natural

CONCEPTION PLAN

for women with PCOS and unexplained fertility issues

WEEK 1 FOODS



WEEK 2 FOODS

Alaskan salmon beans sardines NO soy

watercress sunflower butter chia seeds

WEEK I SUPPLEMENTS

- Pregnancy Prep by Vitanica take 2 capsules daily before meals morning & night days 5-14
- L-arginine- 1500mg days 5-12
- High Quality Fish Oil 3000mg
- Amino-Acid capsules before bed
- Gymnema 500mg with meals
- DIM 50-100mg with each meal
- Ubiquinol 200mg (300mg >35yo)
- Royal Jelly 1000mg 3x daily
- Digestive enzymes with meals

ALL NON-GMO, ORGANIC fermented soy edamame juiced vegetables miso ground flax

WEEK 2 SUPPLEMENTS

- Pregnancy Prep by Vitanica take 2 capsules daily before meals morning & night days 5-14
- High Quality Fish Oil 3000mg
- Evening Primrose Oil
- Gymnema 500mg with meals
- DIM 50-100mg with each meal
- Ubiquinol 200mg (300mg >35yo)
- Digestive enzymes with meals
- Continue fish oil, EPO, and royal jelly at least until ovulation

ORGANIC FOODS TO EAT IN ABUNDANCE ANYTIME

DULSE SEAWEED
COCONUT OIL
SPIRULINA
HEMP SEEDS
BERRIES
SOME RAW DAIRY

PASTURED EGGS
ORGANIC GREENS
CHIA SEEDS
FRESH GROUND FLAX
AVOCADO
VITAMIN D FOODS

SARDINES
NUTRITIONAL YEAST
FRESH SPROUTS
PASTURED LIVER
FERMENTED VEGGIES
PASTURED COLLAGEN

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POST-OVULATION FOODS (WK 3)



LATE LUTEAL PHASE FOODS (WK 4)

juiced vegetables NO soy & no dairy 5-6 Brazil nuts daily lots and lots of greens

P-O SUPPLEMENTS

- Vitex 900-1200mg taken in morning on empty stomach
- Maitake mushroom extract
- 1 tsp Elderberry syrup (max)
- Pineapple core (1/3 daily)
- 15mg zinc and 300mg selenium
- 100mg B6 in morning
- Gymnema 500mg with meals
- DIM 50-100mg with each meal
- Ubiquinol 200mg (300mg >35yo)
- Digestive enzymes with meals

lots of greens & NO soy maple syrup 1/8c/day max menuca honey 1tsp daily organic molasses

LP SUPPLEMENTS

- Vitex 900-1200mg taken in morning on empty stomach (continue to week 12 of pregnancy if achieved)
- Korean Ginseng (do not take if on blood thinners) 100mg 2x daily
- 100mg B6 in the morning
- Ubiquinol 200mg (300mg >35yo)
- Digestive enzymes with meals
- Discuss progesterone w/ midwife

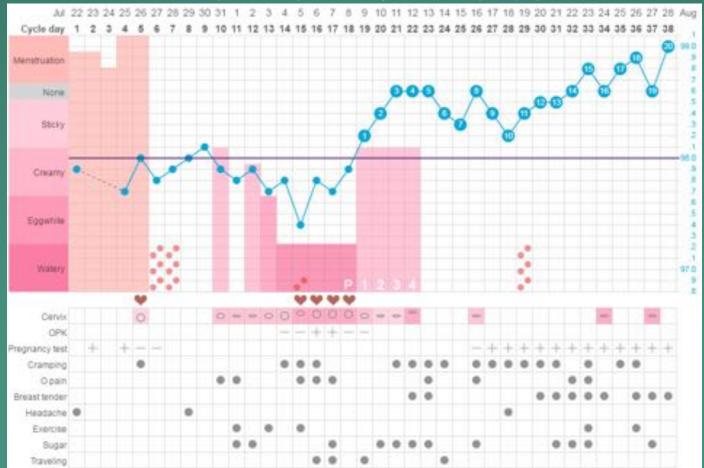
WHAT TO ALWAYS AVOID

LOW FAT DIET
SEDENTARY LIFE
SWEETENERS
TRANS FATS
PROCESSED FOOD

SOY, EXCEPT IN WK 2
NON-ORGANIC
COSMETIC/ PERFUME
HOT FOOD IN PLASTIC
CAFFEINE

POLYESTER
REFINED GRAINS
GLUTEN
PARABENS
CHEMICAL CLEANERS

BASAL CHART BASICS

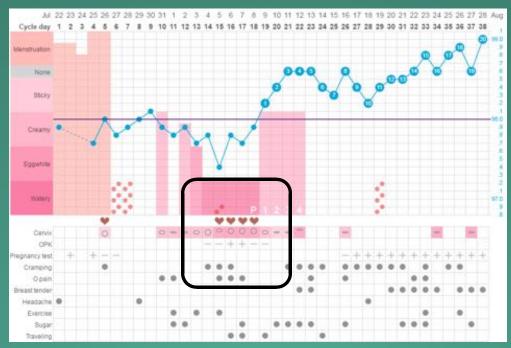


- Use a smart phone app, such as Kindara (shown here) to track data
- Use a consistent digital thermometer placed in the vaginal canal
- Take temp at same time every morning, first thing upon waking, from the time bleeding has stopped until you have observed a temp rise lasting > 3 days (indicating ovulation).
- If you wake at a different time from your normal wake up time, adjust temp by +/- .2 degree/hr, subtract if waking early or add if waking late. Adjustment calculators are available online.
- Be sure to also track cervical position and fluid for a complete picture.

WHAT YOU MIGHT DISCOVER

PREGNANCY- look for temps that are over the coverline for >18 days LUTEAL PHASE DEFICIENCY- a luteal phase (post-ovulation) <than 11 days CYCLE IRREGULARITY- A common symptom of PCOS LOW TEMPERATURE often from diet issues, thyroid, or magnesium deficiency IMPROVED INTERCOURSE TIMING in the case of early/late ovulation ANOVULATION- demonstrated by lack of thermal shift mid-cycle NORMAL TEMP DIP just prior to LH surge or just after implantation

TIMING INTERCOURSE



- Cervical Mucous should be egg white or watery without white cloudiness (which can result from poor diet, infection, yeast).
- Use ovulation predictor tests (Dollar Store or Answer brand is fine)
 daily starting roughly 5-8 days before your anticipation ovulation,
 especially if your cycle length is inconsistent initially. Withhold fluid
 intake for 4 hours prior to testing and test between 10am-2pm daily. IF
 you see a test that is nearly positive, you may opt to test twice daily to
 ensure that you see your surge. The test line must be AS DARK OR
 DARKER than the control line. When it is getting darker begin using
 bioidentical lubricant vaginally to help keep good pH in the vagina.
- Make love to your partner at least the day/night of the surge, but ideally beginning the day the OPK looks nearly positive and every 24-48 hours after that until you see a temperature rise.
- Sperm should ideally be inside the body for 9-12 hours prior to actual ovulation which will typically occur 24-36 hours following the beginning of the LH surge and 9 hours on average from the peak of that surge.

IF YOU ARE DOING IUI

If you are performing Intrauterine Insemination, do so ideally the afternoon/evening of the surge or the following morning, otherwise if using an hCG trigger, then do the following morning after the trigger.

AFTER YOU CONCEIVE

- Select a whole food prenatal vitamins with folate and REAL FOOD
- Discontinue taking DIM once you get a positive pregnancy test
- Continue taking VITEX only through the 12th week of pregnancy to support normal progesterone production, unless you are taking progesterone suppositories.
- You might consider delaying intercouse for a couple of weeks if you suspect implantation has occurred.
- Consider a midwife attended delivery either at home or in a birth center
- Eat thyroid supportive foods
- Stay off sugar and other sweeteners other than non-GMO, organic erythritol, xylitol, and stevia, and avoid high sugar fruits
- Remember to get lots of protein and pastured eggs are your friend!
- Keep seeing a chiropractor skilled in Webster and pregnancy to help with optimal fetal positioning for a gentle birth.
- Remember that giving birth is already programmed into every cell of your body and every woman will do it her own unique way.



OTHER CONSIDERATIONS

Chiropractic and Acupuncture

Overall success is higher when these arts are incorporated into your weekly routine. Expect significant improvement in endocrine function!

Recurrent Miscarriage

Recurrent miscarriage is common with PCOS, and some women will also have a gene mutation such as Factor V Leiden or MTHFR that will benefit from daily baby aspirin therapy to help prevent excessive clotting in placental development. If you have recurrent miscarriage, ask you provider to test you while not pregnant. MTHFR can also affect how your baby breastfeeds and baby may benefit from li and tongue tie revision.

Getting enough sunlight?

Most people are deficient in vitamins D3 and K2. Depending on your climate, you may or may not need heavy supplementation. Have your levels tested is possible.] and always take these two vitamins together.

Period Not Coming?

This can be easy to fix, for those who are not menopausal or suffering from premature ovarian failure. Progesterone loading is discussed here: http://natural-fertility-info.com/progesterone-fertility-guide#cream

What can the MAN do to support healthy conception?

An important question! See: http://natural-fertility-info.com/mens-fertility

No information contained in this document is intended for medical advice. This plan is intended to be used for a full 3-6 months, with proper intercourse timing. DO NOT use herbs while breastfeeding, on Clomid or other ovulation medicine. Please consult a natural fertility specialist or make an appointment with me if you are not confident in your research of the topics above. Still have questions? Book a phone consultation (\$75/hr). 617-475-5191