

In The Midwife's Office #1 - Pre-conception Planning After Two Miscarriages

Actually is a podcast about re-imagining the way we approach the entirety of the birthing year Margo's goal is to combine her radical imagination with her knack, for strategizing to bolster the birth revolution and a larger global revolution of feminine consciousness. Actually is a production of the Indie Birth association and Indie Birth dot org.

No material on this podcast should be considered medical advice. Birth is not a medical event now here's your host, midwife and teacher Margo Blackstone. Hello out there, listeners Margo here, and I wanted to. Record a little introduction before we get into the meat of this podcast episode trying something new.

It's an experiment where I am doing virtual midwifery sessions with women for free in exchange for them letting me record them and turn them into these episodes. So it's getting a behind the scenes peak at what a midwifery session is like with me. These could be preconception, they could be prenatal, they could be postpartum.

I'm leaving it open ended in terms of the content and the topics that I'm going to be including here. I have a bunch of these lined up and I'm really excited about this for a couple reasons. One is that I just really enjoy. connecting with women and doing midwifery work. I think it's really amazing that I can connect with someone anywhere in the world that has a wifi connection to do this and have found over the course of the last bunch of years of doing virtual visits, that they can be just as powerful if not, sometimes more powerful than in person sessions.

Yeah, it's been a lot of fun to do these and it's exciting to be doing more of them especially for this project, because the other reason I'm really excited to do this is to give a glimpse into what it's like to work with a midwife, especially a midwife like us here at Indie Birth.

And I'm excited for women to hear these sessions and hear what it's like to get more holistic well-rounded. Care that honors both the sacred and the scientific that comes from the wise woman model of care. And and to get to experience that. And then likewise, I'm really excited to share these behind the scenes experiences with doulas and midwives and also other birth practitioners, OBS, et cetera, who maybe are curious what actually happens in a visit with us.

I'm excited to share, my knowledge also my sort of insights and also to show what it's like to not always have all the answers, some, even in this midwife role and how that's okay. I think so often we are. Told to do this work. We have to know it all. And I think I had to get over some of my own feelings around like doing it right.

And putting this out there for the world to hear in order to do this as well. So I'm being vulnerable by sharing this. These women are being vulnerable by sharing this. I think it's a really cool experiment that I've been meaning to do for a long time and I'm super excited to be doing it. We go into this woman's experience of having had a full term pregnancy five years ago, and having had two miscarriages as urges essentially in the last year or last year.

And wondering where to go from here, talking about blood work, what was ordered, what wasn't by her OB getting into some of the things she's already been doing to try to strengthen her health and her fertility ideas of other places. She could be looking to do that and sharing some of my own story around my own losses and pregnancy after loss.

We talk a lot about progesterone in this episode and we talk a lot about just the reality that even after two or more pregnancy losses it is most likely that the next pregnancy will go to full term. So it's some really awesome stuff. It is a session that is a must. Listen, if you have experienced loss if you are in the shoes of this woman, wondering where to go next planning for a next pregnancy or not.

Just really, I loved how much she focused on whether or not ha she has another baby just wanting to spend time, making sure that her body is healthy and she's giving it what it needs for optimal health. It's really important. I think, as a listen for women, who've gone through this and are going through this.

I also think it's a really important episode for doulas and midwives and OBS to listen to because we so often fail these women who've experienced loss and really don't do a good job supporting women through miscarriage and loss. Hopefully, I'm not saying that I'm doing it right or that there's a perfect way to do it.

I'm sure we could all improve. But I think that this will serve as some inspiration around what it might look like to talk to a client like this lovely guest you're about to hear from. So enough for me, and I hope you really love this episode. If you are interested in doing one of these experimental episodes with me, where we would do a session that's recorded you are welcome to submit an application for that.

I have limited spaces in my schedule and in trying to just pick people who have something that is relatable and trying to get a diversity of experiences so that this podcast episode series can be as useful as possible. So that's it for me for now and enjoy the episode.

Hello everyone. If you're enjoying this podcast, you'd probably really enjoy our other more in-depth offerings. We have a comprehensive course for mamas called 13 moons epic education for the birthing year. And in everything you need to know course for aspiring doulas who want to change the world called the birth warrior project 120 day doula training and transformation, and for the real birth nerds who want to become home birth midwives, we have the Indie Birth midwifery school, and you can find out about all of these options and more Indie that's Indie

you and I both have our pretty mugs. That's a very pretty mug you have. Thank you. Okay. And today we are going to be doing as non awkwardly as possible. I think I'm gonna forget that it's recording in 60 seconds, but experiment where we are recording a virtual midwifery session. I guess I'll start, like I always do.

And just ask you what are you hoping to get from our time together today? Yeah I'm hoping to just maybe get some insight preconception. I had two miscarriages in 2020, and I am looking to get pregnant, but this time around, I want to really focus on preconception health and anything that I can be doing differently.

Okay. So I would love to hear a little bit more I have some information that we had exchanged prior to hopping on today, but maybe you could just tell me a little bit more. You have an almost five year old, is that right? Yeah. My daughter will be five next month in April. So I got pregnant with her when I was 35.

And I had a totally healthy uncomplicated pregnancy. Yeah, literally nothing, no high blood pressure, other than, first trimester, extreme nausea, which is far for the course a lot of times. So I just had this like amazing healthy pregnancy. I had a home birth 18 hour labor, no tears.

Just a great experience overall. And so yeah, my husband and I for years went back and forth. Do we wanna have another one? Do we wanna have another one? And last year I got pregnant unplanned. We seem to have no trouble getting pregnant. , even when we're not trying, but I got pregnant at the beginning I guess it was at the end of 2019.

And we weren't planning that baby and it wasn't really great timing. I'm a farmer and the baby would be coming. Would've been coming like in the height of my season. So there was, a lot of feelings there oh okay, we're excited, but this isn't the right time. And then I miscarried at 10 weeks, I went into my midwife for an appointment to see if we could hear the heartbeat.

I had only had one midwifery appointment prior. And yeah, I hadn't had any complications, but I wasn't having the extreme pregnancy symptoms that I, had first trimester so many years before. On that. 10 week appointment, we didn't hear a heartbeat and she didn't seem to think that was totally a normal or anything because it was so early.

Yeah. So she did a lot of like intense palpitating kind. She was just really trying to hear a heartbeat. And I got to the point where I was like, this is I'm okay. I'm just gonna go home. It's fine. But I still didn't really realize that I was, already having a miscarriage until I got home.

I started to spot that night. But I had a safe miscarriage at home at 10 weeks. And from, after delivering that baby at home, from what I could tell the fetus was about eight week gestation. So fast forward many weeks, many months later at the end of 2020. My husband and I had actually set intention that we were going to try again.

It had been almost a full year and I really hadn't done anything differently. I have a clean lifestyle. I get, I eat a lot of healthy food. I exercise. I felt like I was in a good place, but I hadn't done anything to work on my hormone for anything other than processing the grief from the first miscarriage and, I had done some of the spiritual, emotional work, but yeah, so we basically like literally said, okay, let's try again.

And then I was pregnant, we seem to just have no trouble getting pregnant, but so that was in the winter. And this time around, I just decided I wasn't gonna get any early prenatal care. I was just gonna see if I got to 12 weeks. So I was resting and healthy and I was having a lot of nausea this time around.

So I felt like it was a more normal pregnancy. And I got really big, very quickly. It was a little shocking, I was like wearing, having to use my maternity clothes at nine and 10 weeks already. So then it's funny, it's after, with the first miscarriage, I had never even engaged that was an option.

Like I had never previously had a miscarriage, so I just didn't even think about it, but once it happens, it's like always on your brain and right. So I remember like that first, the whole first trimester every time you're going to the bathroom, you're like looking , for spotty.

Totally. And yeah. And so it's I got out of that space right at 11 weeks where I was like, I'm almost there. It's, I'm almost at 12 weeks. And I started spotting. And so this time around, I had not had contact with the previous midwives. It was like two weeks before Christmas, still the height of COVID.

So I called a nurse friend. I know. And she said, if you go to the first care, they can write you a a prescription to run over to the emergency room to get an ultrasound. So I went there, I sit there for an hour for them to tell me, no, we can't do that. And so then I ended up in the emergency room in the height of COVID pandemic just to get an ultrasound and to find out what was going on.

And the ultrasound confirmed that the fetus was eight weeks again. And that I was in the process of a miscarriage. So I came home and was naturally able to do that again by myself, safely and pretty easily, That once that knowledge was there, I just communicated with the baby and, I birthed my baby very easily at home again, and it looked very similar to before.

So it's just, I keep losing these babies at eight weeks and I obviously don't wanna go through that anymore if I can help it, totally. Yeah. I'm just curious for the sake of me knowing do you know much about my history with miscarriage? Are you familiar? I do just a little bit. Okay.

Yeah. I've read part of your book. And I've followed your website some, and we actually have a mutual friend who originally told me about you. I have a friend here in New Mexico who knows you from Flagstaff. Oh, funny. We'll have to talk more about that. Yeah. . Yeah I don't wanna talk I guess here's an interesting thing about being a midwife and having had my own pregnancies is there's always this line of I think my own experiences are really valid, but I obviously don't wanna let that color necessarily the advice or insights or ideas they give you.

But it's interesting because I've had two very similar miscarriage experiences. So I'll be curious if that comes up later, but okay. So I guess I have one question, I think I already know the answer, but just to be sure when you got pregnant with your daughter that was also really smooth and easy.

Yeah. Okay. We weren't planning her. We were planning our wedding when we got pregnant with her. interesting. Tell me a little bit then about I'm just trying to think which way to go take this first, but, okay. So after the second miscarriage, you did see an OB and got some blood work. Is that, am I understanding that correctly?

Yeah. So I'm RH negative. So I saw the OB the day after I was in the emergency room. It was late that night. I was in the emergency room. I went the next day for an office appointment with her to get my roam shot. And then I followed up with her postpartum. It was actually like two months postpartum.

Instead of, the usually it's, I don't know, four or six weeks you go back, but it was two full months. I went back and had the blood work done. So that was in February of this year. Okay. All right. What's my next question. So let's talk about the blood work. You said that they, you had advocated for yourself to.

This much done. Is that true? Yeah. There were some things that she brought up that I hadn't thought of about like checking for autoimmune issues. I was mostly wondering about progesterone and my thyroid and, yep. Let's see. I wanted to

know about my iron levels. Yeah, I don't, I'm just, oh yeah, that was another thing that came up for me.

The gene mutation, I had just always wondered if I had that. , since I was pregnant with my daughter, I didn't get tested. And then my daughter was born with a slight lip tie that she had corrected like the upper frenulum. And that's one of the signs. And then I don't know, I'm trying to think now there were some other things in the passage that came up for me that kind of had that in the back of my brain.

So I asked her to test me for that also. Yeah. And it's funny all the different labs have different like ways of writing these reports, but it looks like that came back negative for the MTHF. Yeah. She said that she, there was something that was flagged, but it was based on some case studies. And she said that she didn't see anything in my history because I didn't have any issues with clotting or there were some other things on her end that she was like, I don't see any reason to retest this.

I don't think you have this gene mutation. Got it. I was gonna add to I had started to have some short cycles. I'm 40 and I had started between the birth of my daughter. which I got my cycle back immediately after I had her, like literally I ended Celosia and then I like started my period, like right after that.

Wow. Yeah, I know. And I was doing all the seven tenets, yeah. Like everything. Totally. The baby was on me all the time for years but anyway yeah, so I had started to have some short cycles prior to getting pregnant the next time where I was having like 26 day cycles pretty regularly.

And I even had 1 24 day cycle, which I've never had in my life, except that one time. Yeah. But since I had the second miscarriage, I have gone back regularly to 28 day cycles and I feel like I'm ovulating on day 14 based on charting and stuff. So anyway, I feel really balanced more now than I have been.

Okay. And I've been doing some things to work on that. Okay. I have a follow up question and then I want to hear more about what you've been doing to work on it. So before getting pregnant with your daughter, were your, what were your cycles like if you can hearken back to that era? yeah. I have pretty much always had 28 day cycles.

Okay. Forever. Since I was a teenager and even a little longer, but never anything over 30 days, always 28 to 30. I don't remember them getting shorter before my daughter. Okay. Interesting. Yeah. And then you said after, when did you tell me, gimme a description of, it's a bunch of years, but between birthing her and then getting pregnant again the next time, what was that?

What were they like? And were you charting your fertility or. No, not really. I wasn't. I had charted when I was younger a lot before I had her. And I hadn't been, I didn't really chart after her. Okay. And my sleep cycle is such, my daughter still wakes up in the night as many children too. So my sleep cycle is such that I don't really take my temperature and I'm not doing that currently, but I am like watching my mucus and okay.

Other stuff. So yeah. I'm not like formally charting right now, but I have just noticed since this last miscarriage that I'm like back at 28 days, which feels really good and I'm not having a lot of PMS symptoms that I've had off and on. I've always had really heavy periods. A good bit of clotting, extremely swollen breasts prior to my menses starting a lot of belly bloating.

Just true, like PMS symptoms for me for as long as I can remember. I remember when I, I think I even when I was a teenager, like just having really awful periods. Okay. Which is, it's like my own personal path. That's part of what led me to herbalism. It course in my, like at age 20 is like trying to figure out what's going on with my body, yeah. Same. But yeah. I know it's, I love that. I love that these I don't know that our path brings us to this other path where we can help others, yeah. That's amazing. Yeah, so I don't know. I, it's hard to think about like over the five years, because I wasn't regularly charting, but I feel like I've always had, signs of fertility.

I've always had good cervical mucus and yeah. Yeah. When were the 26 and 24 day cycles, I guess is what I'm trying to. Yeah. I feel like maybe the last, maybe from when I was 37 on, I started to have thir 26 day cycles. Sure. And I'm just guessing there shorter cycles. Yeah. And that 1 24 day cycle was just prior to the second pregnancy.

Like maybe not the month before, but two or three months before. Okay. Interesting. Yes. Okay. So I'd had some definite thoughts, but what have you been doing that you feel has helped link them, lengthen them back to the 28

days and feeling more balanced. so I have I've always eaten well, but I've really been like trying to focus on it, and I've been seed cycling, which seems to have made a huge difference. Are you're familiar with that? I'm sure. Yeah. Do you wanna describe it though for people who might be listening yeah, sure. And I'm, I've just started this, so I don't know if I'll describe it in the best way, but yeah, so it's basically using different seeds.

So flax and pumpkin seed for the first half of your cycle for the follicular phase. And then and then Sesame I've been using, wait, I'm sorry. I just said that backwards. Didn't I now I've confused myself. don't I don't know which seeds specifically are used. I just understand the concept of like certain nutrients that are dense in certain ones.

And they're better at different parts of the cycle. So I also don't know which ones go where blacks and pumpkin for the first half Sesame and sunflower for the second half. Okay, cool. Yeah. And so you're getting of each a day. Cool. Cool. And you feel like that's helped a lot? Yeah, I do. And then I've been, just like really focusing on getting extra omegas.

I'm always trying to work on my sleep which, is as a mother is not always in, in your own hands. So yeah, I've been taking magnesium at night and some trace minerals and trying to get really good night's sleep. Despite it being interrupted I've been taking CPY vitamins and doing the seed cycling and taking omegas.

And I actually stayed on a prenatal yeah, just in case. So I don't know. I have some questions for you about all that. I'm doing these things, like in hopes of strengthening my uterine lining and balancing out my hormones. And, but I just really have you get into the world of OBS, which I've been very out of for a very long time.

I had midwives when I had my daughter and I don't see an OB regularly. I see midwives for well, woman care. So it's I'm all of a sudden sort of back in this realm and there's just, there's the talk of oh, you're 40. So it, this might be that your eggs are old which no one wants to hear.

I was having a geriatric, how was that helpful pregnancy? Okay, if they're old what are we gonna do about it? But that's the terminology, you're like a geriatric

pregnancy advanced maternal age at 35 when I had my daughter. I don't know, I've been following about this.

There's this woman online who does natural fertility info is her website. Her name is Heather Rodriguez. I don't know if you're familiar with her, but she has a lot of great info on like egg, health and a 90 day protocol for building the health of your eggs. So it's like in the natural world. Yeah.

Yeah. I don't go ahead. No, I was just gonna say in the natural world, there's like the idea that is possible, and herbalist and natural paths and midwives talk about it. Totally. So I've been thinking some of that stuff too. Totally. Yeah. I have some definite directions. We could take this, but I guess what questions do you have for me to start?

Let's start there. yeah. With your history I think that is totally valid. So I don't want you to hold back from sharing your experience seriously. I go through the same thing that you were talking about as an herbalist where I'm like, if someone's story is resonating with me and it feels similar to mine, I don't wanna dominate what I'm gonna choose for them as their protocol, based on my own experience, but our experience is important and it has led us down this path.

So I don't know, I just, I guess a, are there like more, would you looking at my blood work? Are there things that you would follow up and test on? Are there things you would suggest me doing on a daily basis, just to, I'm really in this place emotionally where it's like, whether I have another baby or not, I wanna preserve my fertility.

I wanna have a healthy menopause when that time comes. It's put me on that journey too, of just I definitely want another baby, but even if that doesn't happen, I want to start taking care of me, in the best way that I can. Absolutely. Yeah. Yeah. Let's see. So did they talk to you at all?

Or have you researched like the optimal way to test progesterone a little bit, but they talked about testing it on day four. That's what the OB said was the optimal time. And I just happened to be there on day two of my cycle. And she's we'll go ahead and test now. Yeah. But I feel like there's more follow up.

Yeah. The way to actually test progesterone is a seven days post ovulation test, because we want to know what it's doing in the L_{al} phase. And like I said, it's one of those things where it's I don't know if it's a thing I see more because it's what was the answer for me. But I've worked with so many women who do have, I don't the name, they call it, for a diagnosis, but like a A_l phase defect or deficiency or whatever.

And I've seen so many women, myself included benefit from supplementing progesterone, bio identical progesterone, if that's the case. And it's a cheap, easy thing to look at and there's differing perspectives. It's interesting. I actually had somebody reach out to me a couple weeks ago who had, let's see, she had two miscarriages with her first, so with her first pregnancy was a miscarriage.

Her second was a miscarriage. Her third was full term, and then she thinks she's had two more, which I never got totally clear on what she meant by. She thought she had two more this last year in 2020. And I brought up, some of these labs that you did and then also yeah, the day they call it like a day 21, but progesterone test, but it more specifically it's seven days post ovulation.

So if you're someone who knows when you ovulate, which you are, that's the best timing is to see what it's doing halfway through the L_{al} phase. And so I mentioned that to her and she said, oh, I forgot. And OB had prescribed me progesterone with my full term pregnancy. I don't know how she had not realized I didn't, we didn't talk more than just by email.

And she was somebody. Really isn't in the Indie Birth world at all. She's just a friend of a friend. So I didn't get to follow up and be like, what do you mean? You didn't realize that you didn't remember that was part of your experience, but she's oh, that sounds like maybe I should try that again.

And I was like yeah, if it worked if it worked that time. So my, but I guess the reason I was gonna tell this story is she had said, oh, I just saw an OB recently. And I asked about blood work. And she's after you asked me about progesterone, I called and asked for a progesterone test and they told me there's not enough evidence to support testing and supplementing.

Because yeah, the evidence isn't clear that is beneficial, which I guess is true. But if you talk to any reproductive endocrinologist, like they'll tell you that's their

go to, and often it's the silver bullet. All of that said. Especially you're someone who's into natural health and healing and herbalism.

The other question, if that were the case. So if you were to do a 21 day or a seven day post ovulation progesterone tests and it came back low, there are many different perspectives on how to increase those levels. I think I don't know if I shared about it in the book. I probably didn't, but I've shared about it.

Other places. My, after my second miscarriage, I did the full battery of blood work. And I also saw a reproductive endocrinologist, which would be on my list of things to recommend to you. If you feel like you really want to get someone who knows what they're talking about, because OBs don't like, they just, I don't know why it seems like something they should know more about and they just don't and they often give really dumb advice.

Doing a progesterone test on day two or four, like that tells us literally nothing like literally nothing. So where was I going with that? Yeah, so just the really brief version of my story. We did all these tests. My, my partner even had his sperm looked at for any chromosomal abnormalities.

Like I was like, I wanna check everything, 'cause like you said at the beginning, like I did not wanna go through that again. If there was anything I could do to prevent it. 'cause it's so difficult and progesterone was the very last thing that we tested because I had to wait till that point in my cycle and I actually thought for sure it would come back fine because I had 26 to 28 day cycles.

I was charting, my Lal phase was usually 10 or 11 or 12 days. So it was on the shorter side, but it wasn't like six days or something, and. Same with you as you, my pregnancies went to seven and eight weeks. Which isn't the classic way that it would present if you had, if you thought about low progesterone, the classic way we think about low progesterone is people miscarrying at four or five, maybe six weeks.

So I, we had already started trying before I got my results back for the progesterone, 'cause it was the last one I did and they called me and said, we don't think you even ovulated. It's so low. And I got a positive test a few days later and that was my daughter. So I didn't have time. Yeah. So I was, it was like, oh this might be the answer.

And I had resigned myself to maybe there's no answer. Let's just try again and see what happens. So anyways, we'd already tried. We stopped trying, but okay. So it wasn't a few days later it was maybe a week and a half later I got the positive test and. Anyways, long story short. I didn't have time to try all the things I wanted to try naturally to increase those, the progesterone levels.

So I was faced with the choice of do nothing, even though I know it's really low or take a pharmaceutical, which felt really like hard as a choice for someone who, you know yeah. Is like us. Just an interesting anecdote. And so I guess my question for you would be like, as an herbalist, are there things that you've tried to in terms of like hormonal balancing and strengthening, 'cause you probably know more about it than I.

truthfully. I, a little bit, but not much, but first I wanna say thank you so much for sharing your story because you're validating for me that pro I just had this feeling that it's my progesterone. Like I had no evidence of that other than the short cycle, and I went in there feelings, strong piece of evidence.

Yeah. I think though, like you say, an OB doesn't seem to think so. And I went in there feeling pretty confident, like my progesterone was gonna come back and say, this is the thing. And the, and in my mind, like there are a lot of options to work on that. And that would be like the simplest issue that I could address.

Totally. That's how I was thinking of it. It's I don't wanna find out that I have something major going on. Yeah. Or like autoimmune or, one of my ovaries has disappeared. No, I'm just kidding. But anyway. Totally. But, the OB is just oh, there's no reason to even suggest supplementation unless it comes back extremely low.

And then she's testing at absolute wrong time. Yeah. more, that would be a simple for sure. Totally. That would be a simple starting point. And like I said, I never want my story to like color other people's experiences, but it does feel like I've seen that be the case for people pretty often.

And we just live in a world right now where we have so many endocrine disrupting things happening, even when we're trying to live in a way where we like don't cook in plastic and yeah. When you're doing your very best I think that

it's just something that we're gonna see happen more and more, but yeah, so I don't know if that's why I'm seeing more of it.

Or like I said, if I'm just like a magnet for these sorts of. And it might not be the case that's what's going on for you, but it would be a very simple, I told this other woman that I had consulted with, I was like, it's like a \$8 test. I think cash pay when I order it for people. I'm like, there is no reason to not at least check it, why not? Yeah, I've explored you're asking early, I've explored Vitex some, and I actually have like success stories of other women. I know. Yeah, who were getting pregnant later and took Vitex for a month, two months, sometimes three and, had full term healthy pregnancies after.

Here's my thing. I feel really strongly that I just need to go have blood work and have it done with someone who's holistically minded as I am. Like a local midwife or a naturopathic doctor. Who's gonna look at my results and then. help me navigate what to do, because it's I don't know.

Sometimes when you're trying to heal yourself, it's really hard to be like, objective. Totally. And yeah. It's oh, I would do such and such for someone else in this situation. But with myself, it's I want some other input. I want someone with me on this journey saying here's what I would try, right now I'm just like reading, reading, and putting all of these pieces together.

But I don't know. This is just a great starting place is to get tested that day at, seven days post ovulation. Yeah. And go from there. And maybe that will really show it. Totally. If that's the issue. Yeah. I have a couple like books open to different like suggestions, different authors that I have read have and another thought just that popped into my head is we have a really lovely friend named Diane.

Who's a midwife in Phoenix and she's an herbalist as well. And I didn't do a consultation with her, but if I had wanted to do like an herbal consultation around my, if, if that really was something that you're looking at is the low progesterone levels. She, I, we had briefly talked at one point about a protocol that she did and I'm spacing on exactly what it was, but I know she's had a lot of success with Vitex and wildly, but I don't remember in what form.

So she might be a really cool person to reach out to her. Last name is be Beji. I never know. I just always see how it's spelled B a J U S. And awesome. Thank you for that resource. Yeah. Yeah. And it's interesting. Yeah, those are the two that come to mind. And I know there's other herbs that people have had a lot of success with.

And like you said, the B vitamins are big B6 in particular, reducing stress as much as possible sleep you said, is important to of course. Yeah, I guess I had a question. Something else, your, oh, sorry, go for it. No, sorry. Something else I have been doing that I felt to mention is I've really just been like working on my liver.

Some which, I think just helps balance hormones. So I've been, doing a little bit more liver work. That was something that's been in my regular protocol for the last couple of months. That's awesome. I know something that I had tried which I can't remember if it was, I think it was, there's a woman named Katie singer who wrote a book, the garden of fertility, which is a great book.

I have that book. Okay, cool. She talk, I think it's her that talks a lot about wearing like an eye mask when you're sleeping. And there've been some really interesting pieces of research around sleeping in darkness and how that can promote hormonal balance. And I don't have those in front of me right now, but I remember them being pretty convincing, which could be hard.

Of course, though, if you're like up at night with a with a kid. Oh yeah. Motherhood oh, motherhood. I definitely feel like, things. My child has she, how does she's so amazing, but she's super high needs. And she has been from the beginning, so it's I look at my path and who I was prior, and who.

Who I am now and what my life has been like. And it's she's about to be five and I'm just getting me back. And I'm just starting to, in this last year, feel like I was ready to have another baby, but here I find myself at almost 41, trying to do that. Yep. What else is I gonna say about that?

You had said that you feel like you have a strong, like good fertile mucus, you correct. Do you know how many dates you noticed that for? Not very many. If the days are short on that, probably just two or three. And it's not as strong as it used to be. I remember. Prior to having my daughter that, I always knew

without charting, and now I'm checking, I'm having to go and look and I'm like, okay. Yeah, it's there it's stretchy. But yeah, there's, I've been reading up on that too, like ways to increase cervical mucus and bill Ute, ECUs and build uterine lining and all of these things that, traditionally aren't really talked about, it's but it seems like there are foods and herbs that do this.

So I wanna explore that more fully for sure. Do you have any suggestions? I know I'm trying to think if I do a side room, food, I think is so important. I guess before this thought slips away, like the allopathic. thing to do. So there's kind of two schools of thought. It seems like in the mainstream medical world, if someone's got low progesterone, one is to supplement with progesterone.

And the other is to give someone Colomo to stimulate like a stronger ovulation, because if you have a stronger, like more robust Corpus judum, that's left after the egg comes out it will produce more progesterone on its own. So we can reverse engineer that then from our holistic perspective and be like, okay either boosting the body's ability to make its own progesterone in the Lal phase or yeah.

Have a more robust ovulation by working that vicular phase. So yeah, I think the food thing is huge. So I don't know how much you wanna talk about that. It sounds like you're a farmer and I'm guessing you eat lots of good veggie. What is your, what's your diet like? Yeah. I eat meat also, but yeah, I'm a farmer in the mountains of Northern New Mexico.

So this season here is really short which is I'm actually from Alabama. So I'm used to growing food year round, and I'm learning how to grow food at high altitude with a hundred day growing season, which is pretty intense. So that means there, there aren't fresh, a lot of like fresh options through the winter.

But of course I'm just buying organic produce at the store during that time, but yeah, I've been really like focusing on I don't know, other than the seeds and nuts I've been trying to get a little more red meat. My partner has this like really weird allergy where he can't eat mammals at all.

So we end up eating a lot of like poultry and seafood. Okay. I feel like for my fertility journey, I need more red meat. So I've been trying to work that in. And then of course, like dark leafy greens all the time and sweet potatoes. I eat a lot

of winter squash this time of year. 'cause I grow it in the summer and we store it through the winter.

Yeah. What about like chicken livers? I don't eat chicken livers, but that keeps coming up for me. So I should pay attention to that. Yes. Beef liver too, I guess if he can't do the mammals, that was my thought with the chicken liver, but yes, liver of any sort. I am so not a person who does this and I totally should, but there were definitely times where I was doing the desiccated liver capsules.

That's an option too, if you're like not gonna realistically be making it. And then. My really lovely apprentice right now is always encouraging our clients to try pat and just, having that and crackers and maybe buying some really yummy pat from the store, from like a grass fed source. So you are high, right?

Yes. Which has been an adjustment for my body for the last two years being out here. I come from that's elevation Alabama. Yeah. Yeah. I wonder, I felt generally depleted being up here and it's been like, we moved here in 2018 and I'm like, just now feeling like when I hike, I'm not short winded.

And when I, work outside, I'm not dehydrated for two days after, it's dry and it's high. up here. It's dry as high. How high is it? My house right here. My little farm is right at 8,000 feet. Okay. So I had guessed that based on your lab work too. So your hemoglobin was five wait, no 50, sorry.

15.1, which is definitely on the higher side. I remember mine being in the fifteenths when I lived in Flagstaff, which of course is also high up so yeah, there's definitely an adjustment period. I don't actually know like the science behind how long it takes to adjust to high altitude. But I think your report of feeling like it's taken a while makes sense to me, your body has to make all those extra red blood cells and adjust in other ways that I'm sure we don't even fully understand.

So that's interesting. and that's really fascinating. I didn't realize that. I was surprised that my iron came back that high because I had just, I had a miscarriage previously and then two extremely heavy cycles after the miscarriage. And and she was actually testing my blood when I was bleeding, which I felt uncomfortable about.

I just felt already bleeding. Yeah. I was like, I felt, and she, that's just, yeah. They wanted to do an internal exam and I was like, oh, thank you. . It's just a different way of a different way of thinking. Yeah. That's really fascinating though. I expected it to come back lower, but I didn't realize that might be because of the altitude.

Yeah. It definitely is higher at high altitudes, 'cause you're not able to get, the air has less oxygen, so your body has to make more hemoglobin to carry the oxygen that is available. I'm reading a book right now in the five minute breaks between kids interrupting me of course, but called breathe.

And I can't remember who wrote it. There's all these different, like breathwork books coming out, but they're fascinating. In terms of just like total body health, like how our breathing and oxygen delivery and like the CO2 buildup how it affects all the different body systems. So I actually was recently Googling and I didn't get a chance to do a full Google around the way we breathe and how that would affect hormone levels.

But I'm guessing there must be something there. So anyways, I'll report back if I learned something interesting about that. Ooh, that sounds super interesting. Yeah. So do you feel like in general you're getting enough like good fats in your diet? I feel like I haven't been, and that's something that I've been really trying to work on, but that's just been the last couple of months, it's like between those two miscarriages, I really did nothing differently.

And it was like the height of my farming season. So I was just working really hard and, going about my life. It AITs the pandemic right. In a very difficult year for all families. But yeah, it's I'm thinking now, how much different my body feels just after a couple of months of really trying.

And I don't do a great job every day, right? No one does, but like really trying to focus on it and say if nothing else, I need to at least make sure I get my greens every day and I get some healthy fats. So those are like the two things and, the seeds, the seed cycling, definitely.

Helps bring that in. And then I had been supplementing with omegas too, okay. Yeah. Otherwise what, that seems like a big part of the picture. Totally. For

eating, I use I only use coconut oil and olive oil. I do lots of nuts and seeds and nut butters. I do, even though my partner can eat it, I do try to get my red meat.

Like once a week, at least we purchased a local cow that was raised right over the mountain from us. So local grass fed beef. Let me think we do salmon. Maybe once a week I try to get a fish, a fatty fish like that. Yeah, lots of butter. I do grassed milk. I do dairy in general. Nice. What am I missing?

Yeah. Yeah. I eat a really very diet and I'm open to eating anything. Like the liver is definitely something that I haven't worked with, but I totally should. And it's come up for me a lot, trying to think. Yeah. So I'm willing to try whatever though. There's nothing that I don't eat. I love food. So cool.

You cool. Yeah. So just making sure you're getting some really good fats at every meal. The more, for me, it's like the more, the better, and I guess the reason being, this, but in case someone listening's like, why are they talking about fats? That's what our body needs is to manufacture hormones.

So when we don't have enough the body just doesn't have the building blocks that it needs. So it's an important thing, but it sounds like you're doing a good job, but maybe give yourself like another extra drizzle of olive oil or an extra pad of butter here and there, even beyond what you're doing and see how that goes.

What about vitamin? We can always, is that something. Yeah. So we're like super blessed here in New Mexico to have sun even in the winter. So I'm outside a lot, but I have been supplementing. I'm just like, we've had a decent snow year and when it, when the snow packs on and you like, can't really get out and walk and hike, and I'm obviously not like gardening and farming during that time.

So I've been supplementing through the winter for sure. And I'll probably back off of that. And just with the pandemic too, we've had the whole family supplementing. Cool. And then I had two other kind of like individual like nutrient questions, they're mineral. Is I diet a mineral now I'm questioning myself if it's, what is it a mineral?

I think so. I think so. Do you do. I'm guessing there's some in your prenatal, but it's something to just maybe peak at your thyroid labs. I thought looked fine. I'm not an expert in interpreting thyroid labs, but what, from what I do know, they

looked good. But I feel like that's always something that comes up when I'm working with people.

Prenatally too, is, most of the people I work with, aren't doing iodized salt. And they're also not eating a ton of seaweed or, sea creatures. There's not a super fantastic way to get it other than I think dairy has some amount in it, but not as much a little bit. Yeah. Yeah. So just something maybe to check on your prenatal and make sure it's in there in, in a good amount.

Yeah. It's funny. Seaweed is one of those things that like, I've, it's you should do it or like blue, green algae, but it's not natural. It doesn't naturally work its way into. Our diet, it's not part of our culture here and it's not accessible. Unless you're going and buying it, it's not something that we just have, so yeah.

I've actually been thinking that's another thing with the liver. The liver has been coming up for me a lot. So I and I have a friend here who's really good to like always put her C sprinkles on her meal instead of salt. Oh. So I've really been thinking about seaweed, but in Irv school, we used to cook it up and drink it like a tea, and would do that regularly tea.

Yeah. Yeah. Boil it in a pot, like a, just, it almost like you would've root. Yeah. But make a seaweed cloth and then drink it like a tea. I should totally start doing that. Thank you for bringing that up. yeah. Or I know, I, I don't do it enough. I should. This is the other reason it's fun to do it with free work is oh yeah, it's good to remind myself what I should be doing too.

But just for general health purposes, being like A piece of, I don't know how to say it kombu, whatever. One of the kinds of seaweed in with any soup you're making yes. And just adding it and that's another really great way to get some more iodine. I have Lisa Hendrickson Jack's book, the fifth vital sign open.

I just wanted to read this. This is interesting. I don't know what her source is for this, but if you have the book, you could check out her source list, but she said many practitioners assume their patient's iodine levels are normal instead of testing them. But deficiencies very common, a recent study of pregnant women in the us found that more than half of the women tested, had less than adequate iodine levels.

Wow. So that's interesting. And then the other one, which kind of goes in, I think with the, maybe it's not with the seed cycling, but it's making me think of Brazil nuts. Selenium is the other one that I wanted to ask about. And those are. Like I said, your thyroid labs look fine, but it's if you're looking for ways to just really optimize everything going in that's a really easy thing you could add into to your seed cycling is to also include some Brazil nuts.

Yeah. Cause it only takes a few a day, right? Yeah. Both millennium two maybe. Yeah. It's like ridiculous how high they are in that. Also she said other foods high in selenium, she said are Brazil, nuts were first. And then Oregon meat, kidneys in particular and then state food and dairy products.

And then zinc is another one she talks about in her book as of course being important. If you don't have it, this is a really fantastic. It's my favorite actually at the moment, for people who are wanting to learn more about their cycles, which you already do know about your cycles, but she's got a lot of really cool ideas around strengthening them in some cool like this page, she shows the chart for somebody who had low pre ovulatory temps.

And then it shows when she started taking zinc that they jumped pretty dramatically. So it's like a really cool, just an obvious example of a simple, intervention, so to speak. That book is fabulous. I just borrowed it from a friend. Oh, cool. Yeah. Lisa's such a powerhouse. Oh my goodness.

I list, I just recently listened to your interview with her too. Your podcast interview. Oh, nice. Yeah. Yeah. Cool. I'm glad to check that out. And I guess that would be another thing to maybe try. I know you've got. the little one waking you up. But even if it was for one cycle, seeing if you could figure out what your temps are, because yeah.

If they're low, even if your thyroid staff looks normal on paper, that might be just another place to give yourself some more TLC. And you said, yeah, that's why I actually borrowed the book because oh really? I wanna start formally charting again. And my other, my Katie singer book, and then I have the other one taking charge of your fertility that, the one that first one that kind of became bigger.

The Bible, both of those. Yeah. I have both of those in storage, but it's been years since I was formally starting. So my friend here locally, let me Lisa's book and I'm feeling really strongly that I should start taking my temperature again, even. After I listened to one of her podcasts she did. And someone asked this same question what if I don't get solid sleep?

It's I get, the solid five hours earlier in the night, but then, the second half of the night is disrupted. He was just like, take your temperature anyway, just take it anyway and record it. Yeah. But I can consistently run low in the daytime. Yeah. Oh, interesting. I've always read low my entire life.

I've always had a low thumb. I run in the 90 sevens, interesting. So yeah, I should start doing that for sure. Thank you for that encouragement and reminder. Yeah. And she has that really nice list. And on page 2 57 on improving egg quality that we don't have to maybe I'll just read it for people who are interested.

I'll just do the highlights, but K Q 10 reduces oxidative damage to the ovaries and improves ovarian reserve parameter. So that might be something. That is interesting to you. We can talk about this. You're already doing the omega three, so that's great. Vitamin a D, which we talked about one we haven't talked about, but I think is an interesting thing is the myo Atol.

She says here that there's a study that shows it's associated with improved egg quality D AGA vitamin CE selenium, fully sink, which again, shouldn't be in your prenatal and you're eating really great. So those should be covered, I would think. And then Royal jelly, which I don't have a lot of experience working with, but I know one woman who had recurrent miscarriages, who's also a midwife.

I'll send you her preconception, like handout she had made, it's like really incredible. She talks about what to do during the different yeah. During the different weeks of pregnancy and maybe I'll post it in the show notes as well for other people to look at. I don't have it on hand, but I remember that was part of her protocol was doing the Royal jelly.

Yeah, I haven't worked with that, but I have seen that come up in some of the other stuff I've been reading. Yeah. But like you said earlier, it's so tricky when you're working with yourself. Like you can read this list and be like, Ugh, I guess I could do all of those things. It's hard to put it together.

So what I guess, what could I be helpful with in terms of and maybe we're not there yet, but at some point before we're done like some next steps, I don't wanna just leave you with this weird random list of stuff. . No. Honestly like the, in the beginning coming to this, having your progesterone tested at the right time is that's huge, ding, ding let's find out.

Yeah. , let's find out where that lies before I like, start swallowing. Vitex constantly, that's where I'm like this. This is my personality, it's I won't do anything. I won't take any supplements. Then I'm like, I'm on a protocol and I'm doing it all. And I'm doing it every day.

And I think that's like a classic sort of heal mentality when we're working with ourselves. It's we're really gung ho, but we're also like the worst client ever, totally to like, not follow the protocol and then follow it really intensely for just a little while wildly.

Totally. Yeah. So I'm trying to like, to not get into that space and trying to keep it pretty simple, but. Yeah, I don't know. I just feel like I really just need to test my blood again. And the thyroid thing too that's been another intuitive thing. I had it tested after maybe six months after my daughter was born and I really was like my thyroids off.

I feel really bad. And my midwives were like, no, your numbers look good. And then I felt the same way with the OB. And she's no. And she herself had, she's with my personal history of thyroid issues, I don't see anything here that would warrant retesting. And so I'm like, okay. So I don't know.

I should just into really follow that. And I think similar to the progesterone, there are right times to test your thyroid through the month. Sure. And yeah, so I don't know. I feel like that's another thing to just follow up on and just talking about all of this with someone else is, is good.

It's bringing it where it needs to be. I think. Are you familiar with Aviva Rams book, the adrenal thyroid revolution? Yes. I gave that book to my mom years ago. I should ask her to borrow it. yeah, I think it's helpful just in terms of those kinds of questions, which, like I said, I don't have, I don't have committed to memory.

She talks more about like the ideal ranges, which are not the ranges, the reference ranges that show up on actual blood work. Your, let me look again, your TSH was 2.4 and I had just looked this up the other day. Otherwise I would not know this in my own brain, but I think Aviva rom says that it's under, I wanna say it was 2.5 to 2.9 or something is what is ideal.

Whereas on here, the reference range is up to 3.7. So , there's those sorts of like little differences. That you could like cross check with, or like you said, find someone who can just do some of this, like work for you. Who's already really knowledgeable about Optim optimizing health, not just what is normal for most people who are actually relatively unhealthy.

'Cause that's what they base reference ranges on is just you know what, I'm trying to remember where it goes down to, but it's you know what, the fifth to 95th percentile is or something like ridiculous like that. So it doesn't actually, oh yeah, here, it says the third on at least this reference range, it says this reference interval reflects a three like third percentile to 99th percentile interval.

So it's how is that helpful? That's only catching, right? What does that actually mean in terms of optimization of health and that's when you really have to get into some of the boring studies. I mean they're not boring actually. I think they're really fun, but that look at.

Numbers and what they actually mean. And then again, in the end, numbers are just numbers. So I always take them with a grade of self anyways, but yeah. Yeah. I had one other thing I wanted to share with you, but questions first or other things you wanted to talk about? Do you mind if I ask you a personal question? I do not mind you're about your journey with progesterone. So when you were saying that you found out it was really low, you were already pregnant, right? And then. So you didn't supplement or you did supplement through the first trimester because that's something that keeps yeah.

That I keep hearing from people from friends and then reading too as oh yeah. I have a friend here who had no evidence that her progesterone was low. She just had her first baby at 35 and she just intuitively felt like it was because of her short cycles. She didn't get it tested.

And she just supplemented with cream for the first trimester of her pregnancy, just as like a, a safety net and yep. Yeah. I don't know. I hear about women doing that. I was just wondering if you did that. Yeah. So yes. And I have a lot to say on this, so it might be like a whole another podcast at some point or an, another episode of people are interested, but I had actually started one while I was pregnant with my son and I just never finished it.

But yeah. Depending on who you. A level, a progesterone level that is good in the first trimester would be anything over 10. Some places like NaPro like this pop Paul, the whatever sixth or whatever group. I think they have higher, higher ranges. They wanna see, I think they wanna see it above 30 actually.

But most people say, anything above 10 or 15 is what is ideal. I think there's a lot, we don't know about this also. I just want say for the record, but mine came back at I'd have to look, but it was somewhere in the threes or fours. And they said you didn't even ovulate. If you ovulate, it's always above.

I think they said five. And I was like I definitely did because I'm charting and also I'm pregnant. So I guess I'm a medical mystery. I don't know. Yeah, I ended up doing a bioidentical progesterone suppository. I believe it was 200 milligrams. Yeah. 200 milligrams every night vaginally.

And I believe I stopped somewhere around 14 weeks. It might have been 13 or 12 12, 13, 14, somewhere in there. And that was prescribed to me by the reproductive endocrinologist I saw who was really fabulous. Like you said, getting back into the world of OBS, it's just a different world and I don't know exactly why, but, for example, when I went to the reproductive endocrinologist, I was expecting, I don't know, just to be put in a cold room and it to be really sterile and the whole experience.

But instead I was brought back to his office, my partner and I. And he was like, tell me what's been going on for you. Tell me your story, essentially. He was amazing and was like, okay, here's all the tests that we could do. Here's the menu? What would you like to start with? Because you're young he's you've only had two.

So technically, you're not to the point of being diagnosed, wither and miscarriage, 'cause that happens after three. He's so we can be as aggressive or

as not aggressive as you want. I'll let you just pick. It was really amazing. So highly recommend seeing, I don't know if all of them are like him, but I suspect that they are, they're just more like they have more specific knowledge.

And I think they're used to working with people who are going through something emotional, which OB should be too. I don't know why they're so different. But so that would be a first suggestion would be if you're wanting more blood work and there's not someone who's like a knowledgeable naturopath, who's worked with fertility stuff.

Don't be scared to, to go see a reproductive endocrinologist who might be really cool. So I did do that. And then my plan was if I ever got pregnant again, I wanted, and even if I didn't get pregnant again, I wanted to retest after doing a bunch of stuff to try to strengthen in, in that Lal phase.

And so I did, it'd be hard for me to even probably recount what I've tried, but, the LA the latest round before getting pregnant with my son was I did do the bio and Tal. That was a new thing. I tried the B6 of course, like prenats, like a full spectrum, prenatal fish oils, the liver.

I think I tried, I did Vitex I think just for the Lal phase for many months and retested, and it was the same so it was super, disappointing. I was like cat, right? Like I did all the things. And so I also did an interesting experiment on myself where one cycle, I guess it was the cycle I got pregnant or was the one before I'd have to go back and see, but I tried the cream to see what that would bring it up to because I was like like I just wanna see if this whole cream thing actually works, which I did believe it did.

But I was putting on, I think, 80 milligrams a day, which is a lot, it's like hard to even slather yourself with that much. It was like, I ran out of room to rub it in. And so I was doing, I think, 40 in the morning and 40 at night after I ovulated. And just because, I didn't want to take the biodental if I wasn't pregnant, but I wanted to do something so that my body was getting what it needed if I was, if I did conceive that cycle.

And so I tested, I wanna say on day 10 And I've, I did get a PO I think I got a, I did a few experiments. I also got a faint positive test on day 10, which I did with my daughter too. And so I went and got my HCG and progesterone tested that day.

And it was really interesting. I can't remember what my HCG was, but it was super low, but it was cool to see that like these home tests could pick up such a tiny amount.

Yeah. So I think that's fascinating. And my progesterone was 15 and so the cream was definitely working, but it was not gonna be sustainable for me to be slathering myself, head to toe in this cream. And it was so expensive. It would've been like, it is a bottle a week, like a bottle a week. I would've been going through, I think I like priced it out.

I was like, this is ridiculous. And ultimately it's the same. So I ended up doing, yeah, the bioidentical progesterone again with him which I had gone to a nurse midwife in town and just said, Hey, look, here's what happened last, here's my pregnancy. Here's what worked for me. Can you just prescribe it?

So I have it on hand for like the moment I get a positive test, so I don't have to like scramble and feel anxious about, procuring it. And she said, yeah, so I just had it, around and ready. And I think I could, that's awesome to have a plan, and have it in place and avoid that anxiety because I feel like that is, obviously that's not good for keeping a baby right.

To be super stressed and anxious for the whole trimester. Totally. And, I will be the first to admit that, some of the evidence is scanty around it. And there was part of me that was like, you know what? I think I should just see what happens. I feel healthy.

Those two miscarriages totally might have been flukes, chromosomal things happen. It's really not uncommon. And then at the end of the day, I was. If I have another miscarriage and I didn't take the progesterone, I just will feel really terrible. So so that was why I made that choice. But it was hard.

I think all of these choices are hard. They are, but that's what you're describing is exactly where I am now. It's I don't, we're not actively trying now because I don't wanna try again until I know I'm doing everything that I can, and figuring out exactly where my hormone levels lie is part of that picture.

Yeah. Yeah. It's like rolling the dice or I don't know. I just remember that feeling. Just not feeling good. Yeah. It's so hard. I guess that I have two things, I guess I

thought I had one, but I have two. So you said you feel like you've moved through or been dealing with like the grief part, but.

Tell me more about that as that's come up now. Yeah, there is a lot from 2020 that was happening in our life. Like we had a lot of family grief. We lost pets, two pets in a year. We lost my childhood best friend since I was 12 at age 40, just suddenly unexpected gone. Yeah. It was a hell of a year.

And we lost two babies, , I'm still, I think I'm gonna for a long time be really working through that. But with the babies, I think the way that I was able to. Have miscarriages safely at home on my terms. And I really, I felt really strongly, like the first time it happened I had no experience.

You just don't know till you go through that. Even if you've supported friends through miscarriage, you really have no real idea till it's happening to you. But I had an amazing midwife here who supported me on the phone and let me talk out if what are the symptoms, when do I need to get help or like, when am I okay to stay home, and it was really supportive to have that and then like to talk herbs with her and go and have things on hand for just in case, so I think the way that I was able to do that, the first time I gained so much confidence that the second time, once I had the ultrasound and I realized what was happening.

And I I'm pretty sensitive energetically. And before I even started spotting, like there were a few days before that where I felt all of a sudden different, it was like, I almost just felt that energy was gone. And there's part of that is the processing, right? Like understanding what's happening in your body.

And then being able to make terms with that in whatever way you need to emotionally or spiritually, but being able to after the first time gaining the confidence and knowing the second time the OB was offering me like, here, I don't remember what the drug is, where they like, try to help your miscarriage along, and she wrote me a prescription for it. I was like, okay, cool. That's sitting at the pharmacy. If, in three days I might need that or whatever, but I just I already had that level of confidence. So I just came home and being able to just. I in my space and communicate with my baby on my terms.

It was like once that decision was made between us and I knew that energy was still there in some ways, but the physical body was ready to leave. I just, I don't

know. It was like, I was able to just make peace with it. And it's, there's still like this space where I still have this like longing and wanting for another child, and I think that is what's harder to make peace with is if I really get to a space in this next year where I'm like, okay, we're not having another baby. Like how long do I feel safe trying? Or, I think that's more like the processing that's still to be done, and I'm just I'm on this journey now of working on my health status, that's good in nourishing for me either way.

And it's work that I haven't done for a long time because I've been consumed with being a mom, and totally all of my work world has been put on hold for years. And so it's like this climatic point where I'm like, okay, I'm taking care of me again either way, but I think that there'll be more grief processing to come if we don't have another baby, if we try again and we don't get pregnant, or if we try again and lose another one, like I just don't emotionally.

Obviously I'll have to deal with that outcome if that's what happens, but like emotionally right now I'm so not, I still don't feel like I wanna go there again. So yeah. And then this limbo space, it feels like a little limbo space. Yeah. Yeah. And it sounds like you said, this was the second miscarriage was in December.

Is that right? Yeah, just a couple months. yeah, right? Yeah. The week before Christmas. Yeah. December mid December. Yeah. Yeah. And you touched on it too. If someone hasn't gone through it, it's hard to explain just and everyone experiences it so differently, somewhat across the board, just like the most women report to me and I experienced wow, that was way more intense than I ever imagined.

It could be just on all the levels, physical and emotional and spiritual and all of it. So you're still pretty fresh coming, coming out of like a postpartum time, and yeah, it sounds like you're on a really good track and you're really aware of kind of the places where there might be some more grief and yeah, that unknown is so hard.

Yeah. And Working up the courage to try again, if that's what you're gonna do. yeah, no, definitely. It takes a lot of courage. And I love that midwives. I don't know, maybe OBS do too, but it's like considering it a postpartum period, like this yeah. You should really take that postpartum space and it's not always easy to do, especially when it happens so early.

And many people don't even know that you are pregnant. And so you're still just going through life and going on with it. But I love that midwives really hold that. And you and Maryn have done that in your work to like encourage that, that women really need that they need to be treated that way.

And I had a friend here who had a miscarriage just the year before. So I had this like other person that I could talk all of this out with who had been through it. And she just kept reminding me like, you're postpartum right now. So I actually, this time around, I did some stuff to I took, wish garden herbals that makes they make some really great postpartum formulas.

I took their herbal balance, their rebalance, I think it's called. And that was something that I, yeah, and I was focusing on my diet too, but that was something that I did this time that I, that was different than last time where I was like, you know what, my emotions are all over the place because my hormones are all over the place and I'm gonna try to balance that out.

And I'm gonna really like, recognize that this is a true postpartum without the outcome of having a beautiful baby in your arms, yeah. Yeah. That's interesting. You brought up wish garden. I think it was them. They have one called baby blues and I just happened to have it on hand and I didn't necessarily feel like that's what I was experiencing, but it was one of those, like just intuitive things after my first miscarriage, I had it around maybe for my mid, before he kit.

I'm not sure. And I was like, I think I need that. And it really. Felt like the right thing for me to do. And also, yeah, I don't know. It's just interesting, 'cause obviously it's meant for like post like a full term postpartum experience. But I was like, I do think I, in retrospect, like I do think I had some amount of like postpartum depression and just mixed with all the grief and all of it, it's like a lot, it's a lot.

So I'm glad that you took that time and did some things to honor that was the case for you. Yeah. Yeah, and if it suits, for everyone has, different ideas about what they do with their placenta postpartum, when they're having a full term birth, but it's like finding ways to, for me, ritual and ceremony are important parts of my yes.

Spiritual life, so finding ways to honor that little one, I've done that both times and. Yeah, we've planted some beautiful fruit trees on our property, for those babies. Yeah. I think that's important for women to think about and hear too, like the whatever their idea is about that, but like finding some way to, yes.

Yeah. And it's, I know you had said like maybe OBS do this too, but across the board, they do a really bad job with miscarriage and supporting women. And I just had somebody in a local mom group this week say I'm really feeling disappointed in the care I'm getting after a miscarriage that I had, like from the hospital just reaching out 'cause I'm feeling like I don't know what to do.

She was maybe a week out and just feeling really, I don't even know how she'd describe it, but not in a good place. And so for people who are listening, like definitely even if you haven't made contact with a midwife during your pregnancy not all of them feel this way, but a lot of them, myself included are happy to like.

Talk through this stuff and give support, even if you're not their client. Like I know on my website, usually people don't see it because most people don't think they're going to experience a miscarriage. So they're not like planning for that. I have on my website that I provide free miscarriage support.

And sometimes I've even gone to be with especially with my clients, particularly with my clients when they're experiencing miscarriage, if they feel like they need that in person support, wondering, is this normal? Is this not normal? Should I stay home? Should I not? And I think that's an area that even midwives could get better at.

But just anyone who's listening, if you're experiencing that, even if maybe are through the physical part of it, like definitely reach out to your local midwives and see what kind of resources are around, even if it's just them listening for some time. Yeah. That's a beautiful service.

That's awesome that you offered that. Yeah, I think it's so important. And I have a client right now, actually who's due in July, I think who had a miscarriage last year. And she had been working with another midwife and at the first appointment, couldn't hear the heartbeat, went in for an ultrasound baby.

Had stopped growing was not alive. And the midwives said call me next time. You're pregnant, essentially. And that was that. Ouch. Indeed. Yeah. And so when she got pregnant again, she was like, I'm really looking for someone who maybe approaches this differently. Because that felt really not validating and not supportive or loving and really not ideal.

So like I said, a lot of midwives have some room for improvement as well. And some of the time I think it's because they haven't experienced it themselves. So maybe they totally get it. yeah. I had another thing I wanted to share, which is just that, and this is something that I thought a lot about too.

And this is interesting. I don't know, I'm guessing you already know this stat, but for people who are listening, I wanna make sure I get it right. So let me pull it up. That even after two consecutive miscarriages, the risk of another miscarriage is about 28%. So even if someone does nothing at all the chance of having a full term baby is what would that be?

72%. The odds are in your favor, is what I like to tell people. And I remember that being somewhat comforting to me, at least okay, this doesn't mean it's gonna happen every time. And then after three or more, the risk of another miscarriage is about 43%. It's just really interesting that even when there are consecutive ones, it doesn't always mean there's like an underlying thing that's gonna keep happening.

And then I wanted to just I don't know if I'm gonna read all of this to you, but it's from, there's this thing from this passage, it's a page or two from a book called coming to term, uncovering the truth about miscarriage. And there's some really cool things in it. And some that aren't so great, but it's a book that he wrote after his wife lost four pregnancies and says he set out to gather the most comprehensive and accurate information on miscarriage.

It's probably a little bit dated at this point, but he talks about this thing that I think is very much in line with what we were just talking about. So is it ridiculous if I just read this to you? no, please do. Okay. Okay. So this is chapter 10, cause it's called expert care. In one of the most peculiar miscarriage studies ever published researchers in Oslo in 1984 reported what they called tender, loving care had a dramatic impact on pregnant women who had a history of repeatedly

miscuing hardcore, biomedical researchers, typically blanch one confronted with such soft touchy, feely findings.

But the researchers who ran this study a husband and wife research team who worked in the obstetrics and gynecology department of the university of Oslo had hardcore credentials between them. They studied infections and miscarriage problems with amniotic fluid, chromosomal, abnormalities of sperm and osmosis and cellular membranes.

They found that out of a group of, and so this was a small study. I will preface it with, and then he talks about a larger one that was done similarly, but they found that out of a group of 61 pregnant women, 86% that were given tender, loving care or TLC carried to term. While the success rate plummeted to 33% in the group that received no specific treatment.

So essentially I'll summarize essentially they were doing weekly in person meetings throughout the first trimester. It consisted of, yeah, so weekly medical exams, which whatever, that's probably not what actually helped and optimal psychological support. TLC also consisted advising these women to avoid heavy work and travel as well as bedrest during the two week gestational period at which they had previously miscarried.

So yeah, he essentially is saying that this study showed psych psychological support in weekly like meetings maybe are what actually is beneficial. And so that's one of the reasons they are questioning things like the progesterone supplementation, because maybe it's just that they, people are often coming in every.

And getting to talk about this and de-stress and feel like they're doing something proactive. So it's a, the other part was just that that study had its methodological weaknesses. But seven years later, a more carefully controlled study published by New Zealand investigators presented more evidence that TLC had spectacular powers.

They did do like a control group and women in each group had an average of four previous miscarriages and were all similar in age. And the treated group attended a physiotherapy class each week at which they learned relaxation skills

and got a relaxation tape where the researchers asked them, which the researchers asked them to use every day.

They had a nicely decorated room in the hospital ward if they wanted to come into the hospital. If they wanted to just check in with somebody at any point or on the anniversary, gestational, previous losses essentially they just gave them more opportunity to like, have. And so they had amazingly identical results.

86% in the treated group went to term with all the success rate dropped to 33% in the control. Amazing. What a difference some TLC will make. Huh? totally just

to be supported. And, I guess this part's somewhat interesting that I'm done with reading from this book, but it says they further emphasize that repeatedly miscarrying creates a very market stress reaction. The next time a woman becomes pregnant. And this is goes back to something you said at the very beginning this was from the study.

It says observation shows that the stress reaction is characterized by general tension, weeping fear of going to the toilet or examining underwear in case of finding bleeding, checking continuously for the continuance of pregnancy symptoms. Anxiety over any abdominal pain, discharge change in symptoms, avoidance of other pregnant women, or discussing the pregnancy with anyone, including husbands and like panic at the gestation of previous miscarriages, general despondent and assumptions that it will happen again, is what they saw happen a lot in these women who were having multiple miscarriages.

It might just be that yeah, that's stress and getting support to help relieve. Some of it is maybe the greatest medicine of all. I think that's really true in whatever form you can find that, and I definitely don't think that modern I think modern midwifery care does, but I don't think that other modern care for women offers that

No, not at all. So I guess that would be my other suggestion to you or anyone listening. Who's finding yourselves in that space. If you're gearing up to try again, just having somewhat of a plan in place of okay, who can I check in with? Maybe it's not even the same person, but having it scheduled to check in once a week and get some really good quality support.

I have a, an example of what not to do, which is I saw a therapist after my second loss and I saw her through maybe 10 weeks and she was terrible. Oh, no. I was trying to find that support I was like, okay, I really do need some more support on this and like processing from the second one.

And she just didn't get it at all. And I, so I stopped going, so if you, if at first you don't succeed, try again to find someone. Whether it's a therapist or a midwife or a friend or some combination of those things, just having support during that early time is so crucial.

'cause otherwise it's really easy to go into that mode of like just holding your breath for three months straight, which does not feel good. No, and you're so right. That's like the, I mean you've been there. I've been there. It's what you do. It's like you're already feeling the, what if stress, yeah.

Any last questions or thoughts or anything?

No, I'm. I'm just so grateful for the conversation. Thank you so much. It's really put some things in perspective. It's brought up some new ideas and it's just been really awesome to share. And thank you for sharing too. I feel like this was just having a cup of tea with you, Margo. It was awesome. I was having tea.

Where were you having tea? I know we were bug. That is so pretty. I wanna know where you got that mug. You'll have to tell me later. Yeah, I will tell you it's special. It's from, I dunno, smoky mountains of east Tennessee. Ooh, I like the color. Mine is the, is it black banjo arts? She makes these cool birth mugs with babies on them.

Oh, awesome. And like moons. They're pretty Maryn. Got it for me as a present. Oh, nice. Thank you so much. For, just, being here and sharing your story, and I'm sure that it's going to be so helpful for other people to hear whether they're the woman, who maybe is in your shoes, or maybe they're a doula or a midwife who's working with someone like you to just give them more perspective and more understanding around, these topics and the ways that loss can look in different people's stories and how to support people.

Hopefully I gave them a good example of that. So definitely. Yeah for me too. Thank you so much. Yeah, you're very welcome. If you enjoyed what you heard,

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