

your guide to natural family planning

Helping you choose the method
of contraception that is best for you



Natural family planning

This booklet gives information on how natural family planning can help you to avoid pregnancy.

Fertility awareness involves being able to identify the signs and symptoms of fertility during the menstrual cycle so you can plan or avoid pregnancy.

What is the menstrual cycle?

The menstrual cycle is the time from the first day of your period to the day before your next period starts. The average length of the menstrual cycle is around 28 days, although many women have longer or shorter cycles and this is normal. Regardless of how long or short the cycle is, ovulation (when the ovaries release an egg) will usually happen around 10–16 days **before** the start of the next period. During your menstrual cycle:

- Eggs develop in your ovaries and usually one is released.
- The mucus in the cervix (entrance to the uterus – womb) changes to allow sperm to

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pass more easily through the cervix to reach the egg.

- The lining of the uterus thickens to prepare for a pregnancy.
- If the egg is not fertilised by sperm and you don't get pregnant the uterus sheds its lining as your period, which signals the beginning of a new menstrual cycle.

The menstrual cycle is controlled by your body's natural hormones – estrogen and progesterone.

How does natural family planning work?

Natural family planning works by observing and recording your body's different natural signs or fertility indicators on each day of your menstrual cycle. The main fertility indicators are:

- your body temperature
- cervical secretions (cervical mucus)
- the length of your menstrual cycle.

Changes in these fertility indicators can help you to identify your fertile time. You can also use fertility monitoring devices (see How do I use fertility monitoring devices? on page 11).

How long does the fertile time last?

The fertile time lasts for around 8–9 days of each menstrual cycle. This is because the egg lives for up to 24 hours. Occasionally, more than one egg is released at ovulation (within 24 hours of the first egg being released) and sperm can live inside a woman's body for up to seven days. This means that if you have sex as much as seven days before ovulation you may get pregnant.

How effective is natural family planning?

How effective any contraceptive method is depends on how old you are, how often you have sex and whether you follow the instructions.

If 100 sexually active women don't use any contraception, 80 to 90 will become pregnant in a year.

If used according to teaching and instructions, natural family planning methods are up to 99 per cent effective, depending on which method is used. This means that up to one woman in 100 will get pregnant in a year.

If natural family planning methods are not used according to instructions, more women will get pregnant.

Natural family planning is more effective when taught by a specialist natural family planning teacher, and when more than one fertility indicator is used. Some people choose to combine their fertility awareness knowledge with male or female condoms – this is sometimes known as fertility awareness combined methods. The effectiveness of this depends on how well you use male or female condoms.

What are the advantages of natural family planning?

- Using fertility awareness makes you more aware of your fertility and can help to plan a pregnancy or avoid a pregnancy.
- It does not involve using any chemicals or physical devices.
- There are no physical side effects.
- It can help you recognise normal and abnormal vaginal secretions.

- It can help you to communicate about your fertility and sexuality.
- It is acceptable to all faiths and cultures.

What are the disadvantages of natural family planning?

- It takes 3–6 menstrual cycles to learn effectively.
- You have to keep daily records.
- Some events, such as illness, lifestyle, stress or travel, may make fertility indicators harder to interpret.
- You need to avoid sex or use male or female condoms during the fertile time.
- Natural methods don't protect you against sexually transmitted infections (STIs).

Can anyone use natural family planning?

Most women can use natural methods as long as they receive good instructions and support. They can be used at all stages of your reproductive life, whatever age you are. Natural family planning may not be a suitable method for women who do not have periods.

It may take longer to recognise your fertility indicators and to start to use natural family planning if you have irregular cycles, after stopping hormonal contraception, after having a baby, during breastfeeding, after an abortion or miscarriage, or when approaching the menopause.

How do I record the fertility indicators?

Some natural methods rely on using only one of the fertility indicators. Other methods use two or more indicators - this is more effective.

Month and year	April																															
	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	
Date	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	
Day	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	
°C	37.1	37.0	36.9	36.8	36.7	36.6	36.5	36.4	36.3																							
Notes and comments	<div style="border: 1px solid black; border-radius: 15px; padding: 10px; width: fit-content;"> <p>Notes and comments</p> </div>																															
Sexual intercourse	<div style="display: flex; justify-content: space-between;"> Circle day of cycle 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 </div>																															
Cervical Secretions	<div style="display: flex; justify-content: space-between;"> Wet, slippery, clear, stretchy Moist, white, cloudy, sticky Dry, No secretions seen or felt </div>																															
Cervix	<div style="display: flex; justify-content: space-between;"> High, soft, open Low, firm, closed </div>																															
Fertility devices	Use of test sticks																															

How do I record my waking temperature?

The hormones estrogen and progesterone cause your body temperature to change throughout the menstrual cycle – it rises slightly after you have ovulated.

You can chart these changes by recording your temperature each day to show you when the fertile time ends. Visit www.fertilityuk.org to download a fertility chart. You should use a centigrade digital thermometer which has a last memory recall and a low battery warning indicator. Ear or forehead thermometers are not accurate enough to use for natural family planning.

Do I need to take my temperature at a particular time?

You need to take your temperature before you get out of bed or after you have had at least three hours rest. This is known as your basal body temperature (BBT) or waking temperature. This should be done at the same time each day and before you have anything to eat or drink.

The fertile time ends when you have recorded temperatures for three days in a row, which are higher than **all** the previous six days. The difference in temperature will be about 0.2 degrees centigrade (0.4 degrees Fahrenheit).

Can anything alter the temperature readings?

Certain activities or events can alter your temperature readings and can make them less accurate. For example if you:

- take your temperature earlier or later than normal
- use poor equipment or record the findings badly

- have an illness, such as a cold or flu, drink alcohol or oversleep (this can make your temperature go up)
- are taking pain relieving drugs, including aspirin (this can make your temperature go down).

The temperature indicator on its own does not help you to find the start of your fertile time.

How do I monitor changes in my cervical secretions?

The amount of estrogen and progesterone varies in the menstrual cycle and this alters the quantity and type of cervical mucus. By monitoring the changes in your cervical secretions you can learn to identify the start and end of your fertile time.

- After your period you may notice a few days when your vagina and vulva feels dry and you can't see or feel any cervical secretions.
- As the level of estrogen rises, your body prepares for ovulation and the secretions produced by the cervix begin to change in texture and increase in amount and sensation. At first they feel moist, sticky and appear white or creamy in colour. This is the start of the fertile time.
- Just before ovulation the secretions become clearer, wetter, stretchy and slippery like raw egg white. This is known as fertile mucus and is a sign that you are at the most fertile phase of your cycle.
- After ovulation the cervical secretions return to being thicker and sticky and after three days you will no longer be fertile.

The amount and quality of cervical secretions will vary from woman to woman and also from one cycle to the next.

Can I combine temperature and cervical secretions?

Yes. Combining the temperature and cervical secretions indicators acts as a double check and increases the effectiveness of natural family planning. The fertile time starts at the first sign of **any** cervical secretions and ends after the third high temperature has been recorded and all three high temperatures occur after the last day of having wet or clear, slippery secretions (the peak day).

How can I work out how long my menstrual cycle lasts?

The length of your cycles can help you to work out the start of your fertile time. Keep a record of the length of your last 12 cycles, then find your shortest cycle and subtract 20 days to find the first fertile day. Calculating your cycle length is not a reliable way of working out the end of your fertile time and should **not** be used on its own as a fertility indicator.

How do I monitor changes in my cervix?

During your menstrual cycle your cervix changes in position and feels different. Around your fertile time the cervix will feel higher in the vagina, soft and slightly open. During your infertile time your cervix will feel low in the vagina, firmer to touch and closed. These changes are not reliable enough to be used on their own as a fertility indicator.

Are there any other fertility indicators?

Some women may be aware of pain around ovulation or changes in the breasts, skin, mood or sex drive. These are the least reliable indicators of your fertile time.

How do I use fertility monitoring devices?

You can buy a number of different fertility devices. They work by monitoring changes in temperature, urine or saliva. In the UK the most widely available product is Persona. This consists of a handheld computerised monitor and a series of urine test sticks which measure hormonal changes. Persona interprets these changes and can predict the fertile and infertile times of your menstrual cycle.

If you use Persona according to the instructions, it is around 94 per cent effective. This means that at least six women in 100 will get pregnant in a year.

Computerised thermometers work by combining information about the length of your menstrual cycle and temperature. More research is needed about the effectiveness of these products.

Luteinising hormone (LH) dipstick tests or ovulation predictor kits are designed to be used by women planning a pregnancy. They are not effective as a natural family planning method.

Saliva testing devices are not accurate and should not be used for avoiding pregnancy.

Can I use an app on my phone?

There are numerous apps available for mobile phones and a number of online charting systems. These products vary in their approach using one or more fertility indicators. Their reliability and effectiveness in avoiding pregnancy is unknown.

Can I use breastfeeding as a natural family planning method?

Breastfeeding is also known as lactation. When used as a contraceptive method it can be very effective in avoiding pregnancy and is known as lactational amenorrhoea method (LAM). LAM can be up to 98 per cent effective in preventing pregnancy if all of the following conditions apply:

- you are fully breastfeeding – this means you are not giving your baby any other liquid or solid food **or**
- you are nearly fully breastfeeding – this means mainly breastfeeding your baby and infrequently giving your baby other liquids **and**
- your baby is less than six months old **and**
- you have no periods.

The risk of pregnancy increases if:

- you start breastfeeding less often, or
- there are long intervals between feeds - both day and night, or
- you stop night feeds and use supplement feeding.

Once your baby is over six months old the risk of getting pregnant increases, so even if you don't have periods and are fully or nearly fully breastfeeding, you should use another contraceptive method.

If I have to use hormonal emergency contraception will it affect my fertility indicators?

Yes. Using hormonal emergency contraception will upset your normal hormone pattern and alter your fertility indicators. After using hormonal emergency contraception you should not rely on your natural family planning indicators for two complete menstrual cycles. This allows time for your cycle to return to normal and for your natural family planning indicators to be reliable.

Where can I get help with natural family planning?

You will need to find someone to teach you how to use natural family planning. General practice and contraception clinics do not often teach it so you may need to find your own teacher – some charge a fee. You can get further information from:

- FPA at www.fpa.org.uk
- Fertility UK at www.fertilityuk.org

How do I find out about contraception services?

The Sexual Health Information Line provides confidential advice and information on all aspects of sexual health. The number is **0800 567 123** and the service is available from Monday to Friday from 9am - 8pm and at weekends from 11am - 4pm.

For additional information on sexual health visit www.fpa.org.uk

Information for young people can be found at www.brook.org.uk

Clinics

To locate your closest clinic you can:

- Use Find a Clinic at www.fpa.org.uk/clinics
- Download FPA's Find a Clinic app for iPhone or Android.

You can find details of general practices and pharmacies in England at www.nhs.uk and in Wales at www.nhsdirect.wales.nhs.uk. In Scotland you can find details of general practices at www.nhs.24.com and in Northern Ireland at www.hscni.net

Emergency contraception

If you have had sex without contraception, or think your method might have failed, there are different types of emergency contraception you can use.

- The emergency contraceptive pill, Levonelle – can be taken up to three days (72 hours) after sex. It is more effective the earlier it is taken after sex. It is available with a prescription or to buy from a pharmacy.
- The emergency contraceptive pill, ellaOne – must be taken up to five days (120 hours) after sex. It is only available with a prescription.
- An IUD – can be fitted up to five days after sex, or up to five days after the earliest time you could have released an egg (ovulation).

Ask your doctor, nurse or pharmacist about getting emergency pills in advance, just in case you need them.

Sexually transmitted infections

Most methods of contraception do not protect you from sexually transmitted infections.

Male and female condoms, when used correctly and consistently, can help protect against sexually transmitted infections. If you can, avoid using spermicidally lubricated condoms. The spermicide commonly contains a chemical called Nonoxinol 9, which does not protect against HIV and may even increase the risk of infection.

A final word

This booklet can only give you general information. The information is based on evidence-guided research from the World Health Organisation and The Faculty of Sexual and Reproductive Healthcare of the Royal College of Obstetricians and Gynaecologists.

All methods of contraception come with a Patient Information Leaflet which provides detailed information about the method. Remember - contact your doctor, practice nurse or a sexual health clinic if you are worried or unsure about anything.



talking sense about sex



www.fpa.org.uk

The Sexual Health Line is provided by the Department of Health. This booklet is produced by the sexual health charity FPA, registered charity number 250187. Limited liability company registered in England, number 887632. Supported by the Department of Health. FPA does not run the Sexual Health Line.

© FPA printed January 2014 ISBN 978-1-908249-59-3

The information in this booklet was accurate at the time of going to print. Booklets are reviewed regularly. Next edition available in 2015.

If you would like the information on the evidence used to produce this booklet or would like to provide us with feedback about this booklet email feedback@fpa.org.uk

