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** * * Intro Music * * **

Welcome to Supplementing Health, a podcast presented by Advanced Orthomolecular Research. We are all about applying evidence based and effective dietary lifestyle and natural health product strategies for your optimal health. In each episode, we will feature very engaging clinicians and experts from the world of functional and naturopathic medicine to help achieve our mission to empower people to lead their best lives naturally.

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[01:49] *Cassy Price*: Hello and thank you for tuning in to another episode of Supplementing Health. Today I am joined by Antoinette Falco, naturopathic doctor to discuss ways to empower women to use their menstrual cycles as a diagnostic tool to understand their hormones and their reproductive health. Dr. Falco believes that health is one of the most beautiful gifts and we all deserve to feel our best and live our life to it's greatest potential. Welcome Dr. Falco. Thank you so much for joining me today.

[02:14] *Dr. Antoinette Falco*: Thank you for having me.

[02:16] *Cassy Price*: So, before we get started on the conversation, I would love to know how hormonal health and fertility became a passion of yours.

[02:23] *Dr. Antoinette Falco*: Oh yeah, well like many practitioners I would say it starts as a personal journey when you are in your early 20s and you are navigating the world of hormonal birth control, non-hormonal birth control and which way you want to go to give you the reproductive choice that you are looking for. At the time I had just started naturopathic school and I had been recently diagnosed with Hashimoto's and hypothyroidism and at the time I was lost to the understanding of how that hormonal condition effects my periods and my cycles. Fast forward to getting more lab tests done through my work with a naturopath at the time and I learned that the real answer to treating my hormonal condition was actually to approach it in a more holistic way and to look at all the systems in my body and to consider whether or not hormonal birth control is going to further complicate that situation or what it is actually going to be doing for me. I was really thankful that I worked with someone at the time that told me that maybe hormonal birth control wasn't the

direction that I wanted to go in. Then through my own healing at the time and starting practice I started noticing that there was this trend of a lot of women who are coming to me who either were on hormonal birth control and wanted to come off because they wanted to start their families, or they were having terrible side effects. From there emerged the work that I do which is around helping women transition off hormonal birth control and then with that I received extra certification in teaching the fertility awareness method. The fertility awareness method is what I teach women as their form of natural birth control that is highly effective but also as a way for them to understand their reproductive health. That is where we are today.

[04:29] *Cassy Price*: I think it is really interesting how much information is becoming mainstream about hormonal birth control. In the past women have just been told that this is your only option, and it is used as a solution for so many things, even beyond just fertility control, right? People use it for acne and for other conditions that come up. I know I have been reading a lot lately about utilising your hormone cycles to manage your fertility. Are there other benefits to charting your cycles?

[04:59] *Dr. Antoinette Falco*: Oh yeah. Definitely. Understanding your reproductive health is probably your most significant one in that it can also help you understand, for example, if you need to have a blood test done to test your hormones, taking your blood on any random day of your cycle is going to give you different results. By understanding your cycle through charting, you can know when the best time for me is to check my oestrogen levels because you understand that is the part of the cycle where oestrogen is the dominant hormone. Or when am I going to test progesterone? Well progesterone is correlated with ovulation, so you need to know when you ovulated in order to count seven days after that to then get a progesterone test. It is going to give you the most information. We could get a blood test done any day but is the result or the value that you get going to be helpful to you if it is not done on the right day? No, its not. So, I think that charting helps give you this tool that then can guide you in terms of lab tests that you might want to run or treatments that you want to do. If you've got any abnormalities or atypical menstrual patterns, whatever they might be, or if you have PMS or whatever is going on. It is the fact that it can be used as a diagnostic tool because your cycles are a vital sign. This analogy has been tossed around a lot lately, but I truly believe that it really does capture how a woman has this extra vital sign that makes her have this next level of knowledge around her health. It is not just her reproductive health. I think that is pretty fantastic.

[06:57] Charting can be used in three categories. We talked about using it to measure reproductive health but then the other two categories are using it for hormonal birth control and the other one is using it to plan a pregnancy. This depends on what your intentions are and what stage of life you are in. When I say charting, I am referring to fertility awareness method. I wanted to keep that clear in case there was confusion with some of the listeners. Going back to that you could use it for any stage that you are at in your reproductive life. For example, if you're wanting to navigate the transition into menopause you can be charting your cycles to help with that. If you are postpartum and you don't have a period and you want to be tracking the return of your fertility, charting becomes very helpful there. Or if you don't have normal cycles charting can help you understand where I need to do more work and where do I need some treatment potentially to help bring my cycles into normal ranges.

[08:07] *Cassy Price*: So, beyond recording the start and the end of menstruation and maybe some symptoms, what are some of the other details that women should consider including in their chart?

[08:17] *Dr. Antoinette Falco*: That is an excellent question. Most people when they think of charting, they think of using an app and telling an app when your first day of your period is and then telling

the app when the last day of your period is and then not really tracking anything else on top of that. In my practice and what I teach through which is called the Justisse Method, which is a form of fertility awareness method, we teach to record three important fertility biomarkers during your cycle. That is your cervical mucus patterns, your basal body temperatures and as well the position that your cervix sits each day of your cycle. Those are the three most common, but I would say in terms of what is the most important - cervical mucus patterns is the most important. It is your number one fertile sign. It is what is linked to your hormone productions throughout your cycle, and it is what is linked to a healthy cycle. In terms of other details, I really do encourage women to add in some of the other lifestyle factors that go into their day to day. That could be things such as what type of exercise you do, what days you do exercise, are you consuming alcohol.

[09:34] Alcohol is one that can throw off that fertility marker mainly your basal body temperature and basal body temperature is helping us pinpoint when ovulation is. So, we want to be recording lifestyle events that happen in a cycle so that we can use that to help us validate the biomarker data that we are collecting regarding cervical mucus, temperature and cervical position. Some other things to be recording of course is if you had a bad food day. So, a lot of people don't realise this but if you have a sensitivity to a certain food, say you know that sugar doesn't react to you, most people sugar can react well to, but we can all make the case of why having a chocolate bar here and there is needed in our lives. That can alter your cervical mucus or if you have a gluten sensitivity for example or you have a dairy sensitivity. Those can affect your charts from month to month. It is important that you are recording all of that in your chart. If you are sick. If you travelled somewhere and your environment is different. That is going to throw off how your body responds. Those are important things. When I talk about charting and I talk about fertility awareness method it is really putting everything on a chart to keep record of so you can be monitoring your fertility month to month or cycle to cycle.

[11:06] *Cassy Price*: It is fascinating how sensitive our bodies really are. When I first started reading about basal body temperature, I was so surprised by even waking up 30 minutes later it can change where your temperature comes in at or that you can't get up to go to the bathroom before you take it. Little things like that if you didn't look into it the proper way then all of these things affect the data that you are collecting, right? I didn't realise about the food sensitivities either. It is really interesting to learn all of those little details that impact your hormonal health and reproductive health that way. So, the other thing that you mentioned was the cervical position. How do you chart that?

[11:54] *Dr. Antoinette Falco*: Yeah. Well, checking the position of your cervix, you want to get yourself in a certain position and insert one finger and you are measuring for the opening of your cervix which is called the cervical os. You're feeling it with your finger and noticing what direction it is sitting in. Is it forward? Is it more towards you like you can feel it easily? Is it open? The way that most women can chart that is by drawing a circle and drawing the opening and drawing it almost like a compass or people can record words. They can say it is forward, it's open. What we are looking for is tracking those changes leading up to ovulation because during ovulation your cervix is actually going to sit forward and be more open. Then as the cycle goes on it is more anterior and it goes high, so it is going to be harder for you to feel.

[13:03] *Cassy Price*: Interesting. That makes sense from a biological standpoint that it would be open to allow the sperm a better chance at getting toward the egg and fertilising, correct?

[13:14] *Dr. Antoinette Falco*: For sure.

[13:17] *Cassy Price*: Interesting. So, then is there an ideal day within your cycle that you should start charting if you haven't been to date?

[13:25] *Dr. Antoinette Falco*: I would say start the first day of menstruation which is the first day of your period. That is your cycle day one and that is the first day of your chart. That way you are recording menstruation, what happens everyday that you bleed, do you get PMS, do you get pain, what is going on those days and then you can continue, and you track your mucus. Your basal body temperature you don't have to be recording during your menstruation because that is usually when your temperature is coming down from the last cycle but definitely you want to start recording towards the end of your period. You want to be taking your temperature and plotting that on your chart and then at the start of your next period that is when you are going to be starting another chart. That would be chart two.

[14:20] *Cassy Price*: As I have been reading more about this charting method, I found it very interesting just how effective it can actually be when you are tracking all of these different factors that play into it. So, what I was wondering is what are the benefits of charting over fertility methods beyond basically just birth control or fertility?

[14:45] *Dr. Antoinette Falco*: So, the charting that I am speaking about is a sympto-thermal fertility awareness-based method, so this is well researched, and it does have a high efficacy rate as a method for birth control. There are of course some distinctions that need to be made when we are talking about efficacy rates. So, you want to make sure that you have learned the method correctly and that you are practicing it according to the rules of whatever method you learned. Sometimes people will say "it doesn't work" or "so and so that I know got pregnant using that method." I always go to "okay but who taught them the method? What method was it and were they doing it correctly?" Just like hormonal birth control, if you don't take it at the right time every day or you don't take it every day, we reduce its efficacy. When you see 98.2 or 99.2% effective, when you see rates that high of efficacy when we are talking about fertility awareness method that is referring to perfect use with abstinence during the fertile window. So, if you are using it according to that then yes you will have the high efficacy rate. If you are not using it according to that or you are using, let's say, barrier methods during your fertile window then you are not using the method to its highest efficacy. It is really important to differentiate that when I am talking about FAM because there can be some misconceptions around that.

[16:39] *Cassy Price*: So, do you use charting in conjunction to other treatments or supportive tools for your clients?

[16:46] *Dr. Antoinette Falco*: Yeah definitely. So, I primarily trained as a naturopathic doctor so after I received my FAM certification and now, I would say that almost all of my patients go through my introductory FAM presentation where I teach them to chart. It is purely because I want them to be involved in their treatment journey and their health journey, so they understand what is going on. If a woman comes to me saying that she is experiencing a week straight of spotting for me it is important to know what days exactly is that? What is your cervical mucus pattern? I need more information so I am going to teach her to chart and as I start to see issues with the chart that is where I am going to recommend potentially a vitamin, a supplement, a herb or maybe some homeopathics and I want her to record on that chart when she started it and then I want her to start to track the changes because it is pretty fantastic when you can start to see those cycle parameters shift into more normal ranges after somebody has initiated treatment. So, that is something that I think is really cool about charting and really awesome that I am teaching women this way of using their charts as essentially their own marker of their health, their own diagnostic tool if they will

because once I teach women what a normal cycle looks like and then she may or may not have that in her cycle, that is when she is reaching out to me “This is what is going on, what could it be?” Usually it is a conversation of “Okay, so what was going on in life at this time? Tell me a bit about this.” Usually together we are coming up with exactly what is going on and exactly what needs to be done. It feels less of me as the doctor telling them what they have to do and more that she is involved in her hormone health journey and her reproductive health journey. I love that dynamic.

[18:56] *Cassy Price*: I think is really exciting this shift that we are seeing where patients are more in control of their health particularly women’s health because historically menstruation was very much a taboo topic and it was seen as an ailment or a condition just like pregnancy was for the longest time, right? It is really great to see that shift and that power being returned to the people who can control them, the women that are dealing with these conditions if you will. So, if a woman is coming off hormonal contraceptives, is there a waiting period before she should start using charting?

[19:42] *Dr. Antoinette Falco*: That’s a great question and it one that I do get asked often. There is definitely a transition period in terms of what is going on in your body and your own cycles getting back to their normal rhythms but there are no waiting periods in terms of when you can start charting. You can start right away the day that you take your last pill. Sometimes actually if a woman is feeling anxious or overwhelmed about charting, I may recommend that we do the introductory session when she is in her last month of taking hormonal birth control and then that gives her time to make sure that she understands the method and gives her a couple of weeks to start recording. A lot of fertility awareness method is making sure that you go through the observations routines for checking mucus in the correct order and that you get into the routine and the habit of taking your BBT first thing in the morning. While the data that we get when you are on hormonal birth control isn’t going to give us much information, it is about practicing the method before you come off and you will likely see changes happening to your mucus patterns and your temperatures just in the nature of your hormones getting back to what their base line is?

[21:08] *Cassy Price*: At what point do you consider the new data after they are off birth control somewhat reliable?

[21:15] *Dr. Antoinette Falco*: Yeah, so I guess it depends on what you are asking. Reliable for using it as a contraceptive or like reliable for monitoring?

[21:27] *Cassy Price*: For reproductive health so whether they want to do it for pregnancy or for contraception so either or.

[21:35] *Dr. Antoinette Falco*: Right away. There is information about how it can take up to a year for a woman’s cycle to go back to normal after hormonal birth control but there are still some women who are going to ovulate that first cycle off the pill and that is just how their body is and they can still get pregnant at that time. For some women it takes longer. They might not get a period for a couple of months, but we can be tracking your biomarkers right from the beginning and we can be monitoring those shifts in hormones right from the beginning.

[22:17] *Cassy Price*: Earlier you mentioned that it can also be used postpartum and pre-menopause. What are the benefits after pregnancy to continuing tracking?

[22:28] *Dr. Antoinette Falco*: In postpartum often at your six weeks follow up with your doctor or OB after you have had a baby, they are usually asking you what is your method of birth control that you would like to use. At that time some women are put on the mini pill and they get an idea that then is when they have to make a decision of what they are going to do. A lot of women don’t know that

they can use fertility awareness method as a reliable tool for pregnancy prevention at that time. Then also I have had women who postpartum, their babies are approaching a year and they are starting to think that we want to plan for a second baby but I don't have my period back yet so what do I do? Then we are not trying to rush the onset of your period and your cycles postpartum, but we want to be tracking your cycles and we want to be paying attention to your mucus pattern because what tends to happen is that women will ovulate before they get their first period. It is possible to conceive before you get your first period postpartum. Definitely those are the benefits in the postpartum and then of course women can use it for birth control and reproductive health and all of the other things that we talked about can be useful after pregnancy.

[24:04] *Cassy Price*: Okay. That makes sense for sure. When you are working with clients, what are some of the symptoms or biomarkers that might trigger further exploration of the symptoms or of those markers? Something that is a sign that they should be looking into what is going on further rather than it being something that is considered 'normal'. There are certain PMS symptoms that many women experience that aren't necessarily a trigger for concern whereas other things might be of more concern. Are there certain signs or symptoms that you and your clients tend to look for specifically?

[24:45] *Dr. Antoinette Falco*: Yeah. We always want to talk about what are the normal menstrual phases and what are we looking for in regard to mucus for example. So, you will have your period which will be anywhere from five to seven days and then you will have a phase where it will be dry and you won't notice any cervical mucus and then you enter your mucus phase which can be anywhere from seven to nine days in terms of length and then after that after ovulation then you have a dry phase until you start your next cycle. One thing to for sure be on top of is, are you producing enough cervical mucus or too much cervical mucus? That could be a sign that your hormones are out of balance. If you have, when we were talking about PMS, PMS can be divided into four different categories. There is the anxiety category of PMS, there is the depression category, there is cravings and there is headaches. You have symptoms under each of those categories that relate to those. So, for example anxiety if might be that you have insomnia, you are irritable, you are having mood swings, you are having panic attacks, you have mood issues. Then headaches, you can have fluid retention and fatigue. There is a bunch of symptoms that go under each category. You want to be recording not only what PMS symptoms you have but the intensity of it and what days you notice them.

[26:26] Are you getting PMS that whole two weeks after ovulation before the onset of your period? When you get your period do the symptoms just go away or do they get worse? If that is the case that is not PMS that is hormonal imbalances. PMS usually is going to last for a couple of days. It is going to be fairly mild and then it will go away when you get your period. Of course, because it happens, and it is common does not mean that it is normal and does not mean that there aren't things that you can't be doing to help manage your symptoms. Knowing when it is happening in your cycle gives me as the provider information about how it can be linked to your hormones. For example, I will give you an example from a chart. If I see that a woman has low temperatures after ovulation and has increases cervical mucus after ovulation and has a lot of PMS symptoms, we know that basal body temperature is correlated with your progesterone levels. If your BBT is low chances are your progesterone is low. If your having increased cervical mucus, well we know cervical mucus is produced from the cervical crux cells in the cervix in response to oestrogen.

[27:53] Now we have a picture where it is the second half of your cycle, progesterone should be the more dominant hormone but perhaps oestrogen is actually the more dominant hormone. We can see that by looking at those two markers, cervical mucus and basal body temperature. Then we layer

on top of that the intensity of your PMS symptoms then in my mind there is what we call an oestrogen dominance picture there where you are producing too much oestrogen relative to progesterone at that phase in your cycle. That is a situation that would need addressing.

[28:29] *Cassy Price*: Okay. Cool. Now most of the factors that we have talked about today are during your follicular phase and your luteal phase. Are there specific details that should be tracked during the period as well beyond just symptoms?

[28:57] *Dr. Antoinette Falco*: Yeah. So, when you are talking about your period you want to talk about the quantity. In the Justisse method we use HML and VL for heavy, moderate, light or very light. Then you also want to be starting to track your cervical mucus on your light and very light days. During the heavy and moderately heavy days, you can't really differentiate the mucus because the blood is really heavy but on those light days you should be tracking your cervical mucus especially if you are using it as birth control because we know that sperm can survive in cervical mucus for three to five days and if you are an early ovulator then potentially intercourse on that day could risk a pregnancy. So those are important and then, yeah, symptoms. I think a lot of people are already doing that. It is also important like I mentioned before to rate your intensity of your symptoms because again if you do something different whether that is a diet change, lifestyle change or supplement change, you want to be able to track that on your chart and see the difference from a quantitative perspective.

[30:17] *Cassy Price*: That makes sense for sure. Do you prefer apps for your clients or a manual log?

[30:26] *Dr. Antoinette Falco*: So, definitely when you are first learning to chart it is a lot easier and simpler to record it on paper, to do a paper chart. I prefer that when I am teaching clients at the beginning because it is a lot to wrap your head around. In terms of apps that in my opinion are as customisable and as flexible at recording data there are very few out there. There is one that has come out fairly recently in the last couple of years that actually does work with various fertility methods and educators to implement those customisable features of all of the methods. That app is called Read Your Body. I usually will first have clients use paper and then when they are confident in their routines and using the method then I will coach them on "How do we take this chart and modify it in the Read Your Body app so you can use this app to track the same data?" The Justisse College is working on creating templates to make that easy but for the most part if women just download the app it can be a bit confusing because there is a lot of information on there and how you customise it. I would recommend watching a tutorial on how to navigate the app because while it is customisable that could be overwhelming for some people.

[32:04] *Cassy Price*: Awesome. Thank you so much for chatting with me today. This is a really fascinating topic I think and one that we would probably talk about for hours if we wanted to. There are so many little details to go into and cover but unfortunately we have run out of time for today. So, if our listeners wanted to work with you, what would be the best way to go about doing that?

[32:27] *Dr. Antoinette Falco*: Yeah. So, they can find all of those details on my website which is www.antoINETTEfalco.com. You can also reach out to me on Instagram. I'm @drantoINETTEfalco. Reach out to me either way and we can have a conversation about what working together might look like and whether it is the right fit for you.

[32:48] *Cassy Price*: Awesome. Thank you so much again I really enjoyed chatting with you today.

[32:52] *Dr. Antoinette Falco*: Thank you so much. Likewise.

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Episode 56: Finding Your Fertility Flow

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