

## Understanding Couple Fertility with the Billings Ovulation Method®

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#### Introduction

The Billings Ovulation Method® is a natural method of managing your combined couple fertility, based on understanding the importance of cervical mucus as a marker of fertility. It can be reliably used to plan a baby or to naturally postpone or avoid a pregnancy.

By reading this booklet you will come to understand the signs of this time of potential fertility. If you want to conceive, you will recognise the best time to have intercourse. But if you do not want to conceive you can avoid pregnancy naturally, if you wait, without genital sexual contact, over the time of fertility.



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# Understanding Couple Fertility with the Billings Ovulation Method®

Both men and women have the potential to be fertile from puberty. Both are at the peak of their fertile years in their 20's. But by the time a woman has entered menopause, her fertility is over; whereas the man has the potential to become a father into old age.

The woman's cycle, which starts with menstruation and ends with the beginning of the next menstruation, has only a short number of days when she is fertile. She will ovulate on only one day within each cycle. The ovum (egg) which is released at ovulation can only live for a maximum of 24 hours if it is not fertilised. The man is very different as he is producing sperm each day, but it is only when the woman is fertile that sperm can survive and fertilise an ovum.

It is important to understand that the only regular part of the menstrual cycle is the time after ovulation until the beginning of the next menstruation. This is called the luteal phase and, in fertile cycles, is between 11-16 days from ovulation to menstruation. But you will want to know about the time between menstruation and when fertility begins. The length of this time varies and explains why your cycle length can vary.

This is where you will both understand the relevance of the Billings Ovulation Method® as it unlocks the mysteries of the phases of your cycle and the patterns of fertility and infertility. It reveals the information of your infertility both before and after the fertile time, regardless of whether your cycle is long, irregular or short – because couple fertility is revealed by the signals your body gives you at the external vaginal opening (vulva). You are not asked to do anything you have not done before except to pay attention to what you sense at the vulva and what you might see. At the end of each day you record these observations and your patterns will be revealed. It is that simple!

When we understand couple fertility, we can appreciate the importance of the differences between male and female fertility.

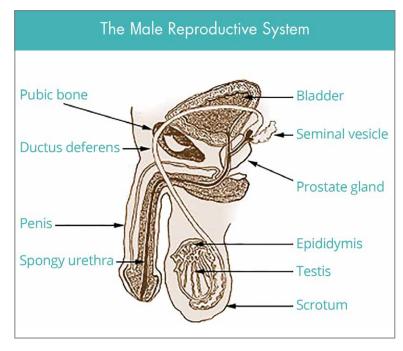


DIAGRAM 1

Under the influence of the male's hormones, immature sperm cells develop through several stages to become spermatozoa (mature sperm cells). It takes about 74 days for sperm development with an additional 12 days for further maturation as the sperm travel the length of the epididymis (uncoiled length is approximately 6 metres). After another 18-24 hours they gain motility and the ability to move spontaneously. Mature sperm then move through the ductus (vas) deferens and are stored in the seminal vesicles until ejaculation. Sperm combine with other fluids to make up seminal fluid.

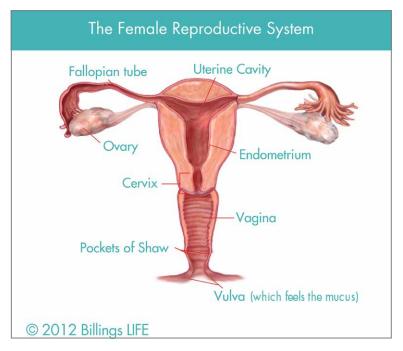


DIAGRAM 2

Now, a few words about the female reproductive system. The reproductive system is made up of the uterus or womb which has two Fallopian tubes, one on each side of the upper part of the uterus, the ends of which hover over the two ovaries waiting to collect the ovum at ovulation. The lower part of the uterus has the cervix which leads to the vagina at the end of which are the Pockets of Shaw – two small pouches situated near the external opening of the vagina. The outer parts of the reproductive system are the lips – the labia, which protect the delicate organs and are highly sensitive; these make up the vulva. The cervix produces mucus, essential for fertility. As this mucus leaves your body, the vulva allows you to identify the sensations which indicate your fertility or infertility.



For a couple to be fertile, the woman has to be ovulating – that is, releasing an ovum. That means that your ovaries must be healthy and responding to the circulating hormones.

A man must produce healthy sperm to enter a woman's body during intercourse and which will move towards the ovum at the time of ovulation.

But the loving relationship between the couple, with the production of healthy sperm and an ovulation, are only part of the story.

You need to be ovulating with good hormone levels. This means the time after your ovulation to your next menstruation should be 11-16 days, regardless of how long your cycle is.

The cervix must respond to the body's natural hormones and produce the mucus that is essential for the sperm to enter and to survive until the ovum is released. During this time, sperm can live for 3-5 days as your body now provides the perfect environment for sperm survival.

You also need open Fallopian tubes so that sperm can travel to meet the ovum, which, after ovulation, enters the outer part of the tube where it will live for a maximum of one day if conception does not occur. If conception does occur, the new little life is able to travel down the tube to imbed in the uterus (womb).

The endometrium needs to be growing and developing during the cycle as it responds to the body's hormones. It prepares to receive the baby and nurture it to live and grow there for the next 9 months.

## **Understanding your Cycle**

Your cycle begins with the first day of bleeding and ends the last day before the next menstruation. During this time ovulation has occurred. However you can bleed without ovulation occurring. This is the result of hormonal activity without an egg being released.

Hormones trigger the start of fertility to allow ovulation to occur. This process involves the brain sending chemical messengers (hormones) to the ovaries to stimulate the growth and development of follicles and to release an egg at ovulation. The growing follicles in turn trigger the hormone oestrogen from the ovaries to send messages to the cervix to produce mucus and to the endometrium to develop a healthy lining to prepare for a baby to imbed. Each cycle your body is preparing for pregnancy, even though you will have many cycles throughout your reproductive life without a pregnancy.

After ovulation, the endometrium is affected by another ovarian hormone, progesterone, to further grow and thicken to provide nutrition for a pregnancy. If pregnancy does not occur, the endometrium breaks down and typically, 11-16 days after ovulation, the lining of the uterus is shed, marking the beginning of menstruation, known as a period. The cycle then starts all over again.

The Billings Ovulation Method® will help you to identify your patterns of fertility and infertility. The first step is by making two simple observations: taking note of the sensation you feel at the vulva as you go about your normal daily activities, recording any visible discharge you observe.

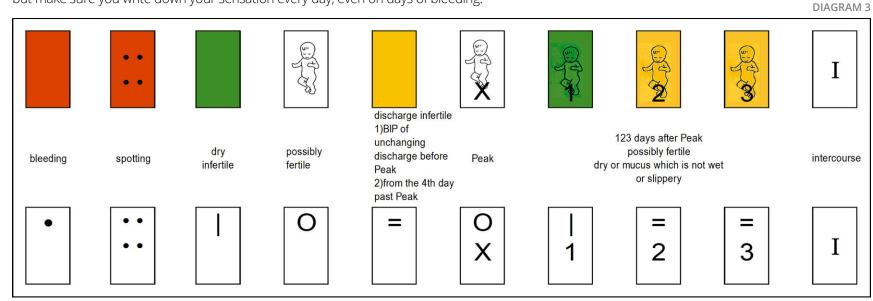
### Identifying the Patterns of Fertility and Infertility

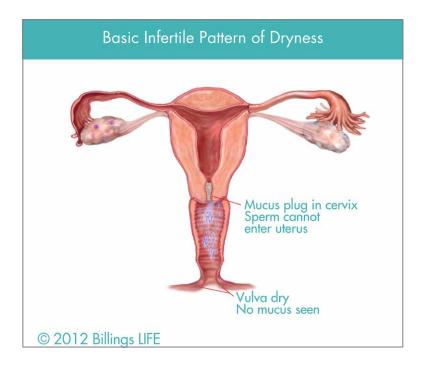
At the end of each day, you record these two observations – what is sensed and what is seen. The record then reveals your patterns of infertility and fertility. You will learn to recognise your infertility before fertility begins, as the pattern will be the same day after day. This is called the Basic Infertile Pattern (BIP). You may be dry each day and see no discharge, or you may feel and/or see something which is unchanging. When fertility begins, you will feel different and may see some mucus. Each day will be a bit different from the previous one as you get closer to ovulation. You will recognise that ovulation is imminent by the very slippery sensation at the vulva and then the definite change to no longer slippery. Approximately two weeks after you ovulate you will menstruate.

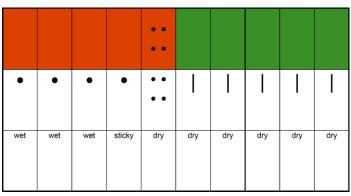
When you use the Billings Ovulation Method® you will keep a record, using either stickers or symbols. Only one system is used and the following key explains this recording system. You will also record in one or two words the sensation you experienced and, if you saw any discharge, what it looked like. There is no need to ever touch the vulva or mucus with your fingers or to stretch the discharge. Just write down in one or two words what you saw. On some days you may not see anything but make sure you write down your sensation every day, even on days of bleeding.

### Infertility Before the Ovulation Process Begins

After menstruation, there is usually a time when the ovaries are resting; this is a time of infertility. You can recognise this infertility before ovulation because of the **unchanging** pattern of sensation at the vulva and/or discharge you observe. This unchanging pattern, associated with low hormones, and known as a BIP (Basic Infertile Pattern), applies only to the pre-ovulatory phase of the cycle. At this stage, sperm cells cannot survive as the cervix is completely blocked with a thick mucus plug which also protects the reproductive system from infection. The unchanging pattern may be complete dryness for one woman (diagram 4A) while for another, it may be a discharge which is always the same, day after day (diagram 4B). It is important to note that in cycles of average length, less than 35 days, one woman will have only one pattern of BIP

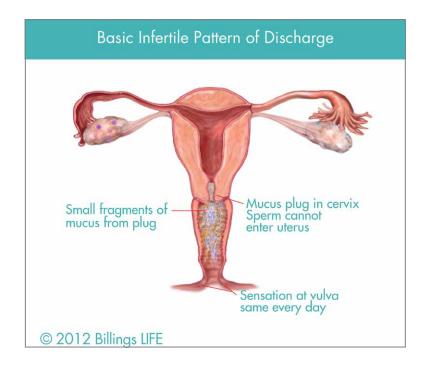


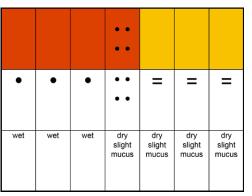




If dry – no vulva sensation and no discharge

green stamps or | symbol are used.





If not dry but sensation is the same day after day, when BIP is established

yellow stamps or = symbol are used.

DIAGRAM 4A DIAGRAM 4B



## **Recognising Fertility**

The cervix, which is very responsive to increasing amounts of oestrogen, will give you the key to the commencement of potential couple fertility as it starts to produce mucus which you will feel and observe during the day.

In the days before you ovulate, you will notice a changing and developing pattern: of sensation, changing perhaps from dry to sticky, to wet and slippery, as well as seeing mucus discharge which looks different every day (diagram 5). This changing and developing pattern of sensation and mucus is because rising oestrogen causes the production of different sorts of mucus, all essential for sperm selection, survival and motility. Over this time sperm can live for perhaps 3-5 days inside your body waiting for ovulation.

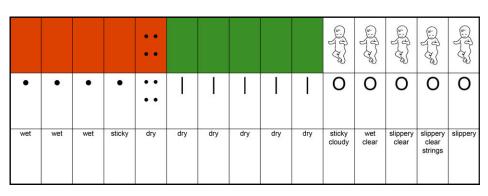


DIAGRAM 5

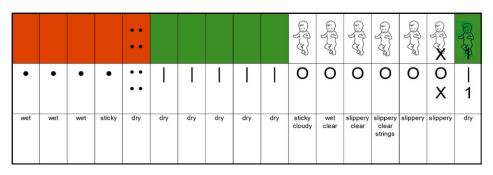


This changing pattern ends in a very slippery sensation, often without any visible mucus, and is followed by a definite change in sensation to no longer slippery (diagram 6). The last day of the slippery sensation is the most fertile day in the cycle and is termed the Peak because it is the peak day of fertility and is associated with a heightened sensitivity and swelling of the vulva.

In most of your cycles, ovulation will occur on this last slippery day (that is, Peak Day), but can be delayed until day 1 or day 2 past Peak in some cycles. The ovum will survive for a maximum of 24 hours.

Just prior to ovulation, the ovarian hormone progesterone starts to rise, causing a change in sensation at the vulva because mucus is dried as it passes through the Pockets of Shaw. As a result, a sensation at the vulva of dryness or stickiness replaces the Peak sensation of slipperiness. Progesterone also stimulates the production of the thick mucus which begins to block the cervix again.

When Peak is recognised by a change to no longer slippery, put a cross on the last day of slippery and begin the count of 1, 2, 3 with a green or yellow stamp with a baby or | or = symbol.



Slippery sensation Vulva soft and swollen

DIAGRAM 6

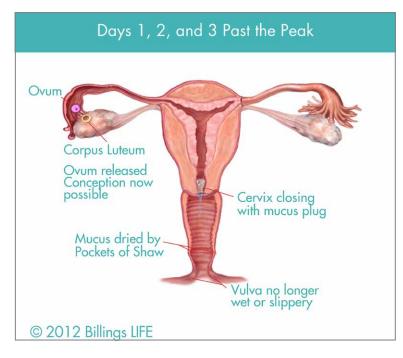
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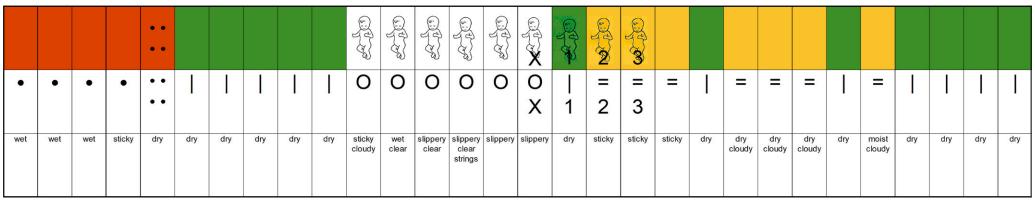
## Post Ovulation Infertility

After ovulation, the corpus luteum (empty egg-sac) which remains in the ovary, produces a secondary rise in oestrogen and ensures the continuing production of progesterone. By the end of the 3rd day after Peak, the cervix is completely closed by the mucus plug, but until that time, there are still channels of mucus for sperm transport and survival. Couple infertility for this phase of the cycle, the luteal phase, commences from the beginning of the fourth day after Peak (diagram 7). There is only one ovulation day in a cycle, even if there are non-identical twins, and once ovulation has occurred and time allowed for the life of the ovum, couple fertility for that cycle is over.

Once Peak is recognised and there has been a count of 3 days, infertility is again present.

Use a green stamp or | if dry, or a yellow stamp or = symbol if there is a discharge.







## Cycle Length

An average menstrual cycle (starting from the first day of your period to the next) is approximately 28 days, but can range from 23 days to 35 days. The length will vary from woman to woman and it is normal to vary from month to month as stress, sickness, and other factors, including your life stage e.g. breastfeeding, pre-menopause, affect your hormones.

Your cycle has different phases which you will learn to recognise. If your cycle is about 28-35 days it will look similar to diagram 8.



DIAGRAM 8

However, your cycle can lengthen or shorten, and it is the BIP or pre-ovulatory infertility which will be longer or shorter or may be absent. In short cycles you may have no BIP or pre-ovulatory infertility (diagram 9). You will recognise that your fertility symptoms have already begun when your menstruation is diminishing. Importantly, ovulation and therefore pregnancy can occur during bleeding. In a short cycle, with an early ovulation, mucus production may begin during the menstrual period, thus creating an environment for sperm to be united with the egg.

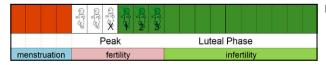


DIAGRAM 9

There will be times in your life when ovulation is delayed and when this happens you will notice extra days of BIP (diagram 10).

DIAGRAM 10

BIP

Peak

Luteal Phase

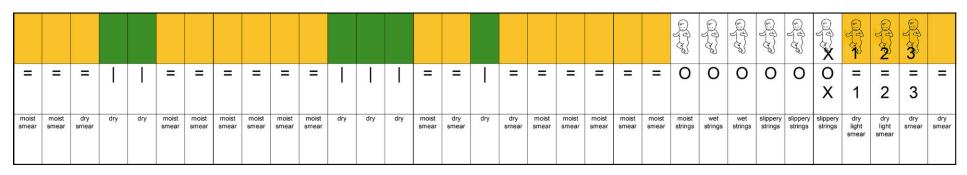
However, whether your cycle is of normal length or short or longer than a month, once your fertility begins, the rest of your cycle length will be the same — the follicles will develop and one will be released at ovulation, and about two weeks later you will menstruate.

## When Ovulation is Delayed

There will be more days of infertility before you notice the beginning of fertility. You should be guided by an experienced teacher of the Billings Ovulation Method® to help you identify your BIP as the pattern might incorporate slight variations, different from the BIP experienced in regular cycles of average length when there can only be one description of BIP for each woman. When ovulation is delayed, you can have a combined BIP (diagram 11), but your fertility **patterns** can be the same as in your normal length cycles. You will ovulate much later in the cycle and have a longer BIP time.

Cycle length changes can also happen when you do not expect them and may indicate that you should ask your doctor to investigate the reason for this change. Similarly, if you usually experience long/irregular cycles, it would be wise to discuss this with your doctor as there may be some underlying problem suppressing your fertility.

You will learn to recognise whether you are fertile or infertile on a daily basis and the 4 Rules of the Billings Ovulation Method® can be applied whatever your cycle length and whatever stage of your reproductive life.



You may also find that you experience changes from your BIP and may notice some fertile symptoms which do not progress to Peak but instead, the BIP returns and the long cycle continues (diagram 12). This might happen following

the birth of a baby and during breastfeeding/weaning or when you are approaching menopause, but it may also be caused by stress.

SA ASS STEE STEE 2 0 0 0 = = = = = = = = = = = 3 3 damp damp damp

PAGE 10 DIAGRAM 12



Early Day Rule1: No intercourse on days of heavy menstrual bleeding.

This is because fertility can start during bleeding and could be masked by the wetness of the bleeding.

Early Day Rule 2: Alternate (every other) evenings are available for intercourse when these days have been recognised as BIP.

Sperm cannot survive when there is no mucus to allow them to enter the cervix. By waiting until evening you will know there has been no change from your BIP because if any mucus had been present you would have sensed it or seen it come away as you moved around during the day. The reason for alternate evenings is because the day after intercourse will have a seminal fluid loss, which may mask the beginning of the fertile sensations. There are no live sperm cells in this seminal fluid.

Early Day Rule 3: No intercourse on any day of discharge or any type of bleeding which interrupts the unchanging pattern (Basic Infertile Pattern).

This change is indicating potential fertility. There are two possibilities: it will lead to the changing developing pattern with a slippery sensation, the identification of Peak and the application of the Peak Rule.

*Or* The BIP returns indicating that this was a hormonal change without ovulation. You are still in the early part of your cycle and ovulation will occur at a later time. When this interruption to the BIP has not resulted in ovulation, the BIP will return. Count 3 days of Basic Infertile Pattern after any change before intercourse is resumed on the fourth evening. Then continue with Rule 2 until there is another interruption to the BIP.

#### When Peak is identified, Peak Rule is applied.

**Peak Rule:** From the beginning of the fourth day following the Peak until the end of the cycle, intercourse is available every day at any time.

Counting 3 days after Peak allows time for the ovum to be released and for its maximum survival time. By the beginning of the 4th day after Peak, fertility is over for this cycle.

#### Natural Indicators of Ovulation

There are three natural indicators of ovulation which may be helpful to identify the time of ovulation. But the Peak symptom is the key and the most recognisable by women who are fertile.

- 1. Peak Symptom: A changing, developing pattern of a variable number of days, leading to a slippery sensation, followed by a definite change to a much drier sensation – no longer slippery.
- 2. Swollen vulva: Heightened sensitivity and swelling of the vulva, more noticeable on the side of the ovulating ovary.
- 3. Lymph node sign: Enlargement and tenderness of small node in the groin on the side of the ovulating ovary.

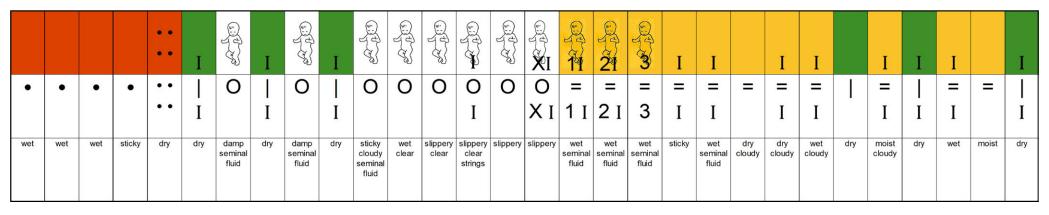
## **Achieving Pregnancy**

If you want to use the Billings Ovulation Method® to have a baby, you should apply the Early Day Rules. This will help you to identify the beginning of the fertile phase. Then postpone intercourse until the slippery sensation occurs. Intercourse at this time and for one or two days past the Peak gives the best chance of achieving pregnancy.

Following these guidelines will optimise your chance of pregnancy if you are able to conceive naturally. It will allow the fertility of both of you to be at its maximum at the time of intercourse. Many couples wishing to conceive can be worried that it is taking longer than they expected and are becoming stressed as a result. Intercourse can be too frequent or too infrequent as the concentration on "making a baby" becomes central. However, stress can affect the ability to conceive so it is wise to spend time on your loving relationship, and to have intercourse at those times when you know it won't be possible to conceive, as well as over the fertile phase. This will ease anxiety and may make the waiting time for the realisation of your dream easier for both of you.

This chart shows a couple using the Billings Ovulation Method® to achieve a pregnancy. Early Day Rules have been applied. Note day after intercourse prior to the beginning of the fertile phase is recorded with a white stamp as seminal fluid may be masking the beginning of fertility. Couple waits until the next day to establish whether BIP is present before intercourse is again available that evening. Once fertility begins, the couple waits until the slippery sensation is present. Intercourse over the time of slippery sensation and the next couple of days maximizes the opportunity for pregnancy.

**Note:** intercourse is available at any time after the count of 3 after Peak and the days of seminal fluid are now recorded with a plain yellow stamp.



## Postponing or Avoiding Pregnancy

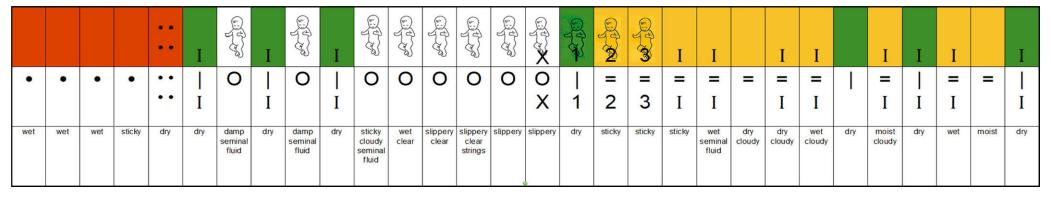
Just as the Billings Ovulation Method® can be used to achieve pregnancy, it is also effective when you are not planning a baby. Many couples are uncomfortable about the side effects of hormonal contraceptives and others have moral or cultural reasons for looking for a natural way to manage their fertility. Using the Billings Ovulation Method® is a couple decision rather than the responsibility of one person. Because it is completely natural it is acceptable to people of all cultures and religions.

For the avoidance of pregnancy, there should be no genital sexual contact over the fertile time. This means that the use of barrier methods, such as condoms, diaphragms or withdrawal, are not compatible with the Billings Ovulation Method® and an unexpected pregnancy may be the result.

To use this Method effectively:

- Apply the Early Day Rules and
- Peak Rule

This couple is following the Rules of the Billings Ovulation Method® to avoid pregnancy in this cycle. They have applied the Early Day Rules, waiting over the time of heavy menstrual bleeding without intercourse. Once the BIP is identified, intercourse occurs on alternative evenings. The day after intercourse is recorded with a white stamp to remind the couple that seminal fluid may mask the change to fertility. When a change is noticed, the couple waits. In this cycle a Peak is identified and Peak Rule is applied. From the beginning of the fourth day after Peak the couple again had intercourse. During this infertile phase of the cycle intercourse is available at any time. There is no need to record the days of seminal fluid with a white stamp as fertility is over for this cycle.



## Monitoring Reproductive Health

It has become more recognised by doctors that the keeping of a daily record of your fertility and infertility empowers you to identify when there is something that needs medical investigation. Perhaps your cycle is longer or shorter than you would expect for your life stage; perhaps there is bleeding which is not menstruation, or the symptoms of discharge have changed and are not forming the expected patterns – making it difficult for you to recognise fertility and infertility. By recognising what is normal, you will know when it is not normal and this can help you to improve your health, and in some cases may save your life.

## Why Use the Billings Ovulation Method®?

As the Billings Ovulation Method® allows you as a couple to determine the times of infertility and fertility and to understand when ovulation occurs, you can use this knowledge to plan your family naturally without having to use drugs or devices – empowering both of you to make decisions based on your love and your dreams for your family and your future.

Because of the presence of cervical mucus, sperm can travel to unite with the egg in the outer part of the Fallopian tube, and conception occurs. It is only over the fertile phase that you can conceive a baby. If you wish to have a baby you will know when this is possible by recognising the presence of this mucus. By not having intercourse or genital sexual contact over the fertile phase, you will not conceive. You are not taking powerful hormones or using devices which may induce side-effects or changing the act of intercourse. It is completely natural.

The 4 Rules of the Method, as explained earlier, are designed to cover all phases of the cycle whatever the length of the cycle. These Rules can be followed even when ovulation is not occurring, during prolonged times of infertility e.g. breastfeeding, or intermittent times of fertility, e.g. pre-menopause. Once you know your body's signals for fertility and infertility you will have this knowledge for the rest of your reproductive life, regardless of your life stage or the length of your cycle.

Like all methods of family planning – natural and contraceptive – they can only be effective if the instructions are followed correctly at all times. This means that if the couple wishes to avoid pregnancy, they simply follow the 4 Rules to achieve success. Following the Rules to conceive will optimize the opportunity for pregnancy.

Times of abstinence will be necessary, but this can be an opportunity for the couple to express their love non-genitally and appreciate the gift of unconditional love. Many couples say that their love has grown and their relationship deepened since they began to follow nature and plan their family with the Billings Ovulation Method®.

## Ready to Use this Method – what do I have to do?

To use the Billings Ovulation Method® you need to keep a daily record of your sensations at the vulva as you go about your normal daily activities, and follow the Rules of the Method to achieve or avoid a pregnancy.

#### Observations

Each day, think about how you feel at the vulva. Do you feel dry or perhaps sticky, or wet or even slippery? Just as you know you are bleeding because your vulva senses the blood and you feel wet, the same thing happens when you are fertile. Use your own words to describe your sensation and also note anything you see. You don't touch or stretch or do anything you have not done before, except to pay attention, and in a couple of words record this on your chart at the end of each day. You record two observations – what you feel and what you see. Internal observations should not be made as your vagina is always moist, infection may be introduced and the Pockets of Shaw bypassed, thus giving incorrect information.

Your record will reveal your patterns of infertility and fertility. You will then be able to follow the 4 Rules of the Billings Ovulation Method® whether or not you want to have a baby. You may just want to know your fertility patterns to monitor your reproductive health and daily charting will help you to do this.



Chart daily and keep an accurate record by being aware of the sensation at the vulva as you go about your daily activities and record any visual discharge that you observe, without touching or stretching.

You will recognise your cycle patterns:

An **unchanging pattern** following menstruation indicates pre-ovulatory infertile days or BIP. Potential fertility is recognised when this BIP is interrupted by a change in sensation and/or visual observation. In the days before ovulation you will notice a **changing**, **developing pattern leading to a slippery sensation and the vulva may feel soft and swollen. The last day of slippery sensation is the Peak**. The definite change to no longer slippery confirms the identification of Peak: recognised in retrospect when the feeling of slippery has completely disappeared and there is a much drier sensation.

Ovulation occurs on Peak Day or on Day 1 or Day 2 after Peak. Day 3 after Peak allows for the ovum to survive, in case ovulation has been delayed to Day 2, and by the beginning of the 4th day after Peak you have entered your post-ovulation infertility which lasts until you menstruate.

It is important to note that cycle variations will occur. Ovulation may be delayed or even be absent, which is often normal due to age, stress, breastfeeding, after ceasing hormonal contraception or other factors. At times, the chart may reveal some situations which warrant further examination by a doctor, thereby further protecting reproductive health.

The Rules of the Billings Ovulation Method® will cover all the different cycle variations you will have throughout your reproductive life.



What do we do next?

Make contact with an accredited Billings Ovulation Method® teacher. There are teaching centres all over the world and if you would prefer to learn online there is an online charting and personal teaching program you can use on your computer, smart phone or other device. If you want to learn more, read *The Billings Method* by Dr Evelyn Billings and Dr Ann Westmore available from the online shop at www.billings.life

Now is the time to change your life and use a natural method to manage your fertility. Contact us NOW.

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Find your nearest centre or write to us for more information through the "contact us" message on this site.

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