TABLE OF CONTENTS

CHAPTER III

A CONCEPT OF BREATH SUPPORT FOR THE TENOR TROMBONIST

This system of breath support is employed by many professional brass performers and is suggested for the following reasons:

I. It is the foundation on which proper embouchure development and correct use of the tongue is built.

II. It brings into play the muscles which can best accomplish the job with the least effort and at the same time afford the performer maximum *control* over the air stream.

III. It tends to keep the throat (and thus the jaw, embouchure and tongue) relaxed and natural.

IV. It increases the lung capacity slightly.

Correct posture, the first consideration in proper breath support, plays a most important role in setting up the body so that the proper muscles can be brought into play. With poor posture it is impossible to breathe and support correctly. There should be no sway in the back. With a normal build, one should be able to back up to a wall, putting the hand palm out at the belt line on the small of the back and feel the hand touch the wall first. This position can be accomplished by rotating the pelvis slightly forward. At the same time the chest should be held erect but relaxed. The shoulders should be relaxed and natural but should at no time become a part of the intake process. Although the shoulders will move as the upper chest lifts in the last stage of the inhalation process, they should never be consciously raised to cause the intake of air.

Inhalation of air is usually accomplished through the mouth by dropping the lower jaw. This allows one to take a large quantity of air very quickly and briefly relaxes the embouchure which helps counter endurance problems. When one has to breathe quickly and only a small amount of air is needed, a fast *sniff* of air through the nose may be sufficient to complete the phrase. Inhalation through the nose, when one has the time to accomplish a slow, deep breath in this manner, has two advantages. It allows the performer extra time to set his embouchure and does *not* tend to dry out the mouth which is especially critical when playing solo work (1) under pressure of public performance and (2) when the air is especially dry and hot.

Proper breathing and support involves two phases: (1) Intake-inhalation and (2) Return-exhalation - which for the wind player involves compression of air.

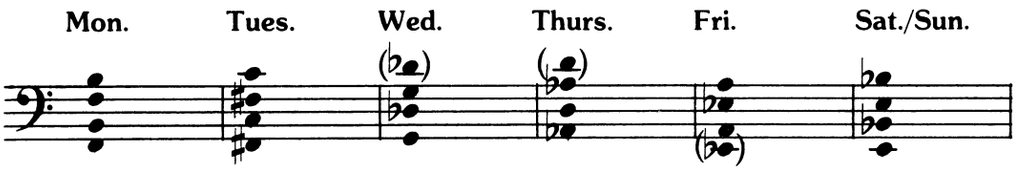
INTAKE OF AIR - Caused by relaxing the lower abdominal wall, and by contracting the diaphragm which causes it to move downward. (The diaphragm is actually a fibro-muscular membrane - it is not a muscle.) This creates a partial vacuum in the chest cavity causing the air to rush in and fill the lungs. Expansion is experienced first downward (below the belt line), at the midsection (belt line area), and finally in the upper chest cavity. The intercostal muscles help complete the last step in the intake process by lifting the rib cage slightly. This *total* breath is accomplished in one sweeping movement. I feel that you must take a rather full breath each time you breathe, expecially if you are playing a large bore instrument with a large mouthpiece. This is especially true if your lung capacity is not large. The secret is to take the full breath (not all you can cram in) with little more energy than you would expend when taking a conversational breath.

RETURN OF AIR - Accomplished by contracting the lower abdominal wall - *lifting* the air up and out. The diaphragm acts as a "counter balance" resisting the lift of the lower abdominal wall. This "counter balance" is experienced as a gentle firmness above the belt line which brings into play the abdominal wall in that area. This gentle outward pressure above the beltline (counter balance) also helps keep the bottom of the rib cage from squeezing in and causing a grunting action which tends to close the throat. If this outward pressure is overdone, it too may cause throat problems. Proper return of air is demonstrated by a gentle rise in the chest at the time of attack (compression). This is caused by the lower abdominal wall *lifting* and compressing the air upward causing a rise in the upper chest cavity. If the chest drops on initial attack, this is proof that you are using your upper chest to compress the air and that the whole support process is *upside-down* and incorrect. This situation produces a tight throat and eventually a tight lower jaw, tongue and embouchure.

I strongly recommend the book, The Alexander Technique by Sarah Barker, published by Bantam Books. It describes a system of body movement and balance that is the basis for the type of breathing and support I teach for the tenor trombonist.

CHAPTER XIV
EXERCISE 5 – MULTIPLE TONGUING

These double tongue exercises may also be used to develop *doodle* tonguing as shown by the letters D-L-D-L, etc. NO NEED TO REST AFTER THIS EXERCISE - PROCEED ON TO WARM-DOWN. Do all of either the double or triple tongued sequence using a one octave scale of your choice built on the pitches indicated for that particular day. Do a different type of multiple tongue each time you do this exercise and do the exercises only as fast as you can do them with rhythmic evenness and control.



A. DOUBLE TONGUE