

# *Stress-Free Fertility*

**Preparing Yourself For New Life -  
Naturally**



**Peter Bennett BSc DC**

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**DISCLAIMER:** We have tried to reference and give information as accurately as possible, however this article is a guideline only and should not be used to substitute a medical professional. If you need medical advice you should see your GP.

# Stress-Free Fertility

*Preparing Yourself For New Life - Naturally*

By Peter Bennett

**It's April**

**No it's not, it's June.** I intended to release this article in April during the lambing season, but I didn't realise just how *much* information there was to cover!

So here we are, two months later and it's June. But, with this topic it makes no difference because it's always troubling someone. Any guesses?

**New Life!**

Yes! The lambs are out filling the hillsides, spring is slowly looking like summer and the trees are in blossom. **Life is all around us and it can be quite hectic.**

Farmers will be sighing with relief after the lambing season. Others may be thinking about starting a family of their own, some of us may already be carrying children ourselves; and yet others will be struggling to have children all together.

**And you wouldn't be alone.**

According to the NHS, around 1 in 7 couples in the UK have difficulty conceiving. **(NHS. 2017)**

And it's not just women with fertility issues, but men too!

That's why this month we're focusing on how **stress impacts fertility** by looking at a variety of fertility problems.

This will cover **the effects of stress** and how to overcome them to **increase your chances of a healthy pregnancy** and take it to full term.

By sharing these tips we can all learn something new!

Let's put a **spring** back into our steps!

Cheesy I know...

**We all know what fertility is** – by definition, it's '*the ability to conceive children or young*'. (Oxford English Dictionary)

However, when we *usually* use the word – it's not to talk about how good we are at conceiving, but how problematic it can be.

For many, discovering how fertile they are, *naturally*, takes around a year. If there's still no progress after this time, it's recommended you check for sure.

We'll start by talking about the signs that *could* point to a fertility problem:

## 4 Simple Signs for Women:

- **Menstrual & Ovulation Problems:** No Period / Irregular Period / Abnormal Period / Painful Period. This includes drastic fluctuations in the pain & blood department, and anything that might indicate the failure of full ovulation.
- **Skin & Hair Changes:** Unexplained adult acne. Dark facial/ body hairs growing excessively, sometimes in places unusual for a woman; or thinning and loss of hair altogether.
- **Painful Sex or Decrease in Sex Drive:** Feeling pain during or after sex can mean a number of things – many could relate to a problem with conceiving in the future. Similarly, with a loss in sex drive.
- **Abnormalities in the Body:** Gaining weight without changes in your diet or lifestyle. Or even some more obvious signs such as creamy white discharge from the nipples (excluding those breastfeeding).

(MD Nivin, Todd. 2015)

If you think some of the above may relate to you – **Please don't panic!**

None of them means with certainty that there's a fertility problem. And even then, many are easily solved. More on it later...

## 4 Simple Signs for Men:

- **Sexual Functioning Problems:** Difficulty getting an erection or producing enough sexual fluid. Can also include a lack of sex drive.
- **Decrease in Hair Growth:** Slower than normal growing rate for facial and body hair.
- **Painful Testicles:** Any pain / visible swelling or lump in the testicular region. Small and firm testicles.
- **Abnormalities in the Body:** Peculiarities such as abnormal breast growth and a lack of smelling senses.

**(Mayo Clinic. 2015)**

**(MD Nivin, Todd. 2015)**

All of the above may indicate a problem which could complicate fertility.

But imagine for a minute that you did have a problem with your fertility –

## Does that mean you can't conceive?

### Of course not!

First of all there are different types of infertility. Some of them are not as permanent as you might think – in fact most of them aren't a one way barrier at all!

In order to know what methods you can use to increase your fertility, we must first understand what type of infertility you could be suffering from.

## What's causing your Infertility?

### Hormonal Imbalance

Hormonal Imbalances are **not** permanent afflictions. How fertile you are, changes throughout the course of the month – as well as different months having different hormonal levels.

Obviously, there are certain reasons why you might be in a state of hormonal imbalance, but with accurate knowledge and a good understanding – **it's perfectly possible to solve.**

We'll start with one that's not only very common, but also very un-diagnosed. Many who suffer from it, aren't aware or diagnosed with it until they've had problems with conceiving...

**Polycystic Ovarian Syndrome (PCOS)** causes much misery for women.

*Why?*

Because if it doesn't cause you distress when you do want to conceive; it will certainly cause you distress before you even consider having a family.

That's because this syndrome remains hidden with seemingly unrelated symptoms.

These include **gaining weight**, even while maintaining a fit lifestyle; **growing excess hair** and **uncontrollable acne**.  
*Remember the 4 Simple Signs for women?*

Needless to say, women who have it, get sick of people telling them they don't exercise enough and can feel very self-conscious being considered 'too hairy' for today's fashion.

The issue lies with the ovaries which become enlarged and **contain small sacs filled with fluid called follicles**. This is known as a **polycystic ovary**.

It causes many side effects – the most significant is the **production of too many male hormones**.

**(ND Neuzil, Amy. 2017)**

(Conditions like **Insulin resistance** usually go hand in hand with this syndrome)

As a result ovulation can't occur and you get a hormone imbalance.

But it not all bad.

**All it takes is for a gynaecologist to confirm this condition with a blood test and you can find out for sure!**

**(NP Pick, Marcelle. 2017)**

There will be various options. A book could be written on these options – just by itself! I'll outline a few.

**Ovarian drilling** – a type of laser surgery. You'll want to check out **all** the details so you can make an informed choice – **surgery carries risks.**

**Symptom suppressing drugs** – more focused on reducing the visible side effects, but they won't increase your fertility.

**Combination Approach** – a good practice will try this method covering nutritional supplements, progesterone cream and enriched nutrition to re-balance the hormones.

**The good news is it's still possible to get pregnant with this condition.** *We'll talk more about how you can increase your fertility later.*

✗ **Men** *(Although you can carry it in your Genes)*

✓ **Women**

**Hypothalamus & Gland Imbalance** covers the balance of chemicals present within the **Hypothalamus, pituitary, thyroid** and **adrenal glands**.

The Hypothalamus is a part of the brain that helps regulate fertility i.e. *body temperature, child birth, emotions, growth, breast milk, salt / water balance, weight and appetite*.

**(MD Wisse, Brent et al. 2015)**

It also controls the pituitary gland – which in turn controls the adrenal glands, thyroid glands, ovaries and testes.

So, it's a pretty important chain of command.

If there is an **imbalance of essential chemicals** in any one of these areas it will affect the sequencing chain and create difficulties with fertility. **(Mayo Clinic. 2015)**

There is also no one agreed upon cause of an imbalance in these areas. Instead, research indicates a mix of factors are responsible. We'll be looking at some of them later, *mainly in the part where we cover stress!*

In women, a **hypothalamic dysfunction** will make it difficult for ovulation to take place.

In men, a dysfunction could mean a fault in body temperature regulation (**Varicocele**). And unfortunately, if it's too hot down there and your body can't keep it cool – you're going to **suffer with a reduction in your sperm count**.

Similarly, with the pituitary gland, if there is problem with its ability to control the correct supply of essential chemicals, then **too much prolactin will be produced**. This is known as **hyperprolactinemia**.

A result of this overly abundant prolactin is a **reduction in oestrogen supply** – which as we can all guess, has a chance to cause infertility. **(Mayo Clinic. 2016)**

For men with **hyperprolactinemia**, the same is true again – except instead of it being too little oestrogen you have to worry about, it's **too little testosterone**.

It may also go hand-in-hand with **erectile dysfunction**.

**Now for the good news:**

Once again, **this does not mean you're doomed to be infertile!**

**A doctor will ask for a blood and urine test to determine whether you have any of these conditions**, after that you just need to work out why you're having an imbalance.

The treatment will depend on what's causing the disruption. For example, if you have a hidden tumour in your head, then getting some extra hormones in your body probably won't make much difference.

But, for most of us, the problem may be easier solved than you think – after all, missing hormones can be replaced.

Speak to your GP to be sure, after that we'll be covering other ways you can increase your fertility, further down!

- ✓ **Men**
- ✓ **Women**

## Reproductive Damage

When we talk about reproductive damage, we almost straight away think of surgery treatment.

However, there are just as many natural remedies for helping this type of damage. I'll be going over the most creditable below, as we delve into the weird and not-so-wonderful ways we manage to hurt ourselves downstairs.

First up, is a common one...

**Tubal Damage** is a major problem that not only creates complications conceiving but can also lead to further conditions which can be quite painful!

For the ladies, the obvious tubes in question are the **fallopian tubes**.

**Just so we're all on the same page:** the fallopian tubes connect each ovary to the uterus.

Each month, the new egg slowly makes its way down from one of the ovaries towards the uterus – with the intent to be in the perfect spot for the sperm to fertilise.

Once fertilised, the egg plants itself into the pre-prepared thickened lining of the uterus/ womb. If not, then it's flushed out along with the excess lining and blood known as menstruation (or the period).

### **But what happens if the tubes are damaged?**

Blockage means two things:

**The egg has difficulty making its way towards the uterus.**

**The sperm is less likely to reach the egg – leaving it unfertilised.**

And that's how fallopian tubal damage links to infertility.

In the lowered chances of an egg becoming fertilised under these conditions, the egg can become 'trapped' inside the tube and continue to develop, leading to an **ectopic pregnancy**.

**This is serious and can be fatal.**

Here's a look at the ways these tubes can be damaged.

The 3 factors

- **Inflammation**
- **Scarring**
- **Distortion of Pelvic Anatomy**

This can happen through:

### **Infections**

- STD's (such as Gonorrhoea and Chlamydia)
- Other infections (Appendicitis, Diverticulitis, and Peritonitis)

### **Surgery**

- Pelvic Surgery (creating scar tissue or 'kinks' in the tubes)
- Previous Abortion

### **Endometritis**

- It's a common but nasty disease (the lining of the uterus 'grows' or 'flakes off' in other areas of the reproductive system, causing irritation and blockages – and as a man, I can only guess, a lot of pain too!)

(MD Dr. Komaroff, Anthony L. 2016)

(WebMD. 2017)

**For men**, the damaged tubes in question are the **epididymis**.

**This is a twenty foot long, tightly coiled duct within the scrotum** which the sperm passes through in order to reach the ejaculate.

If one side is damaged, naturally, through a hernia or surgery, the sperm count will be significantly lower. If both sides are blocked, you'll have none!  
**(Maze. 2017)**

**Here's the 3 factors blocking your pipes.**

- **Inflammation**
- **Scarring**
- **Cysts**

**This can happen through:**

### **Infections**

- STD's (such as Gonorrhoea and Chlamydia)
- Other infections (TB, Mumps, inflammatory infections)

### **Surgery**

- Genital Surgery (creating scar tissue in the tubes)

### **Epididymal cysts**

- It's common but not always a problem – if one of the cysts grows out of hand it can impact the tubes, otherwise, you'll only really find out if you

have a troublesome cyst if it gets infected and swollen. Basically, it's a fluid filled sac that older men are more likely to develop – the good news is, it's not cancerous!

**(Dr Knott, Laurence. 2014)**

**(MD, PhD Patrick Davis, Charles. 2016)**

**The BIG Question:** Yes! You can still conceive with tubal damage.

Once again, **the remedy depends on which condition** you're looking at.

I'll cover some methods directly related here, *otherwise, make sure to check further down on how you can increase your fertility, naturally.*

**IVF** – (in vitro fertilization) is one of the most successful means to have a child with **more than 5 million babies being conceived this way since 1978.** **(Brian, Kate. 2013)**

The main problem is meeting the criteria and the expense!

Same again for the men, **ICSI is very successful and used in nearly half of all IVF** treatments. However, this is a last resort as your full fertility will rebound quickly if the infection has been dealt with, or the tubes unblocked. The fact that men aren't the carriers makes it a lot easier to solve!

**Surgery** – since the success of IVF, traditional means of surgery has largely been replaced, partly due to its lack of success with **most people not becoming pregnant** and somewhere between 10-20% resulting in an ectopic pregnancy.

(Dominion Fertility. 2017)

However, if IVF is not an option, **Keyhole surgery** (Laparoscopy) is much **less damaging**, involving less incisions, less scarring and a shorter recovery time.

*As always, please be sure to check out all the details you can before considering any surgery.*

For the men, *still be careful*, but usually an experienced urologist / physician can **surgically correct most blockages and remove troublesome cysts** without much drama. The hardest part is probably the thought of the blade going anywhere near... *OW!*

**Natural Approach** – and cost effective approach! There are many things you can try, I'll be giving more details on pg. 41. Here's the general lowdown:

- **Cut out the bad habits** – smoking, drinking etc.
- **Reduce Stress** (pg. 49)
- **Massage**
- **Eat foods with real nutrition**
- **Ensure you have the right balance of vitamins**

- **Use gentle bacteria killing herbs** (helps flush out toxins, infection and reduces inflammation)
- **Improve your blood flow** (helps remove old cells, diseased cells, scar tissue and more pg. 59)

- ✓ **Men** (*epididymis*)
- ✓ **Women** (*fallopian*)

**Retrograde Ejaculation** is a rarer problem, but one worth noting in our list of damage that could seriously affect fertility.

Some of you may not have heard of it.

**We all remember being a child and wetting the bed at least once.** Over time, we learnt to 'hold it in'. That may feel like a maturity thing. In actual fact it's a little more complicated.

As we get older **we learn to control a muscle within the bladder** (bladder neck muscle), which helps us hold back our urine. If this muscle was to malfunction, we'd have problems.

During sex, without us being conscious of it, that same muscle tightens to stop the flow of semen from traveling into the bladder as it travels from the prostate into the penis.

**(Mayo Clinic. 2016)**

**Retrograde ejaculation** is just that – **the inability to tighten or control those muscles.**

Basically, instead of semen traveling through urethra and consequently out the 'correct' end; it travels into the bladder.

As a result, **no semen comes out when ejaculating** (or only very small amounts). The semen within the bladder then comes out as cloudy urine when you next go for your post-coital toilet break.

Naturally, this is a fertility problem because if you can't ejaculate then it's **much harder to get someone pregnant!**

**Its possible causes:**

### **Medication Side effects**

- High blood pressure medications such as Alpha blockers
- Prostate enlargement medications
- Depression medications

### **Surgery Damage**

- Bladder neck surgery, testicular cancer surgery or prostate surgery can all be responsible for damaging this important muscle.

### **Nerve Damage**

- Injuries and conditions that impact the nerves (**spinal cord injury**, diabetes, multiple sclerosis, Parkinson's disease)

**(Mayo Clinic. 2016)**

Again, the answer depends on the cause. So get yourself checked out and find out the *underlying* problem.

I'm going to start by saying, if its surgery or diabetes that's causing the condition\*, then it's very difficult to fix the damage. You may not be able to make your partner pregnant by conventional means.

(\* Skip to *Intrauterine Insemination on the next page*)

**Medication** – this covers being on meds and needing to come off them due to the adverse side effects, **AND** it covers using meds to possibly treat retrograde ejaculation.

Firstly, if you're certain it's side effects from your prescribed medications – speak to your doctor about what's happening.

They will either:

**Find you an alternative medication**

**Allow you a break from the medication** (if possible)

**Attempt to treat your new problem with a different sort of medication**

The last one is tricky.

You have to be careful. There is medication that *might* work for retrograde ejaculation. The doctor may also prescribe these medications if they suspect that nerve damage is responsible. They work by tightening the bladder neck muscle.

However, if you want to go down this route, it's important to realise that these medications are primarily for other conditions.

Please consider the cumulative effect of extra medication on top of current prescriptions. A 'cocktail' of drugs carries further risk – like raised blood pressure and heart rate!

**(Mayo Clinic. 2016)**

**Intrauterine Insemination** – A technological approach that could help those where medication is not an option.

The semen is removed from the bladder, developed in a laboratory, and used to inseminate your partner.

*Ask your GP for details.*

✓ **Men**

✗ **Women**

## Biological Conditions

**Polyps & Tumours** covers abnormal growth within the womb or pituitary glands that control reproductive hormones.

For the ladies, a polyp was basically discussed in the Tubal damage section under 'Endometritis'. However, I think it deserves a little more explanation in its own right.

**Polyps are growth within the inner wall of the uterus**, but can be found growing further down through the opening of the uterus into the vagina.

They vary from the size of an acorn to the size of a potato and are usually cherry/ pink/ purple or white coloured.

Although, typically non-cancerous, there is the rare potential for a polyp to become cancerous.

**A simple biopsy can determine whether you have problematic polyp growth.**

The main impact it has on woman's fertility is by **blocking fallopian tubes** or by **interfering with implantation**.

Similarly, **tumours** (also known as **fibroids**) are abnormal growths of smooth muscle, drastically varying in size; again typically, non-cancerous.

Once more, they grow within the uterus and act the same way as polyps.

However, they tend to grow and shrink depending on the levels of oestrogen and insulin within the body.

**(MD Stöppler, Melissa Conrad et al. 2015)**

**We don't yet fully understand why women get polyps and fibroids** but we have a good understanding that it's linked to the oestrogen/ progesterone balance, otherwise referred to as **oestrogen dominance**.

Don't worry if you do have them though, about 70-80% of all women have them by the time they reach fifty. Having a fibroid doesn't guarantee a problem.

**(MD Stöppler, Melissa Conrad et al. 2015)**

The good news is **women can still conceive with Polyps and Tumours!**

The main problems with **fibroids** is actually maintaining a healthy pregnancy and the later delivery.

'*Shrinking*' your fibroids with the right sort of nutrition will help a lot. See page 44.

As you can imagine, large obstacles can be quite a hassle for a successful birth!

**For the guys**, tumours can directly affect fertility by stopping the **pituitary gland** from producing the reproductive hormones, like testosterone!

Obviously, without testosterone, you can't produce sperm.

**But that's not the only reason why I've put Tumours on this list.**

Malignant tumours (cancerous) can also be an in-direct cause of infertility.

*Why?*

Because the treatments **deliver significant amounts of radiation.**

And your sperm making machines are very sensitive to radiation!

It will either render you infertile, or it will take a considerable time for sperm production to resume.

It's also estimated that 90% of patients who receive high doses of chemotherapy drugs will have long-term azoospermia (no sperm in the semen).

**(RN, MSN, AOCN Vachani, Carolyn. 2016)**

*So what can you do about it?*

Before we start listing the various ways you can help yourself, just remember (particularly for the women), that most fibroids and polyps don't need to be 'treated' unless they're a cause for concern.

**Medication** – otherwise known as **hormone therapy** to women. It involves a GnRH drug that puts your body in a state, similar to menopause.

**The reduced hormones shrink the fibroids as a temporary relief.** This method is not guaranteed, as less hormones means less fertility (generally speaking).

It also relies on you getting pregnant in the short space of time during the treatment – this is because it can have adverse side-effects like weakening the bones. Sometimes this method is used pre-surgery to reduce the chance of scar tissue. **(WebMD. 2017)**

**For the men** (with tumours effecting the pituitary gland), the problem can lie in the amount of prolactin produced by the tumour. **A prolactin-lowering drug** like **bromocriptine** can be prescribed. However, I'm told that these drugs don't always work and can have nasty side effects.

**Surgery – to remove troublesome polyps and fibroids** after building up a full picture of what's going on inside.

For smaller polyps, a **hysteroscopy procedure** will follow.

For fibroids, a **myomectomy procedure**.

Polyps rarely grow back, however, fibroids are more likely to grow back, so it's recommended you get pregnant as soon as it's safe to do so. **(Mayo Clinic. 2015)**

**Ultra sound surgery is less invasive**, but may not be available everywhere. This uses high-intensity ultra sound waves to break down the polyp or fibroid. This has not been done enough to build up a full résumé. But with what we know – it's pretty safe!

(WebMD. 2017)

**For the men**, surgery is probably a last resort because it entails **removing the entire pituitary gland**, and living with a cocktail of hormone replacing drugs for the rest of your life.

Let alone the fact that the pituitary gland is an important part of the body that regulates much more than just fertility.

For smaller tumours in the pituitary gland, **a targeted radiotherapy** may be available and more preferable to full surgery!

But remember, radiation may be just as damaging – unfortunately, tumours are a tricky business and it's going to be a hard decision!

(Macmillan. 2017)

Lastly, **for those who plan to have a family and can already produce good sperm**, check out **sperm banking** before considering cancer treatments – if you have a tumour, it may not be effecting your sperm production just yet!

**Natural Approach** – for men with tumours or women with fibroids, having some key components in your nutrition can make all the difference.

Although, natural medicines and herbs may seem a little hippy and out of place with the modern world, it may be worth taking a second look at them – after all, it could save you an operation!

It's up to you whether you wish to try them, I'll outline some of the basics here and include links for those curious.

**Curcumin** found in **turmeric** is a powerful **anti-oxidant and anti-inflammatory** which acts by **shrinking tumours and fibroids**.

It also helps your body control the hormonal balance so you're less likely to get them growing back or out of control.

A study published in 2008's journal 'Endocrinology' concluded:

*"Curcumin inhibits pituitary tumour cell proliferation, induces apoptosis (tumour cell death), and decreases hormone production and release, and thus, we propose developing curcumin as a novel therapeutic tool in the management of prolactinomas (pituitary tumours)."*

**But before you all go off and start eating plenty of turmeric** – stomach acids pretty much denature curcumin, so just eating it isn't enough!

You'll have to protect the curcumin by mixing it with a type of fat.

That way, you can get a paste that won't denature the curcumin when digested. **(Louis, PF. 2013)**

**Check out these links if you're interested in learning more:**

[http://www.naturalnews.com/043188\\_curcumin\\_pituitary\\_tumors\\_apoptosis.html](http://www.naturalnews.com/043188_curcumin_pituitary_tumors_apoptosis.html)

<http://fibroidnaturaltreatment.com/the-amazing-effects-of-using-turmeric-for-fibroids/>

However, this is just one example – give it some research and find others, basically you'll be **looking out for any anti-inflammatory or hormone controlling substance.**

There may even be pill forms of this substance available at your local health food shop!

More natural ways to increase your fertility, page 41.

- ✓ **Men** (*pituitary*)
- ✓ **Women** (*uterus*)

## Troublesome Shapes and Sizes

### We're all told we're unique.

It's good to have differences – it makes us individual. But sometimes there's a price to pay for unique anatomies.

### This is one of them.

Unfortunately, ladies can struggle quite a bit getting pregnant (or remaining pregnant) if they have troublesome shapes, sizes, or mucus abnormalities.

Here's the breakdown:

**Narrow Cervix** – otherwise known as **cervical stenosis**. In some cases, the cervical canal can be entirely closed. This means the semen can't travel into the uterus.

**Low Quality Mucus** – or a lack of mucus altogether. Without the 'correct' type of mucus, the sperm can't survive in the naturally acidic vagina. Low quality mucus is usually thick and sticky.

**Abnormally Shaped Uterus** – some people just have downright awkward shapes. If the shape of the uterus is too far from what we call typical – it could cause problems with becoming pregnant or maintaining a successful child birth.

However, don't get this mixed up with a 'tilted womb' as they're harmless unless there's other complications. Check with your doctor to be sure. **(Mayo Clinic. 2016)**

Typically, **these problems are inherited**, but it is possible for surgery or other damage to be responsible.

Much of the treatment is specific to the exact case; there's no set guidelines. However, here's some of the 'common' treatments.

If you've been told you have an abnormally shaped uterus – that's *very* specific!

You'll have to speak to your doctor and see what's possible.

**Medication** – depends on what's causing the problem with the cervical mucus. You'll need to find out the culprit to be sure, but if it's down to a **hormonal imbalance** we can take a pretty good guess.

You may want to try **oestrogen supplements** like **Estrace** or **Premarin**.

(Gurevich, Rachel. 2016)

**Surgery** – although it's not as invasive as it sounds. Under ultrasound guidance, a **cervical stent** is used to dilate the cervix. It's left in the canal for 2 weeks.

From tests, it appears to be both safe and **effective in treating cervical stenosis** (narrowed cervix canal).

(Tan, Y, Bennett, MJ. 2007)

**Intrauterine Insemination** – A technological approach that could **bypass the need for cervical fluid altogether**. The semen is removed and transferred past the cervix and straight into the uterus. *Ask your GP for details.*

(Gurevich, Rachel. 2016)

**Natural Approach** – for improving cervical mucus, understanding key factors into what your body needs to make mucus is important.

Here's the general lowdown:

- **Drink Enough Water** – if you're not properly hydrated, you can't produce enough mucus.
- **Good Nutrition** – is needed to supply your body with essential fatty acids and important minerals.
- **Ensure you're Not Underweight** – if you are, it's bad news for your oestrogen. Without enough oestrogen you can't produce quality cervical fluid. As a general indicator, try keep yourself above 19 on the BMI scale.
- **Cut-out Bad Habits** – like *Douching*. Don't do it, anything that washes out cervical fluid or puts unnecessary chemicals into your reproductive system needs to stop now.

(Gurevich, Rachel. 2016)

✗ **Men**

✓ **Women**

## Unexplained

Now we move onto the last category of infertility causes. And it's probably, (in my eyes) the most important because it effects everybody. **Everybody.**

*(Just needed to emphasise that!)*

Although, it's medically diagnosed as 'unexplained'; it will most likely fall within this one explanation: **Environmental Toxins!**

**Environmental Toxins are poisons found in the air, water and food.** So we'll break this down in the same way.

**A Note:** *Toxins are such a general health problem and understandably sparks a lot of heated passions from people; so I'm going to try my best to keep it relevant to fertility alone, although you could equally have this as a possible cause for anything from cancers to cardiovascular diseases.*

### Air Toxins

**Dioxins** (a group of harmful chemicals) and **Mercury** are both dangerous. But that's not the only thing they have in common.

**Both are by-products of burning.**

**And, both can cause reproductive and development problems** *i.e. your fertility!*

Once Dioxins (in particular) enter the body they can be absorbed into the fat tissue and **remain for at least 8 years!**

**(BERC. 2017)**

Accumulative toxins like these begin to damage, interfere with hormones and mutate your body's cells – which is why it's also linked to cancer.

But more specifically, your immune system, central nervous system and reproductive organs can take a heavy hit without you even being aware of it.

**It's worst kind of problem – *the silent kind.***

**Dioxins come from:**

- **General waste incineration**
- **PVC and plastic incineration**
- **Paper, steel, and pesticide processors**
- **Power plant emissions**
- **Volcanic eruptions and forest fires (natural processes)**

**This gets pumped into the air** and makes its way into the soil and sediments. Which in turn, are eaten by other animals and stored in their fat.

When people eat from crops and livestock they can easily be contaminated. It's easy to see why more than **90% of human exposure is through food.** (WHO. 2016)

**Mercury comes from:**

- **Naturally occurring emissions from the Earth's crust**
- **Man-made coal burning – like coal power stations**
- **By-product of mining**

The majority of mercury pollution is from man-made processes. Once again, this is released into the air, where it later pollutes the soil, lakes and sea. (BERC. 2017)

## **Water Toxins**

The problem with water pollution is that it's too easily done. Toxins of every kind find themselves in the water supply which cause problems with everything else along the food chain – **including us!**

Here's the main toxins you're likely to come across.

**Nitrate** which comes from:

- **Fertilizers from fields**
- **Human waste**

**Arsenic** which comes from:

- **Insecticides and Herbicides**
- **Naturally occurring from the crust, rocks and other minerals**

**Lead** which comes from:

- **Various products such as paint, batteries etc.**
- **Old water pipes were lead lined**
- **Naturally occurring in mineral deposits**

**Perchlorate** which comes from:

- **Naturally occurring in sodium nitrate deposits (mined for fertilizers)**
- **Rocket fuel, flares etc.**

All of the above can pollute our water supply! And when they do its bad news for your fertility.

Excluding other nasty conditions, Nitrate contaminated water has had some evidence linking it to **lowered sperm counts** and even **miscarriages**.

Nitrate contamination is certainly considered dangerous to infants and pregnant women!

**(MD, MPH Dr Aimee Eyvazzadeh. 2010)**

Perchlorate and Lead both mess with the **production of hormones**. Lead pollution in particular can cause **damage to the Nervous System** – which in turns controls most systems around the body.

Both potential areas of damage play a role in a person's fertility.

And arsenic is also a big suspect in the reproductive toxicants for males.

It can include **altered sexual behaviour** and **problems with sperm shape and count**.

Women also are effected with the possibility of **altered menopause onset, infertility** and **altered lengths of pregnancy** – including pregnancy outcomes.

**(Right Diagnosis. 2017)**

## **Food Toxins**

Now take every dangerous heavy metal, chemical and waste mentioned above and lump them into this category because that's how most of it eventually pollutes our bodies – *through food!*

Here's how the toxins eventually find their way into your food:

**Dioxins** come from:

- **Polluted Fat in Meat**
- **Polluted Crops and Vegetables**

**Mercury** comes from:

- **Polluted Fish**
- **Contaminated Water Supply**

**Nitrate** comes from:

- **Common Food Preservative**
- **Contaminated Water Supply (very difficult to filter)**

**Arsenic** comes from:

- **Contaminated Water Supply**
- **Water Soaking Foods (like Rice)**

**Lead** comes from:

- **Contaminated Water Supply**

**Phthalates** come from:

- **Plastic containers (it can get into your food from heat or natural de-generation)**

And don't forget **BPA plastics!** These chemicals can get into our food from readymade meals or pre-packaged goods and cartons.

A common way (of which people are still largely unaware) for these chemicals to contaminate is through **heating the plastic with the food**, or leaving water for extended periods of time in BPA bottles.

### **And think about the cosmetics you use on your face.**

It may not be directly food pollutant related. But, if you're eating a meal with lipstick on every night, that's bound to get into your food.

Lipsticks and other cosmetics can contain **nasty chemicals like Parabens** – just look it up!

I'm not trying to be a scrooge and say drop everything we enjoy but if it's especially young children and pregnant women, just be aware.

And if you are trying to conceive, see if lowering your contamination will make a difference – I bet it will!

The main problem is **we don't typically think of these things before deciding to start a family** – so if you are possibly wanting children in the future – make some changes now. It may make all the difference.

Anyway, enough of the doom and gloom – let's see what we can do about it!

Obviously, environmental pollutions are difficult to avoid, but there are certain things you can do to lower the risk of infertility from these types of toxins.

And don't worry, you don't have to walk around with a breathing mask!

## Lower your exposure by...

**Avoid Big Fish** – which have been shown to have higher mercury contamination. This includes **Tuna, Marlin** and **Sea Bass**.

**Wash your Food!** – even just a quick spray of your vegetables can get rid of potential pesticides lying on the surface, microscopic to the eye. Oh, and don't trust pre-washed foods from your supermarket, better to be safe than sorry.

**Purify your Air** – I'm serious. If you live next to a busy industrial district, you may feel the need to clean some of that air – and why not? Simple air purifiers are available to purchase.

**Purify your Water** – with filters on your taps or water jug. This can vary greatly from a full pipe purifying job which might be quite costly – to simple purifiers on your drinking water. Either way it's worth it. There's been many tap water contaminations and they just crop up before anyone sees it

coming – usually only discovered AFTER it's been around all our houses and drank from.

**No more Ready-Meals** – besides the fact you'll be doing yourself a huge favour, it may be necessary, at least while you plan to have a child, to cut back on plastic contamination from heated plastics from microwaves etc.

**Buy Organic** – its meat is much less likely to be contaminated and it won't contain certain preservatives. Even then, it will do you some good anyway – a bit of detoxification while you try for a child – ladies and gents!

**Buy BPA Free** – this goes for all your bottled drinks, to any pre-packaged foods. Luckily, we have quite good standards here in Britain, but it's always worth a check.

**(MD Lonky, Stewart & Deitsch, Rik J. 2007)**

We've covered the simple signs that could indicate a fertility problem, we've gone through many possible causes of infertility – and now:

I'm going to share the **3 super-important natural factors to increasing your fertility and overall chances!**

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## 3 *Super-Important* Natural Factors to Increasing Your Fertility and Overall Chances!

It doesn't matter if you think (or know) you have one of the conditions mentioned above, or even if you think you're squeaky clean and will have no problems at all – everyone NEEDS to know the information I'm going to outline here.

It could be the one **single most important factor** to ensuring a healthy fertile body with every possible chance at getting it right!

Some of you may know this, others may not – I'd advise everybody read it, just to be sure!

### **Menstrual Cycle**

*and how to understand yourself!*

As we all know, the menstrual cycle is a women's natural process that the body undergoes to prepare for pregnancy. It all revolves around **the level of hormones**, which **rise and fall throughout the course of a cycle**.

It's important to understand this process because every women is different and although the cycle is around 28 days, one will not be the same as another.

By better knowing your **'window'**, you can further the **chances of a successful fertilisation.**

## Day 1

**Your cycle starts on the first day of your period.** Keep your iron levels up and make sure you're eating!

## Day 5

**Your period ends.** It can actually be anything around 3 -7 days before you can look forward to the end of your period.

## Day 14

**Ovulation takes place.** Around two weeks after you start the cycle, your uterus thickens and an egg is released. **This is where you're more likely to get pregnant!**

## Day 28

**Cycle ends.** 28 - 32 days – depending on when your next period starts. If the egg is unfertilized, you'll begin the cycle again.

## So when is the fertile window?

Let's break this down.

For fertilisation you need **the egg** and **the sperm**.

**The egg only lives for 24 hours.** It's released on the day of ovulation.

After its 'sell by date', it's considered impossible to get pregnant!

So that **only leaves 1 day to get fertilized.**

**But, sperm can live up to 5 days inside the womb.**

The magic window is the 6 days, including the five days before the egg is released.

**It's during this time you can get pregnant.**

**(Your Fertility. 2017)**

Although, it's difficult for some women, it's a good tool to track your cycle and understand when your best chances are – particularly useful if you're not one for 'trying' every night (as is recommended by some).

**Other ways to identify your fertile window are:**

**Basal Body Temperature:** Body temperature rapidly drops just before ovulation and then spikes shortly after. You measure this with a thermometer first thing as soon as you're awake.

**Cervical Fluid:** Becomes thinner and stretchier approaching ovulation.

**Ovulation Tests:** Tests strips which identify the presence of luteinizing hormone (LH), the one responsible for triggering ovulation. These tests can tell you accurately when ovulation is imminent.

(Ovia. 2016)

## Nutrition

*and what it does for you!*

Now that we've covered understanding yourself, we can move onto what sorts of foods you should be eating.

Good nutrition is a **key cornerstone to fertility** because it plays an essential role in **supplying the nutrients needed** for creating and maintaining healthy eggs and quality sperm.

You can use nutrition as a natural means to boost your fertility and of course, to maintain a successful pregnancy!

No matter what condition you may have, practicing a well-rounded balanced diet will bring you one step closer to increasing your chances!

Let's look at some **foods that boost your fertility.**

(Zita West. 2017)

## Simple Carbs or Complex Carbs?

What's the difference?

For those who don't know, **a simple carb is a more refined** carbohydrate, or in other words it's been through more processes.

This includes foods like cake, white bread and white rice. All have been processed and have less whole grains and fibre.

**These types of carbs are digested much quicker** and turn into blood sugar.

The rapid 'peak' in the blood sugar level means your pancreas **releases more insulin**.

And that's the problem.

Studies have found evidence to suggest that **higher insulin levels inhibit ovulation**.

Unlike simple carbs, **complex carbs are more often full grain and full of fibre**. Therefore, they break down slower and have a more gradual effect on glucose and insulin within the blood.

So **stick to less processed foods in general**. Whole grain bread, fruit and vegetables etc. You know the drill.

**(Diabetes Digital Media Ltd. 2017)**

## Choose Unsaturated Fats

This is starting to sound like every other lose weight and eat healthy magazine, but I promise you it's fully relevant to fertility.

Saturated fats found in 'snack' foods and animal products **increase your insulin resistance.**

This is unfortunate because a greater resistance means it's harder for insulin to help move glucose from the blood and into the cell walls.

With the pancreas releasing more insulin everyday anyway, what you get is **an increase of insulin within the blood.**

Once again, **higher insulin levels inhibit ovulation.**

**(fitPregnancy and Baby. 2017)**

## Full-Fat Everything Dairy!

Whether it's milk, cheese or yogurt – stick to the full fat versions!

According to studies conducted by MD Jorge E. Chavarro and MD Walter C. Willet, **skimmed milk or reduced fat dairies may be associated with ovulatory infertility** and reduced chances of getting pregnant.



## Get Enough of the Secret ~~Sauce~~ Acid!

We've known for a long time now that **Folic Acid is important during pregnancy.**

However, what's maybe more surprising is its role before you get pregnant!

In an 8 year study conducted by Harvard, women taking a daily multivitamin (of at least 400 micrograms of folic acid and 40-80 milligrams of iron) were **40% less likely to experience ovulatory infertility than the women who didn't.**

So, it looks like enough folic acid is especially important before you get pregnant and in the first 12 weeks of a baby's development.

Crucially, it helps **prevent birth defects to your baby's brain and spinal cord.**

Get your hands on some multivitamins or folic acid tablets, although a source of folic acid can also be found in a bowl of fortified cereals.

**(MD Johnson C, Traci / WebMD. 2016)**

## Stress

*and what it does against you!*

This is our third super-important *natural* factor that secretly influences our fertility.

Once understood, not only will you have all the excuse you need to have a five star massage, but you'll also increase your overall chance of success!

For many couples, **trying for a child can be very stressful.**

It's important for both men and women to manage this stress as it can have impacts on any stage of the child bearing process.

**This includes getting pregnant.**

**This includes carrying the child.**

**This includes the birth of the child.**

Some studies show that it may even effect the later development of the child.

Sounds scary, but **we're going to make it sound easy –**

*I Promise!*

Let's get down to details.

**Stress is believed to effect:**

## **Sperm Production**

Your hormones help produce sperm. They influence the production and the quality.

Unfortunately, stress messes with your hormones. Not only will your **sperm count be lowered**, but it can even effect how far and fast the sperm can swim!

**(Al-Taher, Hamed. 2013)**

## **Menstrual Cycle**

Ever heard of **secondary amenorrhea**? It's a temporary break in the period cycle. Without being pregnant, you may not menstruate for three months or more.

Alternatively, you may just get **irregular periods**, making it tricky predicting your fertile window.

**Stress can play a role with both.**

By supressing the function of the hypothalamus, the chain of hormone production is adversely affected. Basically, your ovaries, oestrogen and lining can all be out of sync and not work properly.

Obviously, if this happens you'll struggle to get pregnant.

**(Winderlich, Melanie et al. 2010)**

## Foetus Growth

A growing foetus can still be affected through stress. *But to what extent?*

**This is still under scrutiny.**

There is a close link between chronic stress and lower birth weight / and / or premature delivery.

Although, science is yet to know for certain whether stress itself causes development issues with the foetal brain.

It's quite clear that the outcome of the baby is closely tied to nutrition, substance exposure like drugs, alcohol, nicotine and even steroid based medicines. These definitely have **long term effects on the brain chemistry of the foetal child.**

Many studies show that the mother is more affected through stress than the child. If this were the case, damage to foetus from stress would be minimal.

**(Watson, Stephanie. 2013)**

However, if stress is causing problems with the mother such as sleeping disruption, eating disruption and a general health decline; then this *would* affect the child's growth –

**Putting stress as its secondary cause.**

What's more interesting, is that some studies do show stress actually causing foetal brain development problems.

This is because stress releases **glucocorticoids** – which is found in steroid medicines and **known to disrupt a child's growth if in too-high levels.**

(Li, Y, Gonzalez, P, Zhang, L. 2012)

## This is where we share the good news!

So stress links to fertility – we know that.

*But how and why?*

And of course, it wouldn't be a worthy article from me if I didn't tell you where the spine fits into it all.

First, we need to step back a bit.

**Answer this question.**

What actually is stress?

**Some people think it doesn't exist.** *It's just exaggerated emotions.*

Others believe in **physical stress** but not **mental stress**.

Many more **feel the effects of stress but don't fully understand it.**

And I'm sure the rest of us are just confused by the whole ordeal. Well, I'm going clear it all up!

**Stress is real.**

*...Literally*

Physical?

Mental?

Emotional?

**They're all one and the same.**

*Let me explain...*

**Stress is a mixture of three hormones.**

**Adrenalin**

**Norepinephrine**

**Cortisol**

When the mind and body are under attack in some way, these hormones are released from the **nervous system** and distributed around the body.

When this happens **your body shuts down functions that aren't essential** for life in order to prioritise survival.

Theory has it that this response is built into us as part of the **'Fight or Flight' survival mechanism.**

So – if a caveman was to come across a big sabre tooth tiger, he'd suddenly become 'stressed' and **survival instincts would kick in, increasing his chances of survival.**

**(The Stress Management Society. 2017)**

However that's a little 'out there' for the daily 21<sup>st</sup> century living...

**Here's some better examples:**

**When you're exhausted and need to lift something really heavy** – your body pumps you full of adrenaline and you feel super human. That's a **physical** response to stress.

**When you're having a hard time at work keeping up with demand** – you work faster and stop thinking about eating and drinking. That's what some might call **mental** stress and it's the same chemicals at work.

**When you're parted from a loved one and the Titanic violins start rolling in your head** – you may feel drained of energy and deflated. That's what some might call **emotional** stress, but it's part of the survival mechanism of these three hormones.

It's perfectly normal and a natural part of living.

More than that – *it's an essential part of living!*

The problem occurs when **we're stressed for a prolonged period of time.**

That's not healthy. Our body gets 'flooded' with these hormones which can be quite damaging!

In this 'stressed' state, **blood's not traveling to where it should be for us to prosper.**

That means:

- **Blood is being diverted from our muscles**
- **You get digestive problems**
- **You stop eating**
- **Minimal brain function**
- **Increased sugar levels**
- **Increased blood pressure**
- **Decreased Libido. (Sex drive)**

All these things can be a great hindrance on both our work and personal lives.

(PhD Segal, Jeanne et al. 2017)

We all respond differently to stresses:

**A fight** response misdirected can mean aggressiveness towards friends and family.

**A flight** response could mean not facing the stress and bottling it up instead.

**A freeze** response might stop you from breathing normally and make you feel worse.

And remember what we learnt earlier – it can affect your ability to conceive!

I suppose the next obvious thing to ask yourself is...

## What's **Stressing** You?

Everybody who feels that their stress is getting the better of them will probably have an idea of where it's coming from – even if it's not precise.

For many couples, the process of trying for a child causes them the stress and fertility problems.

That's the **pressure which comes from having to perform.**

Something that should be intimate and joyful can very quickly become routine 'sex on demand'.

And with too much build up and seemingly little results, disappointment may put you off the idea of a child altogether.

**(Al-Taher, Hamed. 2013)**

### **Don't fall into this vicious cycle.**

Make sure you're both aware of each other's stresses. Just be open and honest with each other. If something's affecting you, give it the attention it deserves.

If one of you can't perform, take the night off. There's no race.

Just keep each other happy – remember trying for a baby is supposed to be fun, joyful and close.

## Stress and the Spine

For those who know me, you're probably reading this and wondering when I'm going to start rambling on about the spine.

Well, that moment's come – and don't worry, I'm not really going to ramble...

But here we have it, **the spine and how it links to your stress.**

*I always say:*

**Your spine is like the body's main highway. Everything the brain needs to send will usually travel down this 'fast lane' before reaching its destination.**

That's because encased within the spine is the **nervous system** – a complex 'tree' of nerves allowing impulses to travel down the spine and reach out to every part of the body.

And relying on these nerve impulses are **essential chemicals and important hormones necessary for your body to function!**

That includes the stress hormone 'cortisol'.

**As chiropractors, our theory is:**

If the spine is damaged, *even fractionally*, it impacts the nervous system and causes all sorts of problems. This includes **misfiring essential chemicals** while negatively affecting **blood flow and tissue repair**.

As we've already said – when you're stressed, you're more likely to suffer from the same problem of a **decreased blood flow** around certain areas.

A stressed person is also more likely to hold themselves in a state of high tension.

We all know the signs: hunched shoulders, clenched fists, constant frown and deflated posture.

**All bad news for the spine and nervous system.**

Ultimately, this stress can lead to a damaged nervous system and could mean keeping you in a **semi-permanent state of damage**, strain and interrupted tissue repair – *even after* your stress levels have returned to 'normal'.

*You see the link – and the problem?*

## Is stress causing you hidden damage within your spine and nervous system?

*It's a question worth asking.*

More so, when you learn just how *relevant* the spine is to the whole fertility process.

**A damaged nervous system can negatively affect a person's fertility.**

It's believed the reason for this is linked to the **pituitary gland** and **hypothalamus**.

Both are essential in controlling the amount of oestrogen and testosterone produced within the body – all vital for fertility.

If these master glands encounter an interruption in the spine's nerve 'highway', then their **messages could be misfired or incomplete**.

As a result, you may **stop producing the correct amount of hormones** required for optimal fertility.

### **A more complete way of describing this is:**

*“Spinal movement contributes to the proper flow of cerebrospinal fluid. Restrictions of spinal movement alter the flow of CSF and may impact the hypothalamus and/or pituitary gland. These glands are responsible for reproducing hormones such as follicle-stimulating hormone and lutenizing hormone which are vital to reproductive function.”*

...in the words of **DC Shelley, Jessica**

**(DC Williams, Cody. 2005)**

This can be seen in studies involving chiropractic care (the art of re-aligning the spine) and women considered infertile...

## **Chiropractic and Fertility**

The study conducted by DC Madeline Behrendt set out to measure the response of **infertile women undergoing chiropractic treatment**.

Of the **fifteen women** case studies:

**All were infertile**

**All had misalignments of the spine**

**Nine had already undergone unsuccessful fertility treatment.**

Over the coming months, each woman was carefully observed and their results tracked.

Through the course of chiropractic treatment, spinal misalignments were constantly corrected with the application of simple **spinal adjustment**.



(The fancy word chiropractors use to describe the hands-on manipulation of the vertebrae — sounds scary, but *trust me*, everyone who sees me will agree my method is *gentle, painless* and *non-invasive*)

## The Final Findings

Of the **fifteen women** case studies:

**All misalignments were corrected and reduced**

**All experienced improved whole body function**

**All become pregnant *naturally* and went on to deliver a healthy child!**

**Amazing results!** Depending on the woman, it took anywhere from 1 -20 months to conceive. This study caused quite a sensation amongst everyone in the medical world and has prompted further research into the field of fertility and chiropractic.

This tells us the possibility of a **link between the spine, nervous system and fertility** is a strong one indeed!

*I look forward to more studies like this, but for the men – that too would be interesting!*

Since then, **more studies have been done documenting more success** with chiropractic and ‘infertile’ women with conditions including **amenorrhea, scoliosis, chronic colitis, ‘lazy’ reproductive system, ‘unexplained’ infertility** and even for **women preparing for IVF.**

**(MA, CH Willett, Elizabeth. 2015)**

I too have heard and seen similar situations within the practice, here in Penrith!

What this all tells me, is by removing hindrances, misalignments and strain on the spine – we allow the body to do exactly what it needs to do without interruption.

To me, it’s that simple.

*It could be for you too?*

Before we move on to the overall conclusion of this month’s article, **allow me to make a mini conclusion right here...**

Don't give up hope because you've been told it can't be done.

The truth is **Miracles Do Happen...**

**Because they're not miracles at all** – Fertility is just one of the many things where we still don't know everything!

All I can say is – try different methods.

*See for yourself what works.*

Chiropractic may or may not be for you.

That's why I've tried to give you this article with as much information as possible (and I know it was a long one this time... sorry!)

**It's also why I like people to be able to try chiropractic, before committing.**

We have our **3 visit money back guarantee** for just that!

For those interested, you can check out the details on the next page along with this **month's awareness offer!**

Make sure to check out my overall conclusion on page 67 for some final thoughts!

## THIS MONTH'S AWARENESS OFFER!

This month we're bringing awareness to **Stress & Fertility**; couples new to care can enjoy **our very best special offer!**

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### 6 Months of **Unlimited Care For Two!**

*Couples receive £2640 worth of care!*

- Now only **£255 p/m**
- Includes both you and your partner
- **That's savings of £1110!**

*Offer Valid Until  
1st August*

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### Here's how it works:

As some of you may know – we use a detailed Insight Nerve Scan to accurately determine if you have a problem with your Nervous System.

*The only one in Cumbria!*

### This Consultation & Nerve Scan is entirely free.

- Ring us up – **01768 259 021**
- Fill out a quick five minute form
- We'll scan your spine and print you out a copy
- After that we'll book in your first three visits
- On the third we'll see how your body's responding to care

It's important to remember that it's a **NO Obligation** Consultation and Nerve Scan – so you're not stuck in anything and won't be pressured into care!

**And you're covered with our:**

**Three Visit 100% Money Back GUARANTEE!**

*If you decide, for any reason, that you no longer wish to continue care by your third visit, then we'll give you a full refund on all 3 visits!*



**For more information:**

Penrith Family Chiropractic

**01768 259 021**

[www.penrithchiropractic.com](http://www.penrithchiropractic.com)

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## Final Thoughts

I don't know about you, but the more I've looked into this, the more I've come to realise that fertility is a complex matter –

*But perhaps it's made out to be scarier than it is?*

We often get distracted with the small stuff and forget about looking after number 1.

**I say sort out the basics and the rest will follow.**

Small things like nutrition and stress can make all the difference!

**And they're easy for you to put right!**

If you're unsure, look back at our **3 super-important natural factors** (pg. 41)

**'Reduction of stress' can so often feel clinical**, as though there's a 'right' way to go about it...

All this talk about relaxing can put us into a state of 'chasing' this relaxation every minute of the day – when in reality, as soon as we start chasing it – we create another chore...

**Suddenly, it's not very relaxing.**

Be spontaneous, be fun and do relax – but not because *you have to* but because *you want to!*

**It's fun!**

**Trying for a child is exciting!**

**It's a moment of happiness –**

Don't wear yourself down with 'having' to be intimate every night – keep it close and enjoyable.

Live in the moment.

Whatever you do, look after yourself and have a plentiful spring and summer!

Lastly, if you've read this far – *thank you!*

**And a final favour** – please pass this on to a friend or family. Then, together we can spread local awareness.

If anyone does wish to talk to me you can reach me on **01768 259 021**

I'm usually available to chat out of clinic hours on:

**Monday – Friday**

**1.30 – 3.30pm.**

If I'm busy, just leave a message and I'll get back to you ASAP.

As always,

Yours in Health,

**Peter Bennett**

BsC (Hons) DC Chiropractor

**PS.** Don't forget this month's Awareness offer – details on page 65.

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