

ks. Paweł Leks, SCJ

HELPING MARRIED COUPLES

*The
Billings Ovulation Method[®]*



*Helping
Married
Couples*

ks. Paweł Leks, STJ

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Couples*

*The
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... 2020

(For the POLISH edition)

IMPRIMI POTES

I agree to publish the updated brochure

„Helping Married Couples”

Fath. Wiesław Święch SCJ

Provincial

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Bish. Dr. Hab. Józef Wróbel, Prof. KUL,

Vicar General

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Foreword from the Bishop

Natural Methods – Billings Method

The description of the creation of man in the Book of Genesis specifically emphasizes the important aspects of God's plan, namely the endowment of the first Parents, and in them every person with a special dignity („*Then God said: 'Let us make man in our image, after our likeness' ...*" – Gen 1,26), the creation of man as sexual being („*male and female he created them*" – Gen 1,27), the vocation of the first parents to love („*That is why a man leaves his father and mother and clings to his wife, and the two of them become one body*" – Gen 2,24) and their vocation to parenthood („*God blessed them, saying: 'Be fertile and multiply; fill the earth' ...*" – Gen 1,28). Sexuality is therefore a special gift. It helps man overcome loneliness and predisposes him to participate in God, the source of fertility, and to human development. Above all, fertility makes the love of the spouses similar to the love of God the Creator, allows them to participate in that love and is a testimony of their great dignity (*cfr. John Paul II.: FC 28s*).

In this important vocation, the Creator does not deprive man of the gift of freedom. By building interpersonal communion in spirit and body, spouses can prudently, inspired by the generosity of the heart, in proportion to their abilities, living conditions and circumstances, fulfill their parental mission. This freedom guarantees the periodicity of female fertility. It allows married people to make joyful encounters and deepen their love without closing themselves on God's gift of parenthood.

From the above perspective, the spouses sadden the Creator when they decide to reject this gift, make infertile their intercourse – whether permanently or only here and now, regardless of the method used. The moral evil of such attitudes is already indicated by the Holy Scripture of the Old and New Testament, by scriptures of the Apostolic Fathers and the works of ethics and moralist theologians, who are in communion with the teaching of the Church. In modern times, this doctrine has been officially confirmed and developed by Popes of the 20th century.

– Pope Pius XI notes, that making infertile the marriage act is in opposition to the nature of man and burdens his conscience with a heavy sin (*Encyclical CastCon, part II: 31.12.1930*).

– Pope Pius XII has repeatedly spoken out on this issue. In a Speech to the Italian Midwives Union (*29.10.1951*) he teaches: „Any attempt of the spouses on the marriage act itself, on the natural consequences of that act, any attempt towards deprivation of an intercourse act of its innate natural power, prevention of life beginning – is immoral! No recommendations, no necessity can turn an act internally immoral – into a moral act permitted.”

– The Second Vatican Council in the Pastoral Constitution on the Church in the modern world *Gaudium et spes* (No. 47-52) firstly speaks: „Married love is too often profaned by ... illicit practices against human fertility...” (*GS 47*), and further speaks about the: „... pure conjugal love and undivided affection” of married people, „... expressed in a manner, which is truly human” (*GS 49*). In the next issue stresses, that „marriage and conjugal love are by their nature ordained toward the begetting and educating of children” (*GS 50*).

– Pope Paul VI in *Humanae vitae* (1968) not only cites the above teaching of the Vatican Council (HV 9), but adds the constant teaching of the Church: „This particular doctrine ... is based on the inseparable connection, established by God, which man on his own initiative may not break, between the unitive significance and the procreative significance, which are both inherent to the marriage act” (cf. HV 12). Therefore „excluded is any action which either before, at the moment of, or after sexual intercourse, is specifically intended to prevent procreation – whether as an end or as a means” (HV 14).

– This teaching is repeated multiple times by John Paul II, and especially in *Familiaris consortio* (1981), where in communion with the bishops gathered in 1980 at the Synod on the family he teaches: „This Sacred Synod, gathered together with the Successor of Peter in the unity of faith, firmly holds what has been set forth in the Second Vatican Council (cf. GS, 50) and afterwards in the Encyclical *Humanae vitae*, particularly that love between husband and wife must be ‘fully human, exclusive and open to new life’ (HV 11; cf. 9, 12)” (FC 29).

Does the above teaching mean, that spouses can only have an intercourse if they want to give an offspring to the world? No. The Church teaches that intercourse serves not only as the transmission of life, but also to deepen the reciprocal bond at the level of personal love. Therefore, for important reasons (e.g. health, economic conditions), guided by responsibility, may „decide not to have additional children for either a certain or an indefinite period of time” (HV 10), translating their marriage union on days of cyclical Infertility. This attitude, however, must always be accompanied by the inner willingness of accepting a child, if it had appeared nevertheless.

For spouses who want to preserve God's order in their conjugal life and beware of the sin of impurities, it is therefore a very important ability to recognize periods of fertility and infertility in the development of the cycle. Methods of such knowledge have been developed for a long time and there are many of them. However, they have their weaknesses: either their precision is very low in determining periods of fertility or infertility, or they do not work for women who experience irregularity of their cycles. These problems are overcome by the *Billings Method*. After learning this method, a woman can relatively easily recognize on an ongoing basis, at which moment of the cycle she is currently present, that is, whether the possibility or inability to conceive on a given cycle's day is maintained, and therefore guided by the principles of responsible parenting can take up a marital union, or better shift the union to one of the days of cyclical infertility.

This publication, prepared by Fr. Paweł Leks SCJ, presents the method developed by Professor John Billings, in cooperation with his spouse, Dr. Evelyn Billings (*Melbourne, Australia*) and many science staff around the world. The author of this publication was also authorized by Mr. and Mrs. Billings to ensure the correctness of teaching this method „for Poland and neighbouring countries”. Although the description of the method itself is written with a not easy language, as it contains many technical concepts related to the method presented, it is worth making an effort to ensure, that the joy of the spouses will not be disturbed by the unrest of conscience, but on the contrary, that the spouses could act in accordance with their personal digni-

ty and to be accompanied by the awareness, that their relationship sanctifies themselves by fulfilling God's expectation.

Bishop Józef Wróbel, SCJ

Lublin, 12.11.2019.



Introduction

This booklet is the second edition of its previous edition entitled: „*This beautiful – This difficult Love. The Billings Method. A proposition for Married People*” (Kraków SCI 1998). It consists of two parts.

– The *first* part presents a teaching course of the first specific method (= *hitting „home”*) for diagnosing on the spot the days of the cyclical possible or impossible conception thanks to the ‘*Billings Ovulation Method*’® (*BOM, or: OMB: Billings Ovulation Method, or: Ovulation Method Billings*).

– The *second*, theological part is dedicated to the attitude, what should be accepted while using any method of conceptions planning.

The ‘*Billings-Method*’ has reached Poland (*and several other neighboring countries*) via the author of the present booklet (1972-73). The Author of the Method, Prof. Dr. John Billings, asked him (*Fr. PL*) after the initial contacts to keep watch over the authenticity of the the teaching the Ovulation Method „*in Poland and the neighbor countries*” (*letter from Prof. Billings to Fr. PL: 29.I.1974*).

In itself the Billings Method is a worldwide good to humanity. It is not bounded to any religion. It is a typical *diagnostic* method. The aspect of *ethics* appears only on the stage of *applying* the information gained thanks to this diagnostic: according or not with the inner order of genital relations.

The four basic ‘*rules-advises*’ of the Method for direct use of couples, elaborated by Prof. John Billings, have been over years more and more accurately determined. This happened both in his and his wife’s life, Dr. Evelyn Billings, as well as yet after their death (*Prof. John Billings: +2007; Dr. Evelyn Billings: +2013*). Following this, the medical part of this booklet had to be reworded thoroughly for its

customization to current requirements of the Method. At this opportunity the theological part has undergone, too, a re-editing.

The introduction to the *Billings Ovulation Method*, shown in this booklet, is constantly consulted and agreed with the 'World Organisation of the Ovulation Method Billings' (*WOOMB*), founded by Prof. Billings in 1977 in order to keep watch over the authentic transfer of the conscientiously worked out and in global scale still scientifically and clinically verified rules of the Method, enjoys an international approval. It means, the teaching of the Method as shown in this booklet is fully in harmony with the advises, as they have been elaborated by Prof. John Billings. This statement is enormous important up against those which are in circulation and are not authorized elaborations under the name of the Method *allegedly* 'Billings'.

It should be said, that the current publication is a specific concise presentation of the first part of the extensive website, created by the here writing author (<http://lp33.de>; *the whole homepage includes 7 large parts; written in two parallel versions: Polish and German*). The mentioned homepage, being a specific Encyclopedia of *dogmatic and moral theology, the Holy Scripture, documents of the Magisterium of the Church etc.* – is largely based, although not only – around issues of ethics of sexual relations with explicit inclusion of the calling of every human being as a *person* to eternal life. In case of arising questions the author refers to seek after answers on the mentioned website. The website discussed topics such as *life calling, ethic, conscience, marriage as sacrament, God's Mercy, the price of Redemption, the sacrament of reconciliation, Eucharist, the human and God's order of intimate relations, Church, the Magisterium of the Church, the role of the Holy Scripture etc.* The introduction to the *BOM* is shown there in its first part (*= 3 chapters of its first part*).

Our booklet about the *Billings-Ovulation-Method (BOM)* brings the needed information in a situation, when accredited centers of teaching of the *Billings Method* do not exist in our country (*and so many others*). The here writing author presents the details as they come from the Author of this Method – Prof. John Billings, without addition of any denizens from other ‘methods’. As mentioned, the exclusive instance authorized to adjudicate about the authenticity of the lecture on the „Billings-Method” is founded by Prof. Billings the ‘*World Organisation of the Ovulation Method Billings*’ (*WOOMB*). From there comes the certificate of authenticity for the shown here ‘Billings-Method’ (*given on 7.VIII.2018*).

ks. Paweł Leks, SCJ

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Tarnów, 5.X.2019.



Approval of this text by the 'World Organisation of Ovulation Method Billings' on 7.VIII.2018, updated on 14.I.2020:

WOOMB™

World Organisation of Ovulation Method Billings

7th August 2018

Dear Fr Leks, We thank you for submitting your manuscript of „Helping Married Couples: The Billings Ovulation Method™” and are pleased to give our approval, that it reflects the authentic Method. Please use the statement at the bottom of this letter to indicate this approval.

Sincerely (underdesigned ...)

*Gillian Barker, Kerry Bourke, Marian Corkill, Marie Marshall
Directors, Melbourne, August, 2018*



The Directors of WOOMB International Ltd have checked the text of this book and state, that the Rules and Methodology of the Billings Ovulation Method® as developed by Drs John and Evelyn Billings are accurately depicted.

Signed:

*Gillian Barker, Kerry Bourke, Marian Corkill, Marie Marshall
Directors WOOMB International Ltd*

Melbourne, August, 2018



14th January, 2020

The Directors of WOOMB International has reviewed this book and are confident that the Rules and Methodology of the Billings Ovulation Method™ are accurate and reflect the authentic teachings of Drs John and Evelyn Billings.

*Kerry Bourke, Joan Clements, Marian Corkill, Marie Marshall
Directors*



*From the medical review
by Prof. Dr. Hab. Bogdan Chazan*

„... The Billings Ovulation Method is one of the diagnostic methods used to evaluate fertility. It is an effective method, safe and cheap. It allows the woman to evaluate her own menstrual cycle, and correctly interpret the messages from her body signifying the fertility and infertility phase of her cycle. Knowledge of the biological fertility rhythm enables husband and wife to respect the value of life. The method may also be used for early diagnosis of disturbances in the menstrual cycle.

However, it must be emphasized, that the Billings Method itself relies on the biological diagnosis of the current state independent of any of religion or ideology. It supplies only biological information. The issue of ethics, which will be included with this information, is a matter of secondary importance. Decisions regarding the practical application of the Method, and the motivation for learning about it application depend on the free will of the people concerned. They should not be identified as medical information. Using the Method may arise from religious motives, or from a desire to live in accordance with the laws of the nature.

The booklet is intended for married people, who on the grounds of justified reasons wish to influence the time, when they conceive a child, or they are experiencing problems with their fertility. The booklet may be useful as for young people in workshop preparing for family life – and as help in premarital or familial marriage guidance's.

... I rate this booklet very highly. It is written in an understandable language, is pleasant to the ear, and

the order of the issues covered results from the nature of presented matter. Attention should be paid to its practical advices and clear tables and schemes, which will help married couples to comprehend the essence of the subject matter and apply the rules shown in practice.

The *Billings Ovulation Method* is used and prized all over the world. It is simple and does not require any additional equipment. It is at the same time effective and easy accessible to all. In Poland it is not known or applied as often, as it deserves.

With whole conviction I recommend this booklet be making accessible to readers. Its publication will contribute, in our country, to spread the knowledge about the mechanisms of female fertility, improve to procreative health of woman, and decrease the frequency of infertility. It will contribute, too, to increasing respect for the worth of the human body and the value of human life”.

Prof. Dr. Hab. Bogdan Chazan

Warszawa, 18th November 2017



From the theological opinion
by Fr. Prof. Dr. Hab. Paweł Bortkiewicz,
Society of Christ

„... The value of this book should be considered on several levels. The first value of this publication is the Author himself, experienced, with extensive experience in theology and pastoral activities. At the same time a man who impresses with his fresh views and thorough knowledge of present-day Church teachings in discussion with the world and surrounding culture.

But what especially deserves stressing is the unusual feature of trusteeship involved: in 1974 Prof. Billings – so to speak – entrusted Fr. Leks with the implementation of his own method in Poland. This fact cannot be unnoticed: it constitutes an exceptional proof of the authorization given to author to spread word of this method. An additional certificate is the publication's approval by the administration of the *World Organisation of the Ovulation Method Billings™*.

The Author – a theologian and pastoral guide, affects the features of this publication. It proves to be both: practical and theological par excellence. The pastoral value is immensely fundamental both to staff members of family guidance centers – and to married people themselves. Practical matters are presented legibly and very understandably. Of enormous help here is the attached illustrated material.

The theological part refers, to a certain extent, the marriage as the „natural sacrament”, and thus in accordance with God's specific design expressed in the act of creation. This design has of course a humanity-wide value, as it is connected with the rational nature of human beings.

Here one should emphasize two overlapping levels in this part. They consist of argumentation, that both: explains – and justifies.

On the one hand it appeals to ethics based on the natural law, thus relating to the rational nature of human beings in their inclination to be good. From the viewpoint of this rational nature and the concept of the natural law you can explain and justify the good in opening up a husband and wife to life, which will be brought into being as a consequence of bodily speech, which expresses the rational, super-hedonistic sense of human sexuality. It is also written in the natural needs of human being to strive to prolong one's existence, to ensure the durability of the species.

In the same way, from the viewpoint of the natural law, and thus ethics as generally and commonly available to human beings, you can prove, as Fr. Paweł Leks is doing, that the act of a consciously egoistical closing of oneself to life – is objectively a bad act.

Into these general assessments are written evaluations of various means, or any particular methods, which allow the act of opening oneself to life via the use of the natural fertility cycle – and otherwise an act of directly interfering in the transmission of life via any means of contraception, and above all abortifacients.

... That is why this publication, although surely destined for believers and those living the Church's teaching, may be of interest and help in reflecting on the theme of parenthood outside the Church.

A great asset of this publication is its conciseness – there is enormous economy in the words used, which will surely be of help in practically acquainting oneself with its contents.

It seems to the below undersigned, that this publication by all means deserves to be published. Its

publication in Kraków would have enormous significance – not only because the Author belongs to the Kraków-Metropolis, but above all because of the fact, that from this environment, years ago, thanks Cardinal Wojtyła, there resounded a booming voice of support for the propagation of the truth regarding the marital act and marriage itself, which was proclaimed by Paul VI in „Humanae Vitae”.

The Billings Method is today – as it has been for years – a constantly updated and improved method, which is a unique, practical annex to this encyclical”.

*Fr. Prof. Dr. Hab. Paweł Bortkiewicz,
Society of Christ*

Poznań, 14.02.2017.



Enjoy using the 'Billings Method'

1. The Introduction. Married couples in need of their offspring conceptions regulation, who do not wish to infringe either the *structure* of the marital act, or its built-in *dynamics*, can benefit from one of the 'natural' methods of conceptions planning.

The expression '*natural method*' will be used here in the meaning associated with it by the Catholic Church. Namely '*nature*' of the human being is to be not an '*object-think*', but a '*PERSON*' (*to be a person means: self-consciousness, self-determination, the ability of taking responsibility; and the inalienable call to the eternal life in union with God*). Thus it must be consistently stated, that the „natural” method of conceptions planning will only be such a „method”, which while taking into account physio-biological regularities, will be accommodated to the dignity of human being as person, called to the eternal life in the union with God through the marriage.

Married couples and those preparing to get married can choose one of the available 'natural methods':

a) The Rhythm-Method (*statistical method; very outdated*);

b) The (Sympto)-Thermal-Method in its more and more different varieties (*relatively accurate information, that ovulation has probably taken place in this cycle; all varieties of the thermal-methods have now reached the apogee of their development and are not able improve any more*);

c) The Billings Ovulation Method (= BOM).

Here we shall discuss only the *Billings Method*.

We do no mention about methods utilizing any technical devices. Leaving aside their diverse technical and productional quality, such methods are not available to

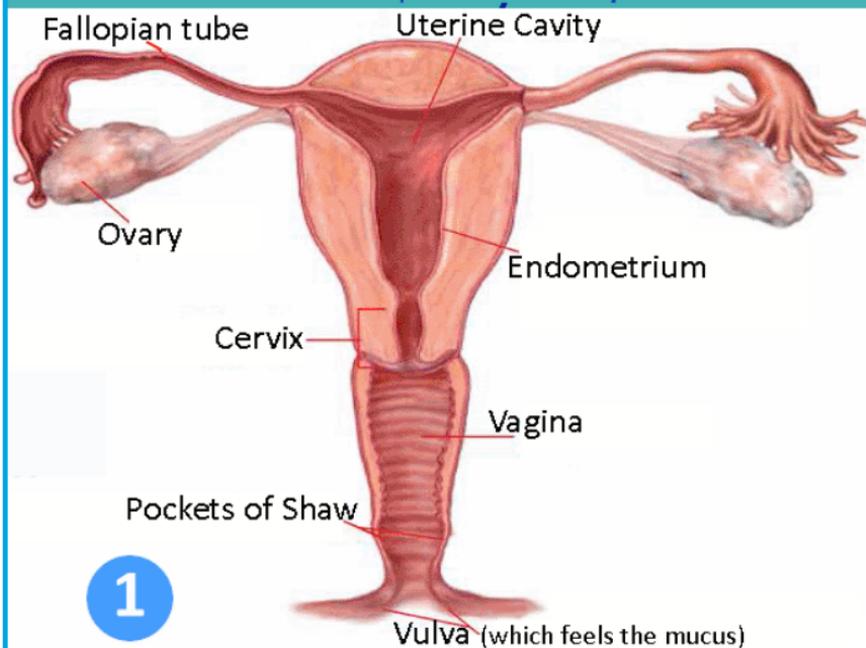
marriages in general and in this respect they can not be included to the *'natural' methods*.

2. The Billings Method (= BOM) is in the history of medicine the first *'specific' method ('specific' in its medical sense)* of recognizing the days, when a conception may or may not occur. It is based on the worked out phenomenon, which was scientifically and practically thoroughly investigated by Prof. John Billings (*and his collaborators*), which is spontaneously observed by the woman and which conditions the sperms penetrability: the characteristic mucus discharge, which appears only on the days, when conception is possible, and this is the only time when sperms can penetrate. This mucus, produced in the upper part of the cervix (*influenced by rising oestrogens level produced in the ovaries*), reveals its presence via a SENSATION of wetness and slipperiness at the vulva, when the woman is standing up. Sperms survive in this mucus 3 days (*exceptionally up to 5 days*), are nourished and moved forward.

The name: *Billings Ovulation Method® (or simply: Billings Method)* is reserved by the 'World Health Organisation' (*WHO, 1976*). This method offers information about the current fertility status both in times of health and during disturbances of the cyclicity, when breastfeeding and pre-menopause age. It does not require either cycle's regularity or gynecological health, and in the same time is helping to diagnose any pathology appearing. It does not require the need to take one's temperature and count days. It is useful both for optimal conception planning, as well as postponing conception.

3. The central event of the cycle is ovulation. The previous days are the PRE-ovulatory part. The length of this part of the cycle may be different: it does not matter for the *Billings-Method*. The length of the POST-ovulatory part is stable: it takes about 2 weeks (*11-16 days*).

The Female Reproductive System



© 2012 Billings LIFE

Pict. 1. Anatomy of the Female Reproductive System

The vulva is a sensitive organ, what responds immediately to fluctuations in hormonal concentrations occurring within the cycle phases. The information provided by the noted SENSATIONS-from-the-vulva (eventually occasionally by visual observations, if she is 'seeing' any discharge at the vulva region) is fully binding to obtain certainty about the possibility or impossibility of conceiving on a given cycle day.

The Billings Method (as a 'method') excludes touching oneself, stretching the mucus between the fingers and examining it on a tissue. All the more, any internal testing – in the vagina, is excluded by the OMB (see more exactly p. 54).

It is worth to muse about the simplicity of Creation's work: the woman (both: husband and wife) is gaining a fully sufficient and binding information from what is going on outside: from the SENSATIONS-on-vulva. There is no need to seek any ad-

ditional information in the deep (in the vagina), nor to reach for any technical instruments (e.g. a thermometer; sophisticated little computer-devices). The Creator supplies informations in astonishingly simple way. This information is understandable for people, even for those, of the most primitive cultures.



4. The Menstruation: ● (*red colour*). This is the bleeding which appears about 2 weeks (*11-16 days*) after the identified PEAK of mucus symptom (§ 18.22). The onset of period menstruation begins a new cycle and its recording. It happens, that the ovulation of a new cycle will occur parallel with the ending menstruation (§ 13.23).

5. The PRE-ovulatory part. In this segment of the cycle – the ‘**Basic Infertility Pattern**’ (= *BIP: Basic Infertile Pattern*) persists. In very short cycles the ‘BIP’-days may not appear at all.

In cycles of average length (= *under 35 days*) the *Basic Infertility Pattern* may occur in two variants. In the Billings Method terminology they are named as **Basic Infertile Pattern of Dryness**; or in other case **Basic Infertile Pattern of Discharge**.

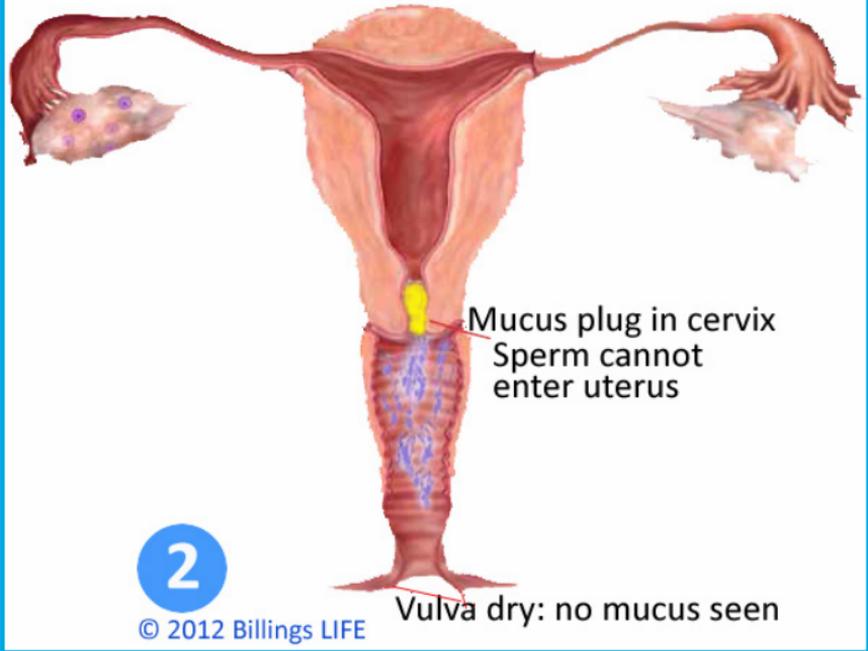
In long cycles (= *over 35 days; situation of prolonged suspended ovulation; while breastfeeding, in pre-menopause age; etc.*) – a ‘**Combined**’ **Basic Infertility Pattern** may appear.

In cycles of average length (= *under 35 days*) only one of the two ‘BIP-s’ appears in the same cycle.

In every one of these three ‘BIP’ variants, the woman *SENSES*, or in addition *SEES*, on the vulva remaining, for the time being, day after day constantly *the-same-the-same symptom*, without any change.

The **VULVA** is a sensitive organ, which precisely reflects changes of the hormonal levels in the cycle. Days

Basic Infertile Pattern of Dryness



Pict. 2. PRE-ovulatory phase: BIP of Dryness

During the days after the cyclical bleeding (menstruation) there are commonly forming few or more days of PRE-ovulatory infertility. These days are named in the 'Billings Method' as the 'BASIC INFERTILE PATTERN' (or more precisely: The Basic Infertility Pattern). It usually occurs in two sorts:

a) As 'days with DRYNESS', or:

b) As days with a slight discharge, in the time being incessantly the-same-the-same-the-same.

Pict.2 presents the 'Basic Infertility Pattern' of 'Dryness'. The SENSATION of 'nothing' persists on the vulva: the vulva feels 'dry'. Even during the visual observation there appears 'nothing'. The cervix remains for the time being blocked with a thick mucus plug. It forms a physical impediment for any further sperm entering. This justifies the certainty for no conception in the time being ...



of the '*Basic Infertility Pattern*' (*BIP*) bear information to the fact, that the ovaries remain currently in a (*relative*) 'resting' state. Oestrogens in the ovaries are at low level, because of processes conditioning their growth towards ovulation have not yet begun. Consequently, the cervical glands as well do not yet produce mucus (*first ovary oestrogens level must rise*). The woman recognizes this due the fact, that for the time being the symptom at the vulva continues to be still *the-same-the-same-the-same*.

6. The stage of learning the Billings-Method. When a woman is just starting out with the '*Billings-Method*', it is recommended to restrain from any sexual contacts for 2 weeks, so the infertility status can be recognized without disturbance by intercourse (§ 14.15). From now on notices should be taken of the observed SENSATIONS, eventually of the *appearance* of the symptoms-from-the-vulva (§ 10), without worrying for the time being about their interpretation. This will allow you to identify your own '*Basic Infertility Pattern*' (*BIP*) and catch the moment of the *first point of change* in this '*BIP*', indicating the beginning of conception possibility (§ 16-17).

On the other hand, yet in the first cycle husband and wife may use the PEAK Rule, if they correctly identify the day of the PEAK of mucus symptom (§ 18-21).

7. The BIP of Dryness. Many women observe in the PRE-ovulatory part from day to day a persisting SENSATION of *dry-dry-dry*: ●. On the vulva not only any mucus can not be seen, but there is '*nothing*'. This invariably persisting '*dry*' is sign of the *Basic Infertility Pattern of Dryness*. Ovaries remain for the time being in a (*relative*) *resting* state.

A conception does not occur on days such as these. Sperms die within 1-2 hours following the intercourse in the acid vagina environment (*attacked by defending cells*)

of the vagina; besides, the cervix is stopped up by a thick plug, blocking sperms penetration).

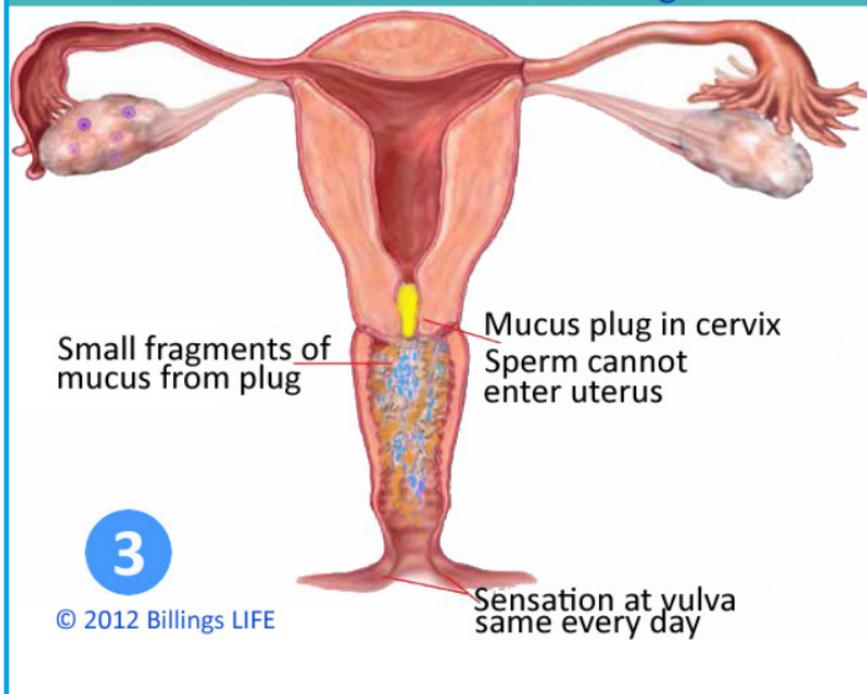
If the notes from the first cycle have allowed you to identify the *BIP-of-Dryness*, starting with the next cycle on, you can use Rules-Advices of the BOM for PRE-ovulatory days (*Early-Day-Rules: § 13-16*).

8. The BIP-of-Discharge. In case of other women the relative 'resting' state of ovaries is revealed *not* by SENSATION of 'dry-dry', but via the appearance of a **slight discharge**, which however remains for the time being – in SENSATION and appearance – unchanged *the-same-the-same-the-same*. This is then the *Basic Infertility Pattern of Discharge*: ● . This will mean, that the growth processes of the hormonal level of the ovaries have still not begun (*oestrogens level of ovaries remain in the time being on a low level*). The discharge appearing on the vulva comes not from the vagina, but from the cervix orifice (*small flakes coming away from the mucus plug closing the cervix from the side of the vagina; the plug continues to firmly block the cervix and does not allow sperms to pass*).

The decisive issue of the recognition of a discharge as the *BIP-of-Discharge*, is if it remains *in a given woman*, for the time being, from day to day, unvaryingly *the-same-the-same*. As long as there is no change in the appearing discharge, conception continues to occur *impossibly (sperms perish within 1-2 hours following intercourse)*.

Any *departure* in the SENSATION or appearance from this till now unchangeably the same discharge attests, that the growth processes of hormonal levels in the ovaries by now have been undertaken, so conception may now occur. In already changed mucus sperms live up to 3 days, exceptionally up to 5 days (*§ 16*).

Basic Infertile Pattern of Discharge



Pict. 3. PRE-ovulatory phase: the BIP of Discharge

This picture shows the same cycle phase: of the PRE-ovulatory Infertility – but in its other pattern: as the BIP of ‘days with Discharge’. The slight discharge appearing at the vulva consists of small flakes peeling off from the mucus plug blocking the orifice of the cervix. This plug continues to seal the entry of the uterine cervix. It causes – on the vulva – a continuous SENSATION, which lasts from day to day, and to be always the-same-the-same, without any change. Until there will be a first sign of interruption to this hitherto not changing BIP. Conceiving at that time is not possible.



When husband and wife are only just learning the ‘Billings’, they should in the case of the *BIP-of-Discharge*, when the cycles of the woman are of average length (= *under 35 days*), not have an intercourse in the PRE-ovulatory phase for the first 3 cycles (*contrary to*

the situation of the BIP-of-Dryness: § 6). The appearing discharge in the first cycle is noted in *white* colour. If in the next cycle, in the PRE-ovulatory part, exactly *the-same-the-same* discharge returns, it will be then noted in *yellow* colour.

If the woman discovers, it is really her *BIP-of-Discharge*, confirmed by an unvarying the-same *SENSATION-from-the-vulva*, intercourse can be resumed starting from the 4th cycle on, using the Rules-Advices for the PRE-ovulatory Days (*§ 14-16*).

On the other hand, right now the PEAK Rule can be used, if the woman has properly identified the day of the PEAK of the mucus symptom (*§ 18-21*).

9. The Combined-BIP. In long cycles (= over 35 days) with a long suspended ovulation, a combination of the *BIP-of-Dryness* and *BIP-of-Discharge* may occur in the same cycle. Namely a slightly raise of oestrogen level may stimulate the vagina's cells to grow and peel off, causing a slight discharge. But the thick mucus plug continues to close the cervix.

Dry days may then occur: thus *BIP-of-Dryness* – interspersed with the days of discharge: *BIP-of-the Discharge*. Sometimes this *BIP-of-Discharge* itself may appear in two slightly different variations. Notes from the two weeks of observation without an intercourse allow you in case of suspended ovulation to identify this 'Combined-BIP' (*more precisely on that: § 24*).

10. The Symptoms observation. The real use of the *Billings-Method* relies on accommodating to the following remarks:

Simultaneous use of the *BOM* – and any of anti-parental methods, exclude one other.

The **symptoms observation** relies on *becoming aware*, while the woman is in an upright position, what is her *SENSATION* in outer genital organs, i.e. what is the

SENSATION at the vulva – without touching or observing and examining it. It's a matter of the SENSATION in the outer genital organs (*middle-lower part of vulva; the region between minora-majora lips towards the rectum*): whether the vulva FEELS *dry*, or any discharge can be *felt*. Additionally sometimes some discharge can be observed *visually*, during the everyday hygiene, however without touching oneself or taking it between fingers.

For the PRE-ovulatory part, it is essential to determine whether the SENSATION from outer remains (*still*) the-same, or has it already undergone any change. The *first change-departure* from the hitherto *Basic Infertility-Pattern (BIP)* signifies, that the development of the mucus symptom has started from now on (*the ovaries' oestrogens have risen and stimulated the cervix to secrete mucus*), which means, that the conception now becomes possible.

Only and exclusively what appears *outside*: on the vulva, is a determinant for the *BOM*. The *Billings-Method* decisively rejects any inner investigation of the vagina (*medical and ethical contraindications: infection; damaging the Pockets of Shaw*). Mucus of fertility days is *fluid* and develops from *sticky* towards *slippery*. It flows easily through the vagina and appears straight away on the outside – as a characteristic *wetness*, becoming gradually *slippery*.

It is matter of becoming aware, of what the *SENSATION-from-vulva* is – without *touching* oneself and taking a discharge specimen, without checking it on a tissue. Non-accepting this advice means, the use of *BOM* is cancelled for you.

The mucus mustn't be *stretched*. The stretchiness of mucus (*'Spinnbarkeit'*) is a misleading symptom, thus there shall not be paid any attention to it. If strings of mucus appear, they may hang down on their own

(like egg-whites), sometimes forming loops, which will disappear themselves.

The characteristic *features* themselves of any mucus are not essential. The important thing is, what must be determined by the woman herself: whether the discharge is undergoing a *change-development*, or it continues to persist at *the same development stage* without any change. One woman will *describe* the *SENSATION-appearance* of her discharge-mucus with these words, an other will be using different words. She must not be influenced by any description of symptoms given by another woman, or by any printed cycle chart. In the authentic teaching of the *BOM* no concrete *characteristics* of the discharge are named. The woman only will be encouraged to describe the characteristics of her discharge using *her own words* (for example: *the change from the BIP-of-Dryness to mucus of fertility days, may comprise in only FEELING a different SENSATION at a certain moment, though she 'sees' no discharge*).

What is important, is that the characteristics of the identified '*BIP*' continue to be at the same woman *the same* from cycle to cycle.

Any *change-departure* from the hitherto noted *SENSATION-from-the-vulva* attests, the oestrogens level has risen, stimulating the cervix to secrete mucus of the fertility days. This *changed* mucus appears quickly outside and produces a change in the *SENSATION-from-the-vulva*. Even if it should be very slight and invisible by eyes, the woman *SENSES* its presence. The *changed mucus is already penetrable* by sperms.

11. Recording the symptoms. Observations of her *SENSATIONS* are made regardless of where she is occasionally staying. The thing is that she should be aware of, what the vulva actually *SENSES*. A convenient occasion will be take place during her usual, personal hygiene. In this case the woman should not let herself

●	∴	Menstruation and all bleeding. If <i>bleed+mucus</i> , record: ●●●, eventually: ●●●.
●		'Dry' (<i>SENSATION in outer sexual organs</i>).
●	=	Mucus of infertility days. Before PEAK: unchanging the same; after PEAK <i>feeling</i> : 'sticky', e.g.: 'cloudy', and the like.
○	○	Mucus of fertility days (<i>from 1st change in BIP, till the PEAK day inclusive; and while doubts in correct understanding of symptom</i>)
⊗	⊗	PEAK of mucus symptom (<i>after mucus development: slippery; 'fish-from-water'; lubrication</i>).
<i>Optional other signs</i>		
	/	Ante meridiem; or: / post meridiem.
	↓	Normal marital intercourse. Left: <i>morning</i> . - Right: <i>evening</i> .
	V	Withdrawal intercourse.
		Wish of marital tenderness.

Pict. 4. The colours and signs on the diagram and record

Here is the explanation of the colours and signs on the diagram of the BOM, which are used to record the symptoms of the cycle.



submit to any unhealthy scrupulosity. The more important, remembered features should be briefly noted on a chart (*1-2 adjectives*) at the end of the day, preferably by dictating them to her husband to note them down (*marriage dialogue; shared marital responsibility*).

In **official manuals of the Billings-Method**, cycles are recorded in a *horizontal* way. Symptoms are recorded using printed colour stamps to *stick on*.

In **environments where there does not exist any accredited teaching centers of the BOM**, for charting cycles you can simply use a slim *squared exercise-book*. The cycle days may be noted in a column *downwards*,

That you mustn't invent short cuts ...

BIP	Basic Infertility Pattern. <i>Only PRE-ovulatory cycle's part</i>	d	damp (<i>moist</i>)	s	back: P+ . slippery (<i>lubricat.</i>)
BOM	Billings Ovulation Method. <i>Name reserved: World Health Organisation, 1976</i>	dr	dry	sc	scanty <i>in amount</i>
br	brown	f	flaky, flocky (<i>like coconut-flakies</i>)	SF	seminal fluid
c	cloudy	h	heavy	sl	slight (<i>small amount</i>)
cb	crumbly	lb	lubricative (<i>slippery</i>)	sp	spotting (<i>staining</i>)
clr	clear (<i>transparent</i>)	lo	loops of mucus	st	stain (<i>tacky</i>)
cm	creamy (<i>smear</i>)	m	moist (<i>damp</i>)	sti	sticky (<i>tacky</i>)
cot	cottage cheese (<i>mycotic vagina inflammation</i>)	mi	milky (<i>white</i>)	str	stretchy
cp	copious amount	o	opaque	sw	swollen <i>vulva</i>
cr	creamy	p	plug of mucus (<i>from cervix orifice</i>)	t	tacky (sticky)
ct	clots (<i>clotty, claggy</i>)	P	ovulation pain. <i>Unreliable symptom: use only mucus symptom! On right, left side: 'P', in abdomen: P; in</i>	thi	thick
				w	wet (<i>moist</i>)
				y	yellow
					☼ ☼ ☼
					Week days: ↗ M T W Th F S (S)

Pict. 5. A supplement to understand the abbreviations of the symptoms description

As yet stated a couple of times, Prof. Billings underlines firmly, the woman shall not be suggested by the recorded cycles charts of any other woman, but note her SENSATIONS from vulva using her own words, or too her visually remarked symptoms from the outside. However in this booklet we are mindful of the environments, where any accredited learning centers with a good and authentic knowledge of the BOM simply do not exist. So we would suggest to use the ready abbreviations in order to not be impelled to 'invent' them while putting down records, which must be very concise, and nonetheless in a readable small column. Abbreviations as these – could be used, if the woman will be aware about her SENSATION maybe as in one of here shown adjectives. – On the first place there should always be notes about the SENSATIONS-from-the-vulva. On the second, additionally, there could be notes related to the visual appearance of symptoms. One thing more must be remembered – the Billings Method excludes any touching of oneself and any examination of mucus between fingers or on a tissue. Any

mucus investigation in the vagina itself, or even on the cervix entry, should be even more firmly rejected.

The shown here adjectives are taken fully from the written and printed in the currently valid manuals of the Ovulation Method authenticated by the WOOMB (see: TBOM-1, 2001; TBOM-2: 1997; UCF-BOM, 2017). Only the abbreviation relating to the sickness discharge has been added.

We remind once more: The woman shall use, when concisely recording her symptoms, her own words (1-3 adjectives). An individual woman may describe similar sensations from the outer genital organs using different words. The words will be typical for this woman and may differ from the description of similar symptoms experienced by an other woman. What is important, is that these sensations persist at a given woman usually from cycle to cycle without any change. So the woman is able to identify her personal, at her occurring, characteristic Basic Infertility Pattern (BIP) in her PRE-ovulatory cycle phase – unlike to its description by an other woman, who will note her own Basic Infertility Pattern in a characteristic, other manner.

while symptoms etc. as a  *horizontal* record. It is best to note symptoms using colours: red (*bleeding*), green (*dry*), yellow (*infertility days discharge*), white (*empty circle; mucus of fertility days; and all ambiguous situations*).

For the purpose of not needing to come up with any **abbreviations** when briefly noting down your SENSATIONS etc., you may use the suggested here (*not obligatory*) set of abbreviations (p. 34). In official manuals of the OMB you can find no such list of abbreviations. Prof. John Billings emphasizes strongly, that the woman should, using her own words, describe her SENSATIONS herself. Therefore he does not accept any set of prepared adjectives. While we nevertheless decide to present here a list of suggested abbreviations, we do it only to spare the effort of having to come up with them in case of countries, where consultations centers of the *Billings-Method*

are unattainable and women must manage with writing down abbreviated notes completely alone.

The first 3 days, following the PEAK-day are noted with a number: 1-2-3. They are days, when conception is still possible.

Below we will show [two learning chart-samples](#) (see p. 46), so the woman will be able to imagine, how a record can be made. The first record shows the situation of the *BIP-of-Dryness*, the second is a record of the *BIP-of-Discharge*. On the ground of these examples you can see a practical application of the *four Rules-Advices* of the *BOM* in the situation of justified reasons for postponing a conception. So you can see, how rubrics and notes should be made.

The record should be concise, readable. So you see the suitability of using *abbreviations* while noting symptoms. *Health issues* and *medicines* used should be noted too. On a computer (*eventually a smartphone*) you may use an adapted **EXCEL**-sheet (*easy to consult by e-mail*). Nevertheless, you should make daily written notes in a squared exercise book: your computer etc. may not always be accessible.

The Author of the 'Method' does not mention of noting *genital contacts* – except the nearest to the beginning and end of the days of a conception possibility. But for one's own insight it is best to note every intercourse, especially from the PRE-ovulatory days. In case of a not planned conception, such notes become its explication.

In case of a not planned conception, one should acknowledge in accordance with the truth, that not biology failed; and not God is dishonest. Instead the man 'failed': both of you; and not the '*Billings*'. This is, why each intercourse should be recorded, even the ethically incorrect one (*using your own signs system*).

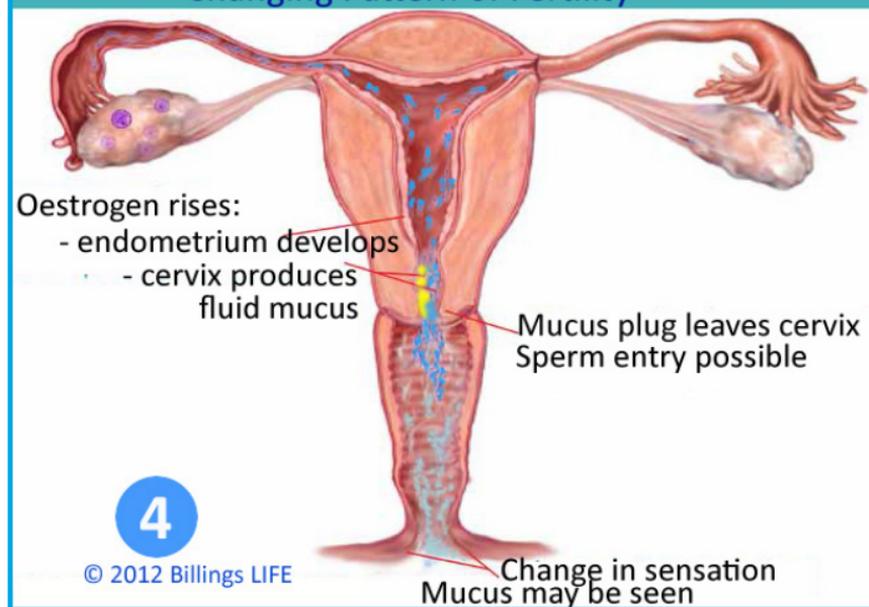
12. The Rules-advices for the PRE-ovulatory days (*i.e.: Early Day Rules, prior to ovulation*). In case of intended postponement of conception, the *Billings-Method* offers **four Rules-Advices**. We say ‘advices’, because you are not forced to take any action. As Prof. Billings has often strongly accentuated, the Rules are never a compulsion to any marital behaviour, but only advices showing scientifically and practically verified informations for when there exist an ethically justified reason to postpone a conception.

13. The Early Day Rule nr.1 (*Rule-Advice nr.1*). Do not have an intercourse on the days of copious menstruation bleeding. This recommendation refers to the bleeding recognized as menstruation (*i.e. following the previously identified PEAK, about 2 weeks previous; § 18.22-23*). In a short cycle, the ovulation may occur parallel with the end of the periodic bleeding. Blood may obscure any already appearing mucus of fertility days (*wetness related with the bleeding*). When blood coagulates, it becomes *sticky*: this makes the symptoms difficult to recognize (*§ 17-19*).

14. The Early Day Rule nr.2 (*Rule-Advice nr.2*). When the *Basic Infertility Pattern (BIP)* is recognized by the woman, alternate (*every other*) evenings are available for intercourse, i.e.: intercourse can be undertaken in the evening – with a 1-day-pause on the following day (*on the PRE-ovulatory days*). Therefore the marital union should be postponed until the evening of the next day, after recognizing, the previous *Basic-Infertility-Pattern* continuous to persist.

15. The Symptom following the intercourse. After the evening intercourse, a wetness appears, sometimes for whole 24 hours (*seminal fluid + wife’s discharges*). Symptoms such as these also occur, following any genital caresses without intercourse. The symptom-from-

Changing Pattern of Fertility



Pict. 6. The Beginning of the days of conception possibility

The 'first CHANGE' in SENSATION-from-vulva has occurred. It is a binding signal, that conception will be possible from now on. In the cervix only a fragment of the hitherto existing mucus plug remains: now it has been considerably dissolved, so that sperm cells penetrate from now on free into the uterine cavity and further. It gives evidence of growing ovaries oestrogens, which stimulate the cervix crypts to secrete channels of mucus of fertility days. In their environment sperm cells are nourished, protected from hostile vagina environment and selected. The women SENSES from now on, from day to day, the developing different features of fertility days mucus.



the-vulva may then confusingly resemble the mucus of fertility days. Therefore the advice for the PRE-ovulatory days: *1-day-waiting* after the marital union of the previous day. The seminal fluid must disappear and the woman should have the opportunity to check, if the same *BIP* as previous has returned.

Seminal fluid after intercourse on a 'BIP'-day does not contain any living sperm-cells. They perish within 1-2 hours of the intercourse (§ 2.7).

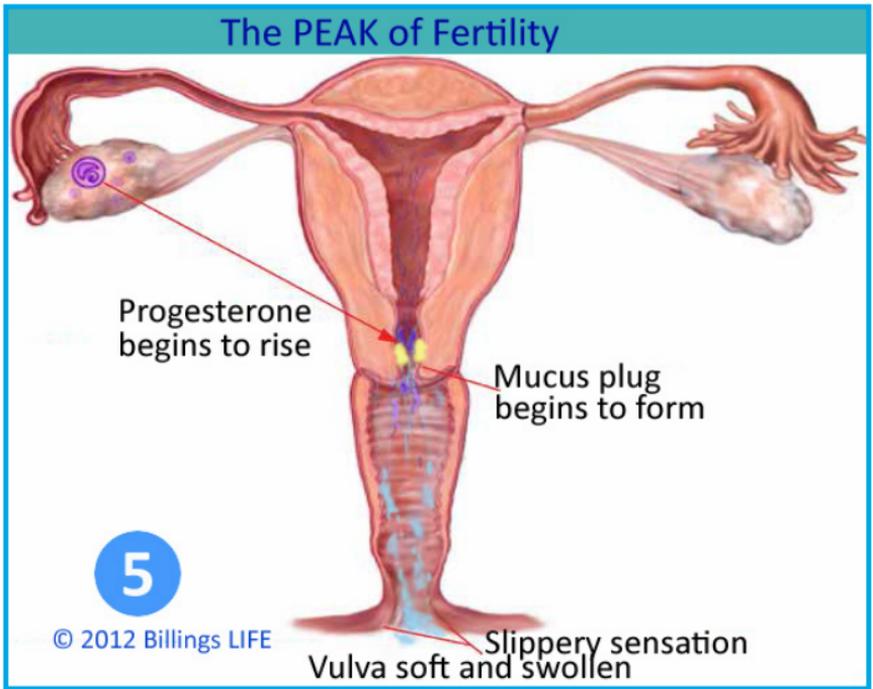
16. The Early Day Rule nr.3 (*Rule-Advice nr.3*). When in the hitherto appearing BIP any change-departure occurs: in *SENSATION-from-the-vulva* or its *appearance* compared with the up till now existing BIP, and also if there should any *bleeding-spotting* appear on a BIP-day, any intercourse shall be for-gone at this time. All change-departure from the BIP gives evidence, that the ovary oestrogens level has risen. As a result – the glands of the cervix are stimulated, and they secrete mucus penetrable by sperms, making conception possible. In mucus as this – sperms survive for up to 3 days, exceptionally up to 5 days (§ 8.15).

In case of a change in comparison with the hitherto existing BIP, two possibilities may appear:

a) The symptom continues to develop and the PEAK of the mucus symptom will be formed (§ 18). In this case the *fourth Rule-Advice* will be applied: the PEAK-Rule (§ 19).

b) If the PEAK has not been formed for the time being, and the symptom goes back to its previous stage, one must wait for 3 full days of the return of the previous BIP (*so the oestrogens-level can return to its low stage; this will confirm the return of the hitherto appearing BIP*).

Hence the **Early Day Rule nr.3** (*Rule-Advice nr.3*) of the BOM: „*Wait until the days of the change are over. If the previous BIP returns, add full days 1-2-3. Intercourse may be resumed only on the evening of the fourth day after the previous BIP has returned. Then continue with Rule nr.2, i.e. intercourse on every other evening, until another change during this BIP occurs*”.



Pict. 7. The PEAK of Fertility days

In the fertility phase, the woman experiences a changing SENSATION-at-vulva, e.g. from dry to sticky, from wet to slippery. Increasing concentration of oestrogens in this phase leads to producing of different kinds of mucus discharge. In this environment sperms are selected, their vitality and mobility is ensured. Sperm cells survive at that time in the inside of the female genital ways 3-5 days in expectance of the appearing ovum and ovulation. The vulva becomes slippery. The last day of slippery SENSATION is named as the PEAK of mucus symptom. The woman learns about this only on the following day. On the PEAK day the mucus may be very scanty, or even invisible, but the SENSATION 'slippery' persists.



The same advice concerns any intermenstrual *bleeding-spotting*. It is always sign of a high conception possibility: ❄️. Thus this advice should be strictly followed: „Wait untill the days of the change are over. If the

previous BIP returns, add full days 1-2-3. Marital union may be resumed on the evening of the 4th day after the previous BIP has returned. And from now on the Rule nr.2 should be applied: intercourse only on every other evening – till the next change of the BIP”.

17. The possibility of conception – The Fertility days.

Any change compared with the hitherto existing BIP – either of the *BIP-of-Dryness* or the *BIP-of-Discharge* means, from this moment on a conception may occur:
○.

Thus, if the woman experiences the appearance of the *BIP-of-Drynes* (*till now invariably ‘dry’*), any departure from this ‘dry’ signifies the beginning of the fertility days. This change can comprise only of a *different SENSATION* – without any *visible* mucus appearing. Any departure from the hitherto existing ‘BIP’ means, that the *mucus plug* in the cervix entry has moved, opening it for sperms (*this is important in context of the disinformation of the Temperature Methods, e.g. regarding the appearing of sticky mucus after ‘dry’ days*).

The woman will observe during the following days ordinarily a *development* of mucus symptom. It loses its characteristics of *stickiness*, and because of its *fluidity*, it flows easy through the vagina giving a *SENSATION* of *wet -moist*. The vulva becomes more and more *slippery*.

If a woman observes a constantly present *wetness*, she will without difficulty identify a *different wetness* appearing together with a *slippery* mucus. This mucus may be at the time being *clear* or *cloudy*. Sometimes it hangs as strings and forms *loops*, which will disappear on their own.

The *development* of the mucus symptom results from the fact, that the cervix produces at the time being *differentiated sorts* of fertility mucus. They fulfill a variety of functions essential for sperms: they perform their *selection*, and condition their *survival* and *mobility*.

18. The PEAK of the mucus symptom. It is the *last day* of the *slippery* sensation (*the sensation as if being oiled-up; like a fish-from-water*), which ends the previous development of mucus symptom: ☒. On this day the mucus can be already cloudy, scanty, often almost invisible, but the SENSATION of *slipperiness* persists.

The mucus is often *most copious* 1-2 days before the PEAK. Sometimes just before the PEAK, coloured mucus appears (*red, pink, brownly*). This is the bleeding-spotting preceding ovulation: ☑.

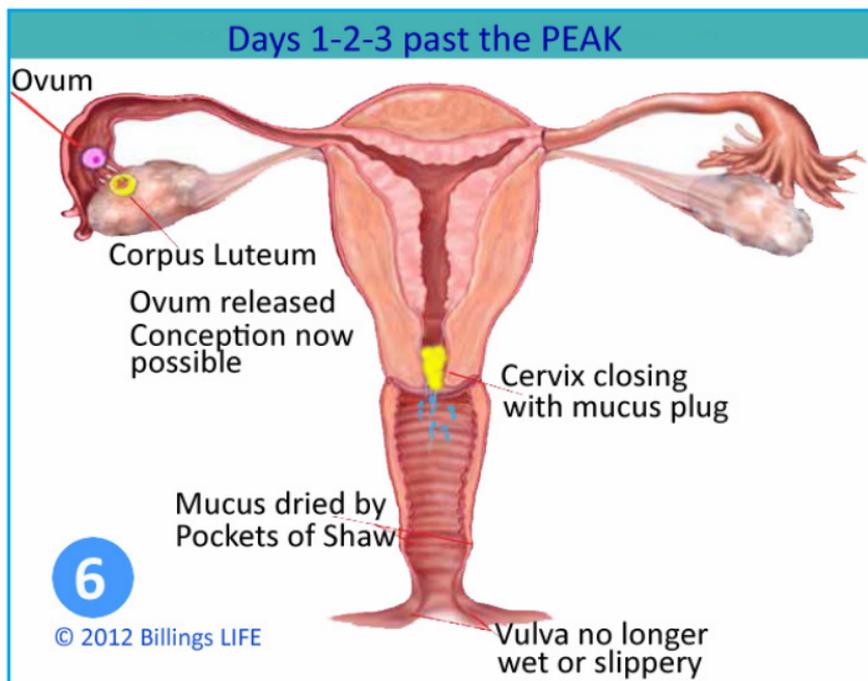
Many women additionally experience on the days around the emerging PEAK symptom a **softness of the vulva**: swollen vulva lips at the side of the occurring ovulation, accompanied by an increased *sensitivity* of the vulva.

Any other women experience the **'lymph node' symptom** (*daily examination on pre-ovulatory days: with straight hands lying down from the groin along the legs, middle finger feeling the pulsating leg artery; the index finger then lies over the lymph gland, felt as a pea; previous to ovulation it gradually increases in size and is tender when pressed*).

The woman recognizes the PEAK on the day after: from now on the SENSATION of *slippery* has disappeared altogether.

On day „1“ after the PEAK day, usually a *suddenly, dramatic change* occurs: the vulva is from now either at once dry, or a slight discharge appears (*for instance: sticky, cloudy, scanty*). It will be different for different women. It will be like this up to the end of the cycle: alternately *dry*, or some *discharge* may appear.

19. The PEAK Rule (*Rule-Advice nr.4*). In case of not intended conception, genital contacts should *not take place* within the *full first 3 days* after the PEAK day. These days must be noted with numbers: 1-2-3. Certainty about persisting the POST-ovulatory infertility, begins with the *beginning of the 4th day* following the PEAK.



Pict.8. The first 3 days following the PEAK of mucus symptom

The first 3 days following the PEAK of mucus symptom are still days of possible conception. The ovulation occurs mostly on the same day as the PEAK of mucus symptom, i.e. the last day of 'slippery' SENSATION, or equally often on the first day after the PEAK of mucus symptom. Only very seldom (ca. 1-2% cases) the ovulation occurs delayed at the second day after the PEAK of mucus symptom. The third day following the PEAK of mucus symptom is reserved for the viability of the ovum (at most up to 24 hours). On day '1' after the PEAK of mucus symptom, a decisive symptom change occurs on the vulva: the vulva is from now on not yet slippery. In case of some women, the 'Dry' appears immediately. Other women experience a slight discharge, e.g. sticky. This change in FEELING results from the rising progesterone. It causes the mucus discharge to become dry when passing through the 'Shaw Pockets', changing the previous SENSATION of slippery to dry or sticky. The same progesterone stimulates again the

forming of the thick plug at the orifice at the cervix from the side of the vagina. This process ends only at the end of the third day following the PEAK of mucus symptom. Only from now on the cervix will be again blocked for sperm cells migration. Thus, the conception impossibility is established from the begin of the 4th day after the PEAK of mucus symptom (i.e. following the last slippery day). About 2 weeks after the PEAK of mucus symptom, the new cyclical bleeding will occur, i.e. the proper menstruation, if in the meantime a conception has not taken place.



20. Ovulation usually occurs on the PEAK day, or the day '1' following the PEAK, and only very rarely on day '2' after it. The vitality of the ovum is assumed to be at most up to 24 hours. This is the reason for the 3 days waiting, following the PEAK.

Even though it is dry outside, in the cervix-canal *channels of fertility days mucus* are present over the course of these 3 days, through which sperms can still easily migrate.

During these 3 days following the PEAK, a *plug* progressively continues to form, and closes from new the entry to the cervix. This process will only be finished at the end of the 3rd day after the PEAK.

21. The POST-ovulatory infertility. In case of not intended conception, intercourse may be resumed from the beginning on of the 4th day after the PEAK till the cycle ends – without any restriction from the 'method'.

It's normal, that before the menstruation *wetness* will appear.

22. The PEAK of mucus symptom and the menstruation. About 2 weeks after the PEAK of mucus symptom, menstruation always starts (*on average: 11-16 days after*

the PEAK-day). As mentioned, the PEAK-day itself is preceded by *changes of the mucus symptom*: it is developing usually from *sticky* to *slippery*. If there are less than 11 days between the PEAK and the menstruation, the cycle will be infertile.

23. In a short cycle, the ovulation may occur parallel to the terminating menstruation. Therefore the *rule-advice* is: not to have an intercourse on days of heavy bleeding (§ 4.13).

Days with only spotting, and at the same time FEELING 'dry' at the end of menstruation, are days of infertility.

24. In long cycles: of over 35 days, and in times of long suspended ovulation, in the PRE-ovulatory part a **Combined-Basic-Infertility-Pattern (BIP-Combined)** may occur in the same cycle (§ 9). Specifically, the *dry days* may first appear, then the days with *unchanging discharge*, interlaced with dry days.

In order to identify this situation as the *Combined-BIP*, it must be observed for 2 weeks. This allows you to recognize it as a discharge, that for the time being is really not changing (*low oestrogens levels in ovaries*). The appearing discharge originates not from the cervix, but from the vagina's wall cells, which die and are shed.

Namely when there appears a situation of long suspended ovulation (*breastfeeding; after stopping the birth control pills; pre-menopause age*) from time to time, a temporarily slight rise of oestrogens there may occur and a response from the vagina (*not from the cervix*). The woman may then observe a slight change in the characteristics of this discharge. Should this new discharge remains invariably the same for 2 weeks, it can be recognized as another, new version of the *Combined-BIP*.

Bleeding may occur at this time (*'breakthrough'-bleeding: the still continuing low oestrogens lead to the growth of the mucous lining of the uterus and bleeding-*

Two learning records: BIP dry – BIP of discharge										
1	6.X.	C	●		21.00	22.	S	●		16.30
2	2005	P	●		<i>BIP of</i>	VIII.	(N)	●		<i>BIP of</i>
3	8.	S	●		<i>Dryness</i>	24.	P	●●●		<i>Discharge</i>
4		(N)	●●●				W	●		w,sm
5	10.	P	●	↓		26.	Ś	●	↓	w,sm
6		W	○		w		C	○		w
7	12.	Ś	●	↓		28.	P	●	↓	w,sm
8		C	○		w		S	○		w
9	14.	P	○		sti,c	30.	(N)	●	↓	w,sm
10		S	●	(1)		31.	P	○		w
11	16.	(N)	●	(2)		1.IX.	W	○		w,f
12		P	○		sti,c		Ś	●	(1)	w,sm
13	18.	W	○		w	<i>cp</i>	3.	C	●	(2) w,ma
14		Ś	●●●		w,sp		P	●	(3)	w,sm
15	20.	C	⊗		s,w	<i>sc</i>	5.	S	●	↓ w,sm
16		P	●	(1)	st,f	14	(N)	○		w
17	22.	S	●	(2)	st,c	13	7.	P	●	↓ w,sm
18		(N)	●	(3)			W	○		w <i>sc</i>
19	24.	P	●	↓		11	9.	Ś	○	wa <i>sc</i>
20		W	●	↓	w,c			C	○	s,w <i>sc</i>
21	26.	Ś	●	↓		9	11.	P	⊗	s,w <i>sc</i>
22		C	●		w,st			S	●	(1) dr,sm 13
23	28.	P	●			7	13.	(N)	●	(2) dr,st
24		S	●	↓	dr,c			P	●	(3) dr,sm 11
25	30.	(N)	●		w,c	5	15.	W	●	↓ dr,sm
26	31.X.	P	●	↓	dr,c			Ś	●	↓ w 9
27	1.XI.	W	●	↓		3	17.	C	●	w,sm
28		Ś	●		w,c			P	●	dr,sm 7
29	3.	C	●	↓	w,sp	1	19.	S	●	↓ dr,sm
30	4.XI.	P	●●●●		8.30			(N)	●	w,c 5
31	5.XI.	S					21.	P	●	st,c
32								W	●	↓ st 3
33							23.	Ś	●	w,sm
34							IX.	C	●	↓ dr,sm 1
35							25.	P	●●●●	10.00

Explanation to this Record

Cycle 1. The woman is aware, 'dry' is her BIP. Departure from BIP on 9th cycle day. Return of the same BIP should persist 3 days. Here the symptom continues to develop after 2 days. PEAK: 15th day. There already doesn't appear any: 'clr' etc.; but feels: 's'. Intercourse in 1st cycle part: on evenings (right square part); + 1-day-pause on day after (because of: w). In the 2nd cycle part, intercourse without method restrictions. The symptom: 'w' on next day after intercourse will be recorded now in yellow colour (not in white).

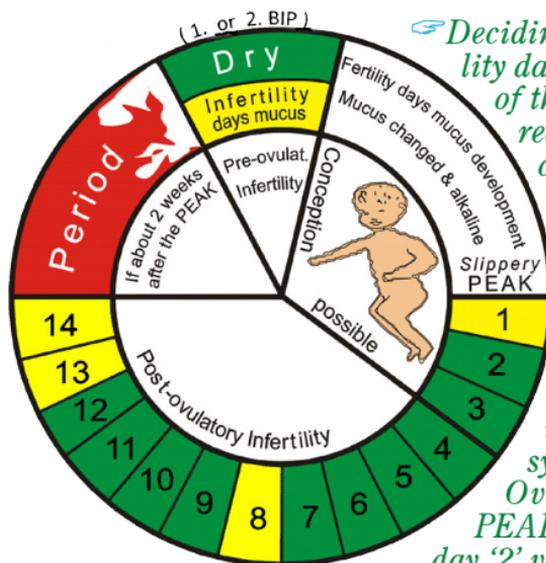
Cycle 2. The woman has yet previous identified her BIP. She knows, this discharge: wet, smear, forms her BIP of Discharge. On 11th day the symptom is yet changed! After the same previous BIP has returned for 3 days, once more intercourse: on evenings. Fertility symptoms difficult to recognise (sc,w), but on PEAK day besides: s. It is a record mainly of sensations-from-vulva.

Pict. 9. Suggestions for cycles charting

We present here two cycles records in order to show, how records can be made using the BOM. First of all we would encourage couples from environment, where accredited counseling centers of the BOM are not available, to nevertheless make her records according the BOM, even when there is no hope for any outer help in case, when some questions may appear. – Here you can see the two typical Basic Infertility Patterns: of Dryness, and the Basic Infertility Patterns (BIP): of the Dryness, and the Basic Infertility Pattern of Discharge. On the records you can see the necessary columns and notes about the symptoms, parallel with the use of the 4 fundamental RULES-Advices, developed and documented by the BOM in the situation of intended and justified postponing of the conception. And lastly once more the important remark: there should be a SENSATION recorded on all days, including days of bleeding or spotting.



spotting). Or a withdrawal bleeding appears (*fall of oestrogens*). The bleeding-spotting is always sign of a high possibility of conception.



Deciding about mucus of fertility days aren't any properties of the secretion, but the already, or not yet occurring change in the quality of its sensation-from-vulva (e.g. in no-longer-dry; already not the same discharge).

The last day of 'slippery' sensation after mucus development is the PEAK of mucus symptom.

Ovulation occurs on the PEAK day, or day '1' after; on day '2' very rarely. Day '3' is added for growth for ovum vitality. Thus,

a conception is able to occur from the change on in the 1st or 2nd BIP, until the end of the 3rd day after the PEAK inclusive.

Pict. 10. The OMB Circle-diagram

In the previous editions of the 'Billings Method' there regularly appeared the 'Circle' of the OMB. Its appearance was amended in the course of time. These changes reflected always more precised justifications of the basic Rules of the Method. Since about 1997 the printing of the 'circle' has been given up. – We put here this Circle as historical memory, because thanks to this Circle the fundamental phases of the ovulatory cycle are presented in a good understandable way at first glance.



The Early-Day-Rule-nr.3 applies to this bleeding: „Wait until the days of the change are over. If the BIP returns, add full days 1-2-3. Intercourse may be resumed only on the evening of the 4th day after the previous BIP has returned. Then continue with Rule nr.2, until another change of this BIP occurs, i.e. intercourse only on every other evening” (§ 6.9.16).

At every disturbance in the symptoms (*'symptoms jumping'*) it is decidedly wiser to follow this Rule-Advice: „Wait until the days of the change are over. If the BIP returns, add full days 1-2-3. Intercourse may be resumed only on the evening of the 4th day after the previous BIP has returned. Then continue with Rule nr.2, until another change of this BIP occurs, i.e. intercourse only on every other evening” (§ 6.9.16).

Fluctuations in SENSATION-from-the-vulva, result from the fluctuations in hormonal concentrations. The *Method* is not to be blamed for this. No other natural '*method*' is then able to provide a binding information.

The PEAK of the mucus symptom is only the last day of *slippery-lubricative* – after the previous mucus symptom development.

25. Stresses and exciting experiences do not cause ovulation to occur sooner, but they may delay it. Thereby, after the already advanced symptom returns to '*dry*' or the *identified, previous BIP*, the mucus may again develop towards that of the fertility days (*'slippery'; vulva swollen, sensitive*). Until the PEAK of mucus symptom is identified, any departure from the *BIP* should be treated using the rule: „Wait until the days of the change are over. If the BIP returns, add full days 1-2-3. Intercourse may be resumed only on the evening of the 4th day after the previous BIP has returned. Then continue with Rule nr.2, until another change of this BIP occurs, i.e. intercourse only on every other evening” (§ 6.9.16).

If a prolonged „*slippery*” symptom persists without any change or development, then it is probably a sign of still high oestrogens level, after which ultimately no ovulation occurs (*no rise of luteinizing hormone, no progesterone*). The woman would then continue to be in her PRE-ovulatory phase. Namely, the ovulation mechanism itself needs to occur in a strictly defined

time sequence, and the true PEAK is followed by an *abrupt* change of symptoms.

26. The pre-menopause age. Pay attention to the characteristics of bleedings. There may be intermenstrual bleedings (*breakthrough, or withdrawal bleedings*), thus appearing together with the possibility of conceiving (§ 4.13.16).

If a *bleeding* should occur on days of 'BIP', intercourse should be delayed till the 4th evening following the return of this BIP (§ 16).

Menstruation is only the bleeding preceded by the identified PEAK day about 2 weeks earlier (§ 4.18.22).

Conception will not occur on a day with 'flushes' (*hot flushes*). They are sign of low level of oestrogens, i.e. infertility of the PRE-ovulatory part of the cycle.

27. After discontinuation of the anti-baby hormonal pills. After the hormonal, anti-parental pills have been discontinued, a few days later bleeding will appear. It is *not a cyclic* menstruation. First, the one's own BIP must be identified (§ 8). As mentioned before, do not check the symptom internally (§ 10). Concentrate your attention on the *SENSATION-from-the-vulva*. If the woman is anxious and too scrupulous, it is better for her to note only the *sensations-from-the-vulva*, as if she was a blind person.

Infertility sometimes persists during the days of the BIP – despite the currently occurring ovulation (*damaged cervix crypts do not respond to oestrogens rise; because of a lack of mucus of fertility days, sperms are unable to migrate further*). Intercourse, even on the ovulation day, will then not lead to conception.

Disturbances after the 'pills' (*intended by mankind!*) may persist for up to 2 years. After having discontinued the pills, no 'treatment' should be applied for 2 years: nature

will return to the normal by itself. Patience pays off, if the woman goes to the trouble to recognizing her *BIP* herself – thanks to faithful noting of her symptoms.

28. Pathology – the pathological discharge. In case of an illness-related discharge (*burning sensation, itching, pain, unpleasant smell, colour*), a diagnosis must be made and a treatment undertaken (*this usually applies to both, the wife and her husband*). Afterwards the *BOM* can be used. You must once again from the beginning recognize your own ‘*BIP*’ (§ 5-8.13-19). The recognized *PEAK* of mucus symptom allows the *PEAK Rule* to be applied quickly (§ 19-21).

29. After a miscarriage. Two weeks of noting without an intercourse will allow you to recognize the current *BIP* (§ 5-8.12-22).

30. Following childbirth. Make every effort to feed *exclusively* by breast: day and night for at least 6 months. ‘*Exclusively*’ means: only by breast and persistently on every ‘demand’, without giving either juice, chamomile, or milk from bottle either. Do not worry about your milk appearance (*thin, bluish?*). Demand the right of the baby and his mother to have the baby at breast immediately following birth. The *colostrum* provides an irreplaceable immunological barrier (*alimentary infections; preventive respiratory tracks protection*). The breasts should be washed twice a day with pure water. In case of inflammation it should be avoided to use antibiotics, unless it becomes necessary. It is recommended then to use warm compresses and massages as well as to exercises the muscles supporting the breasts.

Notes: from 3-4 weeks. In the case of full breast feeding, it will usually be *dry* outside. Less often the *BIP-of-Discharge* appears: an unchanging discharge, different in case of different women, but the same in case of the same woman (*for instance: wet, milky; it is not*

cervical mucus, but a vaginal discharge). If this discharge remains for about 2 weeks unchangingly the-same, it is the *BIP-of-Discharge* (§ 8.13-17).

In times of a prolonged suspended ovulation (*typical for breastfeeding*) the *Combined-BIP* may appear (§ 9.24). This requires a careful attention, in order to be able to recognize properly the occurring *BIP*. If there appears, especially since the number of breastfeedings has started to decrease, a departure from the previously recognized *BIP-of-Discharge*, this would signify, that the mucus has already appeared from the cervix (*its response to a rise of oestrogens*): this is then a sign, that a conception is possible.

The mucus may now continue to develop towards ovulation; or there may be a return to the previous *BIP*.

The *Rule-advice* should then be applied: „*Wait until the days of the change are over. If the BIP returns, add full days 1-2-3. Intercourse may be resumed only on the evening of the 4th day after the previous BIP has returned. Then continue with Rule nr.2, until another change of this BIP occurs, i.e. intercourse only on every other evening*” (§ 6.9.16). This may require quite a lot of patience and love. In return the husband and wife gain certainty of her not becoming pregnant at this time. It costs less to decide to control yourself, than the disappointment of a not too desired pregnancy.

31. Return of fertility following the childbirth. The woman will be informed about her fertility after the childbirth in two ways: by observation (*change of SENSATION-from-the-vulva*), and from the baby. Symptoms fluctuations occur parallel to the baby's weaning (*hormonal levels are 'jumping' due to dropped breastfeeds*). If the interpretation of constantly changing symptoms is difficult, the BOM advises a temporary postponement

of intercourse, until the mucus of fertility days appears, which will allow the PEAK day to be identified (§ 17-21), or to confirm the return of the previous BIP.

With the first menstruation (*about 2 weeks after the recognized PEAK: § 18.22; while the mother is breastfeeding, the period may occur in less than 2 weeks!*), the previous BIP usually changes. This requires you to recognize the BIP all over again. This is important especially in case of woman who previously experienced the BIP-of-Discharge (§ 8.14.16).

However, infertility days after the identified PEAK symptom can be utilized immediately (§ 18-19.21).

32. Fertility diminished: conception intended. Wait for a 'slippery' day, even if it happens very rarely. During the days with the already appearing mucus, waiting is recommended first, and an intercourse should take place when it is *slippery*, or additionally on day '1', or even '2' after the PEAK.

Personal hygiene. Do not wash away any mucus. Do not do any irrigation (*except in case of a responsible medical advice*). Always confine the intimate washing to the outside area of the genital organs.

One should not give semen for analysis by masturbation (*ethically: it is always a sin. In case of marriage infertility please visit a Center of NaProTechnology; s. below*). One should trustingly and humbly pray for the gift of parenthood. While undertaking the marital union, one should not concentrate their thoughts on the *conception*: this may block the process of the conception itself. Instead one should even in that very moment love in entirety of the gift of a husband and wife giving each other to themselves, without narrowing their attention only to the body, but break through with their deed to the level of their *persons*. Husband and wife are confirming with their attitude

their real pursue – through their call to marriage and family life – together with their trusted offspring, to the HOUSE of FATHER.

A child must not be intended '*instrumentally*', i.e. for the purpose of self-satisfaction because of finally achieved parenthood. The conception of their offspring should be intended *for his own sake*, as God calls every human being to existence *for his own sake* (see: *Letter to Family 9*).

Marriages that experience difficulties in obtaining offspring despite using *Billings Method* on days of optimal opportunities to conceive, could use any Counselling Center of NaProTechnology clinic. It was developed by a former collaborator of Prof. Billings (*in the initial period of 'Billings method' development*), Prof. Thomas Hilgers (*Creighton University, USA*). Unlike techniques used for non-ethical (*and non-healing*) „InVitro” treatments, Naprotechnology undertakes research to determine the causes of infertility of a given marriage and to diagnose the chances of their treatment. In Poland, there is a whole range of centres dealing with Naprotechnology.

33. Waiting for offspring. Up to now science has not succeeded in fixing fully verified regularities regarding planning *the sex* of one's offspring. Husband and wife are asked to take a thoroughly flexible attitude in front of God, the Donor of life, so that they are always ready to receive *every child* as it is entrusted them by the Lord; even an unhealthy, handicapped one.

Ethically, it is not allowed to perform an ultrasound test (*USG; or InVitro*) to select the gender of the Baby, if it is contrary to the liking of husband and wife, or to kill the Baby in case it was diagnosed with some health problems.

If a child still does not appear, one should listen to Christ's voice, which maybe is requesting you even more urgently to take an unrelated child and create a *Foster Family*.



EXPLAINING the restriction, while observing symptoms using the Billings Method – for focusing on FEELINGS-from-the-vulva without touching it.

a) The secretion of fertility days is fluid: it flows easily through the cervix-vagina. It spreads on the vulva, causing a perceptible change in the FEELING-from-the-vulva.

b) The MOB is strongly cut off from any internal examination in the vagina. On the walls of the vagina, a sticky discharge from the previous cycle is maintained on fertility days. The mucus of the fertility days flows through the vagina and makes its presence felt as a changed FEELING on the vulva. That is: inside the vagina maintains during the fertility days the symptom exactly the opposite, than on the outside.

c) In a multi-point resolution of the WOOMB Executive Committee (February 1982) was unanimously adopted „...the exclusion from the list of natural methods of any method, that would recommend an internal examination at the cervix itself“. For many people and cultures, the recommended internal examination in the vagina by the woman herself for the recognition of fertility-infertility days is considered as an abhorrent action. All the more so, if this kind of examination was to be carried out ... by the husband ... on his wife. If the woman herself undertook a palpation test at the mouth of her cervix, it is easy to introduce bacteria or viruses that find excellent developmental substrate even under the nail (e.g. golden staphylococcus, or even HIV and HPV virus; etc.).

This resolution mentioned is decisively opposed to the encountered fervent recommendations of this kind of self-examination by many other, different varieties of the Temperature Methods.

d) A binding method for recognizing fertility days based on an examination of the softness of the mouth of the neck or the size of its opening, has not yet been developed.



Ethical-dogmatic remarks on marriage life

(For more on this topic see the considerations presented by the author's homepage: lp33.de - at bottom: A, part I, chapt.2; part II, chapt.1-6; part VI, first of all chapt.4-9; part VII, chapt.1-3; etc.).

34. The marriage ethics (*written in every human conscience*). A 'natural' method of conceptions planning is such 'method', which is able to stay in service of the dignity and the call of married people to the eternal life in union with God.

The aim of a 'method' of conceptions planning consists of furnishing as exact as possible the biological information (*diagnosis*) about the conceiving possibility on a given day of the cycle. In the case of the *Billings-Method*, this information is scientifically and clinically highly precise. Self this information is in its essence independent of any religion.

Only after this expected information has been received, an *ethical* problem appears. In case of the intended *postponement* of conception, the husband and wife can not decline to answer on the question: whether in our case justifiable reasons exist in God's eyes to postpone a conception for the time being (*health; economical conditions; living conditions; engagement in social work*)? When getting married, husband and wife oblige themselves to giving an articulate answer to the question: What is God expecting from us, the already existing children, the Fatherland? These reasons are required by the „*responsible parenthood*” – as is meant by the Church (*HV 10; GS 51; FC 32; and in addition: lp33.de/strona-lp33/p1_2a.htm#mot*). The decision to marry means building a Family: with one's own children, or gather children

from other people, in answer to the question posed at the wedding: „*Will you accept lovingly and bring up in Catholic the offspring, which God will You give as gift?*” (*GratissSane, 8*). A child can not be wished, to get a self-satisfaction of husband and wife, because they (*finally*) became parents, but as it is intended by God: „... *Parents, in contemplating a new human being, are, or ought to be, fully aware of the fact that God ‘wills’ this individual ‘for his own sake’...*” (*GratissSane, 9*).

Therefore, the use a ‘method’ of conception planning as a „*natural method*” is always an issue of ethical responsibility. A ‘method’ faces you with the necessity to always take anew decisions in accordance with *responsible parenthood* in the face of God, ourselves, one’s own family, and the whole Human Family. A ‘method’ does not deprive you of freedom of taking action. Even the freedom to ... commit a sin. Using a ‘natural method’ calls for a living marital dialogue.

35. Love open to life. Marriage circulates constantly around the mystery both of *life* and *love*. Both these realities are strict *property* only of God. Bringing a new human being into existence is never only a matter of ‘biology’: it is a transmission – together with the Creator and Redeemer – of „*God’s Image and Resemblance*”. This shall be achieved according to God’s Design in the climate of the taking place, *personal union* of husband and wife. During the intimate marital union, they both should give each other not only their bodies, but all the more, themselves as *persons*, which are bound by a *lifelong, exclusive* covenant, that they have made in the perspective of going together to the „HOUSE of FATHER”. Both: *life and love*, donated by God to husband and wife only as responsible *management*, should fit in the band irradiated by the Commandments of this God, who IS Love-Life. No wonder a situation can happen,

when you will have to tell yourself and the other in the name of loyalty to God: „*A behavior such as this will not occur in me or in with us!*”!

36. The structure and dynamics of the act. Intercourse is a sign of expressed love (*i.e.: of donating oneself entirely, without reserving anything for yourself – with this restriction: the first place must always be reserved for God and his commandments*), when both allow „*their body to talk*” with full freedom: they are giving each other, „until the end” their true *person*, thus not only their body. This is conditioned by not creating any kind of blockade dependent on *human will*: whether it be for the development of the act’s *structure* or its *dynamics*.

The body of husband and wife „talks” during experiencing their marital union, in accordance with the „*truth of body’s speech*” – in the peacefully performed coupling of their both persons through their in this hour uniting genital organs, that they both really give themselves to each other without making any reservations. In this way the act of marital union was created by God himself, the Creator, and gave the marriage to be responsibly *managed*.

This is what the *structure* of the marital act is based on. This act ought to be a true, not depleted, nor lying *union*, persisting in a climate of attention concentrated not only on the genitals, but breaking through *as if one ‘floor’ above*: to the level of *person* of this other, as this *unique, choiced* in a lifelong made *bound*. This conjunction of them both should be continued for possibly long – till it spontaneous quietens down.

At the same time they both shall allow, with whole subtlety a freedom disturbed by nothing, to develop in their body and spirit an overpowering reciprocal experienced *dynamism*, as accompanies the conjunction of their persons. The dynamics of the husband’s act

expresses itself in leaving himself in form of a particle of his own *person* in the womb of his wife, who in turn embraces him whole with love by her femininity.

37. The parental readiness. The body of them both then „talks” aloud in the name and authority of them both: of their *spousal union*, and their *parental readiness*. This is the meaning of *marriage* written in the conscience of every human being in general, and the sense of the marriage as *sacrament*. Every union of husband and wife is by God’s establishment inseparably joined with the *parental readiness*. This connection originates not from the blind ‘nature-biology’, but is a simply *found reality*: one that was, like this and no other way, created and gifted to the marriage by the Creator of man and wife. Such is the gift for the husband and wife of this God, who the first is Love-Life.

But consequently, in view of this very reason – the only place able to fulfill the goal and meaning of the act, is its performing within the *vagina* of his wife. Any intended delivering of excitation in other way or in another place (*petting; intercrural sex; oral-sex; etc.*) becomes always „lying” of this „body’s speech” and a denaturation of it. It is therefore always a peculiarly grave sin against the dignity and truth of human person and against the then declared love.

38. The anti-Parental measures. Whenever two people interfere in the *structure* or *dynamics* of the act, in order to *block* the orientation of the act to parental potentiality, their action objectively bears the features from manifold points of view of a grave mortal sin. Additionally these acts become criminal, when the partners reaches for an abortifacient device (*a spiral; hormonal medication: pills; early abortive devices, e.g. EllaOne; indirectly the preservative too; documentation to preservative s.: [#ehm](http://lp33.de/strona-lp33/p2_3c.htm)*).

Theoretically at least one Child of their supposedly intended 'love' then may be killed in every cycle. Such is the responsibility before God from cycle to cycle. Namely the act of will decides about the responsibility for a deed. They both are then seeking after the sensual pleasure, and in the same time they in advance exclude the appearance of a child.

When *intercourse-made-infertile* occurs, the body „talks” on behalf of the couple about their *entire* giving to each other in love of their persons – towards their such union, which in the same time opens widely towards parenthood. But the *will forces* their body in case of anti-parental activities to *lie*: there is a reciprocal *not-donation* of each other, a *not-wholeness* of gift, *not-donation* of oneself „to the very end”, because the gift comes with a fundamental restriction.

The intended goal of them both is then: to *exclude the potential for having a child*. It happens, this purpose may be justified. But it should be achieved by adopting the way proposed by the Creator, who loves, equally, the husband and wife, and who very well knows, what does 'love' mean. Here the partners try to ensure this goal in spite of the solution handed to them by God.

Thereby they lie, as well, the *love* itself. Their goal is to ensure for themselves the sexual pleasure. Love – in God's vision and that of humans, as gift of the person to the good in perspective of final matters, comes in this way trampled upon. Parallel to this blackmailing may easily appear, as may intimidation and speaking 'officially' in the event of occasional refusal to give themselves to sin. Whenever instead of the marital conjunction a *sex-copulation only* takes place, the vowed sacramental love becomes profoundly insulted. It stoops on the level of *anonymously experienced* access to the person's sex and triggers masturbation-like sensations.

But God gives to couple (*and only to them*) not an act of 'sex', but the *conjunction of their persons*. They both should remain in their union, full of human and God's peace, for as long as possible. This is according the *inner order of love* experienced a real marital union – in contrast to having 'sex', where the action is marked by hastiness – with attention concentrated not on the person, but on satisfaction of lust – in the end, no matter what person with.

39. The abortifacient devices. When partners reach for any of abortifacient device, they tend to gain pleasure in its most literal sense at the price of the blood of Children of their potential Conceived.

The *pregnancy interruption* is sanctioned by the Church with the **Excommunication**. This excommunication becomes incurred by itself at the moment, when the Child dies (*CIC, can. 1398; Evang. Vitae, 62*). This excommunication applies to all people, without whose contribution this crime would not have taken place (*CIC, can. 1329, § 2*). Excommunication will *not apply* in event of unintentional ignorance about this penalty, and when someone is acting under serious fear of impending danger; this also applies to a person under 16 years old (*CIC, can. 1324, § 1-3*). In such cases the guilt of killing a mankind remains, but not the penalty of excommunication.

No State legislation, which gives either 'permission' for pregnancy interruption, or the use of *contraception, sterilization, the use of abortifacient devices*, or other unethical treatments is mighty enough to change the Commandment of God. The same applies to *homosexual unions* or acting accordingly to the *ideology of gender*. The Commandments of God are written in the conscience without exception of every member of the mankind, no matter whether somebody believes

in God or not. All legislative ‘*permissions*’ in this field, likewise as relating other not ethical measures (*e.g. prenatal examinations in order to eliminate handicapped children; euthanasia; artificial fecundation; etc.*) are in advance invalid and do not authorize us to carry out any of these activities, but only ensure an inescapable Judgment of God.

40. The usage only of cyclical infertility days. The use of just cyclical infertility days in order to spread out conceptions must be motivated in the eyes of God (*health; accommodation conditions; economic circumstances*). The only ethically correct way of regulating conceptions consists of postponing the marital union on the days of biological infertility. With this restriction: every marital act, even this performed on days of biological infertility, must remain fully open for the parental potentiality (*HV 11*).

In case of using only the days of infertility, husband and wife adopt on days of possible conception a *virginal* attitude to each other, i.e. they do not employ caresses leading to genital stimulation. Love then becomes not suspended, but finds its expression more in the *tenderness* – without involving genital organs.

Petting as a ‘*substitute*’ form is always a mortal sin: both outside of marriage, as within marriage. Neither the husband is the owner of his wife, nor the wife – of her husband. Each is established by God as the responsible *administrator* of the gift of his sexuality. But an administrator will be called, sooner or later, to give an account of himself in front of the Owner.

41. The mutual submission. Having intercourse is God’s gift and a possibility, but not ‘a must’. Even the husband and his wife are called to master the blindly intruding lust for the body. Undertaking the marital union should be an expression of giving each other of their *persons* with all subtlety and tenderness, not as

a result of ‘pressure from the body’. They both should live the „*mutual (not one-sided) submission (to each other; and always) in fear of Christ*” (Eph 5,21; MuD 24).

42. God’s gift of cyclicity. The chances of conceiving have been linked by the Creator to the cycle phase of the female. It is the Creator’s will, that the intercourse on stated days will not be able to lead to conception (*infertility days*). Instead, on other days of the cycle, a conception become possible through the Creator’s will (*fertility days*). God always informs us precisely about the status of our fertility. The very calling of a human person to existence is a result of the individualized intervention of the „*Loving Almighty of the Creator*” (DeV 33). God calls this conceived human person at the very same moment to immortality – in the FATHER’S HOUSE, by impregnating him with his *God’s Image*.

43. Marriage as Sacrament of the Church. We believe by the power of the Apostolic faith, that the till now existing marriage being as *PRE-Sacrament of Creation*, by the Son of God, Jesus Christ, has been raised to rank of one of the seven Sacraments of His Church. There not often appears a more deep considerations about this Sacrament. When marriage is one of the sacraments, this means, married people are called to transfer the work of the God’s Son, this *Redeemer-and-Spouse-from-Cross* – to each other, and through their offspring further from generation to generation. In his *Sacrifice on the Cross*, the Son of God has made a *Spousal Covenant* with the Church, his Mystical ‘Spouse’, and with each human separately. It is of course matter of God’s Spousality in its Divine, all surpassing meaning. And the Holy Spirit, this Divine Master of merging of what is impossible to unite, thank the implanted in them God’s Love (*Rom 5,5*) causes, they all „... are *ONE in Christ Jesus*” (*Gal 3,28*).

44. Christ the Bridegroom. In a very special way every husband and wife becomes the „*Betrothed of Christ*“. On the ground of their exclusive made, lifelong true *love covenant*, they have the honor to make present in a quite special way, special because it is sacramental, the *Spousal Covenant* – of the *Bridegroom-from-the-Cross* in face of the Church and the world. Jesus Christ is not embarrassed to define himself as the *Bridegroom*, to whom the *Father-King* has prepared a wedding feast (*Mt 9,15; Jn 3,29; Mt 22,1-12*). The Eucharist, thanks which the „*Church is alive*“ (*EdE 1*), is a still updated, present making of the *Spousal Covenant*, what the Tri-une has made with the *Mankind Family* in God’s Son Jesus Christ: „*For this is my Blood of the Covenant, which will be shed on behalf of many for the forgiveness of sins*“ (*Mt 26,28*). For God, there can be no question of an other covenant than only this *spousal* – in its God’s, not human meaning of this word. So is the Apostolic faith and so is the final call of the last Book of the New Testament: „*Blessed are those, who have been called to the wedding feast of the Lamb*“ (*Rev 19,9*).

45. Christ as Bridegroom-from-the-Cross of Redemption. It is understood, Jesus Christ is ‘Bridegroom’ only in one meaning: by the *totality of donating Himself* on the Cross of Redemption for his ... almost as a rule, very treacherous Mystical Spouse: the God’s People and each of redeemed. John Paul II. emphasizes this attribute in strong words: „*Christ is the Bridegroom BECAUSE ‘he has given himself’: His Body has been ‘given’, His Blood has been ‘poured out’ (Lk 22,19-20). In this way ‘He loved them to the end’ (Jn 13,1). The ‘sincere gift’ contained in the Sacrifice of the Cross gives definitive prominence to the SPOUSAL meaning of God’s love. As the Redeemer of the world, Christ is the Bridegroom of the Church*“ (*MuD 26*).

46. „He loved until the end”: of Redeemer-from-the-Cross – and of the married people. The same Holy Father, John Paul II., likes to compare the Christ’s: *„He loved his own in the world and he loved them to the end”* (*Jn 13,1*), with the marital word-vow, what will be received and sealed by God, as a from now on not changing, starting from the moment, when they express their marital consent: *„... and that I won’t leave you until the death”* (*John Paul II, SZCZECIN, 11.VI.1987,2*). This applies to the totality of the self-person-gift – guided by the final motive: as well in the case of Christ-the-Bridegroom-from-Cross, as of the husband and wife, who too are vowing: *„... and that I won’t leave you until the death”,* this will mean likewise *„... to the end”*.

The Sacrament of marriage is a sacrament of God’s mystery of life-love towards these both, but also vice versa as well: of God’s expectations towards these two, that they will not strive to achieve maximum pleasure to themselves, but to transmit to one other – by the power of the sacrament – the good in the sense of the final matters. Hence the fervent words of St. Paul the Apostle: *„Husbands, LOVE your wives, even as Christ LOVED the church and HANDED himself over for her to sanctify her, ... that he might present to himself the church in splendor, without spot or wrinkle or any such thing, that she might be holy and without blemish”* (*Eph 5,25ss.*). Infatuated in the Face of Christ-this-Redeemer, the husbands should still be ready to go even on the cross, in order for his wife to become *„holy and without blemish”*. And similarly: wives should be ready to offer their person as a pleasing gift to God. This will be the price paid to beg the gift of sanctification, and perhaps the conversion of her husbands and children.

47. Husband and wife: witnesses of God’s Love. By the power of the received sacrament husband and wife

shall, by their mutual marital and family love make visible for the Church and for the world the God's love for human: *man and wife*. They both are called to holiness on the appropriate for them, way of life in marriage and family, not excluding the moments when they undertake their *spousal union*. The life in marriage and experience of mutual closeness should, on the ground of God's institution, permanently make present to them both, the Love of God, which whole is creatrice (*life*) and in God's meaning spousal (*love*). In their mutual references, they should strive to become in such a way to be *with each other* and for themselves, that they will *radiate* the Living Jesus Christ to each other. The Redeemer wants to be in their hearts permanently in the name of the sacrament they have received. It was not in vain, that the newlyweds from Cana of Galilee invited Jesus together with Mary and His disciples to their wedding festivity (*Jn 2,1-11*). Thanks to the *sense of faith* donated to them by God, they have sensed, or rather experienced with a certainty of faith, that Jesus is not an ordinary friend, but ... he radiates his divinity, revealed without prior publicity through the miracle accomplished – at the intercession of His Mother.

48. Involuntary watching of God's style of love.

The spouses do not find it difficult to look involuntarily at the love style of God as the *totality of the gift of his person*. In moments of experienced mutual closeness it is not difficult for husband and wife to raise their hearts' thoughts towards in parallel experienced this other *wholeness* of the Love gift: of God the Father, who „... *so loved the world (the mankind), that he gave his Only Son, so that everyone, who believes in him (i.e.: who will trust on Him) might not perish (in eternal condemnation), but might have eternal life*” (*Jn 3,16*).

The lifestyle of the Son of Mankind, who is in the same time God's Son, becomes a constant model for married people to form their own style of 'love'. God's love is a constant crossing out of God's own benefit to implant the good, the good in the sense of ultimate matters – at those Beloved, so often without any reciprocity on their part.

– Jesus Christ went the love for his human brothers and sisters so far, that he took their nature in the mystery of the Incarnation (*spousal union of the God's Son with the Human Family*). Rejected by his so much beloved, while „... of the great love he had for us, even when we were dead in our transgressions” (*Eph 2,4*), he had loved them the more, becoming, on the Cross, the LOVE, that gives himself as „... expiation for our sins, and not for our sins only, but for those of the whole world” (*1 Jn 2,2; parental-redeeming sense of the body: somehow the horizontal beam of the cross; and God's Love for man and woman as a vertical beam of the reality of the cross*).

49. The totality of the gift of his person. At stake is still the characteristic of a true love *wholeness* in donating of his own person towards the *redemptive good*. We are not surprised when John Paul II reminds married people: „Spouses are therefore the permanent reminder to the Church of what happened on the CROSS; they are for one another and for the children witnesses to the salvation, in which the sacrament makes them sharers” (*FC 13*).

The Son of God purchased and prepared for Himself his Mystical 'Bride' – the Church. He took her in, and gave himself as a *ransom* for her, and at the same time as a *wedding dowry* for her. John Paul II makes spouses particularly aware, they should *invite* Christ-the-Bridegroom to his marriage and family communion for *permanent*. With such an appeal, he begins the main title of the second part of his *Letter to Families*. In this

case, the Pope uses words spoken in this sense by the Redeemer himself: „*The Bridegroom is with You*” (see: *Gratissane 18; Mt 9,15*). The Redeemer offers to married people – spousality with Himself as participation in his God’s Life and his God’s Love ‘forever’. As not only Man (*through the mystery of the Incarnation*), but even more so God, Jesus Christ, as it were, ‘cannot’ donate a different Life, but only this ... eternal one.

50. The Bridegroom-from-the-Cross making a Spousal covenant. Still alive should remain the awareness, that Christ *spoused* the Church, and in it every human: *man and woman*, and in turn married people – in only one, his God’s way: through the „thrillingly” (*DiM 7*) wholeness of the gift of Himself till „*the very end*” on the Cross of his cruel passion: this *redeeming passion*. Only then, as the Crucified Redeemer, though also the Risen One, does he propose *sanctification* with Himself, to the happy *ONE-with-all-redeemed* forever – in the FATHER’S HOUSE.

To do this, Christ enters with his People and every of redeemed into a solemn *Covenant*, sealing it with his Blood of Redemption. This means, that the *Bridegroom-from-Cross* has put on scales of the Covenant, what He proposed to his Beloved, an unimaginable high price. Only God self can afford it: by the sacrifice of the wholeness of his God-Human Life on the altar of the Cross.

This death was inflicted to Him by the hands of His ‘Betrothed’, whom He loved „*to the very end*”. She finally crucified Him, when He offered her ... the God’s conditions of reaching the FATHER’S HOUSE. Jesus accepts this death „*for Her*”, still forgiving her and truly continuing to love Her „*to the very end*” – and beyond „*the end*”: because He has become ... Eucharist.

51. The Cross of Redemption: key to the FATHERS HOUSE. The Cross prepared for Him will be experienced by the Son of God as a „*fervent prayer of his Passion*”

(Dom.et Vivific. 40). The crowning of this Passion, accepted by Jesus as *Redemption Passion*, will become His Resurrection. The Resurrection of the *Redeemer-from-Cross* has become as well His further Spousal Gift for the 'Betrothed': the Church and especially for married people. The Redemption's Passion has become in its literal sense ... *the key* opening the door to the „FATHER's HOUSE". This is the tone of the words of Christ himself, when he said goodbye to the Apostles after the Last Supper: „*And if I go (= the Passion) and make ready a place for you, I will come again – and take you to be with Me, so that where I AM, you may be too*" *(Jn 14,3)*.

Here is the Gift of the God's *Bridegroom-from-the-Cross* for His 'Betrothed': the gift of the *wholeness* of his Person for His Beloved Mystical Bride – to her ultimate GOOD: this redemptive. Jesus Christ wishes to „*catch up*" *(Philp 3,12)* this-Spouse-the-Church, and at the same time every of redeemed and each spouses-couples together with Himself towards the Resurrection of Life.

If she only would be *willing* to receive the gift of the Redemption, convert and trustfully gives herself to Her God – the *Bridegroom-from-the-Cross* – towards a union with Him for ever. Except that the Redeemer will never allow himself in His God's subtlety to force the acceptance of the gift of Spousality with Himself. He always as „*the Crucified one ... is the one, who stands at the door and knocks at the heart of every man*" *(Rev 3,20)*, *without restricting his freedom, but instead seeking to draw from this very freedom love*" *(DiM 8)*. This love must show itself in deeds – by putting God's Commandments-Expectations into practice, that the Bride in her freedom will really „*take on the yoke (of God, which is) easy and His burden (which is) light*" *(Mt 11,29s.)*.

52. The Eucharist: The food and drink of the Bridegroom-from-the-Cross for the Bride.

That the union of God's Bridegroom with His Bride – including married people and spouses – could become a joyful reality, the Son of Man *feeds her* with His God's Body and gives her his Blood as a *drink of life*. So is the mystery of the Eucharist. We hear the words of John Paul II again: „*The Eucharist is the very source of Christian marriage*” (FC 57). In addition, the Mystery of the Eucharist is the pledge of love of union with God in the eternal wedding: „*Whoever eats My Flesh and drinks My Blood, has eternal life, and I will raise him on the last day*” (Jn 6.54).

On the one hand, we realize again the totality of Christ's gift: „*Having loved ... – he loved to the end*” (Jn 13,1), and in turn the total gift of life in the case of married people, who are also called to the *total gift* of their persons towards the GOOD – this ultimate: „*... and that I won't leave you until the death*”. The crowning achievement of this gift is the Eucharist. The following words of John Paul II bounce back echo in the heart: The Eucharist is the stupendous „*Sacrament of the Bridegroom and of the Bride*” (MuD 26). Like his other word: Every marriage is on the ground of God's Will – „*... real symbol of that New and Eternal Covenant sanctioned in the Blood of Christ*” (FC 13.12-14.17.66ss.80.84).

Is it not surprising that, over the years, the life of husband and wife often becomes *one band of despised pain*, not taken and unrequited love? And in turn this band of tears and unrelenting heartache becomes a kind of 'birth' ... towards imploring the conversion and eternal life of their children? It happens, that children and grandchildren find it extremely easy to depart from the advices of their parents, that they passed on to them with the deepest conviction and in a sense of deep responsibility for their definitive fate, the principles of

faith, by sealing this message with an example of their regularly shaped sacramental life and the practice of God's Commandments on a daily basis.

In these circumstances, the lives of such married people often becomes in pain and tears, from very close experienced participation in the Work of Redemption. The Son of God carried it out for an unimaginable, more precisely: a terrifying price: by his death as the *Bridegroom-from-the-Cross*.

A living consolation and hope for spouses and parents becomes a relentless prayer to beg for the conversion of their loved ones. And too – the words, that Christ uttered just before His Priestly Prayer after the Last Supper: „*I have told you this, so that you might have peace in Me. In the world you will have trouble, but take courage, I have conquered the world*” (Jn 16,33).



Daily trusting himself to God's Mercy:

„Merciful Jesus, I trust (we trust ...) in You!

I put my trust (We put our trust) in You in my (in our) life, in dying, and after death!

Mary – take me (us): together with Your Son, and Saint Joseph!”

Prayer of Forgiveness:

„Jesus and Mary: I forgive from the depth of my heart everybody (and specially so and so ...), who has harmed me!

I don't want to come back to this: neither in thought, nor in word, unless in forgiveness!”

Source literature and documentation

See the homepage of the author of this text: ks. Paweł Leks: <http://lp33.de> (Polish-German version). On the top of every page there appears the link: 'Literature' and Short Cuts to Bible citations and documents of Church.

Open on this homepage among others:

a) *Part I, Chapt. 1-2-3*: More thorough presentation of the Billings Method; its often happened essential distortions; disinformation of publicity.

b) *Part II, Chapt. 3*: acting mechanism of anti-parental devices from medical point of view.

c) <http://lp33.de/strona-lp33/ind2.htm> : Holy Confession of married people with sins committed while intercoursing.

See besides the WEB-Site of the 'World Organization of the Ovulation Method Billings' (WOOMB):

<http://www.woomb.org>

and:

<http://www.billings.life>



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Basic authorised actual Manuals of the 'MOB':

1) **TBOM-1:** „*Teaching the Billings Ovulation Method*“, Part 1: *The Correlation of Physiological Events of the Female Reproductive Cycle with Observations Made at the Vulva*, Dr E.L.Billings, Melbourne 2001.

2) **TBOM-2:** „*Teaching the Billings Ovulation Method*“, Part 2.: *Variations of the Cycle and Reproductive Health*, Evelyn L.Billings and John J.Billings, Melbourne 1997.

3) **UCF-BOM:** „*Understanding couple Fertility with the Billings Ovulation Method*“, Gillian Barker - Kerry Bourke - Marian Corkill - Marie Marshall, WOOMB, 2017.



Please study the superbly created animation about the development of the menstrual cycle, shown on the official website of the „Billings Ovulation Method“: www.billings.life. – The animation is entitled:

Animation: The menstrual cycle and your body's natural signal of fertility - cervical mucus:

<http://www.billings.life/en/how-the-billings-ovulation-method-works9/animation-the-menstrual-cycle-and-your-body-s-natural-signal-of-fertility-cervical-mucus.html>



This booklet may be downloaded in 'PDF'-format from the homepage of the here writing author, together with 3 templates for charting cycles on EXCEL:

<http://lp33.de> - Content: B-9b (polish; german; english). Or immediatly:

<http://lp33.de/pdf/bill-en.pdf> = „Helping Married Couples“.

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„To celebrate the Gospel of life means to celebrate the God of Life, the God who gives life: ‘We must celebrate Eternal Life, from which every other life proceeds. From this, in proportion to its capacities, every being which in any way participates in life, receives life. This Divine Life, which is above every other life, gives and preserves life. Every life and every living movement proceed from this Life which transcends all life and every principle of life. It is to this, that souls owe their incorruptibility; and because of this all animals and plants live, which receive only the faintest glimmer of life.

To men, beings made of spirit and matter, Life grants life. Even if we should abandon Life, because of its overflowing love for man, it converts us and calls us back to itself. Not only this: it promises to bring us, soul and body, to perfect life, to immortality. It is too little to say that this Life is alive: it is the Principle of life, the Cause and sole Wellspring of life. Every living thing must contemplate it and give it praise: it is Life which overflows with life”

(EV 84)

„Hence there is nothing so personal and untransferable in each individual as merit for virtue or responsibility for sin” (RP 16)

„For the wages of sin is death, but the gift of God is eternal life in Christ Jesus our Lord”

(Rom 6,23)

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