

The Ovulation Method

The Mucus Patterns of Fertility and In fertility

The following is a brief description of a natural method of family planning which helps you to become pregnant, or not to become pregnant, and which is harmless and reliable. No drugs, no appliances, and no operations are necessary.

Explanation

1. Every woman who is able to bear children notices that at some time between her menstruations, she has a white or colourless vaginal discharge of what is called mucus.
2. This mucus discharge is not an abnormality. It is an indication of good health and tells the woman that it is now the time when an act of intercourse may cause pregnancy.
3. When the mucus begins, it is opaque and sticky. Next it becomes stretchy and slippery, and may look like the raw white of egg. Then it becomes sticky again, and usually stops altogether.
4. The most fertile days are those when the mucus is stretchy, and feels slippery, and for a few days afterwards.
5. Sometimes a little bleeding occurs between one menstruation and the next.

Rules

If you want to have a child:

1. Watch for the days of stretchy, slippery mucus. These may not occur in every cycle.
2. The best chance of having a child is likely to occur if intercourse takes place on the days when the woman is most aware of the slippery feeling produced by the mucus.
3. The husband's fertility may be enhanced at the same time by a rest from intercourse for a few days beforehand.

If you do not wish to have a child:

1. Avoid intercourse during menstruation.
2. Avoid intercourse on days when the mucus is present and for at least 3 days afterwards.
3. Avoid intercourse on days of slight bleeding, and for at least 3 days afterwards, when bleeding occurs between one menstruation and the next.

The Ovulation Method can be applied successfully in all circumstances, it does not matter whether the cycles are regular or irregular. The woman who is breast-feeding or the woman who is going through the change of life will find it reliable.

INSTRUCTIONS

1. All genital contact should be avoided for the first month if correct information is to be obtained.
2. Start the record today in the top row. Leave a gap in which to record the date of the last menstruation or birth or miscarriage or last pill, etc. Write in the date of commencing the record. Each evening record the observations made during the day, using the stamp of the appropriate colour as described in paragraphs 4-7.
3. When the next menstruation begins, write the date in the margin on the left, e.g. 5th August, 80, and write the day of the week in the first compartment. Continue writing the names of the following weekdays, one day to each compartment, across the page, e.g. Tuesday, Wednesday, etc.
4. To record the first day of menstruation, stick a red stamp in the first compartment covering the name of the weekday. On each successive day of menstruation, stick another red stamp in the next compartment. Watch for the possible occurrence of mucus during the final days of menstruation when the bleeding is slight. If any mucus occurs write a description of it in the Compartment beneath.
5. When menstruation stops, and if there is a sensation of dryness in the genital area around the vagina, and no mucus is visible, stick a green stamp in the next compartment.
6. Continue with the green stamps each day until the feeling of dryness stops. These dry days are infertile days, unless preceded by mucus.
7. When the sensation of dryness has gone, this means that the mucus has begun. Now use the white stamp with a baby on it.
8. A dry day may be difficult to recognize if intercourse has occurred on the previous day. If doubt exists, avoid genital contact and record the day with the white stamp.
9. Over the next few days the mucus usually looks cloudy and feels sticky.
10. As ovulation approaches, the type of mucus changes; it usually becomes clearer and stretches without breaking like the raw white of egg; the amount may increase or decrease, and sometimes it is tinged with blood. The mucus is now of a fertile type. Close to ovulation there may be pain in the side. Even before ovulation the stretchiness of the mucus may disappear and the mucus may become cloudy, but a sensation of lubrication persists in the genital area around the vagina because the mucus continues to be smooth and slippery, indicating the time of maximum fertility. Do not examine the vagina internally.
11. The last day of the slippery, lubricative mucus is the "Peak symptom".
12. On the first day past the Peak symptom, the mucus will become opaque or sticky again or stop altogether so that you feel dry. Now you can indicate with "X" the day on which you think you experienced the Peak symptom. If another day of slippery, lubricative mucus occurs after this, you have misjudged the Peak, and will need to mark the record again. If the slippery feeling continues, you have not passed the Peak, even if the mucus has become cloudy.
13. Continue to stick on a baby-stamp each day until 3 days past the Peak symptom. If the change has been to mucus which is sticky and opaque, use a yellow baby-stamp. If the change has been to dryness and no mucus. Use green baby-stamp.
14. If at any time mucus reappears, record it and describe it.
15. **ON** the fourth day past the Peak symptom, you are infertile again. From now on every day of the cycle is infertile, **even if some opaque, non-stretchy mucus is present. Continue the record** at the end of each day, using a plain green stamp if no mucus is felt or seen, and a plain yellow stamp if mucus is present.
16. The next menstruation should occur about 11-16 days after the Peak symptom. When it arrives verify the accuracy of your identification of the Peak by checking this interval.
17. When this next menstruation begins, start a new line in the same way as before. Remember to stick on a stamp at the end of each day.
18. Each cycle has its own pattern. Do not expect it to match any other cycle.
19. It is wise to record on the chart the last act of intercourse ahead of the 'baby days', and the first act after they are ended. Any error of application will then be quickly observed, and not be repeated.
20. The Basic Infertile Pattern. Before ovulation in some long cycles, during breast-feeding, near the menopause, etc. there may be mucus every day, or a succession of 3 or 4 or even more days when mucus is present, separated by days when there is no mucus. When there is mucus every day, that mucus which is the same day after day after day is the Basic Infertile Pattern, just as in other cycles the dry days before ovulation are the Basic Infertile Pattern. Record a Basic Infertile Pattern of mucus with a plain yellow stamp. Record any change from the Basic Infertile Pattern of dry days or mucus with a white stamp, and count 3 days after return to the Basic Infertile Pattern.
21. In using the Ovulation Method to avoid pregnancy, coitus ahead of ovulation must be confined to days on which the Basic Infertile Pattern has been recognized, so coitus is delayed until the evening. Abstinence is necessary on days of heavy bleeding during the period, and also on days when there has been a change from the Basic Infertile Pattern and for 3 days afterwards. When ovulation occurs, infertility returns on the fourth day past the Peak symptom and it is no longer necessary for coitus to be confined to the evening.
22. If there seems to be any difficulty consult other women who are experienced in the method.

For further information consult:

'ATLAS OF THE OVULATION METHOD' (4th Edition) by Dr. Evelyn L. Billings, Dr. John J. Billings, and Rev. M. Catarinich, and

'THE OVULATION METHOD' (6th Edition) by Dr. John J. Billings,

