

Welcome to a topic often overlooked, but undeniably vital – your menstrual cycle.

Every journey is unique, just like fingerprints or DNA. Your menstrual cycle is no exception. It's not a one-size-fits-all scenario. Understanding this individuality is the first step in embracing the importance of a healthy cycle. Understanding the importance of a healthy cycle is a major step to taking charge of your life.

We've prepared a comprehensive guide to help you navigate this journey and perhaps identify some areas that need to be investigated or improved.

## TOOLS TO TRACK YOUR CYCLE

- You can use a regular Calendar
- Tracking Apps (Clue, Aura Ring, etc.)
- Thermometer to track Basal body temperature (BBT)
  - Your body temperature first thing in the morning prior to brushing your teeth, washing your hands, showering etc.
  - o This can be a great indication of ovulation as well as thyroid and adrenal health

## **TESTING**

#### Cervical Cancer Screening: aka: Pap Smear

• Tests the cervix (area that connects the vagina to uterus) for abnormal cells. Can not test other reproductive organs.

- "If you are between the ages of 21-65, you should receive a pap smear every three years. If you are between the ages of 30-65, you should receive a pap smear in combination with HPV testing every five years." as per guidelines for The United States and Canada
- "You can stop regular screening with pap tests at the age of 70 if you have had 3 or more normal tests in the previous 10 years" as per guidelines for The United States and Canada

Ensuring you are having regular dialogue with your physician. Your ever changing health history may change the general guidelines.

## Pelvic and/or Intravaginal Ultrasound

- May be suggested to assess or diagnose any structural abnormalities that could be contributing to symptoms such as but not limited to septic uterus, polyps, fibroids, inflammation, cysts.
- Please discuss with your provider the timing or your ultrasound with regard to your menstrual
  cycle. Some providers may want to have imaging done near the end of your bleed (days 4-9)
  when lining is at its thinnest. However, this needs to be an individual discussion. It is also best
  practice to ensure your Ultrasound technician is aware of the timing in your cycle.

#### **Blood Work**

The timing will depend on your present health condition and concern. When looking at Sex hormones, this discussion does need to happen as you can. You should not just go just any day of the week at any time of day.

- For a cycling female who is NOT on oral contraceptive medication
  - We suggest having lab work drawn 7 days prior to cycle Day 1.
- For a female who IS on oral contraceptive medication and having a monthly pill bleed.
  - We suggest to have lab work drawn around this same time frame for continuity although technically it is not going to matter fully as you are not ovulating (at least not regularly).

Regardless of the situation, a discussion is necessary to ensure timing is as optimal as we can achieve based on your health goals and current health situation

Symptom	Typical	NOT Typical		
Pain	<ul> <li>Some cramping/pain</li> <li>Some Ovulatory pain on the side of the ovary releasing the egg lasting minutes to on/off over 24-48 hours known as Mittelschmerz</li> </ul>	<ul> <li>Debilitating pain and cramping monthly</li> <li>Pain all month long</li> <li>Pain with nausea and vomiting</li> </ul>		
If you are in tears, missing work, school, holidays and/or events this is NOT typical and needs to be investigated! Intense, or ongoing pain can be positively or negatively influenced by many factors such as diet, lifestyle, even relationships and stress. Conditions such as but not limited to endometriosis, fibroids, adenomyosis, polyps, infections as well as other hormonal health factors can also be contributing factors.  Note: If you have an IUD placed (recently or not), pain needs to be discussed not assumed.				
Spotting	<ul> <li>Less than 2-3 days before your period</li> <li>Less than 2-3 days after your period</li> <li>Limited Spotting around ovulation *should be discussed</li> </ul>	<ul> <li>Spotting Multiple times per month</li> <li>Spotting for days/weeks on end</li> </ul>		
Bleeding Length	• 3-8 days of Full Bleeding	<ul> <li>Bleeding less than 3 day</li> <li>Bleeding beyond 8 days</li> <li>Bleeding multiple times per month</li> </ul>		
Bleeding Volume	<ul> <li>Changing your tampon every 2 or so hours</li> <li>25-50 mL (50mL = 3 Tbl)         <ul> <li>1 soaked regular tampon= 5 mL/1 Teaspoon)</li> <li>50 mL= 10 fully soaked regular tampons or 5 fully soaked super tampons</li> </ul> </li> </ul>	<ul> <li>Changing your tampon or pad more frequent than every 2 hours</li> <li>Requiring a tampon AND Pad</li> <li>Bleeding over 80 mL (see below)</li> </ul>		

Bleeding less than 25 mL is considered a light bleed. Bleeding over 80 mL is considered a heavy bleed. If both situations become regular occurrences it should be discussed with your provider and evaluated further.

Clots	<ul> <li>Day 1 and/or 2 of your cycle</li> <li>Equal to or less than the size of a dime (about 1 inch)</li> </ul>	<ul> <li>Anything beyond what is typical</li> </ul>
Color	<ul><li>Pink</li><li>Bright Red</li><li>Dark Red</li></ul>	<ul><li> Grey</li><li> Orange</li><li> Pink if irregular</li></ul>

The color of your menstrual blood can vary from pink to even black. There are many things that affect color, such as the length of time exposed to oxygen, being mixed with cervical mucus. It could also be an indication of anemia or infection. Please ensure you speak with your provider.

Total Length	• 21-35 days	<ul><li>Less than 21 days</li><li>Beyond 35 days</li></ul>
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Clinical Pearl: Day 1 is the FIRST day of menstruation.

As with everything, there must be context such as age and personal health history. Secondary Amenorrhea is considered 6 months with lack of menstruation. Natural Menopause is considered 12 months (to the day) with lack of menstruation, however if you are a 20-45 year old female, lacking a menstrual cycle for 6-12 months it should be investigated.

# By taking charge of your cycle, you're taking charge of your life

It's crucial to remember that many females often normalize and dismiss concerns about their menstrual cycles. Our aim here is to raise awareness and encourage self-auditing. This checklist isn't about chasing "perfection," but rather to provide a tool to help you delve deeper into understanding what's typical for you within the broader spectrum of experiences.

Your menstrual cycle is a reflection of your unique physiology and it plays a vital role in your overall health. It's more than just a monthly inconvenience; it's a vital sign. The way it behaves can provide insights into your well-being.

Additionally, don't forget the role of digestive health and nutrition in this equation. What you eat and how your body digests it can have a significant impact on your cycle. Pay attention to this aspect as it's often underestimated.

Remember that this journey isn't just about managing symptoms. It's about paving the way to a healthier, more vibrant life. By understanding your menstrual cycle, you're not just addressing issues as they arise, you're shaping a path to a life filled with vitality and balance.

By taking charge of your cycle, you're taking charge of your life. Embrace this opportunity for self-discovery and let it be the catalyst for lasting, transformative change. Together, we're not just checking boxes; we're building a foundation for a healthier, more fulfilled you.

If you are experiencing any irregularities or exacerbations of symptoms and feel your hormonal health needs support, please contact us at **info@fortify-health.com**. We offer 1-on-1 Coaching and Consultation Services.



DISCLAIMER: The contents of this document should not be taken as medical advice. It is not intended to diagnose, treat, cure, or prevent any health problem - nor is it intended to replace the advice of a physician. Consult your physician on matters regarding your health.