

C5.17 - NATURAL FAMILY PLANNING

Policy

The purpose of this policy is to outline the use of Natural family planning (NFP) which is a means of either achieving or avoiding a pregnancy based on a couple's knowledge of their cycle of fertility and infertility. It is an educational means of FP, as opposed to the use of a device, barrier or hormonal method, such as the pill, IUD, etc.

There are several methods of NFP currently being taught and promoted. The first of these is called the <u>Sympto-thermal Method (ST)</u>. This combines the observation of three different ovulation-related events: the production of mucus by the cervix (the mucus symptom), a change in the consistency of the cervix itself (which can be noted by placing the fingers inside the vagina to feel the cervix directly), and a change in basal body temperature. Couples who use the ST Method often feel greater security with its triple-check technique.

The second of these NFP methods is the <u>Ovulation Method (OM)</u>. This method depends only upon the client's observation and interpretation of the mucus symptom to determine that ovulation is approaching, and that it has passed. Couples who choose this method like its simplicity.

Another variation is the use of <u>cycle beads</u>. Cycle beads are color-coded beads that represent the days of a client's cycle. A rubber ring is placed on the red bead on the first day of a menses. The rubber ring is then moved daily in the direction of the arrow. When the ring is on a red bead or a dark bead, there is little chance of conception occurring if intercourse occurs. When the ring is on a white bead, there is a high chance of conception occurring if unprotected intercourse occurs. Cycle beads work best in women with 26-32 day cycles.

Procedure

Mode of Action

NFP uses one or more methods to identify the beginning and end of the fertile time in a menstrual cycle. In most cycles, ovulation occurs near the middle of the cycle and lasts about 6 days. Ovulation is expected to fall between cycle day 8-19 in cycles ranging from 26 and 32 days long (about 78% of cycles).

Effectiveness

The effectiveness of either method is measured in three different categories:

To Avoid Pregnancy

Typical/actual use effectiveness of this method is between 76-88%.

To Achieve Pregnancy (normal fertility)

If a couple of normal fertility utilizes days of fertility (as determined by NFP) their chances of achieving pregnancy in the very first cycle are quite high: 75-80%.



To Achieve Pregnancy (previously infertile)

Some couples, who have previously been considered infertile, are able to achieve a pregnancy by learning and using NFP. Many couples trying to achieve pregnancy without success, can be referred to a NFP center, and thus may avoid expensive infertility testing.

Advantages

- It is safe. There are no medical side effects associated with its use.
- It is natural. The use of NFP does not interfere with the body's natural reproductive processes, nor does it interfere with any of its other normal metabolic processes.
- It can be used in all stages of reproductive life: regular cycles, long cycles, following childbirth (breastfeeding or not breastfeeding), during perimenopause or discontinuing another form of birth control. It is also gaining popularity as an initial approach to infertility.
- NFP methods are basically easy to learn and use.
- NFP is morally acceptable to all major world religions.
- NFP is the responsibility of both partners; NFP is a shared method of FP.

Disadvantages

There are two disadvantages frequently mentioned regarding NFP. The first of these is the fact that, if these methods are to be used to avoid pregnancy, they require the avoidance of all genital contact (abstinence, continence) for a variable number of days each cycle. As a means of preventing pregnancy, it is less effective than other methods with actual use effectiveness betweens 76-88%. The second disadvantage often discussed is that NFP methods take a lot of time and energy in order to be learned and used properly. If an individual's menstrual cycle is irregular, then NFP is very difficult and will have reduced effectiveness. In that case, an additional method may be recommended.

Factors Which Influence the Effectiveness of NFP

Mutual motivation by both partners has long been recognized as a very important factor in the success of NFP. However, it is now also recognized that the NFP teacher is nearly as important, and in some cases even more important, than the initial motivation of the couple being taught. There is no doubt that the teachers who themselves use NFP, produce the best success statistics in their clients.

A couple of words of caution are in order: Self-taught NFP (e.g., from a book, from a well-meaning friend) has a notably higher unplanned pregnancy rate than that learned from qualified teachers.

Older Methods of NFP

Rhythm

This was the earliest of the natural methods of FP. Its use is based on anticipating when ovulation is likely to occur in the present menstrual cycle, calculated from the longest and shortest lengths in the previous 6-12 cycles. It is no longer recommended.



Basal Body Temperature

There is usually .4 to .5 degree body temperature rise following ovulation, which is then maintained until the onset of the next menstrual period. This is a very effective method of determining post-ovulatory infertility. Although satisfactory to some couples, many feel the basal body thermometer used alone to avoid pregnancy is too restrictive. In general, using it alone is no longer recommended.

Plan

- Provide back-up method of contraception as indicated.
- Discuss EC and folic acid supplements.
- Return for age appropriate periodic assessment

Client Education

Clients Must Receive:

- I. Information about all types of contraceptive options if they are new or undecided.
- 2. Information about NFP methods including mechanism of action, efficacy, benefits/risks, advantages/disadvantages, etc.
 - a. NFP or Fertility Awareness may incorporate one or more of these methods to help predict when ovulation might occur.
 - b. To Prevent Pregnancy, use a barrier method or avoid sexual intercourse when ovulation or fertile times are identified
 - c. Clients should be counseled about the advantages, disadvantages of NFP (as described above).
 - d. Instruct client about health promotion and disease prevention (especially STI/HIV).
 - e. Advise client that NFP methods do NOT provide STI/HIV protection.
 - f. Correct and consistent use of condoms is recommended for STI/HIV protection.
 - g. Refer client for additional information if requested. A list of training or education resources should be provided.

Fertility Return

There's no disruption to fertility. Given lower efficacy of the NFP pregnancy prevention, please recommend users also take a prenatal vitamin or folic acid supplement.

Date Revised	September 2023
References	Providing Quality Family Planning Services
	Recommendations of CDC and the U.S. Office of
	Population Affairs (QFP) [2014]
	(https://www.hhs.gov/opa/guidelines/clinical-guideli
	nes/quality-family-planning/index.html)
Additional Resources	Summary Chart of U.S. Medical Eligibility Criteria
	for Contraceptive Use, 2020



(https://www.cdc.gov/reproductivehealth/contrace
ption/pdf/summary-chart-us-medical-eligibility-crit

eria_508tagged.pdf)