

Effective contraception by breastfeeding without artificial hormones (mini-pill)

During breastfeeding, the frequency and the intensity of nursing (the suckling of the baby!) will inhibit ovulation and therefore maintain the infertile state of the mother.

The main information in this leaflet are about these two points. It is essential for you to be available for the baby, reassured by a lactation counsellor and happy about this wonderful experience.

During your breastfeeding contraceptive effectiveness is vital. After giving birth, take care of yourself as best as you can in order to recover all of your capacities before planning another pregnancy.

The breastfeeding principles for natural contraception are simple but strict. By complying with them, you can avoid hormonal contraception altogether and will therefore not transmit these artificial molecules to your baby through your milk.

How to start breastfeeding with sympto

After childbirth, you will use the Breastfeeding mode. But before switching this mode on, you scroll back on the calendar to the day of birth of your baby and on this day you introduce the 3 red drops . At this very day sympto starts a new cycle. The birthday of your baby is indeed the beginning of the breastfeeding cycle. From a biological point of view, this cycle will extend your (rose) prevulatory phase. During breastfeeding, your ovulation is postponed by the high prolactine hormone level which is produced during pregnancy and maintained by the baby's suckling. This very special cycle can easily be much longer than the yellow (progesterone hormone) phase of the pregnancy cycle (which lasts the nine months, according to the biological growth of the embryo). The length of your breastfeeding cycle is largely determined by your breastfeeding!

The day after the delivery or later, you switch on

the Breastfeeding mode. Breastfeeding 1 means: you fully respect the LLL rules (La Leche Ligue) by breastfeeding on demand of the baby without any supplements; breastfeeding 2 means: a), either you still continue exclusive breastfeeding but you have passed the day 84 or b) your child has begun to eating other foods. To remain relaxed during this privileged time, don't hesitate to contact a breastfeeding specialist you can find in our directory on www.symptotherm.ch. After entering the 3 drops . you will switch on the breastfeeding mode and you note the lochia (the bleeding days after the delivery) by more red drops, accordingly. This completes you gynaecological picture.

Every breastfeeding cycle will one day result in ovulate and transition into the ordinary postovulatory phase (yellow on sympto). There is a crucial question to be settled first: Will you ovulate before the first - true menstruation or after the first important bleedings (untrue menstruation or intermediary bleeding)?

This is not an academic question at all! If you want to find out the precise nature of your bleedings, you could indeed chart your temperature as soon as elixir appears and modifies into higher quality during breastfeeding 2 phase. You could then certify thanks to the temperature rise, granted you ovulated before the first big bleeding, that this very bleeding would be in fact a true bleeding. If it is not a true menstruation, it means at least that the end of your breastfeeding cycle is most probably imminent.

Does this uncertainty about true and intermediary bleeding justify the hassle about uncertain temperature takings? Fortunately not! For your contraceptive effectiveness, as we will see, temperature taking is not necessary at all. Last but not least, your comfort is at stake: on sympto the breastfeeding mode works without any temperature input in order to make your job easier!

The sympto principle

You can choose between

Breastfeeding 1 and Breastfeeding 2 right from the start of your breastfeeding. This is so because during your first 84 days of breastfeeding you may choose at any time between these two modes. But as soon as you have passed the 84 days, sympto will automatically activate the breastfeeding 2 even if you continue breastfeeding exclusively on demand of the baby to play it safe.

Breastfeeding 1



If you breastfeed exclusively, this phase lasts at least 84 days, thus 12 weeks (= 3 months). "Exclusively" means that you respect the following rules:

- 1) Baby's nourishment comes totally and exclusively from sufficient suckling by the baby at the breast.
- Feedings are distributed evenly throughout the

- 24-hour day, with at least 5 to 6 feedings, no food supplements or water are added. No pacifiers (lollypop, etc.).
- 3) If you were to add up the total nursing time, there should be a minimum of about one and half hours of total nursing each day.
- The baby's longest interval between two feedings must be no more than 6 – 7 hours, night and day. Thus, there will be one feeding during the night on the baby's demand or if you offer him your breast.

For instance, as soon as the baby lets you sleep the whole night (more than 6 - 7 hours), which is certainly a good thing for you, you must, for contraceptive effectiveness reasons, switch sympto on Breastfeeding 2 even if you feed your baby exclusively with your milk (on demand of the baby) and even if you are before the day 84. Exclusive breastfeeding, which does not stick to the 4 rules, does not provide you with a total contraceptive effectiveness even before day 84.

First of all, do continue exclusive breastfeeding as long as you can beyond day 84; it is good for your wellness and for the health of your baby. After 84 days, sympto shifts automatically into the Breastfeeding 2 even if you stick to the 4 breast feeding rules above. Why?

According to the Lactation Amenorrhea Method (LAM), as long as amenorrhea continues (phase without bleeding) and as long as the baby can have milk of his mother on demand and nothing else, infertility and thus avoiding pregnancy is guaranteed for another 3 months (total: 6 months). Compared to this LAM standard, our symptothermal principles are far stricter. After 3 months. you must be ready to observe your fertility signs (even if they might be absent for still a long time) such as elixir occurrence and also occasional bleedings - but not temperatures.

What does this restriction change for you? Nothing, except that you must increase your vigilance and that you should enter all the relevant fertility signs explained hereafter.

Bottom and top 6 rule charting complete breastfeeding

Even if the Breastfeeding 1 period lasts 3 months, we encourage you to enter all the fertility observations into sympto: vaginal discharge or bleedings and remarks about your baby. These comments however will not stop your (rose) infertility since the sympto engine does not respond to any fertility sign in the Breastfeeding 1 phase and continues to display rose infertile permanently.

So what is the use of sympto during this time interval? Apart from tracking your personal profile, you will use sympto as your note pad for vital information concerning your breastfeeding habits. During the whole Breastfeeding 1 phase and even beyond, if you continue exclusive breastfeeding, you should note frequency and the intensity of suckling, the latter by indicating the longest interval. This means, you just fix the two key figures that you introduce into the Remarks: 1) Suckling

frequency, for ex. "6 F", meaning six feedings. 6 F is the minimum. This figure can be higher. 2) The longest interval per 24 hours, for ex. "6 H", meaning a maximum of 6 hours, not more. This H number can be smaller. Example: 7 S/5H is fine, but 5 S and 7 H interval should remain exceptional during complete breastfeeding. By leaving these bottom and the top 6 as a reminder you will not have to measure the total time of all your babies feedings separately! You may do this for fun one or two days. With these two figures, which will not affect the sympto fertility indication, you will have a clear view of your contraceptive effectiveness and you can feel safe about it. These figures are also an important document for your MD or your lactation/symptothermal counsellor.

You can even simplify these notations by leaving just the interval time number, for ex. 5, and E, meaning exclusively (5/E).

Exceptionally you may have a continuous bleeding after the first 8 weeks (there would still be another 28 days of "complete" breastfeeding left). In this very particular case, prudence tells you to switch sympto into the Breastfeeding 2 and you should increase observational vigilance.

Breastfeeding 2



After 84 days of exclusive breastfeeding, sympto automatically shifts into Breastfeeding 2. It means this: as soon as you observe elixir discharge, you introduce a relevant fertility sign (creamy, sticky, streaked), (transparent, very stretchy, slippery) or [10] (feeling moist without discharge), sympto will launch a blue fertile phase from that day onwards even if you continue with exclusive breastfeeding and with the tracking of the bottom and top 6 figures. These annotations are the prerequisites in your breastfeeding program.

There is a new fertility type during incomplete breastfeeding: 6 or 6, the occasional weak bleedings. They also open your fertility window. Why? They are considered as a possible fertility sign as the bleeding could be intermenstrual (untrue menstruation) and in this case hide an ovulation! The sign distands for the supposedly strong bleeding of the true menstruation. You might also use it according to your perception: all theses icons do launch a new fertile phase but never a new cycle.

What about continuous discharge?

Never use the sign (yellowish mucus)! This sign always refers to a postovulatory stage and is normally not appropriate. For safety reasons however, if this sign is triggered, sympto will put you into a fertile phase and you will have to discuss your case with a specialist. Otherwise you stay on blue, possibly fertile, for the rest of your breastfeeding which is not really what is aimed by sympto!

Important: During breastfeeding, about 7 % of all mothers feel continuous moistness or observe

permanent vaginal discharge over several weeks, even with some yellowish colour, so that they might be tempted to put the yellow cloud . These occurrences are no signs of fertility but reveal a typical infertile post partum pattern. They must be clearly distinguished from life elixir and have to be noted separately in the *Remarks* since there are no fertility icons for them.

To verify, do the water glass test. Life elixir remains compact and tends to flow to the bottom of the glass, whereas vaginal discharge will dissolve in the water more or less equally.

As soon as you do not want to respect the bottom and top 6 rule any more before day 84 because you discontinue breastfeeding after some weeks or you supplement with bottle feedings, switch on *Breastfeeding 2* and *sympto* will respond to all of your fertility signs.

Peak day rule during breastfeeding

The icons are fully explained in the user manual and on *sympto's* observation desk when you pass over the icon with the cursor.

Again, once you have entered one of the fertility signs explained above, *sympto* opens your fertility window. The big question is: when will you be infertile again? *sympto* applies a modified Peak day rule. After Peak day, **from the evening of the 4th day onwards** as long as there is no elixir symptom or any bleeding, your infertility is re-established again. You will however only use the combinations 3) and 4) below, because 1) and 2) contain postovulatory mucus. 1) and 2) can, however, eventually be appropriated before the coming back of the heavy bleeding (which would then be a true menstruation).

- 1) from to 9 yellowish mucus, rare 2) from to 9
- 3) from to felt nothing, seen nothing
- 4) from to —

During the long pre-ovulatory rose phase of breastfeeding, there might be some days of bleeding. Since they are considered as fertility signs, there is a new type of Peak day:

5) You observe some erratic bleedings and you choose among the icons of or of according to the quantity. Most probably it will be one or two drops. As soon as this bleeding is over, you have to confirm its absence by the —, otherwise the blue fertile phase you triggered will continue to be displayed. By this bar, a Peak day is generated and you will pass again back into the rose pre-ovulatory phase 4 days later, in the evening, granted that there is no new elixir discharge introduced.

Conclusion: During the time of *Breastfeeding 2*, the Peak days, except eventually the very last one, will not indicate the passing by of an ovulation; they only show the trials of the ovaries to generate an ovulation. The elixir is produced in the cervical crypts as soon as some follicles

start growing. But during breastfeeding, the follicle will not release the ovum and the follicle will shrink before it is completely ripe. This explains why there are different potentially fertile days along the *Breastfeeding 2* which must be closed by a Peak day.

How to handle <a>■ ?

Notice that you will trigger a new fertile phase by entering (moist feeling, without visible elixir). But by confirming some days later the absence of moistness by the icon (seen nothing), you will not generate a Peak day at all! In such a case, if you can confirm the verthe 3 following days, you have to adjust your charting by removing this icon, which is on lower line, but the which is on the upper line, remains. Then you leave a comment in the *Remarks* on that day. By doing this, you will re-establish the rose infertile phase retrospectively and you will not risk any pregnancy either! The repetitions of ver more than three days, if it is not followed by a or , is definitely not a sign of fertility but, like continuous discharge, reveals a typical post-partum pattern.

Peak days which are difficult to identify

Whenever Peak day is difficult to spot, your cervix self exam can be a very useful technique to reach out for the elixir occurrence close to the cervix. This will help you identify one of the 4 possibilities (above).

The cervix exam in itself, whenever you cannot extract any elixir at all, will not generate a Peak day by the — (seeing nothing) even if you observe (high cervix) or (lubricated feeling) the day before. Why? In this mode, these combinations are not explicit enough to identify a Peak day. The goal of the cervix exam is to extract elixir, nothing else.

Return of strong menstruation

Was the menstruation preceded by an ovulation? And is it therefore a true menstruation? Or is it just an intermediary bleeding? For your contraceptive security, fortunately, these questions are irrelevant. Nonetheless, these are important questions because a true menstruation means that your cycle is fully back. As soon as you have a consistent bleeding over some days, looking like your former menstruation pattern, preceded by several days of elixir, you have to resume temperature takings. But do remain in the *Breastfeeding 2* mode. At the same time, you keep an eye on your elixir occurrence. Then, probably after some 12 – 20 days, if your ovulation is back and as soon as *sympto* has registered the typical temperature rise, *sympto* will display the following warning message in red:

By introducing your temperatures, a (green) cover

line and a first higher the temperature (full or empty star) have been detected. Therefore, you must stop the Breastfeeding program RIGHT NOW. This will bring you back into the Symptothermal Pilot Mode (with error messages) which will operate the cross check.

Just follow this instruction, switch off the *Breastfeeding* mode and continue (or start) the regular symptothermal observations. Sooner or later, you will pass into the postovulatory yellow infertile phase once your Peak day and the 3 valid higher temperatures have been identified. This transition period is certainly one of the most exciting moments in your breastfeeding cycle.

Enjoy your breastfeeding