

Are We Members of a Drug Cartel?

by Deborah Witwicki

Dear Sisters Full of Grace,

I was very moved by the film, *Maria Full of Grace* (available at video stores). The film is about a 17-year-old pregnant, unemployed woman in Colombia who becomes involved in smuggling drugs to the United States. What is so remarkable about the film is its tenderness in showing the stark human side of this enterprise. The title character, who is referred to as a drug “mule”, ingests plastic-wrapped drugs in her home country with the plan to excrete them in a hotel room in New York. I expect I will long be haunted by the scenes where the lovely young Maria struggles to swallow the cocktail-sausage-sized packages whole down the back of her throat.

What haunts me more is that the film has become a metaphor to me for our use of artificial drugs for contraception, fertility, hormone replacement, and even for the premature cessation of our menstrual cycles. While at first glance (especially if one’s first glance is a glossy magazine ad showing beautiful women “free at last” from the burdens of their bodies’ reproductive systems) the risks may not seem comparable, but scientific evidence shows that these drugs carry serious side effects such as increased risk of heart attack, stroke, cancer and infertility.

While I realize that the majority of women in North America likely have more choices and resources than Maria did, I wonder if we realize our freedom of choice when it comes to safeguarding our bodies. It takes knowledge, the support of other women and tenacity to find the best natural course for our bodies and to avoid the temptation of “swallowing whole” the promises of drugs and surgery to fix our problems.

Before I began working with Justisse Healthworks *for Women*, I had no idea of the potential we have to work naturally with our reproductive systems to prevent pregnancy, enhance fertility and balance our hormones. Now, I can’t help but wonder how such vital information escaped me.

Maria Full of Grace is ultimately a hopeful tale. It shows a woman’s strength and honouring of all that is good in her, and how it shines in even the most venal circumstances. *Femme Fertile* challenges all of you maids, mothers and crones to get in touch with your bodies with the guidance of our wise women writers and investigate for yourself the many holistic approaches to caring for your reproductive and overall health.

Deborah Witwicki is the editor of Femme Fertile.

Please Keep in Touch

We welcome your questions, comments, story ideas and expressions of joy, pique or outrage.

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A Forthright Women’s Magazine for Maids, Mothers and Crones

Femme Fertile

A Goddess Reviews *Vagina Monologues*

An Ode to Mucus

by Lisa Leger

Thank you for celebrating women in *The Vagina Monologues*. Though you do not name Me directly, I know deep in my heart that actors and audience alike honor the Goddess with every version that is performed around the world.

Vaginas have been tucked away for too many centuries of your *history* and the glorious days of *herstory* are ancient memories. Too many women in today's world do not know their vaginas, and thus do not know Me.

I am a Fertility Goddess and I bring you the mysteries of ovulation, reproduction, sexuality, menstruation, miscarriage, abortion, childbirth, infertility, menarche, and menopause. I protect the regenerative organs of all creatures, both female and male and I have a special place in my heart for the women whose knowledge of Me and my sister goddesses has faded. Those who serve Me are midwives, counselors, teachers, belly dancers, priestesses, and healers; anyone who helps women know how their bodies work on my behalf.

I am pleased that the vulva and vagina are being celebrated; but for my taste, *The Vagina Monologues* lacks mucus. The production covers some of the women's mysteries like menstruation, sex, and masturbation and this is significant progress after the years of repression you are still healing from. But my dears, where's the mucus? Where's the clear, stretchy, lubricative cervical mucus that is so abundant during your ovulations? Where's the smooth, cloudy mucus that marks the beginning of your

fertile phases? Please tell each other about how it feels slippery when you wipe your vulva, how it stretches between your fingers, how smooth and ready it makes you feel, how you started a baby during the days you noticed it.

I don't want to speculate about the reasons for the lack of mucus in *The Vagina Monologues*, but could it be that mucus



is considered too "icky" to be discussed in public? Could modern women be willing to loudly reclaim the word cunt and still not be ready to talk about the mucus that appears "down there"? It hurts my heart to hear women say that they thought fluid from their perfect, healthy cervix was some sort of discharge or infection.

I give you mucus so that sperm can survive in your bodies

and be nurtured until they can fertilize your eggs and bring new life into the world. The mucus that flows from your cervix each cycle is a beautiful crystalline formation; with an elaborate fern pattern like microscopic frost on a window. These channels sort and nourish the sperm, allowing them further passage into your body. Without cervical mucus, you would be barren. No babies; no people on the earth at all.

I give you cervical mucus so that you can know when you are in the fertile phase of your cycles and so that you can identify the day of ovulation each and every cycle. You have the ability to decide whether to start a baby or not. The knowledge is at your fingertips. Look for your mucus when you wipe your vulva after going pee. Does it feel slippery? Is there something on the tissue that you can pick up and stretch between your fingers? Get to know your mucus patterns; your life will become easier and you will grow closer to Me.

It is good to talk about all your woman's parts and your feelings about them, especially when you have not felt able to do so in the past. I invite you to talk about the mucus from your cervix as well. After all, none of you would be here without it.

With thanks to Zsuzsanna Budapest for showing how to give the Goddess Her voice www.zbudapest.com. Find out about The Vagina Monologues at www.vday.org. Also see Judy Chicago's Dinner Party at www.judychicago.com.

Lisa Leger is a Justisse Holistic Reproductive Health Practitioner. She provides natural health consultation at The Pharmasave Health Centre in Parksville, B.C. fertilityfairy@hotmail.com

Femme Fertile

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Publications

Femme Fertile

A Fortright Magazine for Maids, Mothers and Crones

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Sex, Lies and Menopause

Reading for Breast Cancer Prevention

By Laura Wershler

Every year, thousands of Canadians “run for the cure” in our country to raise funds for the Canadian Breast Cancer Foundation. Given that so many women suffer from breast cancer, it is not surprising that survivors as well as family members of both survivors and those lost to the disease put their energy to this cause. I am concerned, however, that the research and education funded by the millions raised annually, is for the most part, based on a scientific assumption that is false.

The book *Sex, Lies and Menopause: The Shocking Truth About Hormone Replacement Therapy* has convinced me that our resources would be better spent *reading for prevention* rather than *running for the cure*. Written by T.S. Wiley, an anthropologist and cultural theorist, with oncologist Julie Taguchi and research scientist Bent Formby, this book has transformed my thinking about women’s health.

The book is, well, shocking. It’s not an easy read. It’s not an assuring read, but if you are a woman concerned about your health, it may be a “must read.” Whatever your fear or experience — cancer, Alzheimer’s, heart disease, osteoporosis, diabetes, arthritis, sleeplessness, uncontrollable weight gain — this book will inform you in ways your doctor will not or cannot.

Sex, Lies and Menopause clarifies the conundrum modern women face when it comes to protecting ourselves from the ravages of postmenopausal aging. We have to decide which of two scientific assumptions we believe before we can decide what our personal health preservation strategy will be.

The first and most widely held assumption is that the major breast cancer risk factors are ‘hormonal’ and related to a woman’s reproductive history. The greatest risk results from long periods of uninterrupted menstrual or ovulatory cycles. In these situations, breast tissue is consistently exposed to estrogen.” This view is supported on the website, *Rethink Breast Cancer*, a worthy new charity started by Mary-Jo DeCoteau to make breast cancer relevant for her generation. Her mother died of the disease at 53. She is 34. One in five of her generation is predicted to get breast cancer.

Sex, Lies and Menopause supports exactly the opposite assumption: “In the hormonal interplay of progesterone and estrogen during the menstrual cycle, nature gives us the prescription for health.” The authors explain how the rhythmic cycling of these two hormones protects us from cancer. Estrogen, which dominates the first phase of the cycle, stimulates the growth of cells in every part of the body. Progesterone, produced by the egg follicle after ovulation, tells these cells to die if pregnancy does not occur.

It is the unopposed estrogen of perimenopause and menopause, when ovulation is intermittent or ceases completely and progesterone — the maestro of cell regulation in women — is no longer produced, that sets us up for breast cancer.

It boils down to this. Do we believe that normal, ovulatory menstrual cycles harm or protect our breasts and overall health? Our response is critical because it will determine to which theory of prevention and/or treatment we will commit.

If we believe the more common view that the less we are exposed

to our own estrogen the better, we may feel compelled to take a selective estrogen receptor modifier like raloxifene or tamoxifen. These SERM drugs will chemically castrate us and make us feel miserable. The authors of *Sex, Lies and Menopause* clearly state that their goal is to ensure their readers do not take these drugs.

“Our response is critical because it will determine to which theory of prevention and/or treatment we will commit.”

Sex, Lies and Menopause makes a compelling case for bio-identical hormone replacement (BHRT). It also explains why traditional HRT as we know it - synthetic hormones, created and patented by drug companies and given in a static dose - do more harm than good.

Mary-Jo DeCoteau and her generation should continue to “re-think” breast cancer. *Sex, Lies and Menopause* will inform them about things they can do to diminish their risk. Like nursing their babies for at least 18 months, with the added benefit of reducing their own daughters’ risk by so doing.

Rethink Breast Cancer provides research grants to young Canadian doctors and scientists. They might consider funding a researcher willing to explore the assumption that our health depends on the cyclic ebb and flow of estrogen and progesterone. For that I would both offer myself as a subject and gladly run to raise money.

Ms. Wershler is a sexual and reproductive health advocate and writer with a special interest in holistic reproductive health care. She is Executive Director of Planned Parenthood Alberta.

Reaching Out

Dynamic Women Help Their Sisters

B.C. HRHP Celebrates International Women's Day in a Special Way

If you've had the chance to read Lisa Leger's *Ode to Mucus* on page 2 of *Femme Fertile*, you might suspect that she wouldn't let International Women's Day go by in any ordinary way.

A Justisse Holistic Reproductive Health Practitioner who provides natural health consultation at The Pharmasave Health Centre in Parksville, B.C., Ms. Leger organizes annual seminars to introduce women to some of the health practitioners in their community.

On International Women's Day this year — March 8 — Ms. Leger brought together a nutritional chef, sex educator, anti-violence activist, a certified holistic health practitioner who practices irridology and long-term financial care specialists for her seminar.

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Justisse Director Speaks to Fifth Vital Sign

Naturopaths, medical doctors, dentists and other health care providers gathered in February to hear Justisse Healthworks for Women Director Geraldine Matus speak on *The Menstrual Cycle: Fifth Vital Sign*. Ms. Matus discussed how menstrual cycle events provide critical information on the health of the endocrine system. This is one of the main reasons that it is so important for women to chart their menstrual cycles. The endocrine system — hormones, hormone producing glands and tissues — is our second most vital system. The first is our central nervous system. Ms. Matus notes, "If our central nervous system fails, we die; if our endocrine system fails, we are very ill for a very long time." The presentation was part of a regular series of the Interdisciplinary Study Group hosted by Edmonton dentist Dr. Lloyd Culham.

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Fertility Awareness Club Starts at Grant MacEwan

Grant MacEwan students as well as interested members of the public can learn fertility awareness on campus thanks to a new club started by Holistic Reproductive Health Practitioner (trainee) Emma Hood.

Ms. Hood says, "The club is being established so that women (and their partners) can have continued access to feedback on their charting with a Holistic Reproductive Health Practitioner (HRHP). Continued follow-ups are crucial in learning to use fertility awareness effectively. We hope to form a charting circle where we can share our charting experiences and knowledge."

fertilityawarenessclub@yahoo.ca

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We look forward to your call to confirm your attendance or to schedule an individual follow-up appointment.

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Tollfree: 1.866.Justisse (587.8477)



Woman to Woman

Reproductive Health Care Practitioners

Answer Your Questions

Ovarian Exhaustion

I recently had a partial hysterectomy and am very worried about the effects it might have on me. How long after a partial hysterectomy do your ovaries continue to produce essential hormones? What measures can I take to protect my health?

Dear Exhausted,

In a sub-total or partial hysterectomy only the upper two-thirds of the uterus is removed, preserving the cervix (lower-third of the uterus), fallopian tubes, and ovaries. (In a complete or total hysterectomy, the whole uterus, fallopian tubes and ovaries are removed.)

Most hysterectomies are performed on women suffering from conditions characterized by estrogen-dominance, that is estrogen and progesterone levels out of normal physiological balance. These conditions include uterine fibroids, endometriosis, ovarian cysts, uterine and cervical cancer, severe premenstrual symptoms (PMS), and menorrhagia (heavy menstrual bleeding).

The physiological aftermath of a partial hysterectomy involves a decrease in blood flow to the lower pelvic region, in particular to the ovaries, thus interfering with essential hormonal communication. The decrease in blood flow is associated with three possible causes:

- 1) inadvertent damage to vascular tissue during surgery
- 2) removal of vascular tissue during surgery



3) the development of scar tissue and adhesions following surgery (Dennerstein et al, 1988).

After two to four years, without essential hormonal communication, the ovaries atrophy and cease working altogether – become exhausted. Exhausted ovaries cease to produce necessary estrogen, testosterone, and progesterone. Body tissues, systems, and processes dependent on these hormones suffer for the lack. In essence, the woman begins perimenopause. In the case of a complete hysterectomy, the lack of ovarian hormones is immediate, and the woman begins menopause with surgery.

The lack of ovarian hormones is implicated in many health challenges, including decreased sex drive and orgasmic potential, vaginal dryness and atrophy, decreased cervical mucus secretions, urinary incontinence, weight gain, premature aging, depression, anxiety, increased risk of cardiovascular disease, auto-immune disorders, osteoporosis, osteoarthritis, and various cancers (Boston Women's Health Collective, 1992. Jensen, 2003. Wiley, 2003.).

The adrenal glands also become exhausted trying to

output enough testosterone to compensate for it not being converted from ovarian progesterone. Adrenal exhaustion may be implicated in conditions of fatigue, anxiety, cognitive difficulties, muscle weakness, thyroid dysfunction, and exercise intolerance. Immune function is affected by the loss of the uterus as well as the ovaries. The uterus produces prostaglandins, hormone-like substances involved in immune function, normal ovarian hormone production, and sexual response (Jensen, 2003.). Canada has the second highest rate worldwide for hysterectomies: 37% of our women have had this surgery by age 60 (Jensen, 2003.). Women may be able to avoid this surgical procedure and those who have had a hysterectomy can counteract the aftermath of the procedure with attention to whole body health (see column opposite page).

Following are some specific suggestions for those who have had full or partial hysterectomies:

- Have your health care provider assess your thyroid and adrenal gland function and provide supportive measures if necessary.
- Keep your liver healthy so it can detoxify detrimental estrogens. Remedies include, doing a liver cleanse, or supplementing with indole-3-carbinol, dandelion root or milk thistle.
- Have your health care provider monitor serum follicle-stimulating hormone (FSH) – high levels are indicative of ovarian exhaustion – and provide supportive measures if

necessary. Chart your symptoms throughout the month as they occur, and make a note of how those symptoms resemble those you experienced during your menstrual cycle when you still menstruated – this information is useful for your health care provider, and helps you strategize how best to help yourself.

■ Support lagging adrenal function. Remedies include supplementing with adrenal glandulars, rhodiola, ginseng, or licorice root.

■ Improve hormonal balance and support, consider using bio-identical hormone replacement, or herbal or homeopathic support. Initially, the most important bio-identical hormone post hysterectomy is progesterone, which is naturally produced mostly by the ovaries, and some by the adrenal glands. Progesterone is most important because it counteracts the pre-existing estrogen-dominant state that necessitated the hysterectomy in the first place.

■ Avoid the use of birth control pills, Depo-Provera and synthetic hormones.

The loss of a uterus does not have to mean the loss of emotional or physical well-being. There are options for improving health and counteracting the effects of hysterectomy. There are many resources, including groups, health literature, and health care providers, available to help you learn how to maintain your health and happiness.

If you have questions you would like to ask a Holistic Reproductive Health Practitioner, please contact us:



Woman to Woman Justisse Healthworks for Women

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Whole Body Health

Your overall health naturally has an affect on the health of your reproductive system. Following are some suggestions for attending to *Whole Body Health*:

- Work with a health care provider whom you trust and who has knowledge and competence in providing holistic and complementary medicine health care.
- Reduce stress and get 8 to 9 hours of rest daily.
- Reduce exposure to environmental toxins – especially xenoestrogens that mimic our estrogens and fool our estrogen receptors (Berksen, 2000.)
- Increase exercise and pleasurable activities.
- Develop a spiritual life and explore ways to love your body.



Diet and Supplements

- Use non-heated fresh oils rich in essential fatty acids omega 3, 6, and 9.
- Eat lots of fresh fruits and vegetables, especially from the brassica family (e.g. broccoli, brussel sprouts, cabbage).
- Reduce refined carbohydrate intake (processed grains, sugar, etc.).
- Make sure you are getting sufficient essential vitamins and minerals, particularly B vitamins, calcium and magnesium.
- Eat a diet rich in phytoestrogens (found in soy and yams).
- Eat organic whenever possible.
- Don't store or microwave food or beverages in plastic containers.



Around Every Wise Woman are Many Other Wise Women

For you and the other women in your circle of friends and family, Justisse Healthworks for Women offers the following services:

- Counseling therapy
- Fertility awareness education
 - Contraceptive counseling
- Sexual and reproductive wellness education and counseling
- Perimenopause and menopause consultation and care
- Holistic Reproductive Health Practitioner training

Visit us online at www.justisse.ca or call today to set up your personal consultation (780) 420.0877 or 1.866.Justisse (587.8477)



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Holistic Reproductive Health Publications

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