

19th Century Breathing

In Victorian times, particularly from 1860, there were many books on breathing methods. Which was the correct or “natural” way to breathe?

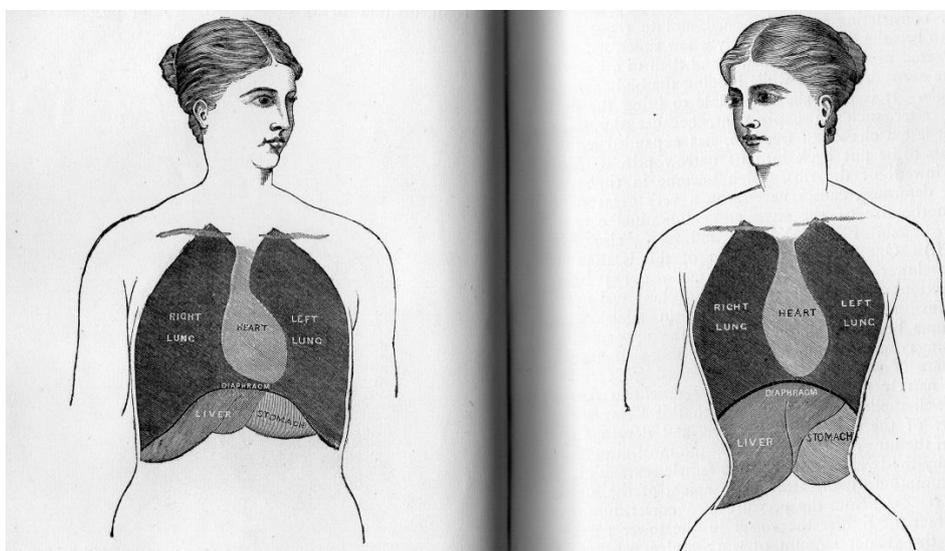
Breathing styles on offer were:

- Collar-bone (Clavicular)
- Rib (Costal)
- Back
- Diaphragmatic
- Abdominal

The partnership of ENT surgeon and vocal teacher, Lennox Browne and Emil Behnke, were the most important UK authority in the latter half of the century.

Many doctors assumed men and women breathed differently; women were ‘high’ breathers, men breathed from the diaphragm or abdomen. Browne and Behnke were two of the first to draw attention to the damaging effect of fashionable tight corsetry worn by women.

They warned about the health dangers of **Clavicular breathing**; raising the collar-bones with ‘accessory’ breathing muscles – neck and shoulder muscles used to assist breathing in extreme or desperate circumstances.



Voice, Song, and Speech: A practical guide for singers and speakers; from the combined view of vocal surgeon and voice trainer, first published in 1883 (many editions).

Abdominal breathing was sometimes recommended to public speakers and singers. The idea (I think) came from observing that babies breathe with their tummy muscles, so that must be the 'natural' way. It was often called '*abominable* breathing'! See Scanes Spicer's photos in the *BMJ* 11/09/1909.

Between these two extremes was **rib breathing** and 'rib-reserve' breathing – expanding the ribcage. The idea behind rib-reserve is that the ribs are held in the expanded position during *exhalation* to control the rate of air being expelled as the diaphragm gradually relaxes. It's sometimes recommended to singers or wind players.

The problem is that people puff their chest out, because it looked (and feels) impressive. But if over-done the back gets pulled in and it doesn't necessarily increase *rib excursion* – the range of movement for the in- and out-breaths. This was Alexander's criticism of the strongman, Eugen Sandow. He boasted a 14-inch chest expansion but doctors found most of the effect was from his 'pumping up' his chest muscles. His *thoracic capacity* remained near average. (See *MSI*, Respiratory Re-Education.)

Back breathing was advocated by some (the army doctor, Major Reginald Austin, who met Alexander in 1905). The military posture – throwing out your chest – led to an exaggerated lumbar *lordosis* or hollowed back. To counter this tendency the **flat back theory** (straightening out the curves of the spine by pressing your back against the edge of a door) was popular with many physical culturists. (Not recommended!)

Diaphragmatic breathing was supposedly a way to strengthen the diaphragm – the main muscle of inspiratory effort. We have stories of the Italian singer Caruso pushing a grand piano with his midriff (an old synonym for 'diaphragm'). Remember, though, the diaphragm is an involuntary muscle. We can only exert an *indirect* control over its action. Walter Carrington called it 'the muscle of emotional expression'. In a way ALL breathing is diaphragmatic.

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Reporter, Melbourne June 1897

Alexander taught *Natural Elocution* and his method was called “**Full-Chest Breathing**”. In the wake of the Darwinian revolution, mankind a part of nature and the mechanisms of the human body are governed by natural laws. Most elocutionists made some sort of claim for their method being ‘scientific’ and following nature’s laws.

MSI, CHAPTER 3 Subconsciousness and Inhibition

Freud, *Interpretation of Dreams*, 1899

The Unconscious

The unconscious is pictured as a restless sea of instinct and impulse, a sea agitated by gusts of libido, swept by the waves of desire, threaded by the currents of urge and drive; and upon these waves and currents consciousness, with all that it contains, bobs helplessly like a cork. Consciousness is represented, in fact, as a sort of by-product of the unconscious. [Joad]

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