NaProTECHNOLOGY® – Healthcare Women Really Need

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aProTECHNOLOGY® is a dynamic, universal women's health science developed by Dr. Tho mas W. Hilgers and his colleagues at the Pope Paul VI Institute. Evolving over three decades of clinical research, Natural Procreative Technology (NPT or NaPro) utilizes a standardized and prospective system of cyclic monitoring¹ whose biofeedback is critical in helping women understand their health and fertility. One abiding hallmark distinguishes NPT's 30-year history: A woman's healthcare goals-the regulation of fertility or the identification and treatment of reproductive abnormalities-are realized in cooperation with her natural gynecologic system.

Here I bring the defining concepts and accomplishments of NPT into dialogue with those of the Woman's Health Movement (WHM),² a major healthcare initiative that, since the 1960s, has continued to gain momentum in American mainstream medicine. Speaking for the former is a representative group of female patients who recount their experiences with NPT in a book entitled *Women Healed*.³ Personifying the latter are the initial architects and contemporary leaders of the WHM.

What the reader is about to discover is how a comparative "conversation" between these two contemporary healthcare phenomena elegantly sets the power of NPT in bold relief. First, NaPro embodies all that is worthy in the WHM. Second, NaPro eclipses the best of what the WHM has to offer. And, third, NaPro excludes any Women's Health Movement proposals / practices that fail to realize health in either female patients or the culture.

Women's Health Movement

The Women's Health Movement has its roots in the 1960s medical trend that reshaped the "paternalistic" standard of physician-patient relationship into a more participative model. Female patients began to insist that they partner with their medical caregivers in pursuing a comprehensive, woman-focused health plan.

In 1973, the feminist pole of the WHM came to light when Boston Women's Health Collaborative published the book, *Our Bodies*, *Ourselves*. The text may have been women-friendly in the sense of helping female patients better understand how their bodies function. But it represents a travesty against women by trumpeting contraception, sterilization and abortion as "healthy" components of reproductive "freedom" and "choice." Predictably, and without so much as a hint of critical filtering, the WHM viewed the passage of *Roe v. Wade* as a catalyst for its reproductive health policies.

The formation of the Congressional Caucus for Women's Health was another "giant step" for the movement. The 1977 Caucus, in turn, convinced the U.S. Public Health Service Task Force on Women's Health to conduct important and much needed studies. The latter uncovered two principal concerns: first, research in women's health issues was woefully underrepresented and, second, the *prevention* of illness and disease, not just their treatment, needed to be put center stage in women's healthcare.

In 1990, the NIH established the Office of Research on Women's Health (ORWH) to take responsibility for establishing policy and promoting research on women's health. Around the same time, Dr. Bernadine Healy, first female director of NIH, launched the Women's Health Initiative, a fifteen-year, \$628-million study that focused on postmenopausal women and looked at the prevention and causes of heart disease, colon cancer and osteoporosis.

In 1992, the Council on Graduate Medical Education identified 42 essential training components to prepare physicians to provide comprehensive healthcare to women. A year later, Congress asked the Department of Health and Human Services to study women's health and, particularly, how it was addressed in graduate medical education.

According to its best goals and objectives, then, proponents of the WHM believe that:

- 1) Women's health is both preservation of wellness and prevention of illness that includes screening, diagnosis and management of conditions more common or more serious in, or unique to, women.
- 2) Women's health is a holistic concept that comprises biopsychosocial wellbeing.

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- 3) Women's health must be comprehensively studied so that:
 - (a) basic diseases can be analyzed within the larger picture of woman-specific responses and
 - (b) the menstrual cycle can be seen as a bodily phenomenon that affects and is affected by a woman's total health.
- 4) Women's health must be properly researched with studies that address the female body and female health needs throughout the continuum of a woman's life.
- 5) A woman's health is best pursued with sensitivity to her values and her experience in wellness and illness.
- 6) Health is optimally facilitated when women are informed participants in their own care. And
- 7) Women's health is best supported with a multidisciplinary team approach.

According to its worst objective, proponents of the WHM believe that women are exercising "responsibility for their health" by electing practices/procedures such as abortion, contraception, sterilization, safe sex, and assisted reproductive technology (ART).

NaProTECHNOLOGY® & The Best Goals of the WHM

"Holistic and woman-friendly"

"I had never before received such prompt, effective, womencentered medical care." ⁴

By offering a holistic approach to health and a healthy gyn-ecology, NPT is, without question, woman-friendly. As one patient put it: "There are many kinds of healingphysical, psychological, moral-and my experience [with NPT] resulted in all three."⁵ Its comprehensive versatility springs from the fact that it can be used by women in a variety of reproductive situations-avoiding pregnancy, achieving pregnancy, breastfeeding and infertility-and from the ingenious way that it networks procreative health with general health. 6 Take the case of women with polycystic ovarian disease (PCOD). Patients who successfully undergo NPT treatment for PCOD often experience short-term health benefits: relief from hirsuitism, skin problems, abnormal menstrual periods and infertility as well as reduction of their risk for PCOD-associated long-term health problems: heart attack, heart disease, hypertension, type II diabetes, endometrial cancer and postmenopausal breast cancer.7The holistic health benefits these patients experience consistently exceed their expectations.

What's more, the comprehensive approach of NPT translates into promoting health at every stage of a woman's life. In adolescent and young women, NaPro not only addresses the issues of irregular and painful periods but it also promotes fertility and sexuality appreciation. In thirty to fifty year-old women, the NPT approach focuses on the whole panoply of gynecologic and high-risk obstetric conditions. In peri-menopausal women, NPT deals with the often confusing and debilitating effects of waning fertility, without the adverse side effects of oral contraceptives. And in post-menopausal women, NaPro offers bio-identical hormone replacement as a way to promote bone and heart health.

When it comes to realizing the WHM goal of viewing the female cycle within the big picture of general health, NPT "scores a bulls-eye." Its system of tracking the ovulatory and menstrual cycles (identifying the biological markers of menstruation, cervical mucus [fertility] and infertility) is the basic tool used by all female patients to monitor their cycle. The holistic benefits of this prospective and standardized system of charting are perhaps most dramatically illustrated in women who suffer from premenstrual syndrome or post-partum depression. Working off chart-derived bio-indicators or their symptoms, the NPT approach to PMS and PPD not only brings the woman's progesterone and hCG to normal levels but also restores her sanity and her overall ability to deal with life. One patient described the results of NPT treatment as "almost miraculous" 9 another likened the resolution of her depression and irritability symptoms to having her battery recharged 10; another said that, after relief from the misery of PPD, she owes her life to her NPT physician.11

"Person-centered"

"I finally felt respected and knew that someone listened to me and wanted to get to the root of my problems." ¹²

The British philosopher, Elizabeth Anscombe, once made a statement about love that also happens to aptly describe the person-focused approach of NPT. "When we are loved," she said, "we are the plan: we are the center and purpose of all the decisions made by those who love us." Within NPT healthcare, every woman is treated as a person to be loved for herself, never used or objectivized, never seen as a number that is crammed into a one-size-fits-all treatment plan. As one woman described her NPT physician: "I finally found a doctor that looked at me as an individual"... a doctor who took "into account the clues that my body seemed to be providing, and put the pieces together [in] an effort to facilitate health, not just pregnancy." ¹³

Another patient's story gives moving testimony to that same person-centered, life-giving care emblematic of the NPT approach to health. She had suffered her entire life with fatigue, inability to concentrate, unexplained weight gain, and poor circulation. Even worse, no physician had ever been able to diagnose, much less alleviate, her condition. Through a full series hormone profile timed cooperatively with her cycle, Dr. Hilgers was able to discover that the patient was suffering from a hormone deficiency. Imagine the woman's relief when, first, she discovered that her debilitating symptoms were real (as opposed to "in her head" as her previous doctors had suggested) and, second, when she finally found herself on the road to recovery. Her response to NPT treatment? "Thank God Dr. Hilgers took such an educated and loving approach." 14

"Patient-specific and freedom-enhancing"

Before NPT treatment, "I felt disconnected from my body-feeling nothing but misery; flat, dark, tired.Never in my wildest dreams . . . did I think my depression was biological in origin. I was placed on four hCG injections every month (Peak + 3, 5, 7, and 9) which . . . helped my ovaries produce appropriate levels of estrogen and progesterone. My depression disappeared immediately and, I am happy to report, has not returned." ¹⁵

One of the critical goals of the WHM is to make the female body the focus of the woman's patient education and of her diagnostic, treatment or prevention plan. By teaching a woman to track her cycles, NPT not only makes the individual patient knowledgeable about female physiology but it also teaches her about her own physiology, how her body is functioning on any given day during any given cycle. This is a patient-specific system of biofeedback at its finest, as this next woman's experience with NPT illustrates. "I knew more about my body," she writes, "than I would have (had I received my gynecological care) anywhere else. I learned how all of the systems in my body are related and why treating my health holistically has the most benefit for my body." ¹⁶

Sounding that very same theme, other patients thank NPT for the freedom and sense of wellbeing that comes from being "completely in tune with [their] body" and "in control of [their] health." 18

"Stewardship-focused empowerment"

"My message to all women is to be informed and to be empowered. NPT will continue to provide answers for [all the] reproductive issues that you may deal with in your lifetime. The charting is an excellent medical record and can be a valuable tool in the evaluation and treatment of a myriad of

female disorders." 19

Not uncommonly, women struggling with infertility will come to the Pope Paul VI Institute after being treated by physicians who could never tell them why they were not able to get pregnant. Let me be clear. I am not claiming that NPT resolves every case of infertility. In fact, it may actually take longer to get pregnant with NPT than it does with IVF or ICSI. But, over the long run Dr. Hilgers has found that NPT is up to three times more effective than IVF in assisting infertile couples to achieve a pregnancy.²⁰

But even when infertility patients fail to conceive their own biological child-and this is the point I really want to make-they are eternally grateful to their NPT caregivers for leaving no stone unturned in identifying and treating the conditions causing their infertility. After years of misdiagnosis, NPT's thorough diagnostics finally offer these patients some treatment direction, some answersand solutions-to their problems. "This was the first time in over 6 years," one women wrote, "that a doctor"-instead of pressuring me to attempt a pregnancy with "all the fancy infertility procedures"-"could actually tell my husband and me what was wrong." ²¹

And, of course, knowing what's wrong is the first step to taking intelligent responsibility for one's health, for exercising proper stewardship over one's body. Indeed, stewardship-focused empowerment is just one more forte of NPT healthcare.

"Prevention-oriented"

"I know that the therapy I have received from Dr. Hilgers at the Pope Paul VI Institute has saved my life." $^{\rm 22}$

Educating women about the importance of annual mammograms, pap tests, and a healthy lifestyle with exercise and proper nutrition has steadily advanced the WHM goal of prevention-focused healthcare. NPT certainly promotes these female screening measures, but its prevention goals are of a much wider scope. Consider the following.

First, with progesterone treatments timed according to the woman's cycle, NPT has prevented severe depression, self-inflicted injuries, and even suicide in women suffering from post-partum depression. Second, with progesterone and hCG supplementation, NaPro has averted serious erosion of marital and family relationships by providing relief for women struggling with the debilitating symptoms of PMS. Third, with the use of progesterone and hCG, NPT has an impressive success rate in preventing repeat miscarriage in women who have lost three or more previous pregnancies. Fourth, its system of charting prevents a variety of troublesome

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health conditions from becoming major problems. Fifth, the use of naturally compounded progesterone administered cooperatively with the menstrual cycle prevents recurrence of ovarian cysts and their associated abdominal pain. Sixth, with progesterone administered cooperatively with the woman's cycle, NPT obviates the need for the surgical management of ovarian cysts. Seventh, with bio-identical hormone replacement, NPT helps to prevent osteoporosis and heart disease in post-menopausal women. And, finally, preliminary data suggest that, because of the thoroughness of its assessment and management protocols, NPT could possibly prevent or at least detect some forms of female cancers in their early stages.

"Multidisciplinary and research-based"

"We were supported, we were educated, we were in control of our family planning." $^{\rm 24}$

The multidisciplinary approach that is unique to the women's health science of NPT, especially as it is presented at the Pope Paul VI Institute, includes a team of specially trained caregivers²⁵-OB/Gyns, a physician assistant, NPT nurses, Fertility*Care*TM practitioners, a family and marriage psychologist, and an ethicist. As a result, a woman who accesses NPT is diagnosed and treated not just medically but also from spiritual, moral and psychological perspectives. Each specialist contributes his or her own unique services to the broader schematic of realizing healthcare that works cooperatively with the woman's natural procreative system.

New Novena

Feast of the Annunciation

For the Feast of the Annunciation (March 25), watch for the new novena to Our Blessed Mother to be published in the 2006 Respect Life Program. The 2006 program will be posted on the Secretariat for Pro-Life Activities website by Summer 2006. See: http://www.usccb.org/prolife/programs/rlp/index.htm.

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Furthermore, women and couples are so confident about NPT healthcare because they know that the exceptional reliability of its diagnostic and treatment protocols has repeatedly been documented in medical journals and, most recently, in a definitive textbook, The Medical & Surgical Practice of NaPro-TECHNOLOGY®. The latter summarizes the results of a 30-year clinical investigation into the complexities of the menstrual cycle and the way the accumulated data has been applied successfully to women's obstetric, gynecological and general health issues.

NaProTECHNOLOGY® Eclipses the Best Objectives of the WHM

"Marriage-friendly"

"Just learning and applying the [Fertility CareTM] system in our lives solves so many issues, physical or mental, spiritual or marital. It makes some problems seem smaller and good marriages even better." 26

The family-planning component of NPT, the Creighton Model Fertility *Care*TM System, boasts of its ability to promote *marital* health (it is no accident, either, that the WHM cannot boast of such an accomplishment). Enabling the couple to cooperate with, rather than destroy or suppress, the gift of their fertility, NPT is helping couples better understand what it means to collaborate responsibly with the "fruitful love of God."²⁷

One patient summed it up beautifully: "Before NPT and Fertility *Care*TM, I was responsible for all the procreative decisions, but now after 15 years of marriage, [my husband and I] were learning a whole new way of dealing with each other and our sexuality. Instead of controlling our fertility, we learned to let God into the picture." Another woman marveled how planning a family responsibly-as NPT allows-worked its special graces in her life, teaching both her and her husband the real meaning of marriage and marital love. ²⁹

Most importantly, though, the Fertility CareTMSystem demands that both spouses discuss their particular goals for building a family and regulating their fertility, not just once, but whenever their procreative plans need to be adjusted according to the changing situations of their marriage. Building interpersonal communication on the issue of family planning-and all the positive spin-off from this important skill-is one of the system's fringe benefits most frequently cited (and appreciated) by user-couples. "We were a happy couple," one woman wrote, "we communicated about procreative issues and our fertility and, as we have always said, if you can talk about mucus, you can talk about anything."³⁰

"Family-friendly"

After getting hCG injections for PMS-related depression, "my husband said it was as if he saw a mask lift from my face. I could laugh again. The children were my joy. I loved life and living." ³¹

With NPT's positive impact on marriage, it is easy to see how its healing balm can effect the life of the entire family. As quoted above, many women who are treated through NPT attest to this effect. NPT builds healthy marriages and strong families, one family at a time.

"Culture-friendly"

My contention is that the healthy effects of NPT spill over not only into the personal life of the female patient, but also into her family and from there into society itself. At the most fundamental level, the science of NPT builds up the health of our culture by being open to, and inclusive of, religion and ethics.

The research behind NPT is genuine medical science; science at the service of human beings; science that neither "deifies itself nor defies faith." As I have written elsewhere, "NPT is the flagship of natural procreative initiatives that are . . . producing the 'good fruit' of a truly human culture where knowledge, belief and behavior will be ordered to the good of present and future generations of the family of mankind."³²

Undergirding and permeating much of the reproductive medicine endorsed by the WHM, on the other hand, is scientism: a scientific philosophy taking a materialist view of the human person and human behavior. Scientism is freighted with the reductionist errors of materialism, pragmatism, and individualism. It backs the reproductive medicine endorsed by the WHM and therefore skews the meaning of human life and the pursuit of health. The science of NPT avoids all of these errors and, in the process, distinguishes itself as a medical technology in dialogue with, not divorced from ethics and faith.³³

NaProTECHNOLOGY® Excludes all that is Unhealthy in the WHM

NPT excludes the WHM-endorsed practices of contraception, sterilization, IVF, abortion, and safe sex. Many women who access the family planning component of NPT are unhappy with, or morally opposed to, contraception and sterilization as methods of family planning. They are skeptical about, and appalled by, the reality that contraceptive means of regulating birth suppress fertility and pregnancy, treating them as burdens or diseases. These women see that fertility is a gift, the capacity to co-create a new human life with God. And because they are determined to cooperate with their

fertility in an intelligent way, they are eternally thankful that the Creighton Model Fertility $Care^{TM}$ System is nationally and internationally available and allows them to do just that.

Oftentimes, infertile couples who investigate ways of conceiving their own biological child discover NPT after being disillusioned with the ART community. As one woman reports, "ART ignores the underlying fertility problems-or makes an anemic attempt to overcome the difficulties." It should come as no surprise, then, why infertile couples who find NPT after a kind of reproductive healthcare odyssey are grateful beyond words. Many are overjoyed (vindicated even) when, at a rate that exceeds that of high-tech methods, they achieve the pregnancy that the ART folks told them they would never do without their assistance!

Of course, induced abortion is simply not an option under NPT obstetric care. The objective is to do everything possible to facilitate the health and life for both mother and baby which, in the case of high-risk OB situations, means keeping the baby in the womb as long as possible.

Selective termination in the wake of a high-order pregnancy is another unhealthy solution endorsed by the WHM but excluded by NPT. First, it is a NaPro objective to keep multiple pregnancy rates to an absolute minimum. Whenever an NPT physician uses FSH drugs to stimulate ovulation, he/she follows the woman closely with ultrasound during her pre-ovulatory phase. If the sonogram shows multiple mature ovarian follicles, the doctor discourages the couple from having intercourse that cycle. In the second place, even should a multiple pregnancy occur, deliberately aborting the baby would be unthinkable for an NPT obstetrician who is dedicated to protecting and caring for both mother and baby.

Finally, when adolescents and single women access NPT for the treatment of irregular or painful periods, they learn to chart their cycles, to monitor their gynecology and, ultimately, to appreciate their fertility. Very quickly, these young women grasp the connection between a healthy self-respect and a healthy self-mastery in respect to sexual behavior. NPT is an amazing healthcare lodestar directing these young women along the path of genuine freedom, honest self-expression, and a chaste love.

Conclusion

NPT is what women should really want from healthcare because it provides what women really need: the opportunity to pursue the basic good of health encompassing physical, spiritual/moral and social wellbeing. NaProTECHNOLOGY® offers women what they really

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need and, therefore, deserve: healthcare that is woman, family, and culture friendly.

Endnotes

- 1. NPT uses the Creighton Model Fertility*Care*TM System to enable the woman to monitor the day-to-day biomarkers that are familiar to women (menstrual flow, the mucus flow and dry days) as the phases of her monthly menstrual and ovulatory cycle. These biomarkers are recorded in a standardized and objective method called NaProTRACKING.
- 2. A good internet source for an explanation of the Women's Health Movement, its history, goals and objectives, is found at www.amsa.org/programs/gpit/women.cfm
- 3. Jean Packard, (ed.) In Their Own Words: Women Healed (Omaha: Pope Paul VI Institute Press, 2004). The stories of fifty women who were treated at the Pope Paul VI Institute for: family planning counsel, general health questions, treatment of repeat miscarriages, infertility, pre-term birth, PCOD, ovarian cysts, endometriosis, amenorrhea, dysmenorrhea, premenstrual syndrome, post-partum depression, hormonal and ovulatory dysfunction. These women candidly recount their frustration and dissatisfaction over the healthcare they received prior to their treatment at the Pope Paul VI Institute.
- 4. Women Healed, p. 225.
- 5. Ibid., 107.
- 6. This patient's testimony confirms how NPT's holistic approach "provides a full evaluation of the entire reproductive system," and always with an eye toward general health: "I have a very complicated gynecological history and ... for over five years was incorrectly diagnosed as having pelvic inflammatory disease, spasmodic bowel, chronic back pain,

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Girardeau, kidney stones and thyroid problems. I was given the birth control pill, but it caused numbness in my legs and weight gain. Then I came to the Institute. I learned to chart, began a hormone profile, and Dr. Hilgers did a laparoscopy ... and lasered the endometriosis. [He then] correctly diagnosed me with hypothyroidism and polycystic ovaries and partially occluded fallopian tubes. Following surgery and hormonal treatment, I had never felt better or more normal in my life. Practically all my symptoms went away; my periods came and went with no cramping or bloating." Women Healed, p. 109.

- 7. Thomas W. Hilgers, *The Medical & Surgical Practice of NaProTechnology* (Omaha, NE: Pope Paul VI Institute Press, 2004), p. 580.
- 8. Women Healed, p. 136.
- 9. Ibid., p. 184.
- 10. Ibid., p. 200.
- 11. Ibid., p. 248.
- 12. Ibid., p. 234
- 13. Ibid., p. 99.
- 14. Ibid., p. 93.
- 15. Ibid., p. 188.
- 16. Ibid., p. 241.
- 17. Ibid., p. 16.
- 18. *Ibid.*, p. 18.
- 19. Ibid., p. 195.
- 20. Hilgers, Medical & Surgical Practice, p. 691.
- 21. Women Healed, p. 73.
- 22. Ibid. p. 248.
- 23. Hilgers, Medical & Surgical, pp. 385-6.
- 24. Women Healed, p. 24.
- 25. The NaProEducation training programs include a six-month medical consultant program assisting physicians to incorporate the science of NPT into their medical practice; a thirteen-month program educating practitioners, those who will teach couples how to chart their cycles; a thirteenmonth program assisting nurse practitioners, physician assistants, nurse midwives and pharmacists to incorporate the science of NPT into their practice, and a thirteen month advanced program to train experienced Fertility Care™ practitioners to be supervisors and educators.
- 26. Women Healed, p. 31.
- 27. Congregation for the Doctrine of the Faith, Donum vitae (Instruction on Respect for Human Life in Its Origin and on the Dignity of Procreation: Replies to Certain Questions of the Day), II, 8.
- 28. Women Healed, p. 197.
- 29. Ibid., p.16.
- 30. Ibid., p. 29
- 31. Ibid., p.188.
- 32. Renee Mirkes, OSF, Chapter Four, p. 33, in Hilgers, *Medical & Surgical Practice*.
- 33. Women Healed, p. 59.

Sr. Renée Mirkes, OSF, PhD is director of the Center for NaProEthics at the Pope Paul VI Institute for the Study of Human Reproduction, Omaha, NE. For further information about the ethics center see http://www.popepaulvi.com/NaProEthics1.htm.