Immune Infertility - Natural Options for Immunological Fertility Issues

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What are Immunological Fertility Issues?

First we must understand that the immune system is a complex network in the body. The immune system refers to all parts of the body that work to defend it against harmful enemies. In people with immunological fertility problems their body identifies part of reproductive function as an enemy and sends Natural Killer (NK) cells to attack. A healthy immune response would only identify an enemy correctly and attack only foreign invaders such as a virus, parasite, bacteria, etc. In fact immunological fertility issues are so complex that there is really no way for us to cover the entire topic, so I will provide basic information in order to help you learn natural options to help reduce negative immunological response, as well as determine whether you fall under risk factors for testing. This article will provide information on immunological recurrent miscarriage and anti-sperm antibodies, the two most prevalent immune related fertility problems.

Who is in Need of Immunological Fertility Testing?

People with the following indications may want to consider getting testing by a Reproductive Immunologist. A Reproductive Immunologist differs from a Reproductive Endocrinologist, which most couples are referred to when fertility issues are not determined by an OBGyn, or other doctor. Reproductive Immunologists have the training and skills to determine if there is in fact an immunological response gone awry that is causing difficulty in getting pregnant or carrying to full term.

- 2 or more miscarriages after the age of 35
- 2 IVF failures after the age of 35
- 3 miscarriages before the age of 35
- 1 failed IVF before the age of 35
- Poor egg production from a stimulated cycle (6 eggs or less)
- Blighted ovum
- Pre-existing immune problems (Lupus, Rheumatoid Arthritis, MS)
- Unexplained Infertility diagnosis
- Previous pregnancies showing retarded fetal growth
- 1 healthy pregnancy with all subsequent pregnancies ending in miscarriage
- Endometriosis, especially stage 1 & 2
- Cold and flu-like symptoms, sore throat noted regularly after ovulation, IUI, or IVF transfer
- Family history of immune disorders, either side of the family

**Immunological Causes of Recurrent Miscarriage**

2% of women of reproductive age experience habitual miscarriage.

**Problems with Embryo Signaling**

Once conception has taken place the developing embryo must signal the mother’s immune cells to recognize it as “self” rather than a foreign invader. The embryo does this by secreting HLA G antigen to signal the mother’s immune cells to allow it to grow and stay. In this case HLA G antigen improperly functions and the mother’s immune cells attack the embryo, eventually resulting in miscarriage. This is considered a HLA G gene mutation. There is testing to determine if this is happening.

**Problems with the Mother’s Immune Response to the Embryo**

This is when the mother’s immune cells do not respond to the healthy signal of HLA G antigen release. Again, the mother’s immune cells attack the embryo. When an embryo is attacked it is not destroyed, but causes inactivation of the DNA in the embryo so that these cells stop dividing and replicating. The embryo fails to grow and dies. There are a series of blood tests that can be performed to determine which immune cells are malfunctioning.

**Thrombophilia: Blood Clotting Issue**

This happens after the mother’s body recognizes the baby as part of herself and the embryo has implanted. The vessels in the placenta take blood and nutrients to the fetus. In cases of blood clotting issue related immunological miscarriage, those vessels clot off, literally starving the embryo of oxygen, blood, and vital nutrients. Blood testing can determine if this is a factor.

**Antisperm Antibody**

In some people semen can cause an immune response in men or women. Antibodies are triggered during the immune response that work to kill off the sperm. High numbers of sperm antibodies can make it difficult for the sperm to reach the egg, and/or fertilize the egg. Antisperm antibodies also may damage sperm that survive, which increases chances of miscarriage.

**How Does This Happen in Men?**

A man’s body may create antisperm antibodies when the sperm come into contact with his immune system cells. This happens when the testicles are injured, after surgery (biopsy, vasectomy), or if the prostate gland has an infection. The testicles protect the sperm from immune cells, when they are damaged they may no longer be able to do that.

Over 70% of all men who get a vasectomy will develop antisperm antibodies. This is something important to consider if there is a chance of vasectomy reversal in the future. Men who get a
vasectomy reversal in the future may not only suffer from scar tissue damage, but antisperm antibody infertility. The longer a man waits to get vasectomy reversal, the more likely there will be damage from antisperm antibody.

**How Does This Happen in Women?**
This is very rare, but in some women their bodies have an allergic reaction to her partner’s sperm. This stimulates the immune system to create antisperm antibodies that attack her partner’s sperm. This may also cause her vaginal tissues to react to the semen, which may result in rash, sores, or painful sexual intercourse. Doctors are not sure why this happens.

**Hope for Immune Related Fertility Issues Using Wobenzym N**

**Immunological Recurrent Miscarriage**
In the case of recurrent miscarriage due to immunological response, Fertility Enzyme Therapy has proven effective in treating pregnant mother’s and their babies. Research has shown that the systemic enzyme blend [Wobenzym N](#) may effectively help reduce immunological response in a pregnant mother’s body so that she can carry her pregnancy full term. [Human trials performed](#) from 1994-1999 have proven Wobenzym N, when used throughout pregnancy stabilizes the mother’s immune system, allowing for a healthy full term pregnancy with no adverse effects to the mother or child. Fertility Enzyme Therapy using systemic enzyme blends are a relatively inexpensive therapy compared to medications administered by Reproductive Immunologists. Each bottle of Wobenzym N lasts for a month and a half when taken at a regular dosage. Average cost for use a year is $720.00 compared to a minimum average of $12,00.00 a year for immune suppression therapy administered by a doctor.

If you are interested in [Fertility Enzyme Therapy](#) for immunological induced recurrent miscarriage, please talk to your doctor. It may be best to begin Fertility Enzyme Therapy while you are trying to conceive, and then continue on through pregnancy as directed by your physician.

**Antisperm Antibodies in Both Men and Women**
Systemic enzyme blends work to stabilize and promote proper function of the immune system. This may greatly help the person who has developed antisperm antibodies to help suppress an attack on sperm, while also working to prevent long term damage to the health of the sperm. In the case of vasectomy reversal, Fertility Enzyme Therapy using [Wobenzym N](#) may help to reduce scar tissue or adhesion damage from both the vasectomy and vasectomy reversal procedures. In women use of systemic enzymes in relation to antisperm antibodies may also reduce pain and inflammation cause from allergic reaction to the semen.
Supportive Fertility Herbs for Immunological Fertility Problems

Below are herbs that benefit healthy immune and stress response within the body, while aiding in proper function of the reproductive system. These here are Adaptogens. Adaptogen is one of the many definitions for the therapeutic action a plant has. This term is well known by herbalists, naturopathic doctors and other alternative medicine practitioners. This term may not be as well know by medical doctors; so don’t be worried if your doctor does not know what adaptogen means. Adaptogens increase resistance to mind-body stress and enhance overall vitality and health through non-specific adrenal (known as stress glands) support. Plants recognized as adaptogens help to normalize the bodies functions even during diseased states, are non-toxic, nutritive, and have been deemed safe for long term use. If a plant is an adaptogen it may also have other action classifications such as anti-viral, immunostimulant or tonic. In general a medicinal herb has many classifications as plants often have many actions.

Both Shatavari and Dong Quai have been shown to aid directly in immune related fertility issues. Tribulus has been shown to reduce antisperm antibodies.
**Shatavari**
Shatavari may be very helpful with women who have stress related or immune-mediated fertility issues. Autoimmune fertility issues may be helped by proper immunological function supported by Shatavari. This plant has shown to protect the body from stressors. This is very helpful for women with stress induced fertility issues. Shatavari has been shown safe for use by men and women to support healthy fertility.

**Dong Quai**
Dong Quai stimulates healthy immune response. Impaired immune function may greatly benefit from Dong Quai because this herb helps support natural, healthy function of the mind, stress response, and immune response. Dong Quai has been shown to have immunomodulatory effects which aids the entire immune system in proper function of immune response, reduces scar tissue formation, and reduces inflammation.

There has been a correlation between immune response and endometriosis in some women. Some research points to women with endometriosis having some type of autoimmune response that is out of balance. Dong Quai stimulates phagocytic activity. This stimulation of phagocytic activity aids in the break down of foreign tissue, while aiding the entire immune system in healthy immune response, rather than aiding in the increase of endometrial growth outside of the uterus.

**Tribulus Terrestris**
A study using Tribulus terrestris showed a 61% increase in conception in couples with sperm antibodies causing their infertility. Tribulus is safe for both men and women to use. This herbal supplement may decrease the effects of sperm antibodies.

**Maca**
A full immune response to attack a part of the body that is unwanted puts our body in a heightened state of stress. When this happens repeatedly (recurrent miscarriage), or long-term (antisperm antibody) the overall immune function may be lowered. It is important to consider ways to support your overall body’s functions nutritionally. Maca is superior in nutrition compared to most other foods on the planet, this is why it is deemed a superfood. Maca nourishes the endocrine system, aiding both the pituitary, adrenal, and thyroid glands. All of these are involved in maintaining hormonal balance, but also are the first to respond to stressors. Supporting the endocrine system helps to maintain proper immunity and stress response as well.

A healthy, well nourished body is more likely to respond better to trauma, surgery, daily stress, environmental toxin overload, medication detoxification, ect. We must support our bodies not only nutritionally, but with daily exercise as well. If we do not, our bodies will not be able to heal as quickly. Doctors are not 100% sure why immune related fertility issues happen, but they do know there are not that many effective options in treating them. Let us first consider natural options in supporting proper function of the body, so that if our bodies face problems in functioning as they should, the rest of the body is ready to handle the stress.
8 Ways to Boost Your Fertility

Simple things -- diet, timing of sex, even your lubricant -- may help you conceive faster.

By Kathleen Doheny

WebMD Feature

Reviewed by Louise Chang, MD

If you're like most couples who are trying to conceive, you want to get pregnant sooner rather than later.

Having intercourse as close as possible to ovulation definitely helps. But fertility experts say there are other ways couples can boost their fertility. A few simple measures may make the next month the month you'll squeal: "We're pregnant!"

See When You're Most Fertile During Your Monthly Cycle

1. Her Fertility Booster: Weight Control

Being underweight or overweight can delay the time it takes a woman to conceive.

William Gibbons, director of the division of reproductive endocrinology and infertility at Baylor College of Medicine, says weight before getting pregnant is often an overlooked factor in fertility. Keeping a healthy weight can help with conception.

In onestudy, researchers evaluated the body mass index (BMI) of 2,112 pregnant women. Women in the study who had a pre-pregnancy BMI of 25-39 -- considered overweight or obese -- had a twofold increase in the time it took to get pregnant. A BMI less than 19 (18.5 to 24.9 is considered normal) is even worse, the researchers found. Time to conception was increased fourfold in women with a BMI below 19.

Gibbons tells women to stay at a healthy weight when trying to conceive.

2. His Fertility Booster: Protect Those Sperm
According to Dale McClure, president of the American Society for Reproductive Medicine, the idea that changing to boxers instead of briefs will boost fertility by keeping genital temperatures down is basically an old wives' tale. Earlier studies seemed to point to boxers as the better choice, McClure says. But more recent studies haven't shown a major difference.

What about exposing the testicles to other sources of heat? The American Society for Reproductive Medicine says controlling temperature doesn't play much of a role in boosting fertility. Some doctors, though, recommend staying away from certain sources. For instance, sitting in a hot tub day after day should be avoided, McClure says, even if a man has no known fertility problems. In at least one study, repeated exposure to high water temperatures through hot tubs or hot baths was shown to affect men's fertility.

Still, no research has clearly shown a link between exposure to other sources of heat and a man's fertility. One study did show that scrotal temperatures went up in laptop users who held the computer on their laps and warned that long-term exposures to high temperatures could harm sperm. Another study found that exposure to radiation from cell phones could adversely affect sperm that had been collected from participants. Researchers in that study speculated that keeping a cell phone in a pants pocket could affect the health of a man's sperm.

While neither study was sufficient to prove that exposure to sources of heat could harm sperm enough to affect fertility, McClure still says a man who wants to be a father probably shouldn't keep his laptop on his lap for extended periods of time. But even considering the above findings, McClure says he is "more concerned about hot tubbing."

3. Her Fertility Booster: Watch the Beverages

Drinking too much coffee or too much alcohol can impair a woman's fertility.

Experts say that drinking more than five cups of coffee a day -- the equivalent of about 500 milligrams of caffeine -- is associated with lower fertility. But don't give up your daily cup of coffee just yet. Moderate caffeine consumption, Gibbons says, seems to be OK. Having one or two cups a day is fine. His advice for women who are coffee or soda drinkers: "Stay under 200 to 250 milligrams of caffeine a day."

Studies on alcohol intake and women's fertility have produced mixed findings. But Swedish researchers have found that women who drank two alcoholic beverages a day decreased their fertility by nearly 60%. Once again, moderation is key. Although higher levels of alcohol -- two drinks or more a day -- should be avoided when trying to get pregnant, there is no evidence to show that moderate alcohol consumption adversely affects fertility.

You will, though, want to cut out alcohol completely once you are pregnant. Drinking while pregnant increases the risk of serious birth defects.

4. Couple’s Fertility Booster: Stop Smoking

Smoking cigarettes can impair both a woman's and a man's fertility. Smoking affects how receptive the uterus is to the egg. And in men, smoking can reduce sperm production and damage DNA. Experts also strongly suggest quitting smoking before you're pregnant. Smoking while pregnant boosts the risk of miscarriage.

5. Couple’s Fertility Booster: The Fertile Window

Taking advantage of what doctors call the "fertile window" can boost your chances of pregnancy. The fertile window is the six days that end on the day of ovulation. Pregnancy is most likely to occur with intercourse within the three days before ovulation.
Richard Paulson, chief of the division of reproductive endocrinology and infertility at the University of Southern California Keck School of Medicine, says that couples often wait until the day of ovulation or later to have intercourse. But if you really want to get pregnant, “Err on the early side,” he says.

Paulson also advises keeping close track of ovulation -- either by the calendar method, figuring ovulation occurs about 14 days before the menstrual period is due, or by using an ovulation predictor kit, widely sold online and in drugstores.

**6. Couple's Fertility Booster: Have Frequent Sex**

Delaying lovemaking -- or as some couples say, "saving up" -- isn't going to boost the chances of pregnancy, McClure says.

"After about a week, the [sperm] count goes up a bit, but the motility decreases," he says. Not having sex for more than five days may affect sperm counts adversely. But intervals as short as two days don't harm sperm density.

Although daily intercourse produced the highest pregnancy rate in one study, it may pose too much stress for some couples. The same study showed that having sex every other day produced nearly as good a pregnancy rate.

**7. Couples Fertility Booster: Choose Lubricants Wisely**

With more frequent intercourse, couples may turn more to vaginal lubricants. That's OK, doctors say, if the lubes are picked wisely. Some lubricants can actually decrease fertility. When you're trying to get pregnant, be sure to avoid products that have spermicidal agents.

So what is a good lubricant to use? "Canola oil," Gibbons says. "Even peanut oil is good," McClure says. But impromptu household lubes may not be good. "I had a patient yesterday with a great sperm count and no motility [swimming ability]," McClure says. When he asked a few more questions, he got to the root of the problem. "He was using soap for a lubricant," and soap was killing the sperm.

You also want to avoid commercially available water-based lubricants. Water-based lubricants, such as Astroglide, KY Jelly, and Touch, may inhibit sperm motility by 60% to 100%.

**8. Couple's Fertility Booster: Avoid Pesticides and Other Harmful Exposures**

Exposures to pesticide, especially agricultural pesticides, may harm both men and women's fertility. And exposure to some solvents and toxins -- including those used in printing businesses and dry cleaning establishments -- can adversely affect women's fertility.

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**Get to it! 20 ways to boost your fertility naturally**

*11 Dec 2012 10:00*
If you want to have a baby in 2013 like William and Kate, try these tips to have the best chance now

1 Try to keep your cool
Sperm develops best in cool surroundings. Men who sit with computers on their laps can have reduced fertility levels.

Men should also avoid long, hot baths. One study found that switching to cool showers increases sperm production by five times. Also swap tight pants for roomier boxer shorts.

2 Be a cleaning queen
Women who do the housework, gardening or other forms of moderate exercise are three times more likely to conceive through IVF than those with sedentary lives, according to research by the University of North Carolina in the US.

Exercise stops the body producing excessive insulin, which is thought to harm development of healthy eggs.

3 Soak up the sunshine
Sunlight boosts fertility in both men and women by increasing levels of vitamin D. The Medical University of Graz in Austria found vitamin D increases levels of the female sex hormones progesterone and oestrogen, which regulate periods and make conception more likely. It also boosts sperm count.
4 Take time to relax

“Stress can have a huge impact on female fertility,” says consultant gynaecologist Michael Dooley. “It can also slow male sperm production and lower libido.”

5 Eat more dairy

Women who eat one serving of full-fat dairy a day reduce their risk of infertility by more than a quarter, a Harvard University study in America found. Dairy fat helps the ovaries work well.

6 Try popping a multivitamin

Research at the Royal Free Hospital, London, showed taking a daily prenatal vitamin – containing key nutrients for conception like folic acid, vitamin B12 and selenium – could more than double pregnancy chances.

7 Stub out the ciggies

Male smokers are 50% more likely to be impotent and have lower sperm counts. Female smokers have a 30% lower fertility rate than non-smokers. Smoking can also prevent an embryo implanting in the uterus.

8 Think before drinking

If you’re trying to get pregnant, it’s a good idea for you and your partner to drink less alcohol. Drinking too much has been found to impair ovulation and sperm production.

9 Use a phone app

Free apps like Period Diary, Fertility Friend and Menstrual Calendar work out when you’re at your most fertile from your daily body temperature and the dates of your period.

10 Get the point

Try acupuncture to stimulate specific points on the body. It’s thought it may help control ovulation and increase blood flow to the uterus, and therefore improve the chances of a fertilised egg implanting.

11 Have sex!

Chances of conception rise from 15% for couples having sex once a week to 50% for couples having sex three to four times a week. Sex keeps sperm healthy. Its quality falls if it’s retained in the body for more than three days.

12 Know your window

For baby success, you need to have sex during your most fertile time of the month. In an average 28-day cycle, this usually falls between day 10 and day 17.

13 Lose weight
Body fat produces oestrogen, which confuses the body’s ovulation cycle. Overweight women often have less regular periods than women who weigh less. Losing just 5% of your body weight can boost conception chances by about a fifth.

14 But don’t get skinny

Being underweight can switch off your body’s ability to reproduce eggs, as it senses there isn’t enough fat to sustain a healthy pregnancy.

15 Cut down on carbs

Some experts believe a diet high in refined carbohydrates, like white bread, pasta and biscuits, can affect conception. These foods raise blood sugar quickly, causing an insulin surge that can impair fertility.

16 Say no to drugs

Recreational drugs, such as cocaine and marijuana, have been found to lower sperm counts and increase abnormal sperm, while female drug users can face ovulation problems.

17 Eat more oily fish

Some studies show omega-3s, which are found in oily fish, such as salmon and linseed, may reduce risk of miscarriage and improve sperm quality. Nutritionist Marilyn Glenville says: “These essential fats are crucial for healthy hormone functioning, but many of us don’t get enough.”

18 Kick the caffeine

Research has shown that just one cup of coffee per day could halve your chances of conception. Experts say caffeine may reduce the activity of the Fallopian tube muscles, which carry the eggs from the ovaries.

19 Cut out painkillers

Some over-the-counter pills, such as paracetamol and ibuprofen, can affect conception if taken around the time of ovulation. They may suppress hormones called prostaglandins, which help release eggs into the Fallopian tube.

20 Drink more water

Fertility expert Zita West says: “If you don’t drink enough water, the reproductive system will lose out as the body ensures that the more vital organs receive what they need first.”

Water creates plump egg follicles and a strong blood supply to the womb lining. Plus, if you’re dehydrated, your cervical fluid – the stuff that helps the sperm find the egg – will be sluggish.
How to increase your chances of conceiving and preventing miscarriages

Over the past twenty years, fertility problems have increased dramatically. One in six couples now find it difficult to conceive and a quarter of all pregnancies can end in a miscarriage and more and more couples are turning to fertility treatments to help them have a family.

What is the cause?
What is the cause? From a medical point of view, infertility is believed to be caused by the following factors, and in these proportions.

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<th>Problem Percentage of cases:</th>
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<tr>
<td>Ovulatory failure (including Polycystic Ovary Syndrome)</td>
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<tr>
<td>Tubal damage</td>
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<tr>
<td>Endometriosis</td>
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<tr>
<td>Male problems</td>
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<td>Unexplained</td>
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If the mathematics don’t add up, it’s because many couples experience more than one problem when trying to conceive: for example, you may suffer from endometriosis, but your partner may also have a low sperm count.

Interestingly, the most common cause of infertility is ‘unexplained’, which means that following thorough investigations, doctors can find no specific or identifiable medical problem at the root. But this is where a natural approach can come into play. If a couple fails to become pregnant, there is obviously something causing the problem. It’s no good labelling infertility ‘unexplained’. The answer is to look deeper – at lifestyle factors, nutritional deficiencies and even emotional elements.

What are your choices?

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The natural approach to fertility is and has been enormously successful, largely because fertility is multifactorial, meaning that there are many, many elements that can be at the root of your fertility problems. A study conducted by the University of Surrey showed that couples with a previous history of infertility who made changes in their lifestyle, diet and took nutritional supplements had an 80 percent success rate. Given that the success rate for IVF is around 25 per cent, it’s worth considering these options.

Natural treatment plans are, by their nature, extensive and really do need to be adjusted to suit your individual needs. I will, however, go through the most important points below. Remember that it takes at least three months for immature eggs (oocytes) to mature enough to be released during ovulation. It also takes at least three months for sperm cells to develop, ready to be ejaculated. This means that when you are trying to improve your fertility, you need to have a three-month period before conceiving. This is called ‘pre-conception care’ and it’s as important to take as much care during this period as it is during a pregnancy itself.

If you are going for IVF treatment or another assisted conception procedure, you should follow the recommendations listed below in order to increase the chances that the procedure will work.

**Diet**

Both you and your partner should follow the dietary recommendations explained in the Nutrition Section (The Foundation of Health) Although it goes without saying that a healthy diet is crucial to a successful pregnancy and a healthy baby, many people are unaware of the fact that diet can help to correct hormone imbalances that may affect your ability to conceive. There are also certain foods and drinks that are known to lower fertility.

**Alcohol**

Alcohol will affect both you and your partner. In fact, drinking any alcohol at all can reduce your fertility by half – and the more you drink, the less likely you are to conceive. One study showed that women who drank less than 5 units of alcohol a week (equal to 2 standard 175ml glasses of wine) were twice as likely to get pregnant within six-months compared with those who drank more.

Research has also shown that drinking alcohol causes a decrease in sperm count, an increase in abnormal sperm and a lower proportion of motile sperm. Alcohol also inhibits the body’s absorption of nutrients such as zinc, which is one of the most important minerals for male fertility.

As difficult as it may seem, you should eliminate alcohol from your diets for at least three months in order to give yourself the best possible chance of conceiving.
**Caffeine**
There is plenty of evidence to show that caffeine, particularly in the form of coffee, decreases fertility. Drinking as little as one cup of coffee a day can halve your chances of conceiving and just two cups a day increases the risk of a miscarriage. One study showed that problems with sperm: sperm count, motility and abnormalities, increase with the number of cups of coffee consumed each day. Once again, it's important to eliminate all caffeine-containing food and drinks for at least three months before trying to conceive. That includes colas, chocolate, black teas and coffee, among other things.

**Xenoestrogens**
Xenoestrogens are essentially environmental oestrogens, coming from pesticides and the plastic industry. When you are trying to conceive, one of the most important things you need to do is to balance your hormones. It is extremely important to avoid anything that might cause an imbalance, and one of the main culprits is the xenoestrogens. One of the best ways to eliminate an excess intake of xenoestrogens is to eat as much organic produce as possible for the pre-conceptual period. For more information on how to control xenoestrogens see my book Getting Pregnant Faster.

**Smoking**
Smoking has definitely been linked with infertility in women. It can even bring on an early menopause, which is a particularly important consideration for older women who may be trying to beat the clock. Smoking can decrease sperm count in men, making the sperm more sluggish, and it can increase the number of abnormal sperm. With men, the effects on fertility are increased with the number of cigarettes.

**Supplements**
There is now a great deal of scientific knowledge about the use of nutritional supplements and their beneficial effects on both male and female fertility. As you will see, these supplements can be very effective in re-balancing your hormones, as well as improving you and your partner’s overall health, which are so vital for successful conception.

Scientific research has shown that certain vitamins and minerals can increase your chances of getting and staying pregnant. In order to maximise your chances of conceiving it is very important that you and your partner are in optimum health. By eliminating nutritional deficiencies and improving sperm production
and mobility you can dramatically increase your chances of getting pregnant. In order to do this it is essential that you are obtaining the right nutrients and in the right quantities to enhance your success.

Supplements are necessary because even the best diet in the world may not contain all the nutrients you need to give you the best chance of conceiving.

**Folic Acid**
It is now known that folic acid can prevent spina bifida in your baby, and it is essential that you get plenty both before and during pregnancy. And that’s not all: folic acid is undoubtedly important, but it is just part of the very important B-complex family of vitamins that are necessary to produce the genetic materials DNA and RNA, not only of the egg but also the sperm. Together with vitamin B12, folic acid works to ensure that your baby’s genetic codes are intact. Remember: it’s not enough to take folic acid alone when you are trying to become pregnant. All of the B vitamins are essential during the pre-conceptual period. Research has shown that giving B6 to women who have trouble conceiving increases fertility and vitamin B12 has been found to improve low sperm counts.

**Zinc**
Zinc is the most widely studied nutrient in terms of fertility for both men and women. It is an essential component of genetic material and a zinc deficiency can cause chromosome changes in either you or our partner, leading to reduced fertility and an increased risk of miscarriage. Zinc is necessary for your body to ‘attract and hold’ (utilise efficiently) the reproductive hormones, oestrogen and progesterone.

And it’s equally important for your partner: zinc is found in high concentrations in the sperm. Zinc is needed to make the outer layer and tail of the sperm and is, therefore, essential for the health of your partner’s sperm and, subsequently, your baby. Interestingly, several studies have also shown that reducing zinc in a man’s diet will also reduce his sperm count.

**Selenium**
Selenium is an antioxidant that helps to protect your body from highly reactive chemical fragments called free radicals. For this reason, selenium can prevent chromosome breakage, which is known to be a cause of birth defects and miscarriages. Good levels of selenium are also essential to maximise sperm formation. Blood selenium levels have been found to be lower in men with low sperm counts.

**Omega 3 Fatty Acids**
These essential fats have a profound effect on every system of the body, including the reproductive system and they are crucial for healthy hormone functioning. Omega 3 fatty acids also control inflammation which may interfere with getting and staying pregnant. For men essential fatty acid supplementation is crucial because the semen is rich in prostaglandins which are produced from these fats. Men with poor sperm quality, abnormal sperm, poor motility or low count, have inadequate levels of these beneficial prostaglandins.

Many of the women I see in the clinic have been taking evening primrose oil supplements – an Omega 6 fatty acid – for years and have not been eating enough Omega 3 oils, or taking them in supplement form,
to counterbalance this. Some women are also taking combinations such as Omega 3, 6, and 9 in supplement form because they have heard that we need a good balance of all the Omega fatty acids. This is true, but you have to take into account what your own levels may be in the first place. It is no good adding in more Omega 6 if you have already got enough or in fact too much in your body. (You can now have a blood test to tell you if you have the correct levels of Omega 3 to Omega 6 in your body see below). To check whether you have sufficient levels of Omega 3 please click Omega 3 Deficiency Test (at home finger prick blood)

Vitamin E
Vitamin E is another powerful antioxidant and has been shown to increase fertility when given to both men and women. Men going for IVF treatment with their partners have been given vitamin E, and fertilisation rates have, as a result, increased from 19 to 29 percent. It has been suggested that the antioxidant activity of vitamin E might make the sperm more fertile.

Vitamin C
Vitamin C is also an antioxidant, and studies show that vitamin C enhances sperm quality, protecting sperm and the DNA within it from damage. Some research has indicated that certain types of DNA damage in the sperm can make it difficult to conceive in the first place, or it can cause an increased risk of miscarriage if conception does take place. If DNA is damaged, there may be a chromosomal problem in the baby, should the pregnancy proceed. Whether or not DNA damage does have these effects has not been conclusively proven, but it’s worth taking vitamin C and the other antioxidants as a precautionary measure.

Vitamin C also appears to keep the sperm from clumping together, making them more motile. One study has shown that women taking the drug clomiphene to stimulate ovulation will have a better chance of ovulating if vitamin C is taken alongside the drug. Clomiphene does not always work in every woman, but the chances are often increased when vitamin C is supplemented.

Beta-Carotene
This is the vegetable precursor to Vitamin A and is completely safe during pregnancy. Beta-carotene is a powerful antioxidant which helps to protect egg and sperm DNA from damage by harmful free radicals which can affect the quality of both the egg and sperm. Free radicals are highly unstable and set off a process called oxidation which can have harmful effects on the every cell in the body. Beta-carotene will be contained in your multivitamin and mineral.

L-Arginine
This is an amino acid found in many foods and the head of the sperm contains an exceptional amount of this nutrient, which is essential for sperm production. Supplementing with L-arginine can help to increase both the sperm count and quality.
Note: People who have herpes attacks (either cold sores or genital herpes) should not supplement with L-arginine because it stimulates the virus.
**L-Carnitine**
This amino acid is essential for normal functioning of sperm cells. According to research, it appears that the higher the levels of L-Carnitine in the sperm cells, the better the sperm count and motility.

Furthermore, by adopting a healthier lifestyle you will be more likely to prevent infertility problems which is discussed in detail in the rest of this ebook which you can read by clicking on Understanding Infertility ebook at The Natural Health Practice.

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**Herbs**

Herbal treatment is aimed at restoring hormone imbalances, and encouraging ovulation if it is not occurring. It will also give you the best possible chance of maintaining a pregnancy.

**Agnus Castus (Vitex Agnus Castus)**
This is the herb of choice for helping to restore hormone imbalance and increasing fertility. In one study 48 women diagnosed with infertility took agnus castus daily for three months, 7 of them became pregnant during that time and 25 of them regained normal progesterone levels.

Agnus castus is particularly helpful for those women who have a luteal phase defect (shortened second half of the cycle) or those with high prolactin levels, because it stimulates the proper functioning of the pituitary gland which controls the hormones.

Agnus castus works to restore hormonal balance and can be used where there are hormone deficits as well as excesses it:

- Regulates periods
- Restarts periods which have stopped
- Helps with heavy bleeding
- Increases the ratio of progesterone to oestrogen by balancing excess oestrogen.

**Caution**
You should not take any of the above herbs if you are taking, The Pill, Fertility drugs, HRT or any other hormonal treatment or other medication unless they are recommended by a registered, experienced practitioner.

I suggest that you follow this three month plan and do not try to conceive within that time. Why? Because when you follow the plan, your fertility will begin to increase. Everything needs to be working at optimum
levels before you conceive, both to prevent a miscarriage, and to give you the best possible chance of having a healthy baby.

**Case history**

Susan and her partner were 30 and 31 respectively, and they’d been trying to have a baby for four years before coming to my clinic. They had been diagnosed with ‘unexplained fertility’ and had had four unsuccessful attempts at IUI. Susan had many problems with her periods: she had a regular cycle, but bled heavily with spotting and headaches before her period. At ovulation, her abdomen swelled up and she felt nauseous.

Both Susan and her partner were tested for infections and the tests came back positive to one infection, which was easily cleared up by antibiotics. Susan was deficient in a number of nutrients, including zinc, selenium, calcium and magnesium, and her partner had low zinc and high aluminium levels. I therefore recommended that he cut out tinned soft drinks and switch to an aluminium-free deodorant. Because I was concerned that the imbalance causing the problems with Susan’s cycle could also be a factor in her inability to conceive, I also used a combination of balancing herbs, such as agnus castus, to alleviate Susan’s spotting and heavy bleeding. Susan and her partner followed the three month programme and waited until their mineral levels were back to normal. Nine months from their first appointment day, they conceived, and, not surprisingly, had a baby another nine months later.

**If you have been trying to conceive for six months**

If you are under the age of 35 and have been trying unsuccessfully to conceive for six months, follow the dietary and supplement suggestions given below for three months. At the end of this period, begin trying to conceive again. Give yourself six months before embarking on any fertility treatments or investigation by your doctor or a gynaecologist.

If you have been trying for six months and are over 35, follow the recommendations but visit your doctor and ask for tests to begin during that first three-month period. If you are given a diagnosis of unexplained infertility, then try for six months on your own before going for medical treatment.

**If you have been trying to conceive for 12 months or more**

If you are under the age of 35, follow the suggestions below for three months. Then try on your own for six months before embarking on fertility tests.

If you have been trying for six months and are over 35, follow the recommendations but visit your doctor and ask for tests to begin during that first three-month period. If you are given a diagnosis of unexplained infertility, then try for six months on your own before going for medical treatment.

[Back to the top]
There are a number of tests available that are extremely useful and are well worth considering. These tests can give you invaluable insights into understanding what is going on in your body at the moment and can tell you what vitamin and mineral deficiencies and heavy toxic metal excesses you may have. They can let you know what your general condition is and how well your digestive system is functioning and then explain what action you need to take to rectify any imbalances the results may reveal. The analysis of these results lets you know what supplements you need to take in order to bring your body back into balance and into optimum health. This is also designed to help prevent these problems from recurring in the future. You would then be re-tested after three months to monitor your progress and to adjust the supplement programme accordingly.

**Fertility Mineral Deficiency Test with Supplement Programme (hair)**
Find out what the mineral and heavy toxic levels are in your body. This test measures the deficiencies and excess levels of 12 different minerals (including calcium, chromium, cobalt, copper, iron, magnesium, manganese, phosphorus, potassium, selenium, sodium and zinc) and 6 heavy toxic metals (including aluminium, arsenic, cadmium, lead, mercury and nickel) that may be present in your body. Find out more - [Fertility Mineral Deficiency Test with Supplement Programme (hair)](#).

**Online Personalised Supplement Assessment Programme**
Discover what vitamins and minerals you need and should be taking. The analysis of this comprehensive questionnaire will give you a three monthly supplement programme to help balance any vitamin and mineral deficiencies you may have. Find out more - [Online Personalised Supplement Assessment Programme](#).

**Female Hormone Test (saliva)**
A total of eleven saliva samples are collected at home at specific times across one cycle, and sent to the lab for analysis. This simple test will chart the level of the hormones oestrogen and progesterone across the month, to work out a pattern that may reveal:

- early ovulation
- anovulation (no ovulation)
- problems with the phasing of the cycles, such as a short luteal phase (second half of the cycle)
- problems with maintaining progesterone levels
- high levels of testosterone

This test can be done even if you have irregular cycles. Find out more - [Female Hormone Test (saliva)](#).

**Vitamin D Deficiency Test (at home blood finger prick)**
With all the news in the press about the benefits of having good levels of vitamin D e.g. prevention of
cancer, especially breast cancer, heart disease, Type 2 diabetes and osteoporosis it is important that you know whether or not you are lacking in this vital vitamin. There is an increasing wealth of research linking low levels of this vitamin with infertility and immunological problems. It’s thought that Vitamin D plays a role in helping the body to maintain a pregnancy. By making mice deficient in vitamin D they can actually make them infertile. So if you’ve had a miscarriage or implantation is a problem, it is recommended that you check your level of vitamin D. Having an optimum level of vitamin D is also crucial for men as it has been associated with sperm motility and having a good amount of normal sperm. To find out whether you are deficient in **Vitamin D Deficiency Test (at home blood finger prick)**.

**Omega 3 Deficiency Test (at home blood finger prick)**

If you want to find out if you are getting enough Omega 3 fatty acids from your diet and whether you have the correct balance of essential fatty acids. Fish oil has also been shown to help prevent blood from clotting inappropriately so it can be beneficial to women in whom recurrent miscarriages have been linked to a clotting problem. The Omega 3 oils also control inflammation. If you want to find out if you are getting enough Omega 3 fatty acids from your diet and whether you have the correct balance of Omega 3 to Omega 6 essential fatty acids please click **Omega 3 Deficiency Test (at home blood finger prick)**.

**Infection Screen (urine)**

Find out if an infection is stopping you conceiving or staying pregnant

Infections in the vagina may have a serious impact on your ability to conceive and to hold on to a pregnancy. These infections may have existed for many years with low activity and often present no symptoms. If you are having problems conceiving or have suffered from successive miscarriage or IVF failure or if you have a persistent vaginal secretion it may be worth considering having an Infection Screen.

Infections in the prostate gland may affect both the quantity and quality of the sperm, so an infection screen is advisable, especially if everything else has been ruled out.

It is advisable to get this organised at a specialist clinic like my one as the NHS infection screens can be very basic. Find out more - **Infection Screen (urine)**

**Semen Analysis (semen)**

A comprehensive test to assess both quality and quantity of sperm

A good semen analysis not only assesses the sperm for quantity and motility but quality and is best done in a specialist clinic as the quality of the results can vary considerably.

A man can now have a comprehensive semen analysis to check for sperm count, motility, abnormal sperm, agglutination (sperm clumping) and sperm antibodies. It is then possible to use nutritional interventions to improve the semen analysis. Find out more - **Semen Analysis**

**Sperm DNA Fragmentation Test (semen)**

Find out if you have healthy sperm DNA

The success of a viable embryo depends to a certain extent on the genetic DNA of the egg and the sperm. The Sperm DNA Fragmentation Test is designed to check whether the DNA of the sperm is liable to fragmentation (the breaking down of some of the sperms DNA strands). There is always a small
amount of DNA fragmentation in sperm but this can be overcome or repaired by the egg after fertilisation. However if the fragmentation is beyond a certain level, the repair process cannot compensate enough for the damage and normal embryonic development will stop, meaning that the pregnancy can’t continue.

A high level of fragmentation in sperm cells represents a cause of male infertility that a conventional semen analysis cannot detect. So a man may be told that his sperm is normal in terms of the count, motility and morphology but could have high levels of sperm DNA fragmentation. Results from the medical literature have confirmed that regardless of whether you are trying to conceive naturally or with the help of IUI or IVF, a high level of sperm DNA fragmentation will seriously compromise any possibility of a successful pregnancy. Find out more - Sperm DNA Fragmentation Test (semen)

Ovarian Reserve Test (blood)
Find out your egg store
This test measures AMH (Anti-Mullerian Hormone) which is a hormone made by your ovaries and helps your eggs mature each month. It is also important in the production of the female sex hormone oestrogen. The level of AMH indicates how well your ovaries are functioning and represents the quantity of your egg store. The lower the level of AMH the lower the fertility level is likely to be. This is a useful test also if you are thinking about doing IVF as a low levels has been shown in clinical trials to predict poor response to IVF treatment. In order for IVF or ICSI to work, your ovaries have to respond to the drug stimulation by recruiting a group of follicles, so if AMH is low then it is more than likely that the response will be poor. Measuring AMH is also useful for women with suspected polycystic ovary syndrome (PCOS) as the level is normally very high due to the greater number of follicles on the ovaries. This test can be done at any time of the cycle, even if you are not having a cycle. Click Ovarian Reserve Test (blood).

Immune Problems (blood)
Is your immune system stopping you getting and staying pregnant?
Immune problems may account for a large number of cases of unexplained infertility and pregnancy loss. Problems with the immune system occur when your body’s normal immune response to a pregnancy goes wrong. Your body naturally produces antibodies to fight off infection or foreign substances but during pregnancy your body should respond differently to an embryo and should form a protective blanket around it. Because half the baby’s DNA is not yours (it belongs to your partner or sperm donor), your immune system has, in effect, to quieten down in order to stay pregnant and not reject the baby. In some women, however, instead of protecting the embryo their immune system attacks it as if it were an infection or invading organism. Find out more - Immune Problems (blood)
There are a number of tests that can pinpoint whether this is a problem e.g. Natural Killer Cells and Antiphospholipid Antibodies

Natural Killer Cells (blood)
Natural killer cells are important. They make up 50 per cent of all white blood cells and are needed to control rapidly dividing cells like cancer. The theory is that some women produce too many natural killer cells which will aggressively attack any cells that grow and divide, offering protection against cancer but making pregnancy impossible. Find out more - Natural Killer Cells (blood)

Antiphospholipid Antibodies (blood)
Antiphospholipid antibodies (APAs) are the most common kind of abnormal immune system problem. Up to 15 per cent of women with a history of recurrent miscarriage have this syndrome – and a 90 per cent
miscarriage rate, without treatment. And APAs can also prevent implantation, preventing pregnancy in the first place. Phospholipids are a sort of glue needed in early pregnancy. Some women, however, produce APA blood-clotting antibodies which attack cells that build the placenta and increase the risk of miscarriage.

Anticoagulants help to prevent clotting caused by APA and both low-dose aspirin and heparin (a blood thinner) are often prescribed. Supplements of omega 3 essential fats, vitamins C and E and garlic also help to thin the blood so you should not take these if you are on blood thinners. NB. Please note some of the recommended tests are only available in conjunction with a consultation at one of my clinics. Find out more - Antiphospholipid Antibodies (blood)

After three months you would then have a re-test in order to monitor your progress and adjust your supplement programme according to your new condition.

If you need help in obtaining any of the supplements, herbs or tests mentioned, click, Infertility options at The Natural Health Practice. They can supply all of them for you online or if you prefer to talk to somebody first you can also order by mail order on the telephone. The products supplied by this company are always of the highest quality.

Plan of Action

Nutrition
Ensure you are getting the right nutrition. Follow the dietary recommendations outlined in the free The Foundation of Health ebook. For more information on the special dietary recommendations for fertility, read the rest of the ebook on Understanding Infertility ebook at The Natural Health Practice.

Supplements
The supplement programme below should be taken for at least three months in order to achieve best results.

Nutrients & amounts

<table>
<thead>
<tr>
<th>A good multi-vitamin &amp; mineral supplement</th>
<th>Vitamin C with bioflavonoids as magnesium ascorbate</th>
<th>1000mg</th>
</tr>
</thead>
<tbody>
<tr>
<td>Folic Acid</td>
<td>400μg</td>
<td>Zinc</td>
</tr>
<tr>
<td>Selenium</td>
<td>100μg</td>
<td>L-carnitine</td>
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With all of the above for your partner, plus:

L-arginine 300mg
L-carnitine 100mg
L-taurine 100mg

To avoid having to purchase numerous supplements for all of the above and to make the process easier, I have put together a supplement programme which contains all the nutrients mentioned above and in the correct dosages. For more information about these click Infertility Supplement Programme. If you would like to order these special supplements for you and your partner now, you can do so through the Natural Health Practice by clicking Infertility Support Supplements at The Natural Health Practice.

**Herbs**
A good herbal formula should contain:

<table>
<thead>
<tr>
<th>Herbs</th>
<th>Amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agnus Castus</td>
<td>200-400mg</td>
</tr>
</tbody>
</table>

Go to your Infertility Supplement Programme

At the end of three months you should reassess your condition and adjust your supplement programme accordingly.

**Tests**
The tests below have been specially selected to be the most helpful if you are concerned about fertility.

- Fertility Mineral Deficiency Test with Supplement Programme (hair)
- Online Personalised Supplement Assessment Programme
- Female Hormone Test (saliva)
- Vitamin D Deficiency Test (at home blood finger prick)
- Omega 3 Deficiency Test (at home blood finger prick)
- Infection Screen (urine)
- Semen Analysis (semen)
- Sperm DNA Fragmentation Test (semen)
- Ovarian Reserve Test (blood)
- Immune Problems (blood)
- Natural Killer Cells (blood)
- Antiphospholipid Antibodies (blood)

NB. Please note some of the recommended tests are only available in conjunction with a consultation at one of my clinics.

After three months you would then have a re-test in order to monitor your progress and adjust your supplement programme according to your new condition.
If you need help in obtaining any of the supplements, herbs or tests mentioned above, click Infertility options at The Natural Health Practice. They can supply all of them for you online or if you prefer to talk to somebody first you can also order by mail order on the telephone. The products supplied by this company are always of the highest quality.

High stress in pregnancy tied to stillbirth risk

URL of this page: http://www.nlm.nih.gov/medlineplus/news/fullstory_66093.html (*this news item will not be available after 07/23/2008)

Monday, June 23, 2008

By Amy Norton

NEW YORK (Reuters Health) - Women who are under high psychological stress during pregnancy may have an elevated risk of stillbirth, a new study suggests.

Over a 10-year period, the researchers found that of more than 19,000 Danish women who were pregnant those who reported high levels of psychological stress were 80 percent more likely to suffer a stillbirth than women with low stress levels.

Most women with high stress levels did deliver a healthy baby, with the stillbirth rate being just under 5 percent. However, women with low or moderate stress levels had a stillbirth rate of about 3 percent, the researchers report in the medical journal BJOG.

This is the first study to establish a link between psychological stress and stillbirth, so it's too soon to conclude that stress causes fetal deaths, lead researcher Dr. Kirsten Wisborg told Reuters Health.

"Our result should be confirmed by other studies," said Wisborg, of Aarhus University Hospital in Denmark.

If heavy stress is confirmed as a risk factor for stillbirth, she noted, then it will be necessary to see whether stress reduction can lower the risk.

The researchers based their findings on data from 19,282 women who were scheduled to deliver a single infant at their hospital between 1989 and 1998. The women completed several questionnaires during their pregnancy, including a standard measure of psychological stress that they completed before their 30th week of pregnancy.

The questionnaire also asked them about their stress levels in the past month -- gauging, for instance, how often they had felt unhappy, worried or unable to deal with their problems.
Wisborg’s team found that women with high stress scores were more likely to be smokers or to have been overweight before pregnancy than women with low stress levels; they were also less educated overall and more likely to be single.

However, even with these factors taken into account, high stress alone was linked to an 80-percent higher risk of stillbirth.

Wisborg said she could only speculate on the reasons. One possibility is that chronically high stress hormones play a role.

For example, Wisborg noted, stress, depression and anxiety all trigger the release of catecholamines, a group of hormones that includes dopamine and epinephrine (adrenalin). Animal research suggests that high levels of these hormones may hinder blood flow to the placenta.

However, Wisborg pointed out, it is also possible that women under heavy stress differ from less-stressed women in their lifestyle habits, which might explain the higher stillbirth risk.

**Vibrational Excellence of Natural Birth**

**And Vibration Derailed**

**Sunni Karll 2006©**

**Synopsis:** Supporting, and not hindering the innate vibrational excellence of birth allows newborn radiance. What creates high and low vibrations of birth? Three common birth interventions reduce baby's vibrational excellence and affect baby's consciousness. (Baby is ‘he’ since mother is ‘she’. “Your” refers to parents along with mother. Words: 2085.

An enormous scope of birth wisdom has been lost through time. Giving birth is the highest degree of honor, for it is our act of co-creation and is our personal gift to our baby. Not only is it an honor to create and nurture another being within, but to release and offer this baby in gratitude for our life and nurturing from the Earth and cosmos is a fulfillment of the cycle of life. For generations, we women have let ourselves miss the opportunity to give birth to align with our true self. We have, on some level, agreed to be anesthetized in birth to highlight this forgetting. To give birth to a baby is an honor. In the world, there is nothing else like it, and women have this honor. If we look to our baby's birth as our gift to and from the Divine, we will most likely choose to be in a state of heightened consciousness and choose wakefulness of body, mind and heart. Conscious presence and joyful expectation is a state commensurate with this grand opportunity.

Birth is a dance of consciousness and matter as a soul is fully received into a body. When the newborn is gently received, with holistic soft practices, and without haste and interference, babies are born at their highest chosen vibration in order to shine forth their essence without overlays of limiting emotional patterning. Humanity, Nature, Spirit, Earth and planetary energies all coalesce for the good of this individual.
What creates vibrational excellence in pregnancy and birth? Many soft ways support parents to welcome their baby gently. The one that starts first is creating a ‘field of birth’. This is an energy field made up of both parents’ thoughts, feelings and actions toward the birth of their baby from pre-conception onward. Everything is part of the field, and becomes the energy that surrounds, protects and later, carries you into birth. Water birth is another gentle practice that better supports both mother and baby; another is honoring your baby by allowing him to determine his own labor and birth time, instead of inducing or scheduling; and another is giving birth naturally.

One new mother said, “As a women, I want to know this passage, to remember it, to feel each part, to have the memory of being in the ancient lineage of all birthing women. I want to feel the baby move down the birth canal, to crown, to be half in and half out of me, to be of me but not mine, and then to slither out. To have him curled up on my soft hollow belly, to see him look around wide-eyed at his new world, alert, gazing into my eyes. I want him to speak to us of his essence, and to remember our promises. I want to know it all.”

If there is only one thing you can do for your baby, let it be the continual offering of love. Love affects all parts of the process and therefore the goal. Love creates every step of devotion and every one of your caring actions. Love becomes your field of birth. It gives you the discernment needed to sift what feels good, from that which is not for your baby. It pulls you toward a birth of aligned and heightened circumstances. It infuses the field around you, within you, and therefore, baby’s physical body. It attracts more of this same delicious vibration to you in outer occurrences.

Building on your love, nature has the implicit ability to raise this vibration in a natural birth - if we do not interfere. As the birth energy flows into mother, the vibration of mother, and therefore baby naturally raises through the hours of contractions. In early labor, our energy is in the lower energy centers, the pelvis and belly, spiraling slowly back and forth from root to navel chakra. As a contraction builds, our feminine energy spirals predominantly from the root chakra up to the navel chakra. If mother welcomes the rushes as that which will help her give birth, her intention draws to it a powerful supplemental energy gifted by The Great Mother. As the rush starts to recede, our masculine energy pulls the birth energy down to the root again, releasing its intensity. The Mother soothes and strengthens each mother between contractions.
As labor progresses, the birth energy builds and moves into higher chakras, purifying our holding patterns from the limiting emotional decisions we hold. Our heart, the seat of our true being, becomes better cleansed as this great surge of energy opens us to vibrational places not reachable in everyday life. As labor peaks, we are immersed in this vibration, bathing us in this higher octave. Creativity held captive at our throat chakra is activated and we discover deeper parts of ourselves that we have forgotten, parts we have unknowingly denied. We surrender these obstacles, and move into more alignment with our essence. When a mother takes part in a non-medicated birth and welcomes the help of The Great Mother, who served birth through time, she clears many limiting patterns that ask for healing so that she may more closely match her soul design.

When feminine energy rises up mother’s spine to her crown, the intensity of the rush builds. As her energy moves down returning to the root chakra, she rests into a new energetic clarity of who she is. She welcomes new integrity within. When mother’s intention is empowered by The Mother, this is the full spiral of birth. We are breathed by an energy greater than ourselves during our initiation of birth. The spiral of birth is the same as the spiral of love. Parent’s love deepens mother’s intention to more closely match that of The Great Mystery, and sends up the next birth wave with renewed momentum.

Suzanna said, “...Giving birth turned me inside out. The swirling driving power of nature swept through my body with an amazing force. What a big baby! Huge! How did you come out of me? My body really worked hard - a storm of change, of transformation. I became a woman.”

Vibration Derailed

In much of the last century, birth has been loosing its magnificence little by little and becoming addressed as its components. In the western world, society places its attention on the intellectual and physical aspect of birth, with its emphasis on pain foremost: the epidural is the dominant request and mothers doze through one of the most transformative opportunities of life: one grand purpose of giving birth as nature perfected is ignored. The emotional aspect of birth is tolerated but not revered. Father is a guest instead of an integral part, and the needs and desires of mother, father and baby are still less important than hospital protocol. Modern birthing prides itself on its technology, allowing its tools to determine decisions rather than its patients. Science dissect birth in order to analyze it, pharmaceutical research ‘forgets’ to watch the behavior of babies as they mature, and match it with the drugs of their birth histories.

So what exactly lowers vibration at birth? There are many practices in modern birth that interfere with natural birth’s vibrational excellence. When drugs are
involved in birth, consciousness is affected: consciousness and awareness in the
mother, and also consciousness and awareness in the baby.

The truth must be stated: drugs harm babies, in the womb and out. Every step
we take toward a more natural paradigm in conception, pregnancy and birth deeply
affects the soul, the emotions and body of our baby. Nature has perfected a process
that has birthed babies safely through eons. When we interfere with nature’s
masterpiece by adding drugs, there can be far-reaching consequences, often not easily
acknowledged because of the lag time.

Anesthesia lowers the vibration in a newborn and mother. The amount of
medication in an epidural is determined by mother’s weight: yet, what mom receives,
baby receives. This means that the baby will receive 15 to 20 times the amount
appropriate for baby’s body weight. At birth, baby will not be alert as in a natural
birth. Anesthesia and drugs keep a baby from participating emotionally in his
transition from the womb to the world. He is less aware and has less innate curiosity.
Physically, he is more disconnected from his surroundings, more passive and often
glassy-eyed. The use of drugs in birth does not only have a momentary impact. With an
overdose of this size, the nerve structure of this pristine little body may be dulled
permanently. The low vibration determines the place at which baby starts life.

With the administration of any birth drug, mother loses the vital inner
communication with baby that she has felt throughout pregnancy. Baby loses all feeling
of connection to mother because medication has overwhelmed her delicate nervous
system and dulled her receptivity. Mother loses her innate connection for baby’s well-
being. Her sense of tracking her baby is dramatically diminished or disappears
altogether. She is no longer focused on working together with baby to give birth.
When there is no feedback linking them, birth is reduced to the mechanics of muscular
contractions. When mother loses contact with baby, the birthday turns into a day like
any other.

With an epidural,
mother is not visibly working to give birth,
she starts talking or sleeping,
father’s heart does not open for her work done,
those around reflect the parents’ level of involvement,
the love does not flow,
the sacred atmosphere of birth is lost,
the baby feels abandoned.

However, the deepest level of harm in the newborn may in fact be due to the
actual energetic effects of the medication. Picture this: as mother is learning to work
with labor and opening to the ever-increasing flow of Divine energy moving thru her
body, the vibration of mother’s body is rising. The baby’s body within mother also
experiences this. As labor progresses, mother incorporates greater amounts of this
refined energy and her vibration is rising more quickly. When a pain medication is
given, the vibration of mother and therefore baby’s body suddenly plummet in
response, yet the vibration of the baby’s soul remains high and constant. The impact of an epidural causes a great energetic discrepancy between the baby’s body and soul, that previously were more coherently aligned before medication was given.

A further step in the gentleness of birth is to not cut the umbilical cord. To allow the cord to stop pulsing before cutting it gently encourages baby to breathe on her own, as mother feeds progressively less oxygen to her. It allows baby to take the first breaths without the panic of suffocation, and this alleviates shock to the baby’s heart and respiratory system. It is not necessary for the scream, so commonly heard on television, to accompany a first breath when the cord is not cut. Often within thirty seconds breathing begins, sometimes imperceptibly at first. Baby may become pink even before you see the ribs expanding, indicating her tentative breathing.

When the cord remains intact and is not cut, the baby holds the vibration of birth and is not susceptible to the energetic depletion and its common baby illnesses. Baby’s vitality can be used instead to gain weight, thrive and discover her world.

Protecting the umbilical cord upholds the energy field and protects baby’s immune system. This is called Lotus Birth.

The “harvesting” of stem cells is another detrimental intervention as it is practiced. The protocol is now to harvest stem cells within 15 seconds of birth, significantly reducing the baby’s blood volume and taking the very substance that baby needs for a healthy life. An alarming increase in autism is being seen in Canadian babies because of this practice stemming from greed. Stem cells belong to this baby. If in fact it is necessary to borrow some, the best practice is to extract what remains, after the baby’s breathing is well established and the cord has naturally stopped pulsing.

These are just three of the many interventions that degrade vibrational excellence available in all drug-free birth. Since a newborn’s physical and emotional stance cannot remain open if life-depleting procedures are performed, instead, let’s honor the whole being of the baby. To retain his innate wholeness, may his whole being be cared for: by doing your best in pregnancy, by receiving a baby with gentle hands, by lovingly welcoming your baby. These moments are his first impressions and you have set the stage for a magnificent human.

Sunni Karll is a birth therapist and a midwife. Author of Sacred Birthing, Birthing A New Humanity, she is guides international ‘birthshops’ to help eliminate birth trauma. She teaches parents and birth helpers how to offer a baby a ‘softbirth’, in order to protect the consciousness of the newborn and support these awakened children. She is a grandmother living and can be found at www.sacredbirthing.com.
Title: FEMALE DISORDERS, INFERTILITY

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Large Scale Study of the Safety and Efficacy of the SCIO Device
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This study was performed in the field by practicing Biofeedback technicians. Data was collected and the study supervised by the Ethics International Institutional Review Board of Romania. The Data analysis and study presentation is done By the The Centro Ricerche, University of Venice + Padova, Italy

Abstract:

This study demonstrates the safety and effective qualities of the SCIO device used in a large scale study. A large scale study of over 97,000 patients with over 275,000 patient visits reported their diseases. Many of them reported this disease. And the results of their therapy is reported in this study.

Introduction:

Over View:

This Large scale research was designed to produce a extensive study of people with a wide variety of diseases to see who gets or feels better while using the SCIO for stress reduction and patient monitoring. The SCIO is a evoked potential Universal ElectroPhysiological Medical apparatus that gauges how a individual reacts to miscellaneous homeopathic substances. The device is registered in Europe, America, Canada, S Africa, Australia, S. America, Mexico and elsewhere. The traditional software is fully registered. Some additional functions where determined by the manufacturer to be worthy of evaluation. Thus a study was necessary to determine safety and efficacy. (As a result of these studies these additional functions are now registered within the EC)

An European ethics committee was officially registered and governmental permission attained to do the insignificant risk study. Qualified registered and or licensed Biofeedback therapists where enlisted to perform the study. Therapists were enrolled from all over the world including N. America, Europe, Africa, Australia, Asia, and S. America. They were trained in the aspects of the study and how to attain informed consent and transmit the results to the ethics committee or IRB (Institutional Review Board).

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**MEDICAL DETAILS**

**What are Immunological Fertility Issues?**

First we must understand that the immune system is a complex network in the body. The immune system refers to all parts of the body that work to defend it against harmful enemies. In people with immunological fertility problems their body identifies part of reproductive function as an enemy and sends Natural Killer (NK) cells to attack. A healthy immune response would only identify an enemy correctly and attack only foreign invaders such as a virus, parasite, bacteria, ect. In fact immunological fertility issues are so complex that there is really no way for us to cover the entire topic, so I will provide basic information in order to help you learn natural options to help reduce negative immunological response, as well as determine whether you fall under risk factors for testing. This article will provide information on immunological recurrent miscarriage and anti-sperm antibodies, the two most prevalent immune related fertility problems.

**Who is in Need of Immunological Fertility Testing?**

People with the following indications may want to consider getting testing by a Reproductive Immunologist. A Reproductive Immunologist differs from a Reproductive Endocrinologist, which most couples are referred to when fertility issues are not determined by an OB/Gyn, or other doctor. Reproductive Immunologists have the training and skills to determine if there is in fact an immunological response gone awry that is causing difficulty in getting pregnant or carrying to full term.
• 2 or more miscarriages after the age of 35
• 2 IVF failures after the age of 35
• 3 miscarriages before the age of 35
• 1 failed IVF before the age of 35
• Poor egg production from a stimulated cycle (6 eggs or less)
• Blighted ovum
• Pre-existing immune problems (Lupus, Rheumatoid Arthritis, MS)
• Unexplained Infertility diagnosis
• Previous pregnancies showing retarded fetal growth
• 1 healthy pregnancy with all subsequent pregnancies ending in miscarriage
• Endometriosis, especially stage 1 & 2
• Cold and flu-like symptoms, sore throat noted regularly after ovulation, IUI, or IVF transfer
• Family history of immune disorders, either side of the family

Results:

Before we review the direct disease improvement profiles, we need to review the overall results. The first most basic of question in the results is the basic feedback of the generic patient conditions.

1. Percentage of Improvement in Symptoms
2. Percentage of Improvement in Feeling Better
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The SOC index gives us great insight to this study. Each disease has a different cut off where the ability of the SCIO to help was compromised. As a general index scores of 200 + where much less successful.
Title: FEMALE DISORDERS, PMS PMT
PREMENSTRUAL STRESS OR TENSION

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Large Scale Study of the Safety and Efficacy
of the SCIO Device
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Developed By:
The Centro Ricerche of Prof. William Nelson University of Venice + Padova, Italy

This study was performed in the field by practicing Biofeedback technicians. Data was collected and the study supervised by the Ethics International Institutional Review Board of Romania. The Data analysis and study presentation is done By the The Centro Ricerche, University of Venice + Padova, Italy

Abstract:

This study demonstrates the safety and effective qualities of the SCIO device used in a large scale study. A large scale study of over 97,000 patients with over 275,000 patient visits reported their diseases. Many of them reported this disease. And the results of their therapy is reported in this study.

Introduction:

Overview:

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**INFERTILTY**

This groups significant SOC cut off was 110.

The Large scale study had over 98,000 patients and 275,000 patient visits we have direct evidence of the safety and efficacy. A placebo group was used for the large scale test to help validate the results.

This disease group total number of patients was 348

**OVERALL ASSESSMENT**

**SCIO Harness Treatment 976 patient visits**

None of these cases reported any major difficulty.

There were

- 7 cases reporting no improvement of Symptoms, .001 % of Subgroup
- 10 cases reporting no improvement in feeling better, .001 % of Subgroup
- 11 cases reporting no improvement in stress reduction, .001% of Subgroup

47%--- Percentage of Improvement in Symptoms
SUGGESTED THERAPIES

FEMALE DISORDERS
1. Female problems are very complex and are often the result from an imbalance of hormones. Stress, improper nutritional toxins, drugs, and lifestyle produce female problems.
2. Hormonal disturbances can develop due to excess or deficient estrogen which is released from the ovaries; excess or deficient progesterone which is released from the corpus luteum, an organ which is developed every month in the female up until menopause; excess testosterone; and deficient adrenalin both of which are produced in the adrenal glands due to stress; excess growth hormones produced in the hypothalamic/pituitary area which can contribute to endometriosis (ref. Endometriosis Study).
3. Disorders of the liver can also produce problems because the liver has to help metabolize the excess of any one of these hormones. Disorders can result from stress and emotional problems, as well as nutritional deficiencies and excesses. Caffeine from cola, chocolate, coffee and tea as well as nicotine have more profound disturbing effects on the female system. Also fatty acid deficiencies contribute to these disorders because the different regulatory hormones need to be made out of fatty acid components. Proper mineral balancing is also important. Toxins can disrupt this. Toxins such as those found in beauty shop compounds and the environment can also place a burden on the female system. Many synthetic pharmaceuticals also cause female problems.
4. *FEMALE LIQUESCENCE contains an estrogen-based compound and can be used as a form of hormone replacement therapy in low grade conditions. For more hormone replacement therapy, a homeopathic of 3x estrogen with 6x progesterone can also be utilized. FEM-PRO is a complex homeopathic that helps any and all female problems.
5. In conditions involving testosterone and adrenalin production, stress reduction is very important as well as prescribing *KIDNEY/OVARIAN/ADRENAL which helps to stabilize these hormones.
6. The diagnostic criteria of a progesterone problem will usually result in a pre-menstrual stress and/or tension that is usually relieved upon the onset of the period. This is a diagnostic criteria that tells us that the problems is in a progesterone imbalance. The use of PROGESTEX for one month can help in relieving this condition.
7. The diagnostic criteria for an estrogen type disorder is that the condition would ensue the entire month or would mostly ensue at the release of the period and then occur for a week after the period. This is known as post-menstrual disturbance and is highly significant of an estrogen type disorder. A combination homeopathic of ESTROGEN 3x with PROGESTERONE 6x, taken 10 drops/3 times a day for one month along with *FEMALE LIQUESCENCE taken for three months, 1 teaspoon per day (ref. Natural
Hormone Study).
8. If there is a problem with irritability, this is diagnostic of a testosterone and/or adrenal disturbance. *KIDNEY/OVARIAN/ADRENAL should be taken 10 drops/3 times a day.
9. In treating hormonal disturbances, remember a healthy liver function is always important as well as good nutrition, stress reduction, and reducing exposure to toxins.

Master acupuncture points for stabilization shown below:
EMOTIONS AND ATTITUDES EFFECT AND CONTROL
HYPOTHALAMUS PITUITARY PINEAL REGULATES ALL FUNCTIONS

THYROID THYMUS
effects metabolism effects immunity
LIVER detox excess male hormone
ADRENALS makes male hormone and other excess hormones, more under stress
OVARIES makes Estrogen releases eggs
CORPUS LUTEUM UTERUS made and destroyed every month makes Progesterone needs to detox monthly
VAGINA There is a critical balance of many factors in the female hormone regulation. Most importantly Estrogen, Progesterone and Testosterone Our natural herbs and glandulars are designed for micro-nutrient supplementation and natural stimulation of balance.

SCIO TREATMENT SUGGESTED

Color - set patient's favorite if desired, or choose color by chakra that is deficient
Cosmic: set 1 for physical body, 2 for astral, 3 for etheric, 4 for mental, 5 for cosmic, 6+ for other
Magnetic Method - 1+10 is universal, 7 for detox, 8 for regrowth of new tissue, 3 for injury, 2 for metabolic correction, 5 for inflammation, 6 for infection, 9 for psych stress, 2 for energy stimulation, 4 for immune stimulation.
Frequency - 5k-10k, , 333hz--555hz 1200--1300hz,
Trivector for 10 min once a month in early stages once a week in later stage.

Discussion:

The results show significant improvement in symptoms and feeling better. The Collective results show a dramatic benefit to the SCIO therapist visit.