

## ***Fertility Services: Catholic Health Care***

by Mary Davenport, MD, OB/GYN



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Catholic health care in its interest in procreation is concerned with all the dimensions of the human person - physical, psychological and spiritual. Unfortunately, the public image of Catholic health care has allowed itself to be portrayed as merely denying reproductive health care options. There has been too much emphasis on the non-provision of contraception and sterilization services, which are widely available elsewhere in most of the United States. Hospital administrators maintain a posture of apologizing for what their hospitals don't do. Recently when a Catholic hospital network took over a community hospital in Northern California, the hospital spokesman defensively stated, "It is not our intention to squeeze out women's health care," when challenged by members of the press and local medical community.

Catholic institutions should have a broader vision of providing superior reproductive health care instead of apologizing for not providing services. One possibility is using natural family planning (NFP) to enhance medical and surgical therapies for infertility, thereby providing low cost and effective treatments for the community. By providing something better, Catholic hospitals can be celebrated for being dif-

ferent. Although many Catholic hospitals have developed natural family planning services as an alternative to artificial contraception for avoiding pregnancy, very few have realized the potential of NFP for the diagnosis of infertility problems and improvement of fertility therapies.

Infertility is an extremely prevalent medical problem and, according to many observers, has been rising over the past few decades. The incidence of involuntary infertility worldwide is 16.7% as reported to health services and 26.1% when calculated from demographic data. This represents 90 million women in the world. The fastest rising demographic category is women with diminished fertility with no children in

the 35-44 year-old age group, which increased 65% from 1988-1995.

The typical infertility patient in the United States is a married woman in her early to mid-thirties who has been attempting to achieve a pregnancy for at least one year. She is likely to be one of the 50% of women with subfertility who has used oral contraceptives. The infertility services she needs are frequently not covered by medical insurance. She needs ethical, efficacious, cost-effective diagnosis and therapy for her fertility problem. It is here where Catholic hospitals can play a leading role in providing superior health care.

A typical couple with a fertility problem is much more likely to be attracted to a method that cooperates with the woman's natural reproductive cycles and achieves pregnancy through marital intercourse. This couple and millions like them present an unprecedented opportunity for Catholic health care services.

The organization of mainline fertility services and the training of physicians in the United States in this field is inadequate. The typical fertility patient consults an ob-

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*Health Care continued on pg. 6*

## PRESIDENT'S PERSPECTIVE

by Sheila St. John, President, CANFP

**T**his issue of CANFP News features articles which provide us with a glimpse of the importance of NFP in Catholic Healthcare, by two of our board members who bring the perspective of a Physician / Medical Consultant, and an OB-GYN Nurse / NFP Practitioner with many years experience in Catholic Hospitals.

**“It is very important that NFP in California maintain a strong presence in Catholic Hospitals”**

A quick scan of our CANFP California Teacher Directory confirms NFP services throughout our state are offered in a variety of settings, including:

- Catholic Hospitals
- Physician's offices
- Diocesan Centers
- Churches
- Independent Centers
- Home Offices

Having offered NFP instruction in many of these settings myself, I have personally experienced the benefits and obstacles intrinsic in each. It is important that we continue to offer programs in a variety of professional venues, to reach the diverse population these programs serve. It is very important that NFP in California maintain a strong presence in Catholic Hospitals. This benefits the profession of NFP, fulfills the mission of Catholic healthcare, and most importantly, provides couples access to a relationally, spiritually, and physically healthy means of planning their families in a professional, credible and appropriate environment.

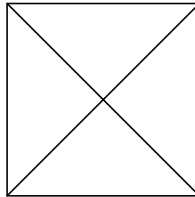
Unfortunately, and ironically, as we dedicate this issue to extolling the benefits of NFP in Catholic Hos-

pitals, the Catholic Hospital in my own Monterey region—Dominican Hospital—where I have taught NFP for the past 17 years, has discontinued the NFP program. The community of Santa Cruz has been left without NFP services of any kind, and the Diocese of Monterey without hospital based NFP services, since Dominican is the only Catholic Hospital in the Diocese.

For those 17 years, it was my privilege to personally witness the importance of NFP in a Catholic Hospital, in the lives of the over 300 couples taught in the program, and the thousand others who attended the hospital Introduction to NFP. I also witnessed the growing confidence in the community in NFP, fueled by the credibility of a hospital based program, with an increasing number of referrals from such varied sources as churches, physicians, Engaged Encounter, and even Planned Parenthood.

Now, it is my burden to share the pain of the couples who desire NFP, but no longer have the means to learn it in their community. And I share the struggle of the parishes and Engaged Encounter program as they call, asking “Where are we to send our couples?” The struggle is intensified when the only offer I have for a facility to continue NFP services in the area is from Planned Parenthood!

The benefits of NFP services in a Catholic Hospital are not theoretical, hypothetical, or faceless....but real, dramatic, and personal when given a face, as in the faces of the



Sheila St. John, President

couples I see when I think back on the many years of coordinating this program.

This setback in one region will not discourage us as CANFP dedicates our resources to assisting any hospital in setting up an NFP program. We will inaugurate this effort by conducting a survey of California hospitals, to determine what level of NFP services they currently offer, what interest there is in initiating or expanding their NFP services, and how CANFP can be of assistance.

We will do our best to be sure the key administrative people in each hospital receive the survey. If you would like to be sure your region is represented, you can forward to the CANFP office the contact information of the appropriate person (perhaps the Director of Education) at your hospital, and we will be certain they are included in our mailing.

**Look for the results of this survey in CANFP News early next year!**

## ASK THE EXPERT

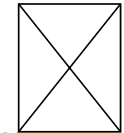
This question was submitted through our web site

Response by: Dr. Mary Davenport



**Q**uestion:

**I have a question that so far I haven't been able to find an answer to. I quit taking the Pill 10 months ago and at that time started NFP. After three months off the Pill my husband and I started trying to conceive. I have used NFP every month for the last 10 months, but have had no luck conceiving. About 3-4 days before the end of my cycle (which has always been 28-30 days ) I start to have brown mucus or spotting. I then know that I am probably not pregnant, and then on day 28-30 I start my period. I'm not sure what this means, could it be a side effect from taking the pill? I would be thankful for any help you could give me.**



Submit your question to our CANFP Expert at: 1217 Tyler St. Salinas, CA 93906 or e-mail to: [webmaster@canfp.org](mailto:webmaster@canfp.org)



**A**nswer:

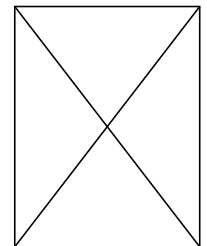
You do not state your age, the duration of time on the pill, the length of your cycles, or the type of NFP you are using.

Various aspects of hormone production can be inferred from NFP charting including peak mucus production, timing and quality of ovulation, and estrogen and progesterone output. End of cycle spotting often occurs from deficient progesterone. A defect in progesterone production can either be gross or subtle. Progesterone deficiencies can cause either infertility or miscarriage.

I would encourage you, first of all, to have a good gynecological exam to make sure that you do not have spotting from cervical inflammation, polyps, or other causes that might require an ultrasound or biopsy to detect. If you do not have this type of problem, the cause is likely to be deficient progesterone.

Some subtle defects in progesterone (termed luteal phase defect) can only be detected if one can deduce the time of ovulation from NFP charting, ultrasound, or LH monitoring, combined with multiple measurements of progesterone in the post-peak or luteal part of the cycle after ovulation has presumably occurred. Diagnosing a luteal defect can be complex, and

many physicians are unaware of how to do it. We even have multiple articles in the ob/gyn literature stating that luteal phase defect does not exist, written by physicians who do not understand how to do it! Luteal phase defects can be treated with progesterone in the luteal phase in the cycle, HCG injections, or at times Clomid. The key is careful diagnosis, and careful monitoring of posttreatment hormones and cycle characteristics.



*Dr. Mary Davenport is an NFP only obstetrician/gynecologist in private practice in El Sobrante, California. She is a board member of CANFP and the American Association of Pro-Life OB/Gyns.*

## PROFESSIONAL OPPORTUNITIES

**Wanted: Family Physician Practicing Obstetrics**

A Catholic Family Physician seeks like minded to join practice in rural northern California (Colusa). Excellent opportunity for physician seeking to join practice which does not refer for abortions or prescribe contraception.

Interested physicians can contact:  
**Dr. Julian Delgado**, or the Office Manager,  
**Merry Seaver** at North Valley Family Physicians.  
(530) 458-8050, or [nvfp@mako.com](mailto:nvfp@mako.com)

**Wanted: Creighton Model NFP Practitioner**

The Diocese of Stockton has approved funding for the education of a Creighton Model NFP Practitioner at the Pope Paul VI Institute this fall. They are seeking a qualified Spanish speaking candidate. Must be a user/acceptor of NFP.

Interested applicants are encouraged to contact  
**Kim Fuentes** at the Respect Life Office,  
(209) 465-5433.

## HERNINGS CELEBRATE 50th ANNIVERSARY!!!

by Terry Maes

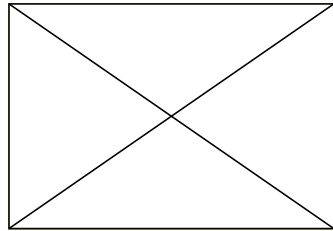
**F**ifty Years of Wedded Bliss!

“a Papal Blessing to mark the occasion.”

ifty Years of Wedded Bliss!

Our love and congratulations go out to Dr. Howard and Dorothy Herning who celebrated fifty years of marriage this past June 17. Dr. Herning serves on the Advisory Board of CANFP. With typical modesty, the Hernings planned a private family

gathering with their three daughters and eight grandchildren. CANFP President, Sheila St. John, however, just couldn't let those who brought NFP to Northern California celebrate such a milestone without the prayers and good wishes of the NFP community.



Dr. & Mrs. Herning with Mother Teresa

Out on the web she went to gather greetings from around the world and how people responded, among them the Drs. Billings, the Hilgers and the Walshes, even the Pope himself. Yes, one of their friends sent away for a Papal Blessing to mark the occasion.

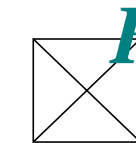
In an era when marriage and fam-

ily are under siege, it is delightfully refreshing to honor a loving committed pair like the Hernings. They are a couple who not only read and reflected upon *Humanae Vitae*, but allowed its prophetic passages to penetrate their hearts. As a Catholic Obstetrician-Gynecologist, Dr. Herning never prescribed contraceptives. As parents, they taught their three daughters to appreciate

the gift of fertility. As a husband and wife, the Hernings are an example to countless other couples of the beauty and joy of living out the teachings of the Church.

Your NFP family thanks you, Dorothy and Howard, for sharing yourselves with us. Here's to another 50 years!

## CANFP WELCOMES NEW BOARD MEMBER



ather Marcos Gonzales is the newest member of the CANFP Executive Board!

Those who attended the March 2000 Conference in Los Angeles will remember Father Gonzalez as a presenter. He and his colleague Fr. Pirrone gave a very encouraging joint presentation on integrating NFP into a parish setting. We were so inspired by his faithfulness, perseverance, and clear vision of NFP, that we asked him to join us in directing the course of CANFP. We were thrilled when he accepted!

Father Gonzalez is Associate Pas-

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tor at St. Andrew's Parish in the Archdiocese of Los Angeles. Father Marcos is a native of Cuba, and our organization has already benefited from his bilingual / bi-cultural perspective, enabling him to present at our conference in both English and Spanish.

We will be featuring his insights on integrating NFP into a parish in our Fall newsletter, in both Spanish and English.

*Welcome Father Gonzalez... and thank you for saying YES!*

## NFP BENEFITS THE CATHOLIC HOSPITAL, TOO!

by Maureen Scagliotti, RN, NFPP



**N**FP Benefits the Catholic Hospital Too!

“NFP brings uniqueness and truth to women's health”

FP Benefits the Catholic Hospital Too!

Yesterday, as I met with one of my client couples I felt NFP had come full circle.

A number of years ago, as a nurse at this particular hospital where I now teach NFP, I received a phone call on the OB floor. A physician from the neighboring Kaiser Family was inquiring about NFP services for one of his patients, and naturally assumed that the Catholic hospital would have such services.

After a long pause and I am sure a quizzical look on my face, I had to tell him no such program existed. He was very surprised, and after some conversation, he piqued my interest. To make a long story short, I researched this NFP and found myself on a journey to provide this in my community. I was impressed by its research, its many service delivery programs, its versatility, and of course its application to women's health.

The Catholic Hospital's mandate is not to provide contraceptive services, sterilizations, and abortions, and of late, artificial reproductive technologies, based upon its very mission and the Ethical and Religious Directives for Catholic Health Care Services set forth by the National Conference of Catholic Bishops. Should that

however, absolve an institution from providing services around the issues of fertility, sexuality, and family planning? Of course not!

The ERD very emphatically states in the affirmative that natural family planning should be provided. Directive 52: "Catholic health institutions may not promote or condone contraceptive practices but should provide, for married couples and the medical staff who counsel them, instructions both about the Church's teaching on responsible parenthood and in methods of natural family planning". A number of our Catholic hospitals in some fashion have established such services. Some include this under the auspices of their OB-GYN programs, or in their Health Education Departments. Certainly this is validating the ERD.

Some of those who have developed programs have been visionaries, and have extended the NFP Program to include Mother-Daughter/Father-Son, Adolescent Sexuality Programs. Rose Fuller from Northwest Family Services of Providence Hospital in Oregon comes to mind. The hospital benefits from the validation of its mission, and the couples and families benefit from the health education. Also NFP can be a first introduction for a newly married couple seeking

healthcare services for their new family. They begin to build a relationship with the hospital for all their healthcare needs.

Artificial reproductive technologies are the latest challenges to the culture of life. However, the Catholic hospital is in a perfect position to develop programs to assist couples who suffer from infertility. Naprotechnology, the new reproductive science, relies on the various facilities of the lab, ultrasound, pharmacy, and surgery for treatment for GYN, including infertility, abnormalities. This can be very cost effective for the institution. It can also be powerful public relations for the Catholic hospital, answering current legislative challenges that the Catholic hospital is too limited in reproductive health offerings.

NFP brings uniqueness and truth to women's health. My experience and those of many NFP teachers is that couples of all faiths are grateful to the Catholic hospital for providing NFP Programs.

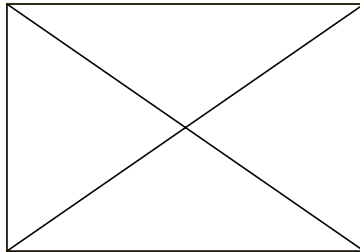
Getting back to my clients, they had first learned NFP because health problems prevented use of contraceptives. Then, following a miscarriage, Progesterone therapy supported a new pregnancy. This pregnancy resulted in a very healthy baby. That is what my clients wanted to share with me: their joy in the new life and their deep appreciation for having NFP services at St. Rose Hospital.

*Maureen Scagliotti is a founding member of the CANFP Executive Board. She has been invited to present at the national meeting of Respect Life Directors to be held in Washington DC this month, August 10th -13th. This annual gathering is sponsored by the Secretariat for Pro-Life Activities, a program of the National Conference of E.6(ual) Bishops. Maureen will be presenting on the emotional and spiritual challenges of Infertility, and the role of Naprotechnology in the treatment of infertility.*

8th ANNUAL CANFP CONFERENCE

SAN FRANCISCO

MARCH 24th 2001



Reserve the date NOW on your calendar. Call our toll-free number for up-to-date information. 1-877-33 CANFP

Infertility Services: Catholic Health Care - art'd

“Catholic hospitals can help create healthy families”

stretician-gynecologist who has likely not been trained in self-monitored fertility awareness, as is common to all methods of NFP, and does not know how effective timed intercourse can be in helping subfertile couples achieve pregnancy, especially at the time of maximum fertility. Her physician may not have been taught anything about the normal physiology of cervical secretions and their effect on fertility, and may possess only rudimentary knowledge of the physiology and endocrinology of the normal and abnormal menstrual cycle, as they relate to self-monitoring for fertility. Because conventional medical education has ignored major scientific developments in fertility awareness, mainstream and secular medical institutions and their patients have traditionally not been exposed to important information and techniques to facilitate pregnancy. The couple is likely to be referred in short order to an ART (Assisted Reproductive Technology) program in which the destruction of life through discarding embryos, cryopreservation, or “fetal reduc-

tion” are part of the fertility “therapy.” In contrast, the science of NFP is in no way destructive. It departed from mainstream reproductive science several decades ago, and has undergone a major transformation since the calendar rhythm method of Ogino and Knaus of the 1930’s and research on cycle temperature shifts by Vollman of the 1950’s. In Humanae Vitae in 1968, Pope Paul VI challenged men of science to develop the medical science of self-monitoring of fertility so that new knowledge could be used for the greater good of mankind in conjunction with Church teachings. By the 1990’s the research of physicians such as Evelyn and John Billings, Thomas Hilgers, and Eric Odeblad had resulted in many new insights on women’s reproductive function. It is now apparent that not only can these discoveries be used for the prevention of pregnancy, but also that they have wide application to help couples who are having difficulty conceiving. We live in an age when medical

advancements and technology supercede themselves almost on a daily basis. However, self-monitoring of fertility, especially in combination with medical and surgical therapies that heal the anatomy and hormonal milieu of reproduction to conform to God’s design, are extremely effective. It is those methods that actually conform to the teachings of the Church that are the best not only for women but the family on a whole. It is time for Catholic hospitals (which comprise over 20% of our nation’s total medical facilities) to stop cowering from the teachings of the Church. Gaudiam et Spes states that “no true contradiction exists between the divine laws for transmitting life and those for fostering true conjugal love.” By developing excellent infertility and reproductive health care services, Catholic hospitals can help create healthy families and compete with mainstream fertility programs that destroy life. Reprinted with permission of Human Life International (540) 635-7884

REGIONAL NEWS



SAN FRANCISCO

Two CANFP members are among 36 residents of the San Francisco region to be named recipients of the Pro Ecclesia et Pontifice medal. Dr. Evelyn Thayer Eaton and G. Gloria Gillogley, both founding members of CANFP, received the papal honor conferred by Pope John Paul II for “their well known and dedicated service to their brothers and sisters” stated Archbishop Levada.

The medals will be presented on Sept. 17th, at St. Mary’s Cathedral. Congratulations to Evelyn and Gloria! The honor is well deserved!

Congrats!!!

FRESNO

A Life-Giving Love Workshop will be held October 6-7 in English (and November 4-5 in Spanish) at St. Joachim’s Parish in Madera.

Life Giving Love is a Catholic Workshop on Sexuality and Natural and Responsible Parenthood presented by Catholic couples and a priest.

Excellent for enaged couples, newlyweds, and oldyweds! Cost is \$20 per couple, and pre-registration is required. For more information call Fr. Larry Toschi at 559-673-3290.

VARIOUS REGIONS

The Women’s Resource Network of California is seeking funding to sponsor professionally produced prolife commercials. These commercials have already aired over 2600 times in the San Diego Region, on all the major networks, and cable. Their goal is to expand the effort to the regions of San Francisco, Los Angeles, and Sacramento, thereby impacting 86% of their primary target audience for the entire state! If you are interested in supporting these efforts, contact the Network at 760-740-4010 or e-mail them at: info@WRNetwork.org They are on the web at www.WomensResourceNetwork.org

PHYSICIANS HEALED



Physicians Healed is the personal, inspiring, and compelling story of fifteen courageous physicians who do not prescribe contraception.

Published by One More Soul, this book can be ordered directly from CANFP.

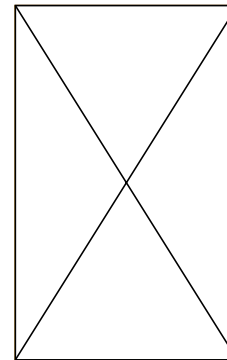
Single copies are \$12.60 (\$11.52 for CANFP members)

To those who receive this newsletter, we are offering special prices for bulk orders:

5 copies of Physicians Healed for \$52.56 (\$47.74 for CANFP members)

10 copies of Physicians Healed for \$92.30 (\$83.72 for CANFP members)

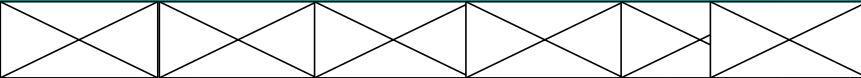
CANFP has many educational resources available. For a list of our complete book, and audiotape collection visit our web site at: www.canfp.org or call us at: 1-877-33 CANFP

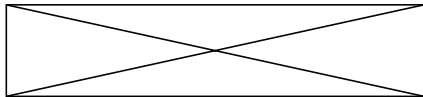


Cardinal O’Connor had this to say about Physicians Healed:

“It is indeed inspiring to read of the spiritual journeys of these faithful physicians, and especially of their honesty and perseverance. I pray that all health workers—and all God’s people—might imitate these brave doctors in their commitment to the Gospel of Life.”

Consider ordering one as a gift to inspire your personal physician or pastor!

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| <p><b>CANFP NEWS</b></p> <p>is published quarterly:</p> <p><b>February 1</b><br/><b>May 1</b><br/><b>August 1</b><br/><b>November 1</b></p> <p>Submissions are welcomed and must be received three weeks prior to publication.</p> <p>Please send all articles to<br/><b>CANFP:</b><br/>1217 Tyler Street,<br/>Salinas, CA 93906<br/>or<br/>E-mail to<br/>info@canfp.org<br/>webmaster@canfp.org</p> | <p><b>CANFP 8th Annual Conference</b></p> <p><i>March 24, 2001</i></p> <p><i>San Francisco</i></p> <div style="border: 1px solid black; width: 100%; height: 100%; position: relative; margin: 20px 0;"> <div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); text-align: center;"> <p><b>Celebrate national<br/>NFP week with the<br/>California NFP<br/>community.</b></p> <p><b>Hold the date!<br/>Put in your budget!</b></p> </div> </div> | <p><b>CANFP NEWS</b></p> <p>is edited and published by<br/>the California Association<br/>of Natural Family Planning.</p> <p>Produced by:<br/>Heavenly Designs</p> <p><b>To receive future editions<br/>of this newsletter,<br/>become a CANFP<br/>member!</b></p> <p>Annual dues are<br/>\$30 for individual/family,<br/>\$50 for professionals and<br/>\$100 for organizations</p> <p>Make check payable to<br/>CANFP, and send to<br/>1217 Tyler Street,<br/>Salinas, CA 93906</p> |



# CANFP NEWS

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