

the natural news

Quarterly newsletter of the
Australian Council of Natural Family Planning

Spring 2009



inside

Protecting Your Fertility	1
President's Column	2
Fertility Fitness	3
Why is it Necessary for a Pap Smear? ..	4
State Reports	5
NFP Board Report	6
Special Award	7
Letter from an Engaged Couple	8

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Protecting Your Fertility

By Trish Logan

Picture this... on the table, in front of the NFP Educator and a young couple, are six text book perfect charts. Clearly marked on the beautifully written chart, is a point of change leading to a definite peak mucus symptom day, supported by significant bi-phasic temperature shift and intercourse timed to achieve a pregnancy. The teacher waits quietly. The demeanour of the young couple is apprehensive.

Then into the silence, one comments, "Well I was a bit of a party animal, before we met." Their hands reach for each other. "Then at dinner the other night, a friend said something about an STI called Chlamydia. We were wondering... does it affect fertility?"

Dr David Bradford retired Director of the Sexual Health unit at Cairns Base hospital had this to say to those ACNFP members present at his presentation in 2005.

There has been a trebling of the incidence of Chlamydia in Australia over the last five years.⁽¹⁾

Chlamydia is the most common sexually transmitted bacterial pathogen worldwide.⁽²⁾

Chlamydia trachomatis is a bacterium (which) has attracted little attention in the past because the symptoms are mild. However, although rarely fatal, Chlamydia can

have devastating consequences if left untreated.

In women, Chlamydia starts as an infection of the cervix. If untreated, it can spread through the uterus to the fallopian tubes. This condition, known as salpingitis, may block the tubes with scar tissue, which can cause infertility and an increased danger of Ectopic pregnancy.

In men, Chlamydia is the leading cause of non-gonococcal urethritis (NGU). This is an inflammation of the urethra. If left untreated it can lead to epididymitis, an inflammation of the testicles that can cause sterility.

Chlamydia can be passed from a woman to her child during birth. This can cause an eye infection, called conjunctivitis, and pneumonia. In addition, the risk of spontaneous abortion and stillbirth is much higher in women with chlamydial infections during pregnancy. It is estimated that

"There has been a trebling of the incidence of Chlamydia in Australia over the last five years."

... continued on p2

... continued from p1

“...informing students of the precious gift of their fertility, how it functions and encouraging choices to protect their fertility may well be a key factor in slowly turning the tide”

60-80% of women and 10% of men have no symptoms².

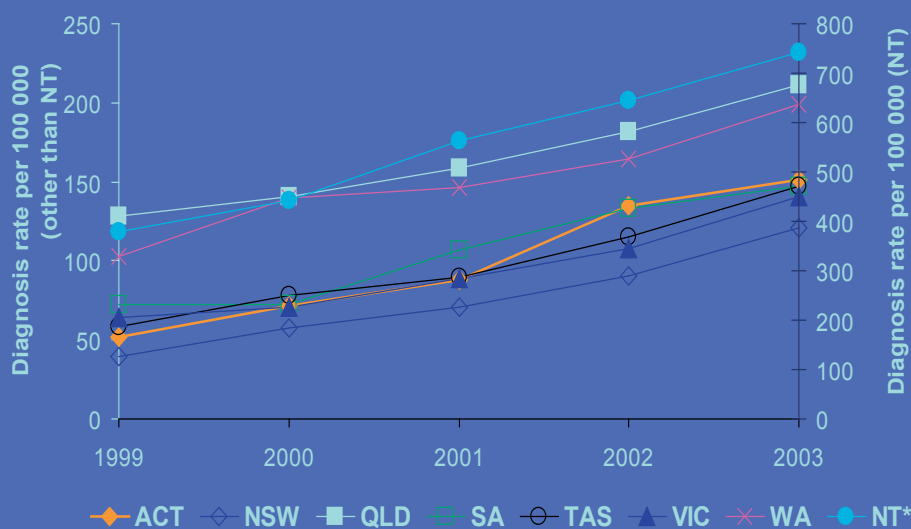
Returning to the scene. The teacher gently offers the suggestion that a visit to their Doctor might be worthwhile, carefully avoiding any form of diagnostic role.

We as teachers know this scenario will become all too familiar as the rate of Chlamydia soars, given its asymptomatic nature and life style choices for contemporary teens and young adults. As NFP educators, using the second page of the Client Record form to record health issues is a key part of client management. In our role as Family Life Educators, informing students of the precious gift of their fertility, how it functions and encouraging choices to protect their fertility may well be a key factor in slowly turning the tide. It is never too late to start educating to protect fertility.

1. “Sexually Transmitted Infections (STI’S)” Dr David Bradford, Cairns 2005

2. Communicable Diseases Network Australia: National Notifiable Diseases Surveillance System (NNDSS), NCHECR2005 Annual Surveillance report.

Chlamydia by year and State/Territory



Source: National Notifiable Diseases Surveillance System

President's Column



Dear Friends,

The topic for this Natural News is “Protecting Your Fertility”.

ACNFP educators have always held the strong belief that everyone has the right to correct knowledge about fertility.

Through Sexuality Education programs in schools, ACNFP are able to educate young people in how to negotiate the stormy path of adolescence and to learn how to say NO to sexual intercourse until they are in a permanent, committed, married relationship.

Couples who choose this path can be confident that when the time comes when they choose to have a family that they have savoured their gift of fertility and that they have the optimum chance of achieving conception.

ACNFP educators are very skilled in educating young people about sexuality and fertility issues. I encourage you all to keep up the wonderful work that you do.

Evelyn Brien
President



Fertility Fitness

By Anne Raymond ~ Teacher Trainer (NFS Perth)

Today, community organisations, more than ever, are promoting health conscious living. We need to be more aware of what we put into our bodies, eat our two fruit and five veg, and find thirty minutes of physical activity each day. We try to take down time, to relax and refresh the mind. Some professions even grace employees with mental health days. We are becoming more aware of all aspects of our lives and our bodies, so let us take a few moments to look at how we can improve our fertility fitness. Some of these things not only improve our fertility fitness they also improve our general wellbeing.

1. KEEP A HEALTHY DIET

A good healthy diet not only makes you feel better but provides the right vitamins, minerals and nutrients needed for healthy sperm and ova production. A diet high in folate, found in leafy green vegetables among others things is essential during child bearing years for women to decrease the likelihood of neural tube defects.

2. EXERCISE REGULARLY

Regular exercise is great for your overall health and particularly good for your reproductive health. According to the Oxford Journal for Human Reproduction regular, moderate exercise has been associated with better ovarian function. Regular, moderate exercise is also associated with better functioning of the male reproductive system.

3. AVOID EXCESSIVE ALCOHOL

Heavy drinking can have an effect on the sexual and reproductive health of men and women. Any alcohol during pregnancy can affect an unborn baby's

growth and development. Excessive alcohol consumption has been strongly linked to lower sperm counts.

4. MAINTAINING A HEALTHY WEIGHT

Women who are under weight can stop ovulating altogether until a healthy weight is achieved. Being obese can lead to hormonal imbalances that may prevent ovulation. Obesity in men can lead to a lower sperm count. So for optimum fertility fitness a healthy weight range is advised.

5. SAVE YOURSELF FOR MARRIAGE

There are too many benefits to list here but let's go with the obvious. You considerably decrease the risk of contracting an STI. Many STI's can either temporarily or permanently affect your fertility. Saving this gift for a trusting and committed relationship can avoid the heart ache.

6. CONSIDER THE HAZARDS

Toxins, chemicals and heavy metals can have an adverse affect on male and female fertility. Consider whether or not you or your partner may be at risk, perhaps from fumes, paints, pesticides etc, in the workplace or elsewhere. Chemotherapy and radiation can affect fertility for men and women; if this is an issue discuss it with your doctor. Also, consider the risk of injury to the reproductive organs; at work or during sport, especially for men in contact sports.

7. AVOID SMOKING AND DRUG USE

Both lower sperm count and quality, as well as have adverse affects on a growing baby including lower birth

weight. Kick the habit. It will benefit you and those you love.

8. CONSIDER YOUR IMMUNISATION HISTORY

Mumps can cause infertility in men. For women, Rubella can have serious health effects on an unborn baby if contracted during pregnancy.

9. GO FOR A NATURAL METHOD OF FAMILY PLANNING

Natural methods such as the symptothermal, multi-indicator method of family planning have no adverse affects on your fertility. In fact they may help you to recognise a problem or abnormality in your cycle early. Other methods of family planning both mechanical and chemical can have a range of different short or long term effects on your fertility and your general health.

10. MAINTAIN REGULAR CHECK-UPS

Be aware of your health and well being and take care of it. Women should have regular pap smears every two years from the time that they become sexually active. And just as women should regularly conduct breast self-examinations so too should men conduct regular testicular self-examinations. Be aware of any lumps or changes and the risks of testicular cancer. See your family GP whenever you notice anything out of the ordinary.

Your fertility is but one part of your life as a whole, but it can have a huge impact on our identity, on who we are and our plans or changes in plans throughout life. Look after yourself and keep yourself fertile and fit.

Why is it necessary to have Pap Smears?

By Cathy Wood

The time to visit your GP comes around too quickly, but every two years all women who are sexually active are strongly advised to have Pap Smears, even if they no longer have sex and/or as soon as they become sexually active which may mean during school age for some. Pap Smears should be continued every two years until the age of 70, unless advised otherwise.

In 1928, Dr Papanicolaou discovered that cells in the cervix change in appearance before they become cancerous. The Pap Smear, named after the doctor, is used to check changes in the cervix. Cells are collected from the cervix and then smeared on a slide for further investigation. If abnormal changes are found, then further tests are done to see if treatment is needed.

The Pap Smear is not for diagnosing cancer, but rather for finding early changes which might become cancer. Nor is it a check for sexually transmitted infections (STI's), however if women are worried about contracting an STI then other tests and treatments are available.

What causes cervical cancer is a wart virus called Human Papilloma Virus, or HPV which in most cases is cleared by the body's immune system in 8-14 months however the presence of HPV may be detected by the Pap Smear. This virus is usually only seen microscopically and in most cases HPV will disappear naturally. It is common that four out of five people will have had HPV at some time in their lives. The Pap Smear cannot identify which type of wart virus is present but all wart virus changes in the cervix need to be regularly checked. The more severe the abnormality the less likely it is to go away and the more likely it

is to get worse and eventually become invasive. It is impossible to predict whether the abnormality will return to normal or develop into cancer. Therefore, tests are always needed to confirm the diagnosis. Some women who have persistent infections may develop abnormalities of the cervix, this is why it is important to have regular Pap Smears.

Regular Pap Smears can help to prevent up to 90% of the most common type of cervical cancer and almost all abnormal Pap Smears results are not due to cancer. It all depends on the type of problem that is detected. Most cancers of the cervix take up to 10 years to develop.

Cervical cancer is one of the most preventable and curable of all cancers however it is the 8th most common cancer in Australian women. More than 1,000 cases of cervical cancer are diagnosed each year. It is estimated that up to 90% of the most common types of cervical cancer may be prevented if cell changes are detected and treated early.

About half the new cases of cervical cancer diagnosed each year are women over 50 and yet women in this age group are less likely than younger women to have regular Pap Smears. More women over 50 die from cervical cancer because their cancer is diagnosed later when treatment is more difficult.

If women have abnormal vaginal bleeding (such as intermittent bleeding, bleeding after sex or after menopause), abnormal or persistent vaginal discharge (bloody or offensive), or pelvic pain, a consultation with a GP is strongly advised. As NFP educators

our duty of care lies in encouraging and reminding women to have regular Pap Smears.

Pap Smears are the only examination available to women for detecting any abnormalities on the cervix caused by HPV.

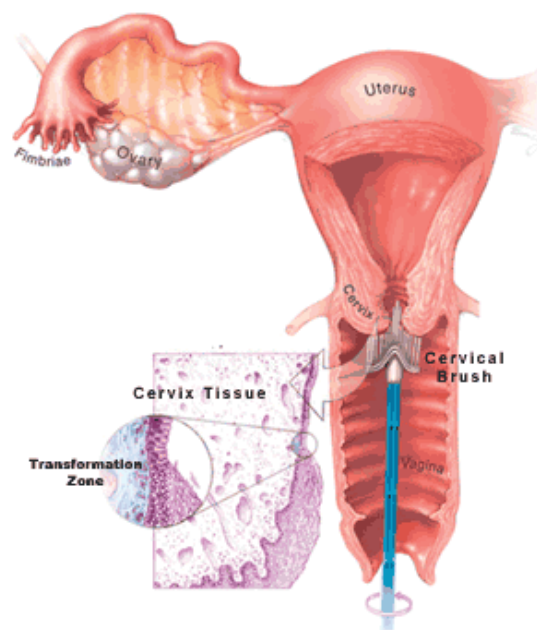
References:

Australian Government Department of Health and Ageing

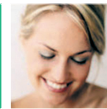
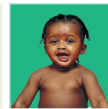
National Cervical Screening Program

ABC Health and Wellbeing/British Medical Journal

U by Kotex – Kimberley Clark Worldwide



An optimal Pap Smear sample contains a sufficient mature and metaplastic squamous cells to indicate adequate sampling from the transformation zone and sufficient endocervical cells to indicate that the upper limit of the transformation zone was sampled and to provide a sample for screening for adenocarcinoma and its precursors.



State Reports

WA

Another busy term of FLE is on the books for our dedicated team. As well we have a few people interested in coming on board and training with us for FLE in the future. Our NFP work has seen many of us away on leave and we extend a big thanks to Chris Fernandez for keeping us going during this challenging time.

We have in-services planned for later in the year with some charting workshops and theology question and answer morning.

We look forward to a busy quarter in all aspects of NFP, FLE and personal development.

SA

South Australia has had a quiet start to the year but will become much busier over the next six months with a number of things happening.

Our State In-service is scheduled for September and topics include Napro Technology and Client Management.

We are looking forward to Cathy, our Pt Lincoln Educator joining us for this and hopefully a new trainee Lesa, from Melbourne as well.

Third and fourth terms are traditionally our busiest for FLE so we are preparing and looking forward to this busy time.

Our trainee Jenni is working hard and progressing very well. We hope she will be finished and accredited by the end of the year.

NSW

The year started out very busy for Natural Fertility Services Sydney and has continued that way, with training courses, clients and presentations for pre-marriage and schools.

We have just finished our 4 part training course for the year (Part 3 1.8.09). What great potential our current trainees have! I am sure all states are looking forward to their final accreditation.

NFS Sydney is now hoping to slow down a little given all the hours gone into organising, preparing and presenting the last few months. I would like to take this opportunity to personally thank all those involved in presenting sessions at our training courses this year and look forward to their continued support in 2010.

Our school services have continued to grow this year, especially our primary sessions. This is a validation of the quality service which our educators provide and I would like to commend their efforts.

Sydney will also be advertising for a new Planning Officer to take on the administration responsibilities for the training courses from next year as Anne McGowan prepares to retire from her part time work in the city office.

Executive Report

Thanks go to Mrs Angie Knighton from the Broken Bay Diocese who finished her term of office at the AGM held at the biennial conference in Sydney. Angie held this position for four years and was a valuable member of the Executive. Due to an oversight Angie was missed from the previous report of the AGM. My sincere apologies to Angie.

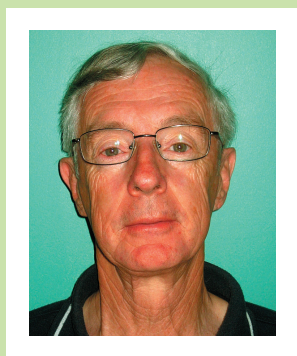
The Executive met at Randwick NSW in June 2009, the following issues were discussed:-

- The changes in how Government funding is to be changed in the 2010/2011 financial year were discussed at length
- Using the website as a teaching tool – it should be up and running for client service from August 2009
- The Federal funding is to be put out to tender for the next financial year. The NFA Board is working hard to ensure funding is ongoing. Your Executive will keep you informed.

Evelyn Brien

NFPP Board Report

July 2009



NEW NAME

From July 2009 the name Natural Fertility Australia - replacing Natural Family Planning Program - will be phased in gradually on statistical forms, Annual Reports, letterheads etc.

A logo has been agreed upon, to be incorporated into letterheads, promotional material etc.

NEW WEBSITE FOR NATURAL FERTILITY AUSTRALIA

The Board has engaged ZOO to develop a new Website and this is a "work in progress."

It is expected that, on completion of the new Website, the Board will address the issue of an updated Promotion Strategy.

NEW ACNFP NOMINEE ON THE BOARD

On the nomination of the ACNFP Executive, Evelyn Brien has replaced Noelle Melrose for an initial 2 year term.

Noelle has completed 4 years on the Board (the maximum time permitted without a break) and during that time has contributed enormously to the workings of the Board, and as a result, to natural family planning in Australia.

Also, on the recommendation of the

ACNFP Executive, I will continue as a Nominee for a further 2 years.

PROJECT FUNDING

This funding - so essential to the operations of Centres providing services to disadvantaged and/or remote communities and to clients of Aboriginal or Torres Strait Island descent - is considered on an annual basis. At the June 2009 Meeting, several Projects totalling \$55,286 were approved by the Board.

MORE SUPPORT FROM BISHOPS & CLERGY

Following a Submission by the Board to the Australian Bishops Conference, there was broad consensus from the Bishops that local Bishops:

- (a) strengthen the advocacy of NFP to pre-marriage couples;
- (b) ensure that Catholic School offer the Church's teachings on sexuality and sexual relations;
- (c) keep clergy in their respective Dioceses updated on the availability, and developments in, NFP services.

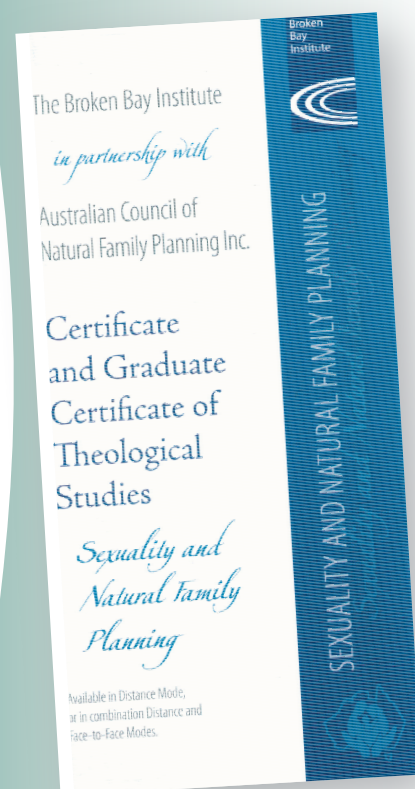
VARIED FUNDING ARRANGEMENTS

The Commonwealth Government has announced that such arrangements will be varied from 1 July 2010.

The Board is working closely with Government in an effort to ensure that the provision of services by ACNFP-related Centres and Billings Centres are not adversely affected.

Brian Maher,
Board Representative for ACNFP

The Broken Bay Institute Course



ACNFP accredited Teachers are reminded of the Certificate and Graduate Certificate of Theological Studies being offered by the Broken Bay Institute and to give serious consideration in undertaking this course of study.

Members are also asked to pass on information about the course to anyone they know, who may be interested in studying in this area.

Further information can be obtained by contacting:

Natural Fertility Services,
Tel. (02) 9390 5156 or

The Broken Bay Institute,
Tel. (02) 9847 0030



Special Awards

At the Australian Council of Natural Family Planning National Conference held in October 2008, a number of people were awarded for their service to the Council. At the discretion of The ACNFP Executive a number of people who have given exceptional service to the organisation are chosen to receive awards.

Dr Terry Bennett was awarded the Barbara Gross Memorial Award. This award is given in recognition of outstanding service to ACNFP in the scientific field. Dr Terry Bennett has been involved in ACNFP since its inception and his contribution to ACNFP has been great. Terry worked for many years at The Brisbane Mater Natural Family Planning Centre where he was instrumental in setting up a very busy centre and maintaining and supporting clients and staff, particularly in the area of breast-feeding, LAM and infertility. Terry was an active member of the Research and Evaluation Committee for ACNFP. His knowledge and skills will be very much missed.

Mrs Noelle Melrose and Mrs Patricia Rainbow were awarded the

ACNFP Award, given in recognition of outstanding service on a National level.

Noelle from Rockhampton in Queensland has been involved on both the Teacher Training Committee (16 years) and on the Executive (10 years) in a variety of positions including President. Noelle has also served on the NFPP Board. Noelle's service has spanned a period of seventeen years; she continues to work in her local centre and is invaluable with advice and support.

Pat Rainbow from Tasmania has been involved on the Teacher Training Committee for many years, although Pat has retired from active work in the field she continues on the Teacher Training Committee and in her support of NFP in Tasmania. Pat has worked as an NFP teacher for 25 years.

Dr John Casey was awarded a life membership, John was already a recipient of the Barbara Gross Memorial Award and is retiring to Queensland. John has been a great support and has presented at the Training courses every

year since they first began. John has always been available for scientific advice and has been invaluable in his support of NFP.

Life Membership – this award is given to individuals who have given long and dedicated service (a minimum 10 years) and are retiring from the Council.

Life memberships were awarded to Ann and Tom O'Donnell from Perth, Jane and Barry Setter from Rockhampton, Faye Cash from Adelaide and Sue Butler who worked in NFP across Australia. Each of these people have served ACNFP with distinction.

ACNFP Award – is an award given in recognition of outstanding service on a National level.

Barbara Gross Memorial Award – is given in recognition of outstanding service in the scientific field.

Years of Service awards were presented to educators who had completed service of five years and more. These service awards are presented at five yearly intervals.



Dr Terry Bennett recipient of the
Barbara Gross Memorial Award in 2008



Mrs Patricia Rainbow
Recipient of the ACNFP Award 2008



Mrs Noelle Melrose
Recipient of the ACNFP Award 2008

Letter from an Engaged Couple



Natural Family Planning was suggested to us through family members who continue to use the method today. They had found success in the healthy natural method of family planning.

As a young couple we were encouraged to use hormonal methods of contraception such as the pill. Discouraged by the negative side affects we decided to explore the NFP path. At first we were sceptical as to the effectiveness of the method, being afraid of the likelihood of an unplanned pregnancy.

Using NFP has prevented us from experiencing the health conditions that can result from oral forms of contraception. It has encouraged us as a couple to communicate about what is happening in the female body and helps both of us get used to noticing the various changes.

Learning together forms a closer bond between the two of us. Although we have not been using NFP for long we are confident that with co-operation and motivation it will be very beneficial.

Engaged couple aged 18 & 24, were married in September 2009.



please note

Occasionally misleading or inaccurate information can be published. In the event that you note something that may be erroneous in a media release or publication please make a copy and send to Evelyn Brien, who will consult with the Medical and Research Advisors of Natural Family Planning so that it may be addressed and accurate information provided.

To contact Evelyn Brien,

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President: Mrs Evelyn Brien

Immediate Past President: Mr Brian Maher

Vice President: Mrs Leila Jessimer

Secretary: Mrs Trish Logan

Treasurer: Mrs Christine Martin

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Chairperson, Promotions Committee: Mr Derek Boylen

Editorial Committee: Dr John Gallagher, Mrs Sharon Young,
Mrs Evelyn Brien

Administration Officer: Mrs Amy Galaret

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