

HEALTHY CYCLE, HEALTHY YOU,

and perhaps some things you never knew!



by Allison Dreher

HEALTHY CYCLE, HEALTHY YOU!

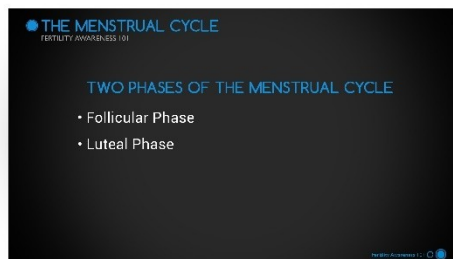
The naturally cycling female is a healthy female, and menstruation is part of that equation. A woman's natural, unmedicated menstrual cycle is like a report card of her overall bodily health. Although this topic can be difficult to discuss, it is important for women to have a healthy cycle. How do you know if your cycle is healthy? There are 3 basic criteria to determine whether your cycle is healthy. 1. Cycle length 2. Bleeding pattern 3. Mucus pattern

1. Cycle length- The first day of your menstrual cycle is the first day you see bright red bleeding. There should be between 23-36 days from day 1 of bright red bleeding to the next day 1 of bright red bleeding. Cycles shorter or longer are an indication that the hormones are imbalanced.
2. Bleeding pattern- A healthy bleed is a minimum of 3 days, with 1-2 days of medium to heavy flow, that tapers off to something lighter. Very heavy, clotty, painful bleeds are not part of a healthy bleeding pattern.
3. Mucus pattern- A woman should experience a time in her cycle where she feels and/or sees a discharge that is wet and slippery. She should also experience a time in her cycle where she is relatively dry. Some women always have a slight discharge and are never dry. This is also healthy, but if a woman learns to chart her cycle, she can see when that slight discharge turns into something wetter and more slippery. For the woman who has dry days, her wet days may be more prominent. The wet days correspond to rising estrogen as a woman approaches ovulation and indicate that she is fertile. The dry days indicate infertility. If a woman feels wet and slippery all the

time her estrogen levels are probably too high. If she feels dry all the time, she may not be ovulating at all.

Every woman is familiar with the bleeding part of the cycle, but in reality, there are several phases in addition to the bleed.

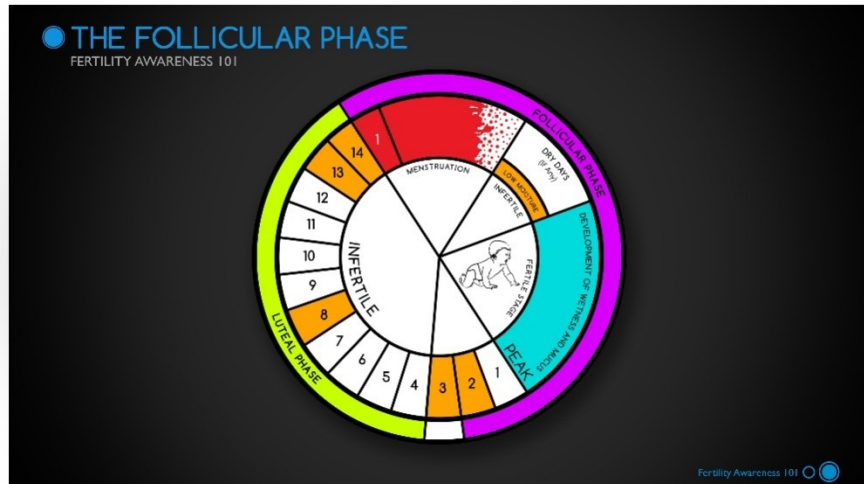
THE PHASES OF THE MENSTRUAL CYCLE



The terminology of menstrual cycle stages can be confusing. Some refer to 4 phases of the cycle. We refer to only 2 phases: The Follicular phase and the Luteal phase.

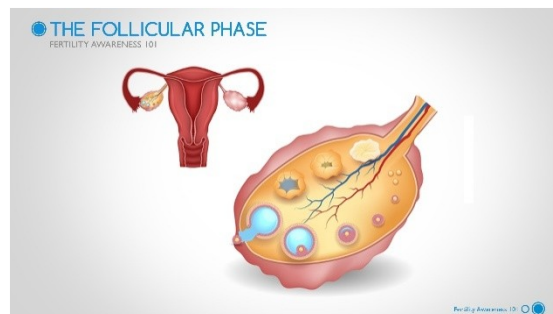
The Follicular Phase includes menstruation, an in-between time of infertility, the fertile window, and ovulation. The Luteal Phase begins after ovulation and ends with the first day of bright red bleeding which is day 1 of the next cycle.

THE FOLLICULAR PHASE



During the first days of the follicular phase, menses or bleeding occurs. The average length of bleeding is 5 days, but anything between 3-7 days is considered normal.

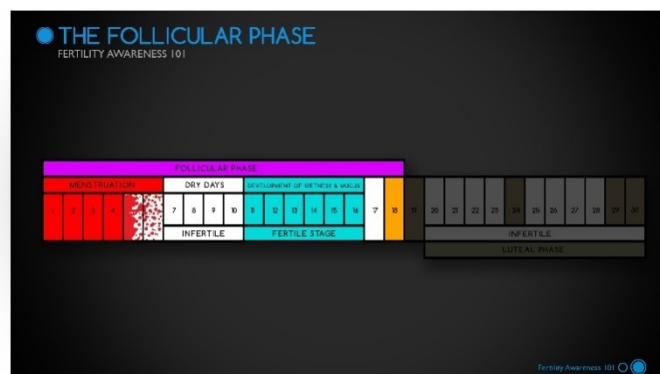
The end of the menses stage of the Follicular phase is usually followed by several days during which the woman feels a sensation of dryness or dampness at the vulva. This is an infertile time.



During the entire follicular phase, a follicle-stimulating hormone (FSH) is secreted by the pituitary gland. When FSH reaches a certain level 5-7 ovarian follicles will be recruited and begin competing to reach ovulation.

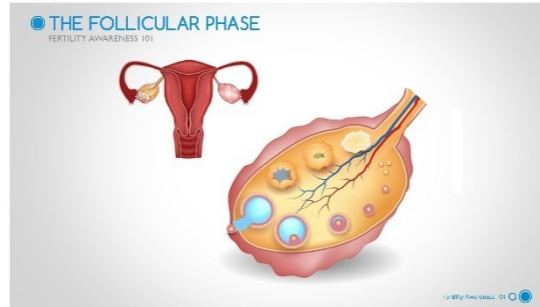
An ovarian follicle is a fluid filled sac in the ovary which contains an immature egg. These follicles compete for dominance during the follicular phase and usually only one ovum

would be released on the day of ovulation at the end of the follicular phase. As the follicle grows, it produces more estrogen. This rise in estrogen tells the uterus to grow the endometrial lining (where the blood comes from during menses), and the cervix to release mucus. It is possible for more than one ovum to be released in the same 24-hour period of ovulation, and this may result in a twin pregnancy.

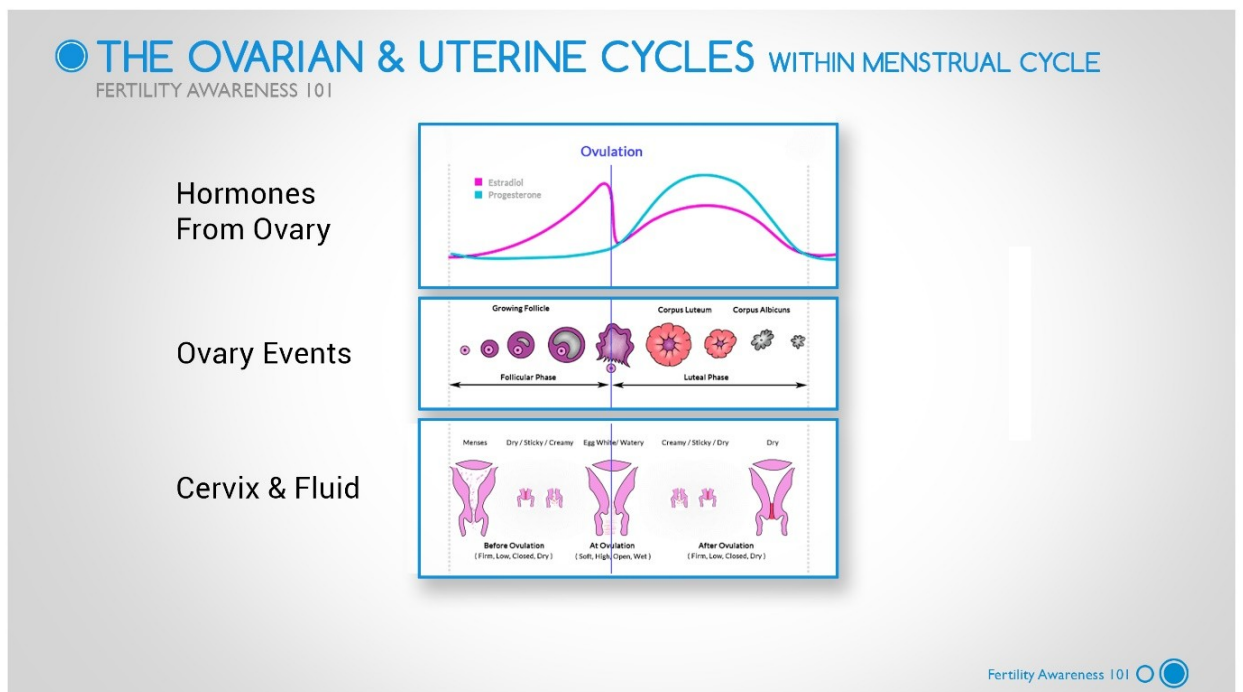


The ovulatory stage is the last several days of the follicular phase. Ovulation typically occurs mid-cycle. That would be approximately day number 14 of a 28-day cycle; however, this follicular phase of the cycle can be the most variable from woman to woman and cycle to cycle. Some women ovulate much earlier or later in the cycle. Additionally, things like stress, illness, and poor diet can affect it. The ovulatory stage begins when the rise in estrogen causes the cervix to soften and release the cervical mucus. During this time the woman feels increasingly wet at the vulva. This stage can begin days before ovulation occurs, and sexually active women should know that sperm can live for 5-7 days in favorable cervical mucus, waiting for ovulation to occur. The ovulatory stage ends 24-36 hours after ovulation because the ovum lives only 12-24 hours. The woman will sense the end of the ovulatory phase when she feels a definite change to no longer slippery or wet at the vulva (cycle day 17 on the graphic above).

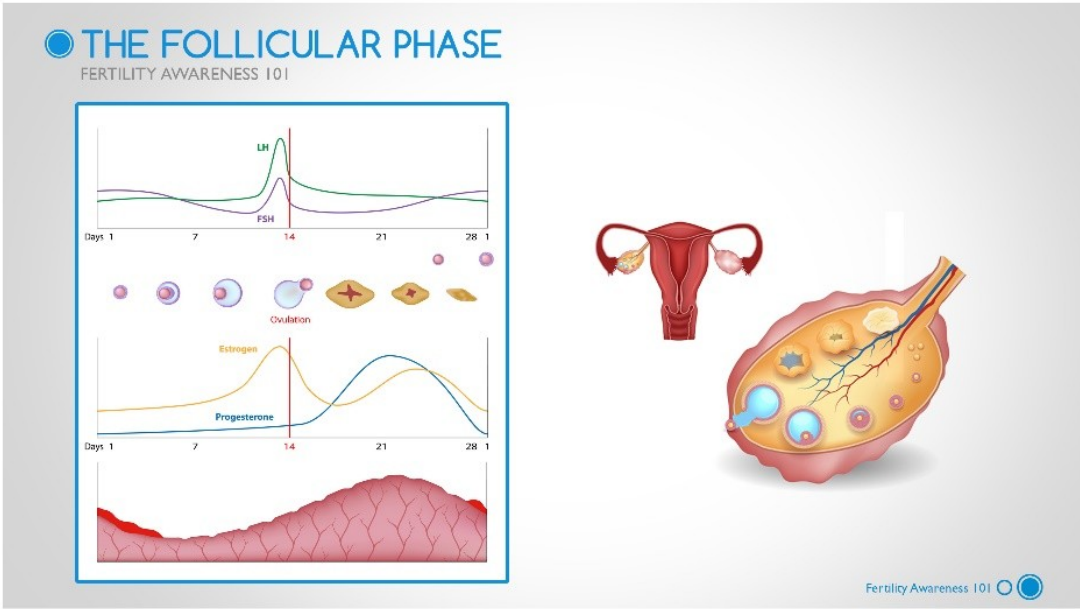
Once the 5-7 follicles are recruited, the fluid sac around them begins to grow.



This causes estrogen to rise and the feeling of wetness to increase.



Once estrogen reaches its highest level, there is a surge of FSH and another hormone, the luteinizing hormone (or LH).



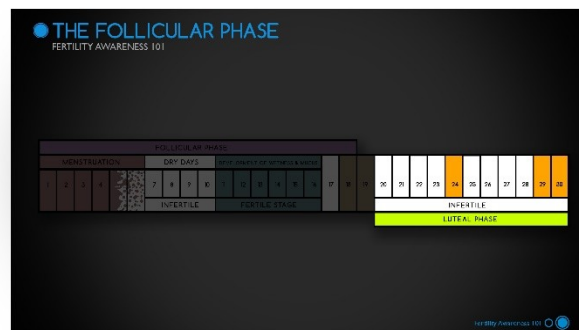
This is called the LH surge and 24 – 36 hours after the LH surge, ovulation occurs. The beginning of the LH surge is a predictor of ovulation within the next 24-36 hours and LH can first be measured in urine at the beginning of this surge.



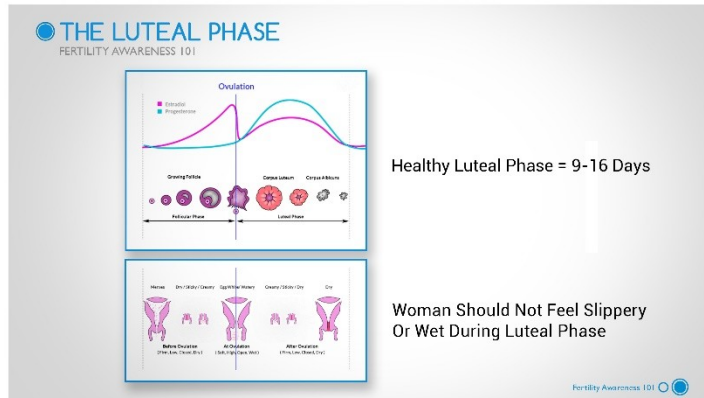
There are tests women can do that measure the LH in their urine, and some women use this information to avoid or achieve a pregnancy. These test strips are the main feature of certain methods of natural family planning.

THE LUTEAL PHASE

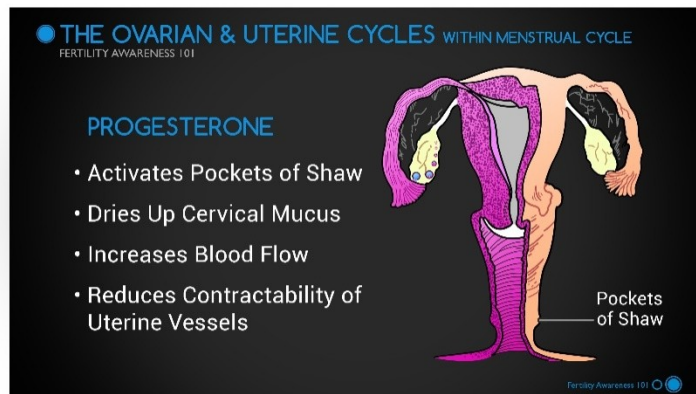
The Luteal Phase does not have stages. It begins after ovulation.



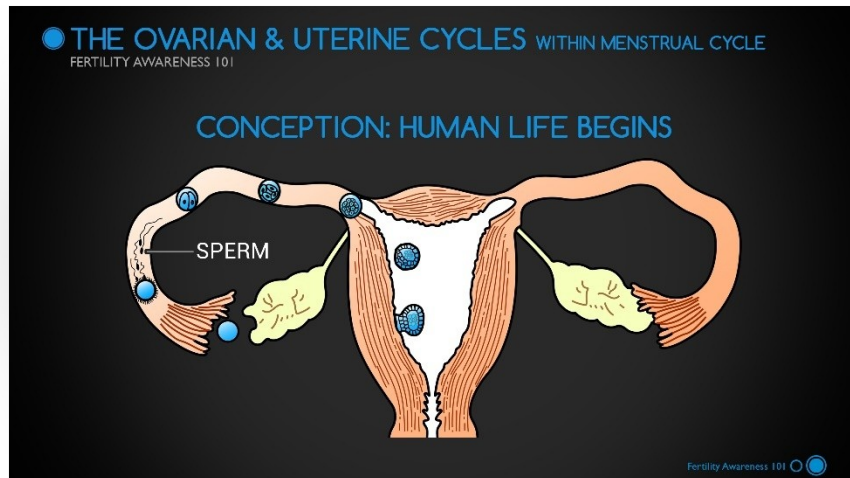
Within 24 hours after ovulation has occurred, the woman is in her luteal phase. The ovum can only live for one day. So, the luteal phase is an infertile time because she has either conceived or the ovum has disintegrated. The luteal phase lasts until bleeding at the beginning of the next cycle.



A healthy luteal phase is 10 – 16 days and should remain relatively constant throughout a woman’s life. That is, if your luteal phase is 13 - 14 days, it will always be around 13-14 days (give or take a day or 2) and your period will NEVER take you by surprise.



Progesterone is the main hormone in the luteal phase. Once the follicle bursts and the egg is released, there is a little hole remaining on the ovary that turns yellow. This is called the corpus luteum. It secretes progesterone which activate the Pockets of Shaw just inside the vaginal canal. The Pockets of Shaw release manganese which dry up the mucus, thus the woman does not feel wet or slippery anymore. Progesterone increases a woman’s waking temperature by between 0.4-1.0-degree Fahrenheit, increases blood flow and uterine secretions, and reduces the contractibility of the uterine vessels, thereby making the endometrium receptive to implantation of the new human life known as an embryo, or more precisely at this time, the blastocyst.



Conception takes place in the outer third of the fallopian tube near the ovary, and the developing baby can be up to 10 days old by the time he or she reaches the uterus to implant. This tiny human is completely unique. Gender, eye color, height, and some personality traits are already programmed in the DNA.

If on the other hand, there has been no conception, then a new cycle begins with menses as the uterus sheds its lining in anticipation of preparing anew for conception in the next cycle.

THE OVARIAN & UTERINE CYCLES WITHIN MENSTRUAL CYCLE
FERTILITY AWARENESS 101

DYSMENORRHEA AND PMS

- Painful Cramping
- Begin NSAIDS a Few Days Before Period
- Ibuprofen
- Acetaminophen
- PMS Can Cause...
 - Breast Tenderness
 - Irritability
 - Usually Decreases When Menstruation Occurs

Fertility Awareness 101

The slide is a dark rectangle with white and blue text. It lists symptoms and treatments for dysmenorrhea and PMS. The text is organized into a bulleted list.

Severe uterine pain, known as dysmenorrhea is common in younger woman and especially adolescents, and the woman who charts her cycle will know exactly when to start taking non-steroidal anti-inflammatories like ibuprofen a few days before her period to help ease the pain. *If the pain is debilitating, a woman should see her OBGYN to rule out the possibility of endometriosis.* Premenstrual syndrome (PMS) which includes symptoms of breast tenderness and irritability generally decreases when menstruation occurs.

For more information please
contact The Sisterhood of
Catholic Women and Adolescents
at 914-613-5505 or visit our
website at
www.SisterhoodCWA.com.

Please consider joining us for our next free 13-week course on chastity and fertility awareness. You can sign up here: <https://sisterhoodcwa.com/> Below is an outline of the course.

Fertility Awareness 101- Weeks 1 and 2

-Gives an overview of male and female fertility. The videos discuss in detail the stages of the menstrual cycle, what constitutes a healthy cycle, how a woman can know if she is ovulating and why this is important. The web chats will also include instructions on how to chart.

Catholic Sexual Morality 101 (The 6th Commandment) - Weeks 3 and 4

-Examines the constant teaching of the Church that sexual intimacy is only appropriate in the bonds of marriage between one man and one woman for life. Beginning with the Magisterium and going over Catholic Action Theory, viewers are brought through a systematic process of evaluating the morality of decisions. The morality of abortion, contraception, homosexual acts and assisted reproductive technology is also explored.

Chastity 101 - Weeks 5, 6 and 7

-Beginning with God's vision for love, marriage, and sex, this course delves into the deeper questions of purity, modesty, boundaries, sexual decision making, and starting over.

Contraception 101 - Weeks 8 and 9

-Begins with a review of God's plan for sex, and the reproductive system. Contraceptives (including effectiveness and risks) and sexually transmitted infections are discussed at length.

Abortion 101 - Weeks 10 and 11

-Examines the issues surrounding abortion and the sanctity of life. Differences between the born and unborn are discussed and after watching the videos, the viewer will understand exactly how an abortion is performed.

Pornography 101 - Weeks 12 and 13

-Addresses the often-concealed problem of pornography addiction. Dr. Kleponis, a Catholic board-certified psychologist and counselor, teaches how the use of porn affects relationships with others and self. Dr. Kleponis also offers advice on how to overcome porn addiction as well as how to help someone who may be struggling with it.