blood supply to the brain can be shut off, and temporary coma will ensue.

Pressure techniques applied: haito hand & shuto hand applied simultaneously (strike to pressure), tiger claw hand, thumbs of each hand simultaneously or several types of choke holds.

This technique should be only practiced under the direction of a qualified instructor.

The central nervous system is greatly affected when the blood supply is cut off in these areas of the neck.
FRONT VIEW NERVE CENTRE #6

The area for the sixth nerve centre is located on the sides of the lower neck and involves the left and right vagus nerve. This nerve travels from the brain and is the longest of the cranial nerves. It emerges from the brain, passes through the neck and chest to the abdomen and has branches to most of the major organs in the body.

At this point direct pressure, dragging or a strumming motion is applied to the nerve centre. At this centre the vagus nerve, as it is called runs up and down the neck.

In order to strum this nerve, place the thumbs in front of the lower neck with the fingers behind the neck. Now, place the thumbs in front of the nerve, and close your hand tightly, pressuring on the nerve. This will cause a decided pain at the time, but the real results comes after a few repetitions or a constant hold. The vagus nerve is an inhibitor on the heart and a stimulator of the stomach. In other words, pressure or irritation at this point, will cause the heart to slow down and the stomach to become upset. It is a known fact that heavy and constant irritation of the vagus nerve, will cause one to vomit and get unduly weak, because of the sudden slowing down of the heart.

Applied pressure is most effective with the usage of the thumbs.

Strumming motion techniques can be peacock hand, extended thumbs, one or two second knuckle techniques.
FRONT VIEW NERVE CENTRE #7

The area for the 7th nerve centre is located just under the arm pit or axilla. This area includes all of the main nerves of the arm at their exit from the brachial plexus. The brachial plexus a collection of large nerve trunks that pass from the lower part of the cervical spine (in the neck) and the upper part of the thoracic spine (in the chest) down the arm. These nerve trunks divide into the musculocutaneous and axillary, median, ulnar, and radial nerves which both control muscles in and receive sensations from the arm and hand.

Injury to the brachial plexus can cause partial or complete loss of movement or sensation in the arm.

This vital spot, also considered a strumming point, but applied pressure and striking techniques can be applied also.

Applied pressure techniques: extended thumb, fist and thumb, two fingers, one finger second knuckle fist.

Strumming techniques: extended thumb or two finger fingers.

Striking techniques: side kick, one knuckle strike, fore knuckle strike and inverted haito.

Grasp firmly and dig your thumb into the lower front of the axila. Because of the main nerves in this area the pain that can be produced with only a slight pressure is unbearable, and numbness to temporary paralysis can be produced by increasing the pressure. A few strokes, even though lightly strummed, will stop your opponent from completing his arm action immediately.

Try this on yourself until you can find the tender spot readily, before you attempt it on an opponent. The practice of securing this hold on one’s self, will disclose the right angle, and pressure to use in obtaining the desired results.

FRONT VIEW NERVE CENTRE #8

The area of the 8th nerve centre is located in the pit of the stomach or the solar plexus. A well directed blow to this area will serve to put an opponent out of commission. It does not make any difference how strong or how large he may be. It should be clearly visualized in the student’s mind that the nerves at which you are directing your blow, lie on the front surface of the vertebral column (the back bone) back of the stomach. The blow you deliver must carry through the stomach and jar the delicate nerve centre, or solar plexus. At this point, one must make a sharp quick jab instead of a slow heavy pushing blow. This can be understood by a trained student that a pushing blow is not jarring enough as that of a sharp retracting strike.

Techniques in this region should be practiced lightly as too heavily of a blow can cause a person to vomit and can be very dangerous in injury.

The solar plexus is the largest network of autonomic nerves in the body. Situated behind stomach the solar plexus incorporates branches of the vagus nerve. The solar plexus sends out branches to the stomach, intestines and most of the abdominal organs.

Striking techniques: fore fist punch two knuckles, spear hand strike, palm strike and two finger fore knuckle strike.

NOTE: Plexus is a network of interwoven nerves or blood vessels, such as the brachial plexus (a network of nerves in the upper arm and neck) or solar plexus in the abdomen area behind the stomach wall. This plexus of nerves is found in several other areas of the body.
Diagram above shows the trunk of nerves and vessels located behind the stomach leading to the spleen and suprarenal gland. One should practice the techniques prescribed for the 8th nerve centre with great care and caution.
The area 9th nerve centre is located on the top outer edge of the biceps muscle. This is a knife edge strike spot and the knife hand strike is the most effective used for this area. Other strikes that can also work are the ridge hand and the two finger or one finger knuckle hand strike.

To practice the knife hand strike on a nerve centre, you can do so by hitting the biceps crosswise this point indicated on the front view master chart. If your arm does not have an excess of fatty material you will see a ridge where you strike rise up for a few seconds after the blow is delivered. The result of this action is due to a clonic contraction the the muscle fibers, caused by an irritation of the nerves of the muscles sheaths. The harder the blow, the greater will be the muscle contraction. Practice hitting with the little finger edge of the hand, until you can deliver quite a sharp and cutting blow. The knife hand strike or block is very effective at higher levels because the basics should be perfected in movements making the force of the knife hand more effective in use.

A major nerve of the arm that runs through the biceps muscle is the musculocutaneous nerve. It also pierces the coracobrachialis and continues between the biceps and the brachialis, and it supplies these three muscles. It emerges at the lateral margin of the biceps as the lateral cutaneous nerve of the forearm. Injury of a powerful blow effecting this nerve in the biceps area can easily take the function of the arm away from an opponent very easily.
FRONT VIEW NERVE CENTRE # 10

The area for the 10th nerve centre is located midway down the biceps muscle on the inner side of the arm but is not protected by the muscle itself. This nerve centre is a strumming point. The nerve involved here is one of the three main nerves encountered with the study on nerve centre # 7. We will run into this nerve all the way down the arm, so try to visualize its course. Refer to the diagram on this page to help locate the median nerve and study its course down the arm. Nerve centre # 10 is located directly over the humerus or the large bone of the arm, and is not covered with a protective layer of muscle.

Pressure technique: grasp under the opponent's arm with your fingers of the right hand, placing the thumb over the nerves. Try this lightly on yourself or a partner for the first few times and note the extent of the pain and nerve irritation in the hand, wrist and forearm.

A few other techniques that I have developed over the years to make this more effective a technique is to use the strumming effect but against an attacker reaching forward, block with the left hand and use the right hand in this nerve area as a strike and then twist the technique clockwise to strengthen the strumming action of your arm. The one or two knuckles fist can be used or the entire fore knuckles can be used (hiraken).

FRONT VIEW NERVE CENTRE # 11

The area for the 11th nerve centre is located on the inner arm and again involves the median nerve as in nerve centre # 10. The nerve again is not protected by the muscles of the arm. This centre is located just above the capsule of the humerus bone where the biceps and the brachialis muscles attach at the elbow joint.

The technique used here are the same as techniques used in the 10th nerve centre. Refer to the diagram below for centre # 11 location.
FRONT VIEW NERVE CENTRE # 12

The location of the 12th nerve centre is located in the inner elbow area, called the crazy bone, about which we hear so much, but know so little. It is a strumming point and striking point where the ulna nerve is partly exposed as it courses around the elbow joint.

Applied pressure technique: pressure can be applied to this area with a knife hand, extended thumb, one knuckle fist hand, two fingers and fist hand. Applying pressure at this point with strumming will temporarily paralyze the little finger side of the hand and loosen anyone’s grip to a marked degree.

Striking technique: effective techniques are the knife hand, fist hand, one knuckle fist.

FRONT VIEW NERVE CENTRE #13

The location of the 13th nerve centre is on the outer part of the arm at the elbow joint where the radial nerve branches out over the inside of the joint of the humerus and the radius bones of the arm, along side of the brachialis muscle.

This location is much more tender than the nerve centre # 9, but a little harder to find. Also the amount of irritation resulting, is less than that which is caused by the nerves on the biceps. You will find that this is very effective in weakening an opponent’s wrist.

This is another knife hand blow spot, and a severe blow here will cause “wrist drop” or the inability to extend the wrist and fingers.

Applied strike: knife hand, one knuckle fist and cupped finger hand strike.
The location of the 14th nerve centre is in the abdominal cavity where the femoral nerve is exposed as it leaves the abdominal cavity to course down the thigh. This nerve centre area is applied with a steady pressure technique. Little pressure applied here at the right time makes it possible to escape from someone’s grip around your body with much more strength than you. The angle of pressure is nearly straight from the front to the back and should be followed through until your opponent doubles up in pain or releases his grip from you.
The location of the 15th nerve centre is found in the wrist area on the outside of the inner arm. This is also a pressure point where we meet another median nerve. The thumb is by far the best digit to use though the fingers can be used but not with the efficiency of the thumbs. The tender spot should be located on one’s own wrists, and location and the direction of pressure studied so that the attack on the opponent will be successful. This is one of the direct ways of opening an opponent’s hand, and if done right, will not only open the hand, but will weaken the opponents grasp for a considerable length of time.

Diagram shows the median and ulnar nerves that run from the forearm to the hand area.
FRONT VIEW NERVE CENTRE # 16

The location of the 16th nerve centre is in the pelvic area or groin area. Here the student will encounter a strumming point that is as effective as the pressure point in nerve centre # 14 in making an opponent release a hold they have on you with their legs. The strumming is done from above and down toward the large ligament of the abductor muscle which is attach to the thigh. The nerve being pressed is a collection of spinal nerves traveling through this area and branching off. The nerves are pressured against the ligament of the abductor muscle. This ligament is easily found, as it is the only one of any size in this region. The nerve is in front and above the ligament.

Applied pressure technique: The thumb is the instrument to be used in this instance. The right hand should be used on the opponent’s left leg or the right, as the case may be. This hold is secured by slipping the hand up the medial side of the leg to be attacked, thumb to the front and fingers to the rear. Now, grasp firmly, digging deeply with the thumb at the same time.

Striking techniques can work in this region but the steady pressure applied is much quicker for release from an opponent’s grip. Pressure can also be applied to this centre with the one knuckle fist, fingers and the fore knuckles.

(See diagram for the 14th centre for the nerve path in this area.)
The location of the 17th nerve centre is in the upper front of the leg area, or midrange of the rectus femoris muscle. The cutaneous nerve of the thigh course and branch through this area.

This centre is injured easily by a striking, or a kicking technique.

A blow here causes a contraction of the muscles, which if at all severe, will make walking nearly impossible. The knife edge of the hand, applied to the muscle is very effective, but far greater is the kick of the knee directly in the centre of the muscle. A severe kick at this point will not only temporarily limit the use of the leg, but can render it useless for several days to a week or more. Therefore, it is plain to see that a finesse of control is quite necessary in practicing this point blow,

Applied striking techniques: knifehand, back fist strike, hammer fist strike and one knuckle fist strike are those which would be quite effective in causing injury and pain to the area.

Applied kicking techniques: knee kick, front kick, side kick and many type of heel kicks can cause severe injury and pain to this area.
The location of the 18th, 19th and 20th nerve centre is located in the shin area. This path is the course of the perineal nerve in the lower leg.

A back and forth strumming or dragging techniques work best for these centres. By running the technique up and down on this spot, using moderate pressure, you will cause pain that is unbearable. The strokes would be directed up and down, pressing the perineal nerve against the lateral side of the shin bone, or tibia, as it is called.

Applied strumming techniques: two knuckle fist, fore knuckles and fist with extended thumb. The front side or the heel of the foot can also be use to strum downward in this nerve pathway.
The location of the 21st nerve centre is located in the outer edge of the arch of the foot. This centre point is where the superficial peroneal nerve branches into the foot area. Applied steady pressure techniques can be used as well as a blow to cause pain and injury to this area. Very effective results can be had by pressing on this centre with the thumb or any blunt pointed instrument, such as an umbrella top or the high heel of a lady’s shoe or even a cane. The effect will not only be painful but the arch can be broken down, thus causing permanent injury to the foot, if the pressure is severe enough. This is a sure way of making a person lift their foot if they are standing on any part of you. A quick pressure to the spot will instantly make a person raise his heel and sometimes the whole foot.

Applied pressure techniques: extended thumb or one knuckle fist.
Quick pressure techniques or a blow: elbow, one knuckle fist or a heel kick.

Diagram shows the branching of the nerves through the foot and where the superficial peroneal nerve runs through the arch of the foot.
The location for the first nerve on the back view master nerve chart is at the base of the ear. This is a pressure point technique, and is reached by directing the thumb or fingers inward and upward at the base of the ear. The facial nerve, and the other nerve trunks with this ganglion, go to make this one of the most vulnerable nerve spots on the entire body. A small person can literally lift a much larger one, by pressing in and up with the thumbs on both sides of the ear at this point.

This nerve centre can be used to break away from an opponent who is attempting to grab and hold you at or around the waist. It can also be used in holding someone who is trying to break away from you. By grabbing your adversary from behind and pulling his head back and up, you can make his escape impossible because of the pain involved.

Pressure techniques: one or two fingers, thumb and one knuckle fist.

**ANGLE OF PRESSURE APPLIED TO THE BASE OF THE EAR** (pressure is applied inward and upward into the facial nerve)
The location of the 2nd nerve centre is at the back of the neck or the third cervical vertebrae, the smallest and weakest in the entire spinal column. Because it is the weakest link of the vertebrae column, it is the point that will be injured very easily.

The knife hand strike is the best technique to use on this nerve centre. However, the angle of the strike in relation to the neck is very important, and should be slanting from the back to the front and paralleling the jaw bone. The blow should be directed from behind toward the front of the neck and slightly downward. "THE DANGER OF PLACING A BLOW AT THIS POINT CANNOT BE OVER ESTIMATED, THEREFORE SHOULD BE GOVERNED WITH UTMOST CARE WHEN PRACTICING. The only time to use this blow is in attacking an armed or desperate foe, where life is in the balance, and you are on the defensive side.

Applied striking technique: knife hand strike or the ridge hand strike.

DIAGRAM SHOWS A SECTION OF THE SPINE AND ITS COMPONENTS OF NERVES. INJURY CAN CAUSE PERMANENT DAMAGE IN THIS NERVE CENTRE DESCRIBED ABOVE IF EXTREME CARE AND CAUTION ARE NOT TAKEN.
BACK VIEW NERVE CENTRE # 3

The location of 3rd nerve centre is the back of the neck. Here we have another knife hand strike or pinch involving the middle of the upper border of the trapezius muscle, which due to its abundant nerve supply and comparatively weak blood flow, is one of the easiest muscles to injure and perhaps the slowest to heal. To pinch the muscle at this point, with the thumb and index finger, is enough to make a person have a stiff and sore neck for several days.

A sharp, knife hand blow on this nerve will almost instantly draw an opponent’s head to one side and thus make further combat exceedingly difficult, if not impossible.

Continued pressure on 3rd nerve centre will cause a severe muscle contraction, and may result in more serious consequences of lasting nature. Therefore, we again urge our students to use caution at all times while practicing.

Applied pressure techniques: tiger claw hand, fingers, thumbs and fist extended thumb, one knuckle fist and fore knuckles.

Applied striking techniques: knife hand, inverted ridge hand, hammer fist, one or two knuckle strike and tiger claw strike.

BACK VIEW NERVE CENTRE # 4

The location of the 4th nerve centre is on the back of the lower neck, specifically it is the location of the 6th cervical vertebrae. This centre is a applied pressure or striking area.

**NOTE** this nerve centre is by far the most dangerous of all the 64 nerve centres in the human body. We deem it necessary at this time to warn all readers and students that this centre is a ‘FORBIDDEN ‘NERVE CENTRE’, and should never be used under any condition by anyone unless they are certain that the death of their opponent is the only hope for their self preservation. There is great danger that a severe strike or blow here will result in death to the opponent unless a most scientific means of restoration and re-suscitation is applied immediately and the it is not always possible to revive a victim of this blow.

The knife hand strike here is the most effective but other strikes can be used. The strike is directed forward and down on he 6th vertebrae. This is the vertebrae that moves forward when the head and neck are bent back. The vertebrae moves with a peculiar sliding action.

Applied pressure techniques: grasp forehead and apply palm heel hand to back of neck.

Applied striking techniques: knife hand, ridge hand, palm heel hand, hammer fist, front punch and back fist.

SPINAL INJURY: damage to the spine and sometimes to the spinal cord. Injury to the spinal cord may cause loss of sensation, and muscle weakness or paralysis.
BACK VIEW NERVE CENTRE # 5

The location of the 5th nerve centre is in the middle of the upper back, on the spinal column, upper thoracic vertebrae, between the shoulder blades (scapula).

This is a very sensitive centre, a technique here would be a strike or kick that would completely knock the wind out of an opponent, and it will be impossible for the attacker to breathe for some time. A severe blow in this region will also affect the heart as well.

Applied striking or kicking technique: straight punch, hammer fist, knife hand and the palm heel hand. Kicking technique most common would be the knee kick.

BACK VIEW NERVE CENTRE # 6

The location of the sixth nerve centre is across the triceps muscle of the upper arm area. The knife hand strike is the most effective strike for this centre. Other strikes that will work in this area are the ridge hand strike and the two and one knuckle fist hand.

To practice the knife hand strike on the nerve centre you can do so by striking the triceps crosswise on the point indicated on the back view master chart. If your arm does not have an excess of fatty material you will see a ridge where you strike rise up for a few seconds after the blow is delivered. The result of this action is due to a clonic contraction of the muscle fibres, caused by an irritation of the nerves of the muscle sheaths. The harder, the blow the greater will be the muscle contraction.

The technique used here is identical of that of the 9th nerve centre, front view.

The nerves of the arm that branch into the triceps muscle are the post cutaneous nerve, brachial nerve and the medium cutaneous nerve. Injury of a powerful strike effecting these nerves can easily take away the function of the arm from an opponent.
BACK VIEW NERVE CENTRE # 7

The location of the 7th nerve centre is on the outer back of the elbow joint where the humerus bone capsule connects which the radius bone of the lower arm. The medium nerve again comes to the surface at this point, and its surface location and tenderness can be taken advantage of.

Pressure and strumming techniques: One knuckle or two knuckle, closed fist extended thumb or two fingers. This strumming technique or even a rocking effect of these techniques prove to be the best.

Striking techniques: one of two knuckle strike. This area is hard to strike to unless you are very adapt at control and good technique location.

check diagram on the 6th nerve centre for the exact location of the medium nerve and where it emerges around the elbow to travel down the back of the foreman.

BACK VIEW NERVE CENTRE # 8

The location of the 8th nerve centre is on the lower back on both sides and is the location of the kidneys. At this point the kidney is very close to the surface of the body. A strike here is very effective and also a knee kick is very pronounced. The direction of the blow is from the back to the front, slightly downward and toward the opposite side. The most vulnerable point of attack on the kidneys is just below the last of the floating ribs, and just in front of the large muscles of the back. The result of a blow here may not be immediate, but a strike here will weaken opponent and in severe cases has been known to cause death.

Control is very important when practicing these techniques in this area. A strike or kick may cause pain if not practiced properly, pain may result but injury can occur much later causing many complications. ‘BE CAREFUL, WHEN PRACTICING TECHNIQUES TO THE KIDNEYS’.

The nerves effected in this region are the dorsal nerve roots and the renal nerve branches. A pronounced blow to the kidneys could lead to a kidney failure and place a person into shock. A kidney that has been damaged can cause waste products not to be cleaned from the blood, and urine output is diminished. A person will become very tired or drowsy, nausea, vomiting and breathlessness will occur.

Applied striking techniques: straight punch, back fist, fore knuckles strike, hammer fist, knife hand strike, and elbow strike (very effective).

Applied kick techniques: knee kick and round house kick (ball of the foot).

LOCATION OF THE KIDNEYS

The kidneys are situated at the back of the abdomen cavity, just above the waist, on either side of the spinal column. The kidney on the right lies below the liver, while the kidney on the left is situated below the spleen. The arteries that supply the kidneys arise directly from the aorta.
BACK VIEW NERVE CENTRE # 9

The location of the 9th nerve centre is located between the thumb and index finger. Here we reach the end of the medium nerve. This is a pinch spot and the only nerve centre on the body where a pinch can do the most good. The sensitivity of the end fibre's of this nerve can be appreciated if you will try it on yourself. When the correct application is understood, you will realize how effective the proper manipulation of this nerve centre is.

Applied pressure techniques: fist and extended thumb and one knuckle fist. A grasp with the other hand will also work well in this application.

DIAGRAM SHOW APPROXIMATELY THE LOCATION OF THE PINCH POINT AREA WHERE THE MEDIAN NERVE ENDS AND STARTS TO BRANCH OUT INTO THE HAND AREA

BACK VIEW NERVE CENTRE # 10

The location of the 10th nerve centre is at the end of the spinal column, known as the tail bone or coccyx bone. The method of attack here is very effective with a knee kick, other kick are very effective as well. ‘NEVER PRACTICE WITH A BLOW TO THIS AREA AT ANY TIME WHERE CONTACT WILL BE MADE’. A slight jar may cause painful and permanent damage. A kick to this area slightly can cause unbearable pain for hours.
BACK VIEW NERVE CENTRE # 11

The location of the 11th nerve centre is between the two middle fingers of either hand. At this point the ulnar nerve branches out into the two middle fingers of the hand. This centre is an effective means of opening an opponent’s hand, by applying pressure at this point. The more tightly your opponent closes his hand, the more effective will be the result of this pressure. The only way the opponent can alleviate the excruciating pain is by loosening his grip which comes so natural that it is really a reflex action, for the minute or second that the pressure begins to hurt, they will unknowingly open his hand. If he refuses this natural impulse to relieve pain, a few continued gouges on this nerve will practically paralyzed their entire grip.

No matter what type of pressure technique you use the pressure should commence between the two centre knuckles, directed at the same angle as the back of the hand, during the initial pressure. Then the technique should be rocked or rolled over the ligament that connects the two muscles together toward the back of the hand. This motion cuts the nerve between the thumb nail and the ligament, and permanent injury is not only possible, but highly probable, in cases where a person refuses to loosen his grasp, and where added pressure is used.

See diagram for nerve centre # 10

BACK VIEW NERVE CENTRE # 12

The location for the 12th nerve centre is in the centre of the muscles of the upper leg, or the semitendinosus muscle (inside muscle) and the biceps femoris (outside muscle).

This nerve centre corresponds to nerve centre # 19 front view of master chart, and by referring to the reading material relating to same of this series, you can readily apply it to nerve centre # 12 back view.

Semitendinosus muscle

Biceps femoris

BACK VIEW NERVE CENTRE # 13
The location of the 13th nerve centre is the lower back area of the leg, lower area of the calf muscle. This region is the location of the calf or Gastrocnemius muscle to the Achilles tendon. The nerve and its branches affected here is the tibial nerve.

We find here that a strike, kick or pressure technique work well in this centre. The kick techniques are the most effective here. A severe kick down and in will very likely prevent an opponent from walking on their own for some time. Therefore this should only be practiced in emergencies, as we have repeatedly urged in previous pages.

Applied pressure techniques: fore knuckle hand, one or two knuckle fist or the fist and extended thumb.

Applied striking techniques: tiger claw hand, knife hand, hammer fist and one of two knuckle hand.

Applied kicking techniques: heel kick, side stamping kick and front kick.
The location of the 14th nerve centre is on the outside of the foot just below the ankle bone. The nerve centre involved has branches of the peroneal nerve and the saphenous nerve running through this area. This is probably the most efficient nerve centre in the entire anatomy. It can be used to bring an opponent quickly down. A hard blow delivered to accurately at this point will, most likely bring an opponent to a squatting or sitting position. The most effective way to deliver a blow to this nerve centre is by using the heel of your foot. Determine the exact location in practice by using your thumb. You will find that the ankle bone protects this area as it protrudes out over the nerve centre. When you find this area you will notice that there is a well defined hollow which seems quite soft to the pressure of your thumb, and on further pressure, the tenderness is readily brought to light. Pressure here not only causes nerve injury, but may to a severe degree cause disarrangement of the bones of the ankle and foot, resulting in nearly irreparable damage. Accuracy in aim and angle is very important at this point, and the angle of delivering the blow should be about 90 degrees from above downward and from the outside toward the middle of the foot.

Applied pressure techniques: fist and extended thumb, one or two knuckle fist.
Quick pressure techniques: heel kick, elbow and one or two knuckle fist strike.

Diagram for this nerve centre can be seen on the front view nerve centre #21 with the nerves that run through this ankle bone area.

This concludes our explanation of the “64 VITAL NERVE CENTRES“ We urge you all our students and readers who have possession of this manual to study them very carefully, in order to derive the greatest benefit. We also remind you to practice the techniques involved with safety in mind to those assisting you in search for knowledge of self defense.