



# Getting Pregnant Made Easy

DISCOVER ALREADY AVAILABLE NATURE'S  
BEST FERTILITY SECRETS & CONCEIVE IN NO  
TIME WITHOUT SPENDING A FORTUNE ON  
EXPENSIVE FERTILITY TREATMENTS-EVEN IF  
YOU HAVE BEEN TOLD YOU CAN'T!

**Fertility4  
Every  
Woman  
Coaching  
Program**

*Joy A Chukwumah  
Reviewed By Dr. Adeniyi*

# **Getting Pregnant Made Easy.**

*Discover Already Available Nature's Best Fertility Secrets & Conceive in No Time Without Spending A Fortune on Expensive fertility Treatments-Even if You Have Been Told You Can't!*

## **Content:**

Section One: Fertility Detox Guide

The Ovaries & Balancing Your  
Hormones Blueprint

Section Two: The Fallopian Tube Blueprint

Unblocking Your Tubes Naturally

Section Three:

Womb Care Blueprint

Get Rid of Fibroid, Endometriosis, and  
Cyst etc.

## Hey My Friend, Welcome!

Have you tried for months or years trying to conceive?

Everything you need-by that I mean, the exact medication –to conceive, is already available. You just haven't come across it yet.

This program is going to show you the already available nature's best medications and supplements you need to overcome your fertility hurdle and conceive successfully in no time.

It's going to be a straightforward guide with no long talks and BS.

My goal through this guide is to equip you with the exact step-step information you need to move from step zero (from a confused infertile couple) to actually conceiving and carrying to full term.

And please pardon me if my English is not perfect or if you come across some grammatical error, I am trying to pass this information as simple and as clearly as possible.

So, if some 'stone' has passed through the sieved unnoticed, do not feel offended at our carelessness.

## How Conception Happen.

### **The ovulation cycle begins in the brain.**

The hypothalamus—a region of the brain that connects the nervous and endocrine systems—releases the hormone (gonadotropin-releasing hormone (GRH)) that kicks off the ovulatory cycle.

The GNRH hormone then, triggers the pituitary gland, also in the brain, to produce other hormones (luteinizing hormone and follicle-stimulating hormone), which stimulate your ovaries to produce still other hormones (estrogen and progesterone) that prompt ovulation.

### **Your ovaries**

Most women have two ovaries, one on the right and one on the left. During the first week or so after your period begins, both ovaries work hard, growing follicles that could become mature eggs.

Now, around day 7, one egg becomes the dominant egg—let’s called the Queen Egg—and the other follicles in both ovaries eventually begin degenerating. (These otherwise “lost” eggs are the ones that are matured, retrieved, and preserved during egg freezing!)

The Queen Egg continues to grow in preparation for her release around day 14 (This is the best time to have sex)!

### **The Fallopian Tube & The Womb Comes Into Play.**

The Fallopian tube is actually the organ that connects the ovaries to the uterus. Once an egg is released from the ovary, it is pulled in by the finger-like appendages at the end of the Fallopian tube, into the tube through which it travels down into the uterus. This journey of

an egg from the ovary to the uterus happens within a period of 12–24 hours.

However, in the case of unprotected sex around the time of ovulation, the Fallopian tube rises to its higher purpose: it becomes the venue for fertilization.

### **What about the Sperm?**

Sperm enters through the vagina, passes through the cervix, across the uterus, and into the Fallopian tubes where the egg is waiting.

They have a really good chance of dying or getting trapped or lost (perhaps up the wrong Fallopian tube), and of the millions of sperm that start this journey, only a dozen or so—the strongest swimmers—actually make it all the way.

### **Your fertility Window**

The good news (for the sperm, at least), is that they can survive stealthily inside the reproductive system for several days, so it's possible to get pregnant even if you have unprotected sex before you ovulate. (Before day 14).

This is what is referred to as your fertile window. It is usually from a few days of your menses till the 12<sup>th</sup>-14<sup>th</sup> day when you ovulate.

#### **Note Your Fertile Window**

You don't get pregnant every other day you have sex with your partner in a month.

There are days meant for conception to happen. And unfortunately, it is even fewer days compared to the days you can't conceive.

**What are those baby days?**

**Answer: From the day you start seeing your period to the next 15 days.**

So, the best day to make love is immediately after you see your last drop of blood.

Start baby dancing from that day till the next 10-15day.

Hope you got that?

Now, let's talk about what could be hindering you from getting pregnant even after all the baby dancing with your partner.

## WHAT COULD GO WRONG?

Why Can't I Conceive?

The female reproductive system is made up of the **ovaries, uterus, and fallopian tubes.**

If a medical problem has affected any of these three areas, it may make getting pregnant more difficult.

As a couple, if you have been finding it difficult to conceive, then as a woman, you will consider checking if;

**For The Woman:**

### **1. You are actually ovulating.**

Disorders of the **ovaries**-as seen in cases such as polycystic ovarian syndrome, ovarian cyst, Primary Ovarian insufficiency and other follicular disorders can actually be the issue.

However, disorders in your ovaries are actually caused by;

-Disturbances to the balance of hormones in the body, such as too much production of prolactin, thyroid hormones or adrenal hormones.

-Disorders of the endocrine system causing imbalances of reproductive hormones. The endocrine system includes; hypothalamus and the pituitary glands. Examples of common disorders affecting this system include pituitary cancers and hypopituitarism.

### **2. Are your Fallopian Tubes Okay?**

**Tubal disorders-such as blocked fallopian tubes**, which are in turn caused by untreated sexually transmitted infections (STIs) or complications of unsafe abortion, postpartum sepsis or abdominal/pelvic surgery can actually be the reason you haven't been able to conceive.

### 3. **Is Your Womb in Good Condition?**

**Uterine disorders** which could be inflammatory in nature (such as endometriosis), congenital in nature (such as septet uterus), or benign in nature (such as fibroids) can hinder a woman's conception efforts.

#### **For The Man:**

The Semen is the main factor to consider-and a must check once a couple has tried conceiving for more than 12 months without success.

#### **Note:**

The problem most couples trying to conceive is that they always seem to leave out male factor in the whole process.

I want to strongly draw your attention to your husband as you go through this journey. Please, you both must go for proper checkup and testing to confirm the states of your reproductive health.

This would improve your chances of conception.

So far, these are the major Issues that hinder a lot of couples from conceiving.

My duty via this book is to show you how to resolve any or all of these problems step by step and finally conceive.

## **Module One:**

### **Let's Start With the OVARIES**

## OVARIES

I just want to cut out a lot of stories and take you reader straight to the solutions you seek-Conception.

So, as a woman who finds it difficult conceiving, the first thing that should come to mind is; 'Am I ovulating at all'?

This is because, from my extensive research, most women trying to conceive have been delayed due to ovary disorders.

So, once you have been finding it difficult to conceive, the first step you should take is

### **Step 1. Find out if you are ovulating or Not.**

*This is the number one issue a lot of women have when trying to conceive-Anovulation.*

This simply means something isn't right with your ovaries. It may not be able to produce and release matured healthy eggs.

But let's talk about ovulation a little before addressing annovulatory issue.

I want to make sure you know when you ovulate and how to track your ovulation period.

### **Ovulation**

Ovulation is the release of an egg from your ovary, into your fallopian tube. It typically happens around the 13th–15th day of your menstrual cycle.

If your ovaries are not releasing matured and healthy eggs as at when due, then there is no way one could get pregnant.

I know by now you already know the difference between menstruation and ovulation.

### **Menstruation & Menstrual Cycle:**

Menstruation or what we refer as 'your period'-is the passing of blood through your vagina. This happens periodically every 28days or 29days or 30-35days-depending on your menstrual cycle.

What I mentioned above is called your menstrual cycle.

Note that, menstruation is not a monthly thing-Meaning, it doesn't happen every 30 Or 31days according to monthly calendars.

It happens according to your own periodic calendar. It is a periodic event that is very personal-controlled by your brain.

My own menstrual cycle is 29days, while yours may be 30 or 28days.

So, I believe by now, you already know your menstrual cycle-The number of days it takes for you to see your period.

Note: The first day you see your period is Day one. It might last for 3-5days, and then it stops. If it stops on the 4th day since it started, then your period stopped at Day 4.

**Note** that, as soon as you start seeing your period, new eggs also start forming and maturing in your ovaries.

The egg actually takes 14-15 days to mature. And once it matures around that day 14 or 14, the next thing that happens is that it will be released. This is what we call ovulation.

So, back to menstruation.

Can you remember the exact date your last menses started? That is Day 1 of that cycle. Now the next date it starts is your day 1 of the next (or let me call it second) cycle.

A day before the second cycle marks the last day of the first cycle. (A day before the day you started seeing your menses is the last day of the previous cycle).

So, let's focus on finding out if you ovulate or not

### **The Best Way to Know if You Ovulate.**

#### **1. Buy Ovulation Prediction Stripes.**

You can walk into any pharmacy and ask for ovulation strips. They can educate you on how to use it.

But just pee into it every day (or best still, start peeing into it from the day you start your menses) till you see your next menses or not.

To be certain that you ovulate or not, you can chart or track your urine using the ovulation stripe or ovulation kits I mentioned above.

Luteinizing hormone (LH) is a hormone released by your brain that tells the ovary to release an egg (called ovulation).

LH levels begin to surge upward about 36 hours before ovulation, so some women and their doctors test for LH levels. LH levels peak about 12 hours before ovulation.

That is how you know when you are ovulating.

You can also buy a Clearblue ovulation prediction kit for better accuracy.

## **2. Go For Folliculometry Scan**

This is another way you could detect if you ovulate or not.

In fact, this is usually the first of the scans or tests your Doctor would ask you to carry out when you are finding it difficult to get pregnant.

How is the Folliculometry test done?

This scan is usually done on Day 12 of your menstrual cycle. That means, the 12th day from the day you saw your menses.

On day 12, a mature follicle should be seen. But if no follicle is seen through this testing, it means you obviously are not ovulating.

These scans show the development of follicles, assessing their size and growth. Scanning continues until the follicles have disappeared and ovulation has occurred.

Your gynecologist or Doctor can advise you (couples) through this technique when to have intercourse.

Through his scan, your Doctor can detect precisely, if you are ovulating or not.

## **3. Another Way to Confirm Ovulation? Track progesterone.**

A cycle day 21 progesterone blood test will give you an accurate progesterone level, but this only shows your levels at that particular point in time.

Since progesterone needs to remain elevated for a long enough period of time after ovulation, a one-time blood test doesn't always accurately represent progesterone levels over the whole

implantation window. Plus, serum progesterone can fluctuate up to 30 times in just one day.

\*\*\*\*

### **I Am Not Ovulating! (No egg seen).**

If you carefully track your cycle or carry out these tests and discover you are not ovulating, then we will begin the next phase of your journey to know why you are not ovulating and how to make it happen.

**But let's take note of the two cases below;**

#### **Case 1: But I Menstruate, How come I am Not Ovulating?**

Well, it is possible to menstruate-shed the linings of your uterus which gets thickened monthly, without actually releasing an egg (ovulating).

#### **Case2: Is It Possible to Ovulate While Menstruating?**

Yes. Quite a number of women ovulate while they are seeing their flow. That is why, the best thing to do, is to begin using the ovulation stripes from the first day of your menses to check if you ovulate during your period.

This will save you so much heartbreak and unnecessary delay, since you can have intercourse during that period.

Sounds messy, but it may be your best bet.

## **Section Two of Module One:**

### **Ovulatory Disorders- Anovulation**

## 'I am Not Ovulating' or I am Not Ovulating Regularly'!

Okay, so by now, you have probably gone to the hospital, ran some tests and it's been confirmed that you do not release an egg on a regular basis or you do not ovulate at all.

You begin to wonder -what could be the cause? What could be wrong with me? Why am I not ovulating?

Calm down. This is not a big issue until you 'over-blow it'.

Anovulation is a common condition in which a woman does not ovulate, meaning her ovaries do not release an egg.

Anovulation is most frequently caused by a hormonal imbalance and may also be caused by problems in the ovaries and follicles.

The absence or irregularity of periods are common symptoms of anovulation.

Many treatments for anovulation are fairly simple, such as correcting a hormonal imbalance to help the ovaries produce eggs on a regular basis.

## What should be done if you are not ovulating?

The Next step after folliculometry (after confirming that you are not ovulating is to go for hormonal assay -The same thing as hormonal profiling.

You want to find out if there is an imbalance in your hormones. This is one of the major causes of anovulation.

This usually happens when your system is not balanced.

So, that brings us to;

## What causes hormonal Imbalance?

Anovulation typically occurs when a woman's hormones are off balance.

During a woman's menstrual cycle the luteinizing hormone (LH), follicle-stimulating hormone (FSH), estrogen and progesterone, AMH, Prolactin- work together to cause ovulation.

If even one of these hormone's levels is wrong, then ovulation may not be possible.

**-Toxins/Infection** If your system is having toxins. Also certain infections in your body can affect your egg.

**-Nutritional Deficiency;** your body needs certain nutrients for it to reproduce. Deficiency in any of these nutrients such as Selenium, Zinc, Magnesium, B6 etc. can lead to sterility.

**-Improper function of the hypothalamus section of the brain,** which can result in failure to signal hormone production necessary for eggs to mature.

**-Pituitary gland malfunction that can cause an imbalance of FSH and LH,** resulting in improper ovulation. This can be caused by over exercising or being underweight.

**-Obesity** can cause a woman's body to produce excessive androgens, insulin and testosterone, which can have a negative effect on the menstrual cycle, making it irregular or non-existent.

**-Stress induced anovulation (SIA)** affects about 5 percent of reproductive age women. High stress levels affect the hypothalamus'

release of gonadotropin-releasing hormone (GnRH) and the pituitary gland's release of LH and FSH.

Other Issues like;

### **-Scarred ovaries**

Ovaries that are damaged, which can occur from infection or repeated surgeries to remove ovarian cysts, may become scarred and inhibit follicle maturation so ovulation doesn't happen.

### **-Unruptured follicle syndrome**

A woman may produce a normal follicle with an egg inside it but the follicle fails to release the egg from the ovary.

**-Premature ovarian failure**, also called premature menopause, and low ovarian reserve can also cause anovulation.

### **What are the symptoms of anovulation?**

Skipping periods or the absence of periods altogether are common symptoms of anovulation.

Physical symptoms that can contribute to anovulation include being obese, being underweight or having extreme emotional stress.

So, if you have immature eggs, no eggs at all, Low or Insufficient ovarian reserve, you don't have to worry yourself at all.

Don't worry about the truck of bad news your Gynecologist or Doctor may have told you.

News like; "I am sorry Madam but you can't conceive, you have Low Ovarian Reserve, PCOS, PIO etc."

They are big names and the 3 step process below is the secret weapon to clear them all.

What is The Solution?

**All you need to do is follow these three steps I will Suggest bellow:**

Step1 Cleanse

Step2: Balance

Step3: Build up

In summary, cleanse your system of toxins, Balance your Hormones, Buildup by giving your body the adequate amount of nutrients it needs to reproduce.

It's that Simple. Yet so many Doctors might never tell you this.

## Step 1: Detoxify (Cleanse) your body, especially the liver.

One would wonder why it is necessary to eliminate toxins from our body when dealing with infertility.

The first question we should then ask is, what are toxins and how do we accumulate them in our bodies?

Toxins are harmful chemicals we absorb from food, the products we use daily or from our environment.

They include pesticides, pollutants like fumes from diesels and cars we inhale daily in our air, fish and chicken grown with unhealthy dose of antibiotics and fertilizers, creams and cosmetic products we use containing artificial estrogens, and chemicals called polychlorinated biphenyls, or PCBs, used in electronics.

Gone are the days our environment was free from toxins and safe.

Our grandparents enjoyed good health, fruitfulness and long lives because they lived in the villages free from pollution, they drank flowing waters and lived in love and peace.

Today we constantly ingest heavy metals like lead and Biphenyl-A (BPA - found in plastics, lining of tin cans and receipts) daily into our bodies.

## **External Sources Of Toxins Include:**

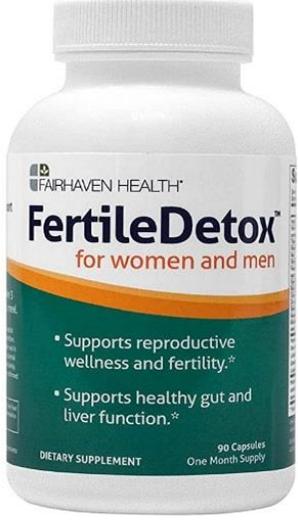
- Biphenyl-A (BPA - found in plastics, lining of tin cans and receipts)
- Synthetic fragrances (like perfumes and air fresheners due to the addition of phthalates)
- Conventionally-raised meat and dairy (i.e. not organic due to the use of growth hormones)
- Non-organic fruits and vegetables (due to pesticide residue)
- Regular personal care products (due to the addition of toxic chemicals like parabens, preservatives and artificial fragrances)
- The birth control pill (due to the addition of synthetic estrogens like ethinylestradiol).

Some toxins come in through your supplements, toothpaste, and medications since many of them contain gelatin. Gelatin is often contaminated with prions.

Ok, madam, please what do you recommend I use to detoxify my system?

How do I go about it? Next step below.

## Fertility Detox Guide (for You and Your Spouse)

	
	<p>Fertile Detox was formulated to support reproductive wellness in healthy women and men by helping the body's detoxification systems neutralize and remove toxins.</p> <p>Milk thistle (<i>Silybum marianum</i>):  Dandelion root (<i>Taraxacum officinale</i>):  Grape seed extract and Green tea extract  Calcium d-glucarate of beta-glucuronidase, an enzyme that promotes the reabsorption of toxic chemicals rather than the excretion of these chemicals.  Probiotics etc.</p>

**Note** I said, Use pure cleanse or Toxi-Flush or fertile Detox.

Do not combine any of them.

Also, do not combine with any other medication. Ensure to finish with this detox before continuing with any other medication.

### What if You Have An Infection?

As you begin your fertility journey, one of the tests you would be asked to carry out would be a test to check for the presence of any infection.

This is one of the key factors that often affect your fertility. So, I would suggest, you carry out a test to check for any of these infections:

Ensure to check with your Doctor if you have any infection.

Common infections to screen for includes (but not limited to) chlamydia. Bacterial vaginitis, Trichomonas vaginitis, and Candida albicans, E Coli, Staphylococcus etc.

I suggest you treat with the recommended antibiotics.

Then purchase **Probiotics and D mannose**.

Please do not joke with these two recommendations.

The reason a lot of people continue to suffer from infection recurrence is because of drug resistance.

The two mentioned medications are a natural and superb approach to clearing infection from your system and enhancing your chances of conception.

Your partner should also treat any of the infections mentioned as you are treating.

**You can purchase any of these products from amazon or your local online store or pharmacy.**

**Also read up about Mannose and probiotics if you have any doubts.**



If you are in Nigeria or any part of the world, I also suggest you add feloclear.

**Breakthrough Dietary Fertility Supplements**

**FELOCLEAR**  
Unblock Fallopian tubes, Clears PID (Pelvic Inflammatory Disease), Clears Candida, Treat Yeast Infection/Vaginal Discharge, reduces mensural pain and bad vaginal odour.

**FREEFLOW (WOMEN)**  
Boost Ovulation, Restore/regulate Menstruation, shrink ovarian cysts, balance reproductive hormones & PCOS.

**FREEFLOW (MEN)**  
Promotes quality sperm production, enhances motility, morphology, protects sperm from damage & Boost Sperm.

**Clinically Proven & NAFDAC Approved**

**100% ORGANIC**

Okay, so, we have looked at how to detoxify your body for fertility and we have also shown you the exact step to effectively eliminate infection in your fertility journey.

Let's not look at balancing your hormones.

## Balancing Your Fertility Hormones

Hormones dictate if the egg will mature and make the journey to the uterus and if the embryo will find a safe place to gestate within the womb for the next nine months.

Hormones have everything to do with fertility, pregnancy, and the issues many couples trying to conceive deal with. If any of your fertility hormones are out of place, you may find it difficult to conceive.

Fortunately, hormonal imbalance is often a very easy problem to tackle.

Hormonal imbalance is one of the major causes of Anovulation.

### **Testing for Hormonal Imbalance**

Hormonal imbalances in men and women can be determined through simple blood or urine analysis.

Fertility hormone testing looks at the presence of a variety of hormones central to reproduction to determine whether one or more hormones is depleted or in excess.

This can help fertility specialists determine potential causes of infertility and the appropriate treatment options.

### **Key Fertility Hormones**

Key hormones responsible for fertility which your doctor would want to examine.

**Estrogen and progesterone levels, FSH and LH levels, Inhibin B, Anti Mullerian Hormone (AMH), Testosterone and other androgens, thyroid tests, and Prolactin levels**

Once you have conducted this hormonal profiling, you are likely to know which of the hormones are out of place.

Please note that to balance your hormones, you must first know the one that is off.

Ensure you carry out these tests-especially for prolactin if you do not ovulate.

Have you been told you have high FSH and LH? High Prolactin, Estrogen Dominance/ low progesterone. Etc.

**Let's start with the general steps you can take to balance your hormones, then we shall look at how to balance specific hormones that may be out of place in your body.**

## Steps To Balance Your Hormone

Have you been told you have Low AMH, Primary Ovarian Insufficiency (POI) or Decreased Ovarian Reserve?

Please ensure you get all the products I will mention below plus, ensure you have undergone the detox procedure before commencing with these steps /products.

### 1. Freeflow for hormonal balancing (especially if you are in Nigeria or Africa)



**Breakthrough Dietary Fertility Supplements**

**FELOKLEAR**  
Unblock Fallopian tubes, Clears PID (Pelvic Inflammatory Disease), Clears Candida, Treat Yeast Infection/Vaginal Discharge, reduces mensural pain and bad vaginal odour.

**FREEFLOW (WOMEN)**  
Boost Ovulation, Restore/regulate Menstruation, shrink ovarian cysts, balance reproductive hormones & PCOS.

**FREEFLOW (MEN)**  
Promotes quality sperm production, enhances motility, morphology, protects sperm from damage & Boost Sperm.

**Clinically Proven & NAFDAC Approved**

**100% ORGANIC**

## **Product prescription for free flow & feloclear from afro organic website**

- Ovarian Cysts (6 packs of FreeFlow Capsule for women)
- Hormonal Imbalance (6 packs of FreeFlow for women)
- High Prolactin with breast milk (6 packs of FreeFlow for women & 2 Feloklear Capsule)
- Menstrual seizure of few months or up to a year (6 packs of FreeFlow Capsule for women)
  
- Menstrual seizure of more than one year (6-8 packs of FreeFlow Capsule for women)
- Lack of Ovulation & Hormonal Imbalance (6 packs of FreeFlow Capsule for women)
- Tubal Blockage/Hydrosalpinx (4-6 packs of Feloklear Capsule)
- For vaginal discharge or purple in men (4 packs of Feloklear and 2 packs of Bitter Plus Capsule)
- Dark Menstruation & Irregular menstruation (6 packs of FreeFlow Capsule for women)
- Painful and dark menstruation without vaginal discharge (6 packs of FreeFlow Capsule for -women)
- Low sperm count & low mobility (6 packs of FreeFlow for men)
- Azoospermia (6 packs of FreeFlow Capsule for Men & 4 packs of Dr. Quick Capsule)
- Male Complete fertility Combo
- Female Complete fertility Combo
- Fibroid (WhatsApp +2347037913319 for proper prescription)

You can purchase the products via: <https://afroganiks.com/>

Note: If you cannot get feloklear and free flow, kindly follow step 2 and get the rest products.

**2. Next is Vitex & Maca or combine maca with evening primrose.**



Or this combination especially if you have low progesterone.



### Step 3 DHEH and COQ10

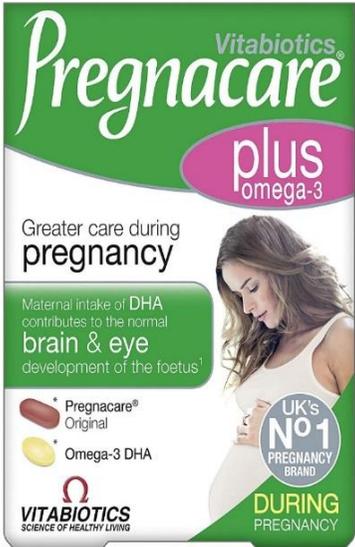


## Step 4

To Build up Your Nutrition consider the Fair heaven combo product below or Pregnacare or Conception



**Or Get Pregnacare or Conception.**

 <p>The image shows the packaging for Pregnacare plus omega-3. The top part is green with the brand name 'Vitabiotics Pregnacare' in white and pink. Below that, it says 'plus omega-3' in a pink oval. The text 'Greater care during pregnancy' is prominent. A green box states 'Maternal intake of DHA contributes to the normal brain &amp; eye development of the foetus<sup>1</sup>'. There are icons for 'Pregnacare Original' (a red capsule) and 'Omega-3 DHA' (a yellow capsule). The Vitabiotics logo is at the bottom left. A circular badge on the right says 'UK's No 1 PREGNANCY BRAND'. At the bottom right, it says 'DURING PREGNANCY'. The background features a pregnant woman.</p>	 <p>The image shows a clear plastic bottle of Conception dietary supplement. The bottle has a black cap and a blue label. The label features the 'EU NATURAL' logo at the top, a stylized baby face icon, and the word 'CONCEPTION' in large letters. Below that, it says 'INOSITOL &amp; VITEX' and 'FEMALE FERTILITY PRENATAL'. At the bottom of the label, it says '60 VEGETARIAN CAPSULES DIETARY SUPPLEMENT'. The bottle is filled with yellow capsules.</p>
<p>You can combine pregnacare with maca and primrose oil</p>	<p>If you are using conception, do not buy vitex, as it already contains vitex. You can combine conception with maca and primrose oil.</p>

**NOTE:**

You should take either Pregnacare or Conception or the fair haven combo. Please make sure to get all the above listed products.

But note that you can either use the fertile product from fair haven or pregnacare or conception.

Do not order for all three brands, as they all contain almost similar nutrients to help build up your nutrition.

In this section, we shall look at the various hormones in our bodies and how the above supplements aid its balance.

## 1. Estrogen Dominance

The gold standard of hormone testing estrogen levels and other hormones is the **Dried Urine Test for Comprehensive Hormones (DUTCH)** which examines the key reproductive hormones like estrogen, testosterone and progesterone, as well as their metabolites to provide a comprehensive picture of your overall hormone balance.

Note: Do not use a blood test to assess your hormonal levels- it could be very misleading.

Also ensure your progesterone levels are tested to determine if it is too low.

### **Excess Estrogen vs Diminished Progesterone**

One of the most common hormonal imbalances that most women suffer from is an excess in estrogen levels, and a deficiency in progesterone.

These two hormones can be best friends, and also worst enemies. They rely heavily on each other to stay in balance, and when one gets out of line, the other one falters.

When estrogen levels become too high in the body, progesterone levels immediately plummet and vice versa (however, it's far more common for estrogen to be the hormone that is in excess).

Progesterone is also a precursor hormone, meaning the body uses it to make other steroid hormones.

A body that is lacking in this essential hormone will surely be affected in several ways.

You are most likely going to have these situations;

**Higher than normal levels of estrogen and or lower than normal levels of progesterone.**

<b>Symptoms Of Estrogen Dominance</b>	<b>Symptoms of Progesterone Deficiency</b>
Allergy symptoms like asthma and hives Thyroid issues Breast cancer Breast tenderness Decreased sex drive Depression with agitation and/or anxiety Dry eyes Early onset of menstruation Fat gain, usually around the middles Fatigue Foggy thinking Hair loss Headaches Increased blood clotting Fertility issues	Recurrent early miscarriage No period Not ovulating Endometriosis PCOS, PMS Cramps during menses Excess bleeding during menses Swollen breasts Fibrocystic breasts Loss of libido Obesity Depression Water retention Low thyroid Facial hair Hot flashes Night sweats

Irregular periods Insomnia PMS Polycystic ovaries Sluggish metabolism	Vaginal dryness Foggy thinking Memory lapse, Incontinence Tearful, Sleep disturbances Heart palpitations, Bone loss
---	---

**Estrogen Vs. Progesterone, AMH, FSH, LH and Eliminate Ovarian Cyst, PCOS, Endometriosis, Polyp and Even Fibroid Naturally?**

If you have Excess Estrogen levels vs. low Progesterone or do not ovulate at all-Follow the following steps below to naturally boost your egg production and quality.

**First detox and cleanse your system using the detox guide.**

**Evening Primrose- For Low Levels of Progesterone:**

Have you been told you have low progesterone or estrogen dominance?

**For Low Progesterone use this: Evening Primrose a most have!**

It shrinks Breast and ovarian cyst and boosts your progesterone level naturally. (Vitex also helps to increase your progesterone levels. So you can go for vitex if you can't get this-but i prefer evening primrose).

**You can combine it with Dong Quai FOR OVARIAN CYST and endometriosis**



Dong Quai is mostly helpful for ovarian cysts. It regulates and balances your estrogen level and clears cyst effectively.

You combine it with evening primrose (to raise your progesterone level).

You can effectively combine it with DIM or maca if you are not able to get Dong Quai.

**You can also USE DIM or Maca supplement to balance excessive estrogen levels**



NOTE: Using these supplements should help you balance your hormones and boost ovulation naturally.

But you can also work with your Gynea.

Take the medications given to you in the hospital, when you are done then you can start with these.

## 2. Follicle Stimulating Hormone (FSH).

FSH is one of the most important hormones for fertility. It is the hormone that regulates your menstrual cycle and ensures your ovaries produce healthy and matured eggs.

It is usually measured on day 3 of your menstrual cycle.

Test must look at follicle stimulating hormone range in the context of a woman's age and other factors

For example, while an FSH test value of around 8 mIU per mL is normal for a woman in her mid to late thirties, it is high for a woman in her 20s. For a woman in her 40s, this would actually be considered low FSH.

This approach of looking at hormone levels in the context of age allows physicians to catch diminished ovarian reserve (DOR) early.

Research suggests that FSH along with AMH test is essential in assessing ovarian reserve and pregnancy chances-and not one of them alone.

### **Is your FSH Too High or Too Low?**

A low FSH result is generally associated with better ovarian function. Higher levels are associated with diminished ovarian reserve, (DOR) which makes pregnancy difficult.

## **Solution for Elevated or Imbalanced FSH**

A successful approach to fertility treatment for women with elevated FSH levels is supplementation with dehydroepiandrosterone (DHEA) and CoQ10 prior to conception.

DHEA helps restore an androgen-rich ovarian environment, which in turn helps women with DOR and POA develop a larger number of healthier egg.

## **How Many Weeks to Stay on Supplementation?**

The purpose of DHEA supplementation in hypo-androgenic infertile women (i.e., women with infertility due to low androgen levels) is improvement of egg quantity and quality.

Studies conducted have demonstrated that taking a DHEA supplement for at least 6-8 weeks is required before statistically significant improvements in female fertility can be observed.

Peak effectiveness is typically reached between 16 and 20 weeks. However, as noted above, the length of time is not necessarily the best indicator--what matters is that the woman's androgen (testosterone) levels rise to about the upper  $\frac{1}{3}$  of the normal range.



Or Use these combinations To Balance FSH and LH Levels effectively (Your Husband Should use the conception for men).

It's also a great combination for PCOS.



### 3. AMH

In reproductive endocrinology, we can assess ovarian function (how well a woman's ovaries are functioning) by evaluating her AMH levels.

Women with low levels have low ovarian function and reserve, a condition called diminished ovarian reserve (DOR), or as we call it at CHR, low functional ovarian reserve (FOR).

Low amounts of AMH indicate that there are few very immature follicles, or eggs, developing in the ovaries weeks to months before ovulation.

When there are few eggs that are coming into the maturation process, obviously fewer eggs will mature eventually. Thus, low anti-Mullerian hormone is an indicator of low ovarian reserve, meaning that the patient is producing few eggs that can be used for fertilization later on.

#### **Low AMH Effect?**

Women with anti-Mullerian hormone that is low may experience a higher incidence of miscarriage, and may even experience recurrent miscarriages, due to the poor egg quality.

Solution?

Maca, Vitex, Evening primrose, CoQ10, DHEA and any of the prenatal vitamins like the fertile aid, Fertile CM, Ova boost.

Or combine maca, Vitex, Evening primrose, Coq10, DHEA and Pregnacare (or conception instead of pregnacare).



Many women who have diminished ovarian reserve with high follicle stimulating hormone (FSH) and/or low anti-Mullerian hormone (AMH) are told that donor eggs are their only treatment option.

But research in reproductive medicine has found out that nutritional supplementation with DHEA and C0q10 helps improve a woman's egg reserve.

This helps to readjust their ovarian environment to a more youthful, androgen-rich one.

#### 4. Testosterone and Other Androgens (PCOS Cases)

The ovaries and adrenal glands usually produce small amounts of androgens (male hormones), including testosterone. If androgens

are overproduced, normal ovulation can be affected. Indications of excess androgen include oily skin, acne, and excessive hair growth.

Some women have irregular menstruation because their ovaries produce too much androgen (male hormones). These women are often overweight, and have a history of irregular periods, acne, and infertility.

This syndrome has been called the Polycystic Ovary Syndrome (PCOS) or PCO, because of the multiple small follicle cysts that can be seen on ultrasound lined up just under the surface of the ovary. In some cases the excess male hormone does not represent PCO.

The adrenal gland or the ovary may be sources of abnormal androgen production. Some of these conditions may be dangerous and require further investigation and treatment.

### **Regular Treatment?**

Women who do have PCO may benefit by using insulin sensitizing medications, like metformin (Glucophage).

Clomiphene citrate (Clomid) is the most common medication used to treat ovulation abnormalities among women with symptoms of PCO. Sometimes these two drugs can be used simultaneously.

Your doctor will usually first give you medication such as medroxy-progesterone (Provera) to induce menses.

After menstrual flow begins, clomiphene citrate is taken daily from the 3rd through the 7th day of the cycle.

Patients may need clomiphene citrate doses of up to 5 pills per day to induce ovulation. It is helpful to monitor the response to this treatment.

Acceptable ways of monitoring range from following basal body temperature charts and urinary ovulation predictor kits to daily sonogram monitoring and blood tests.

**Best Way Out Of PCOS-Balance Your Androgen, Estrogen and Progesterone.**

Follow the steps above for FSH or just purchase these two right away. They are my best.

	
<p>This product has recorded lots of testimonials. Ovarifert is Specially formulated for PCOS.</p>	<p>You can purchase it from their website at <a href="https://www.amitamin.com/eu/ovarifert-pcos.html">https://www.amitamin.com/eu/ovarifert-pcos.html</a></p>

## 5. LH or Luteinizing Hormone

Once ovulation begins with this rush of LH, FSH begins to work and encourages the ovaries to mature an egg cell. When an egg cell is mature FSH will be shut off and LH will ramp up production and cause the matured egg to make its way down the fallopian tube to meet a viable sperm.

### Best Solution? Vitex for low levels of LH

Vitex supplement which can be bought online (Amazon or Jumia) is an effective supplement for balancing your FSH and LH level. (See how I balanced Elevated FSH above).

But if you have Elevated Levels of FSH and LH use a fertility cleanse, then vitex, maca and Pregnacare or Conception.

These supplements contain selenium, zinc, folate, magnesium and all the vitamins that your body may be lacking but need for conception.





## 6. Progesterone

During the menstrual cycle, when an egg is released from the ovary at ovulation (approximately day 14), the remnants of the ovarian follicle that enclosed the developing egg form a structure called the 'corpus luteum', which literally translates as 'yellow body' due to its appearance.

This releases progesterone and, to a lesser extent, estradiol. The progesterone prepares the body for pregnancy in the event that the released egg is fertilized.

If the egg is not fertilized, the corpus luteum breaks down, the production of progesterone falls and a new menstrual cycle begins.

If the egg is fertilized, progesterone stimulates the growth of blood vessels that supply the lining of the womb (endometrium) and stimulates glands in the endometrium to secrete nutrients that nourish the early embryo.

Progesterone then prepares the tissue lining of the uterus to allow the fertilized egg to implant and helps to maintain the endometrium throughout pregnancy.

### **What If Progesterone Levels Are Out of Balance?**

If progesterone levels fall too low, you may have irregular bleeding during your menstrual cycle, your cycles might become more spaced apart, or you might not have any menstrual cycle at all.

Miscarriage and ovulation problems are a couple other possible consequences of a progesterone hormone imbalance, as well as headaches, hot flashes, mood changes, and reduced libido.

And if you have high progesterone levels? You might experience common high progesterone symptoms like vaginal dryness, mood changes, and fatigue.

If progesterone is absent or levels are too low, irregular and heavy menstrual bleeding can occur. A drop in progesterone during pregnancy can result in a miscarriage and early labor.

Mothers at risk of giving birth too soon can be given a synthetic form of progesterone to delay the onset of labor.

Lack of progesterone in the bloodstream can mean the ovary has failed to release an egg at ovulation, as can occur in women with polycystic ovary syndrome.

**To Balance Your Progesterone, use Vitex or especially Evening Primrose Oil, then maca add fertile aid or pregnacare or conception.**



## 7. HCG & HPL

HCG is present only during pregnancy and provides a fresh embryo with the nourishment it needs to develop further.

At 11 weeks of pregnancy this hormone drops off and hPL takes over, providing the nourishment a fetus needs to develop into a baby.

Progesterone continues to play a vital role by prohibiting contractions that would reject the embryo.

Too much, or not enough progesterone can cause many problems for a woman seeking pregnancy. Levels must be optimal if implantation is to happen.

### **Solution?**

**Follow the steps in the first section to balance your hormones.**

## 8. Too Much Prolactin

The pituitary gland can cause excess production of prolactin (hyperprolactinemia), which reduces estrogen production and can cause infertility. This can also be caused by medications you're taking for another condition.

Prolactin is a pituitary hormone that is normally secreted during and after pregnancy to prepare a woman's body to produce milk for her baby.

Sometimes too much prolactin is secreted from the pituitary when a woman is not pregnant. Not surprisingly, women with this condition often begin to lactate.

Discharge of milk and loss of menstruation are the major symptoms associated with this condition. In some cases menses do not stop, but cycles become irregular and there is a shorter interval between menses.

Women with this condition need to have a CT scan or MRI to make sure their pituitary is normal.

Although in the past these cases sometimes required pituitary surgery, today excess prolactin production can almost always be effectively treated with medication.

## **Treatment**

Your Doctor is likely to treat you with any of these orthodox medications;

Cabergoline (Dostinex) or Bromocriptine.

Note: Cabergoline (Dostinex) may be more effective than bromocriptine and has less bothersome side effects.

Please, endeavor to work with a fertility expert before taking any of these above mentioned medications.

However, there is a better method of balancing your prolactin levels, so you do not have to use these above-mentioned medications.

Or at best, you get a better result after you must have taken the medications given to you by your doctor.

## **Natural Method for High Prolactin (Vitamin B6).**

Vitamin B6 is a vital nutrient involved in many aspects of macronutrient metabolism, hemoglobin synthesis & formation, histamine synthesis & gene expression.

In high doses vitamin B6 is shown to have a major role in decreasing high blood sugar, high blood pressure, calcium channel blockers & as

prolactin inhibitor in certain people by improving a functional deficiency of this vitamin that can occur.

**Supplement that can give you this result is shown below:**

Vitex supplement has been proven to be a natural and effective treatment for high prolactin.

**Note: The best form of B6 to look out for is Pyridoxal-5-phosphate.**



Also Add Maca root along with pregnacare



Note: If you are in Nigeria or Africa you can go for feloclear for high prolactin and freeflow for women’s hormonal balance.

The advertisement is titled **Breakthrough Dietary Fertility Supplements** and features three product bottles. The background includes a photo of a smiling woman and child. Below the bottles are three columns of text:

- FELOCLEAR**  
Unblock Fallopian tubes, Clears PID (Pelvic Inflammatory Disease), Clears Candida, Treat Yeast Infection/Vaginal Discharge, reduces menstrual pain and bad vaginal odour.
- FREEFLOW (WOMEN)**  
Boost Ovulation, Restore/regulate Menstruation, shrink ovarian cysts, balance reproductive hormones & PCOS.
- FREEFLOW (MEN)**  
Promotes quality sperm production, enhances motility, morphology, protects sperm from damage & Boost Sperm.

At the bottom, a green banner reads **Clinically Proven & NAFDAC Approved** next to a circular logo that says **100% ORGANIC**.

## ORTHODOX FERTILITY DRUGS YOUR DOCTOR MAY LIKELY USE TO BOOST OVULATION AND GET YOU PREGNANT

Clomiphene, (Clomid) taken as a pill, and FSH and LH hormone injections are the main treatment for women with ovulation disorders. Women with no clear cause of their infertility might also use these drugs.

Pills like clomiphene or aromatase inhibitors (**letrozole**, used off-label) increases LH to induce ovulation.

Injections of GnRH, LH, or FSH help mature eggs and induce ovulation.

Sometimes doctors use drug treatment with intrauterine insemination (IUI), when sperm are released into the uterus through a catheter (a thin flexible tube) inserted through the vagina. IUI is done at the time of ovulation.

## The Recommended Supplements & Their Descriptions.

These Supplements support healthy hormones, menstrual cycles, and fertility. Your healthcare provider can help you determine whether these herbs might work for you.

### THE BELOW IS MY NUMBER ONE CHOICE FOR PCOS.



#### Polycystic Ovary Syndrome (PCOS)?

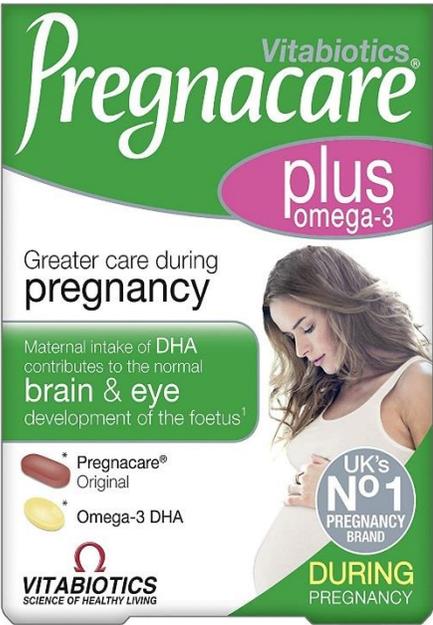
Polycystic Ovary Syndrome is a hormonal disorder that is widespread among women of childbearing age. It is characterised by an often abnormal insulin metabolism and the over production of “male” hormones. It is quite natural that women produce small amounts of “male” hormones, so-called androgens. The well-known androgen is testosterone. Women with PCOS produce increased amounts of these “male” hormones, especially testosterone. The symptoms of this hormonal imbalance may include, but are not limited to irregular menstruation, increased hair growth on body

#### What does amitamin® Ovarifert?

amitamin® Ovarifert supports the particular nutritional and physiological demands of women with PCOS. It is able to treat its symptoms, especially a limited or absent ovulation. The product is based on the findings of nutritional medicine and contributes to the normal female hormone system without containing hormones itself. All its ingredients are officially classified as foods.

and face and a very large number of cysts on the ovaries.	
---	--

**Pregnacare (also my number one recommendation for any woman trying to conceive, engineer ovulation, balance hormones)**

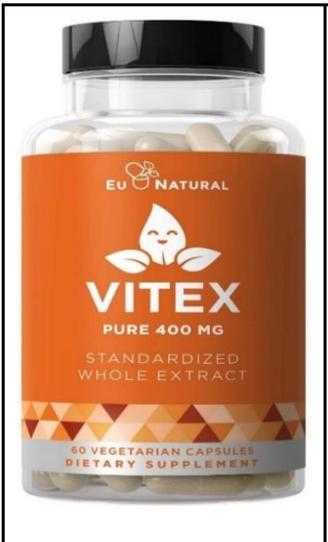
 <p>The image shows the packaging for Vitabiotics Pregnacare plus omega-3. The top half is green with the brand name 'Vitabiotics Pregnacare' in white and pink. Below that, it says 'plus omega-3' in a pink oval. The main text reads 'Greater care during pregnancy' and 'Maternal intake of DHA contributes to the normal brain &amp; eye development of the foetus'. There are images of a pregnant woman and two capsules (one red, one yellow). At the bottom, it says 'UK's No1 PREGNANCY BRAND' and 'DURING PREGNANCY'. The Vitabiotics logo is at the bottom left.</p>	<p><b>It Contains Omega-3 supplements and Vitamin D &amp; DHA</b></p> <p>Omega-3 supplements are also estrogen-aiding, along with Vitamin D3. Studies have shown Vitamin D deficiency to be associated with infertility, so supplementing with Vitamin D and getting regular blood testing may be beneficial.</p>
--	---

**2. Conception + Probiotics MOMMA (my next best recommendation for TTC women)**



Multi-vitamin nutrition for mom and baby's future, including Vitamin D, Vitamin B, zinc, iron, selenium, and folate folic acid, provide the perfect nutrients to support natural fertility.

### **3. Vitex or White peony Supplements (Balances FSH or LH levels, Progesterone, Remedy PCOS, high prolactin, boost ovulation)**



One of the most common herbs used to treat low PdG (progesterone) is chaste tree berry, or vitex agnus-castus.

Vitex stimulates the secretion of luteinizing hormone (LH) from the brain, which stimulates the ovaries to produce progesterone.

Abnormal levels of FSH or LH can be balanced with daily vitex or white peony supplements, and they work best when prolactin hormone is also elevated.

#### 4. Dong Quai or Look for DIM (DIM contains Dong Quai, balances Estrogen, great for PCOS, Cyst)



#### FOR THOSE WHO HAVE UNUSUALLY THIN ENDOMETRIUM:

A Chinese herbal blend containing **dong quai** may support the development of a healthy endometrium (the uterine lining). You can order it from Jumia (Nigerians) or Amazon.

It is very great for **ovarian cysts** and balancing hormones, PCOS, etc.

The one above is from Nature's way brand, but you can get any other brand too.

#### 5. A B6 supplement (Natural Cure for High Prolactin, balance hormones)

A B6 supplement, along with B-vitamin rich foods, can also help to increase progesterone.

Note: The best form of B6 to look out for is Pyridoxal-5-phosphate. That is why I had to search for this anti Prolactin Supplement below.

### Anti-Prolactin Supplement with B6 (Pyridoxal-5-phosphate)

	<p><b>CONTAINS:</b> Covi-ox T-30 P, Pyridoxal-5-phosphate, Zinc orotate, Extract of Mucuna purines standardized to 15% L-dopa, Extract 4:1 of American ginseng root, Extract of ashwagandha root standardized to 5% withanolides, Extract 4:1 of maca root   Other ingredients: Acacia gum, white rice flour.</p>
--	---

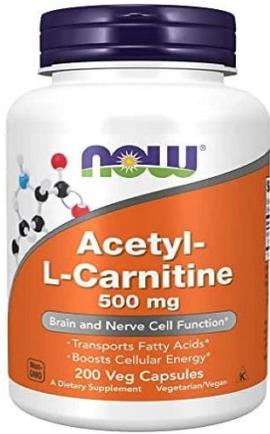
### 6. Myo-inositol + D-chiro-inositol (Balance hormones, PCOS REMEDY)

Myo-inositol has been called the “ovary vitamin,” as studies show it is associated with improved egg quality and pregnancy rates, potentially by making the ovaries more responsive to FSH and LH.

Combined with D-chiro-inositol, it is a great supplement, especially for women with PCOS.

**7. N-acetyl cysteine (NAC) balances abnormal Androgen levels, makes it a good remedy for PCOS.**

Targeting high androgens and inflammation, N-acetyl cysteine (NAC) has been shown to increase glutathione in the ovary and improve fertility.

	<p><b>Licorice root also great for PCOS</b></p> <p>Licorice root can also decrease androgens, with additional anti-inflammatory effects.</p> <p>However when taking licorice root always check your estrogen levels so it doesn't drop below normal</p>
--	---

## Disclaimer:

Kindly check the label for recommended doses. Ensure to stop taking Dim, Dong Quai, feloklear as soon as you take in.

Also, these supplements are not the final say. Always work with a fertility specialist and follow your fertility treatment procedures along with these supplements-as these supplements do not claim to cure or treat congenital abnormalities.

They only aid you in your journey by improving your chances of conception.

However, over a 1000 women-who were told they wouldn't be able to conceive because of poor egg quality, low or insufficient ovarian reserve and anovulation -have used these supplements to conceive naturally.

\*\*With this we have come to the conclusion of ovulation disorders.

**SECTION TWO:**  
**YOUR FALLOPIAN TUBE**

## How to Unblock It Naturally.

Great! We have dealt with your ovary issues and hormonal imbalance-as possible root factors for anovulation and ovary disorder.

In this chapter we will look at your fallopian tube and how it can affect your fertility.

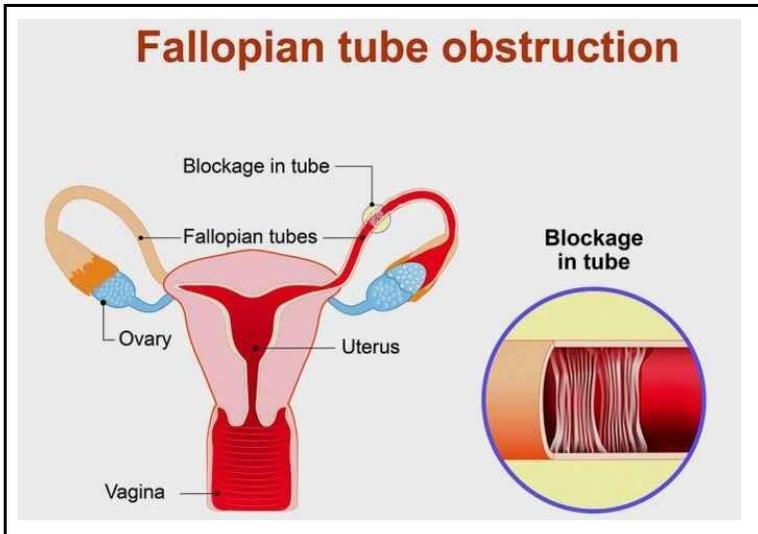
Perhaps you have been told you have blockage of the fallopian tube or have had ectopic pregnancy in the past, in this chapter we will look at how to naturally unblock your fallopian tubes without expensive medications or surgeries.

### **Ovaries - Fallopian Tube-Uterus (womb)**

Each of the two ovaries is connected to the uterus by a fallopian tube. The ovaries store eggs and release them randomly, with one ovary releasing an egg each month.

For example, the right ovary might release an egg for 3 months in a row, and then the left ovary might release an egg the following month.

If one fallopian tube is blocked, it may still be possible for an egg to be fertilized. If both are blocked, this is less likely.



## How & Where Fertilization & Implantation Happens

During conception, a fallopian tube will pick up a mature egg released by an ovary.

Sperm then enters the uterus through the cervix where it will continue to the fallopian tube and fertilize the waiting egg.

The fertilized egg then travels down the fallopian tube to the uterus (womb) where it will implant, resulting in pregnancy.

## Ectopic Pregnancy?

Note That: The fertilized egg must travel down to the uterus before its further development and implantation.

Ectopic pregnancy is a condition in which a fertilized egg develops within the fallopian tube instead of the uterus.

Surgery often needs to be performed to remove the embryo because ectopic pregnancy can be life threatening.

### **What Happens When a Fallopian Tube Is Blocked?**

When a blockage is present in the fallopian tubes, it makes conception difficult or impossible by preventing sperm from reaching a mature egg or preventing a fertilized egg from reaching the uterus.

### **Are There Symptoms of Blocked Fallopian Tube?**

Most women who have blocked fallopian tubes usually wouldn't know -because they may not experience any symptoms-until they begin to find it difficult to conceive.

However, conditions that can lead to a blocked fallopian tube can cause their own symptoms. For example, endometriosis - a condition that increases your risk for blocked fallopian tubes-often causes very painful and heavy periods and pelvic pain.

In some cases, blocked fallopian tubes can lead to mild, regular pain on one side of the abdomen. This usually happens in a type of blockage called a hydrosalpinx. This is when fluid fills and enlarges a blocked fallopian tube.

### **What Causes Blocked Fallopian Tubes?**

Let's take a closer look at the possible causes of fallopian tube blockage.

#### **Pelvic Inflammatory Disease (PID)**

Infection is a common cause of blocked fallopian tubes. Pelvic inflammatory disease, or PID, is a leading cause of fallopian tube infection.

PID is an infection of the uterus or fallopian tubes that is contracted when sexually transmitted bacteria, such as **chlamydia** and **gonorrhea**, spread from the vagina to the uterus and fallopian tubes.

Infections can cause the tissues of the fallopian tubes to swell, sometimes causing blockage. If left untreated, scar tissue may develop within the fallopian tubes, causing further blockage.

### **Scar Tissue**

Scar tissue can create a physical barrier within the fallopian tubes, preventing eggs and sperm from moving freely within the reproductive system.

Scar tissue may develop as a complication of PVD and infection but may also occur as a result of a previous abdominal or pelvic surgery. One common surgical cause of scar tissue in the fallopian tubes is surgery for ectopic pregnancy.

**Past ectopic pregnancy can cause scarring.**

### **Hydrosalpinx**

Blocked fallopian tubes may also be caused by a condition called hydrosalpinx. Hydrosalpinx is a condition in which fluid collects within the fallopian tube.

Hydrosalpinx is most commonly caused by **infection** or injury to the fallopian tubes. Some other conditions that can cause hydrosalpinx are endometriosis and prior surgery.

### **Endometriosis**

Endometriosis occurs when the tissue that is normally found in the uterus migrates and grows in other locations. This extra tissue growth and the scarring that may result from the surgery to remove it can block the fallopian tubes.

### **Fibroids**

Fibroids can block or twist the tubes. Because fibroids often result from a condition of excessive exposure to estrogen, nutritional and lifestyle changes may have a positive impact on these growths.

### **Diagnosing Blocked Fallopian Tube?**

There are three key tests to diagnose blocked fallopian tubes:

#### **Hysterosalpingogram (HSG)**

This is actually an X-ray test, known as a hysterosalpingogram or HSG.

A doctor will inject a harmless dye into the womb, which should flow into the fallopian tubes. The stain is visible on an X-ray. If the fluid does not flow into the fallopian tubes, they may have a blockage.

#### **Sonohysterogram**

An ultrasound test, known as a sonohysterogram. This is very similar to the HSG test but uses sound waves to build up a picture of the fallopian tubes.

**Laparoscopy (My best recommendation).**

This is when a surgeon makes a small cut in the body and inserts a tiny camera to take pictures of the fallopian tubes from inside.

A laparoscopy is the most accurate test for blocked tubes. However, doctors may not recommend this test as an early diagnosis because it is mildly invasive.

## HOW TO UNBLOCK YOUR FALLOPIAN TUBE NATURALLY

### **Step 1. Screen for infections**

Screening for infections should be the first step when diagnosed with blocked fallopian tubes so proper antibiotic treatment can be prescribed.

It is caused by STDs (chlamydia, trichomonas, ureaplasma, and mycoplasma), potentially pathogenic bacteria (intestinal flora, staphylococcus, and streptococcus), fungal infections, or one of 50 possible pathogens.

**Symptoms:** Pain can appear on any day of the menstrual cycle; it can be constant or come and go.

**Prevention:** To prevent salpingitis, you should avoid hypothermia. Keep your feet warm. In cold weather, wear cotton underwear and long outdoor clothing covering your pelvis. Do not swim if you feel too cold.

### **Step2:**

**Treatment with recommended antibiotics should follow immediately.**

Salpingitis requires mandatory antibiotic treatment; otherwise, the disease will become chronic.

You would have to test for any of these infections:

STDs (Chlamydia, trichomonas, ureaplasma, mycoplasma, gonorrhea), potentially pathogenic bacteria (intestinal flora, staphylococcus, streptococcus), fungal infection, E Coli,

If any of these infections is detected in your blood your Doctor would recommend the exact antibiotics with reference to your culture.

Ensure to work with your Doctor's recommendations before taking the next step.

**A Typical Antibiotic procedure for Infection** (This is just a sample, please work with a Doctor to ensure you do not self-mediate.

**Treatment for Chlamydia and Bacterial load (basic recommendation.\* Please its best you follow the your doctors recommendation)**

## **INSTRUCTIONS**

- The treatment needs to be followed by both partners at the same time (please let me know if you are taking any other antibiotics)
- The antibiotics should be taken on an empty stomach or after a meal.
- Alcohol intake should be avoided during the treatment period.
- Keep an upright position for at least 30 minutes after intake of DOXYCYCLINE and avoid taking it too late in the evening.

· **Avoid intake of dairy products** with or close to DOXYCYCLINE intake and limit exposure to sunlight because of possible photosensitivity reactions.

Day 1: Azithromycin tab 250mg, [take 4 tablets altogether, total 1000mg]

Day 2: NOTHING

Day 3-7: Doxycycline tabs 100mg, [one tablet in the morning and one in the evening]

Day 8: Day 1: Azithromycin tab 250mg, [take 4 tablets altogether, total 1000mg].

Day 9-24: Doxycycline tabs 100mg, [one tablet in the morning and one in the evening]

Day 25: Azithromycin tab 250mg, [take 4 tablets altogether, total 1000mg]

DURING THE TREATMENT YOU MAY TAKE 1 TABLET OMEPRAZOLE 20 mg OR **PROBIOTICS** IN CASE YOU HAVE SENSITIVE STOMACH OR IF YOU FEEL THAT YOUR STOMACH IS UPSET.

**NOTE:**

-Also, while treating any infection ensure your partner or spouse also gets tested and treated at the same time.

-While on the treatment, use condoms when having sex to avoid reoccurrence.

-An endeavor to change your underwear as soon as you commence treatment.

-Make Sure you're back and get a retest to certify you both are clear of the infection.

Also consider or discuss this antibiotic with your Doctor when treating severe infection.

**Levofloxacin** for hydrosalpinx

**Step4: BUY PROBIOTICS**

MEN CAN USE THE ONE ON THE LEFT, WHILE THE ONE ON THE RIGHT IS SPECIFICALLY FOR WOMEN.



OR THIS BRANDS



**Step 5: D Mannose (for Urinary Tract Infections, E Coli, Yeast and bladder Infections).**

**NOTE:** You can purchase any of the brands shown below. Do not buy the two. They are both the same.



The above steps taken should help you and your partner become free from all kinds of infection-that can obstruct your fallopian tube or fertility.

**Step 6 for Unblocking your Fallopian Tube Naturally is this:**



This combo can be purchased from your local online stores or via amazon.

Please do ensure you get these 3 products. Especially the systemic Enzyme (Serrapeptase).

The above combo is also great for infection, scar tissues and adhesion.

If you have had past ectopic pregnancy, it's important you get this to ensure your Fallopian tubes are free from future scar tissues and blockage.

Please go get all these three as shown above.

EVEN WITHOUT TAKING STEP 1-4. ENSURE YOU ORDER THESE COMBO IMMEDIATELY IF YOU WANT TO SUCCESSFULLY UNBLOCK YOUR FALLOPIAN TUBES NATURALLY WITHOUT SURGERY.

**\*\*MY BEST KEPT SECRET; SYSTEMIC ENZYMES ARE GREAT FOR CLEARING ADHESIONS AND SCAR TISSUES-THAT IS WHERE SERRAPAPTASE COMES IN.**

## Step 6 Alternative: Buy Feloclear (its first choice or alternative to step 6)

	<p>Used to naturally unblock the fallopian tubes without undergoing any invasive medical procedures. Feloklear is made of 100% natural herbs with no negative side-effects on the body, no preservatives or other artificial substances.</p> <p>How does Feloklear really work?</p> <p>Take two capsules of Feloklear Capsule with warm or normal water 10 minutes before breakfast and two capsules 10 minutes before dinner.</p> <p>For maximum result, use for 60 days (2 months)</p> <p>Here are some of the wonderful benefits of using Feloklear Herbal Capsule.</p> <ul style="list-style-type: none"><li>-Treatsvaginal discharge (caused by yeast infection, P.I.D. or Candida albican),</li><li>-Stops abnormal breast milk (caused by high prolactin/hormonal imbalance),</li><li>-Stops flow back of sperm (caused by blockages of the fallopian tubes due to infection)</li><li>-Reduces menstrual pains.</li></ul>
---	--

## **SECTION THREE:**

### **YOUR WOMB AND FERTILITY (UTERINE FACTOR INFERTILITY).**

## Uterine Problems That Can Cause Infertility or Miscarriage

A (fairly) normal uterine cavity and endometrial lining are necessary in order to conceive and maintain a pregnancy.

Problems of the uterus and uterine lining that can cause or contribute to reproductive problems such as infertility or recurrent miscarriage:

1. **Uterine Polyps** –endometrial tissue growths that can prevent implantation or block the fallopian tubes
2. **Uterine Fibroids** (proper medical terminology is myoma or leiomyoma)-Uterine fibroids can distort the endometrial cavity making it difficult for implantation and can be treatable.
3. **Intrauterine adhesions** – Another cause within the uterus is scarring or adhesions from previous surgery or infection of the endometrium. Asherman syndrome is a term used to describe scar tissue inside the uterus.

The scarring can be mild with thin stretchy bands of scar tissue, or more severe dense, thick bands.

This can interfere with conception, or can increase the risk of a miscarriage.

4. **Congenital uterine malformations**, such as a bicornuate uterus, a T-shaped uterus, or a uterine septum.

Sometimes, an abnormality of the uterus happens before birth.

Like other organs in the body, a woman's reproductive organs form when she is still a fetus inside her mother's uterus.

The reproductive organs includes THE OVARIES, the uterus and fallopian tubes.

Sometimes the uterus and fallopian tubes may not form like they should.

These malformations are called mullerian anomalies.

There are many types of mullerian anomalies, including failure for the uterus or tubes to form (agenesis), a complete duplication of the uterus, cervix, and vagina (didelphys), two uteri sharing a single cervix and vagina (bicornuate), a single uterus with a fibrous band going down the center of the uterus (septate), and normal uterus with an incidental dent in it (arcuate).

**5. Luteal phase defect** – an uncommon condition that involves inadequate development of the microscopic and cellular changes in the endometrial lining of the uterus after ovulation and exposure to the hormone progesterone.

**6. Thin endometrial lining** – this is also uncommon. We like to see a lining of at least 8mm in thickness when measured by ultrasound at the time of maximal thickness during the cycle (see above ultrasound picture of an 11.2 mm lining).

**7. Endometriosis.**

## **Diagnosing the cause of uterine factor infertility**

Fertility specialists typically diagnose uterine problems through a battery of tests, including:

**Hysterosalpingogram (HSG)** – a procedure that utilizes x-ray and liquid contrast dye. A catheter is inserted through the vagina and cervix into the uterus to deliver the special dye. The dye fills the uterus and flows through the fallopian tubes to identify obstruction of the tubes

**Transvaginal ultrasonography** – an ultrasound performed using a probe that is inserted through the vagina. The test is used to evaluate the uterus for fibroid tumors, cysts and other abnormalities.

**Magnetic resonance imaging (MRI)** – helpful in evaluating the condition of the uterus and identifying structural abnormalities.

**Sonohysterography** – a transvaginal ultrasound where the uterus is filled with saline, making it easier to identify uterine polyps and fibroids

**Hysteroscopy** – a lighted camera called a hysteroscope is inserted into the uterus to look for abnormalities

**Laparoscopy** – a surgical procedure where a small, lighted instrument is inserted through an incision in the abdomen and into the pelvis to look for signs of endometriosis, adhesions, polyps, fibroids or other abnormalities.

## **Treatment of Uterine Factor Infertility**

Careful evaluation by a reproductive endocrinologist is needed in the case of suspected uterine factor infertility.

Some conditions can be corrected surgically, including the removal of polyps or fibroids, but caution must be taken to minimize scarring. Polyps or fibroids that do not interfere with fertility usually do not require removal.

Surgical correction of uterine malformations is not always necessary, since many women with these disorders can still conceive. With or without treatment, there may still be a higher risk of miscarriage and preterm delivery for these patients.

However, we will look at

## Natural Method for overcoming Fibroid, Polyps and Endometriosis

### **The first step is to balance your Estrogen levels.**

There is no doubt that Endometriosis affects fertility. Endometrial cells can commonly be found on the fallopian tubes where they implant themselves and begin to grow.

Excess estrogen in the body creates an enabling atmosphere for the endometrial cells to grow.

They may scar and block the fallopian tubes, which then makes it difficult for you to get pregnant.

Estrogen promotes the growth of cells, therefore when in excess there is excessive growth of cells.

This causes the cells to then proliferate leading to Endometriosis as we know it. In estrogen Endometriosis fertility the hormone progesterone is much less than the estrogen found in the body.

It is important to note that the actions of estrogen are controlled by progesterone. Therefore if the progesterone is low, the estrogen is out of control leading to estrogen Endometriosis fertility issues.

To counter this problem you can use supplementary natural progesterone which slows down (as shown in section 1) and even stops the proliferation of these cells.

### **Step one- Get A Fertility Cleansing Tea for your womb**

You can get either of these below



**\*\*Please use either cleanse or toxi-flush or fertile detox. Do not combine detox with any other medication.**

Dosage is 2 tablets daily for toxi-flush. 2 tablets morning and 2 nights for cleanse.

**Step two: Balance Your Estrogen level against Progesterone AS EXPLAINED IN Section one.**

**Step 3. Systemic Enzyme.**



Or Feloclear capsule



Natural Fibroid Shrinking Solution.

Follow the steps above, then you can add fibro defense- if you haven't seen any difference. Or cleanse, then use fibro defense after cleansing



You can either use fibro defense or Fermedies. Do not use both.

You can order for fibro defense from amazon.

You can order for fermedies fertility products from their website using the link below:

<http://partners.fertil24.com/202980/14465>

## How to Get Rid of Ovarian Cyst

### **I Have Ovarian Cyst (Most common is chocolate Cyst)**

An ovarian cyst is a fluid-filled sac that forms on or inside an ovary

For most women, ovarian cysts are harmless and painless. In fact, ovarian cysts often resolve on their own without treatment.

However, in some cases, an ovarian cyst can cause pain or develop into more serious complications.

### **Types of Ovarian Cyst**

#### **1. Endometriosis also referred to as Chocolate Cyst**

This is a condition in which uterine endometrial cells/tissues grow outside your uterus (endometriosis). Some of the tissue can attach to your ovary and form a growth. It is usually referred to as a chocolate cyst because the fluid in the cyst looks like melted chocolate.

#### **2. Functional Cyst**

Normally every month your ovaries grow cyst-like structures called follicles. These follicles produce the hormones estrogen and progesterone and release an egg when you ovulate.

Usually, these follicles stop growing after ovulation. If a normal monthly follicle keeps growing, it's known as a functional cyst. There are two types of functional cysts:

**Follicular cyst;** around the midpoint of your menstrual cycle, an egg bursts out of its follicle and travels down the fallopian tube. When the follicle doesn't rupture or release its egg, but continues to grow- A follicular cyst begins.

**Corpus luteum cyst;** When a follicle releases its egg, it begins producing estrogen and progesterone for conception. This follicle is now called the corpus luteum. Sometimes, fluid accumulates inside the follicle, causing the corpus luteum to grow into a cyst.

### 3. Dermoid cysts

They are ovarian cysts filled with hair, teeth and sebaceous fluid. If they become large they can cause pain. However, they do not cause infertility. These cysts usually appear on an ultrasound.

4. **Cystadenomas.** These develop on the surface of an ovary and might be filled with a watery or a mucous material. They are non-cancerous.

## What Could Cause Cysts?

Your risk of developing an ovarian cyst is heightened by:

**Hormonal problems:** When your hormones are not balanced this could lead to cyst. Also an imbalance in your estrogen/Progesterone level can cause ovarian cysts to develop.

Some fertility drugs like clomiphene (Clomid), which is used to trigger ovulation-can actually cause ovarian cysts.

**Pregnancy:** Sometimes, the cyst that forms when you ovulate stays on your ovary throughout your pregnancy.

**Endometriosis:** This condition causes uterine endometrial cells to grow outside your uterus. Some of the tissue can attach to your ovary and form a growth. (Most likely caused by hormonal imbalance).

**A severe pelvic infection:** If the infection spreads to the ovaries, it can cause cysts.

### Treatment- How Do I Get This Cyst Out of My System?

**Step 1. Treat The Infection:** Go for a test to check if you have any infections in your system. A pelvic infection could spread to your ovaries if left untreated causing a cyst to occur. The next step I would advise after you have been diagnosed with a cyst is to check for any infection and treat with the recommended antibiotics plus probiotics.

**Next step to take is...To check your hormones and balance it. Follow THE STEPS IN SECTION1&2 TO BALANCE AND CLEAR ANY OVARIAN CYST**

Ensure to get these 2 products



**Watch And Wait It Out:** In many cases you can wait and be re-examined to see if the cyst goes away within a few months.

This is typically an option — regardless of your age — if you have no symptoms and an ultrasound shows you have a simple, small, fluid-filled cyst.

Your doctor will likely recommend that you get follow-up pelvic ultrasounds at intervals to see if your cyst changes in size.

## You Are More Than Ready To Make Your Dream Come Through!

If you have read to the end of this material, then you know more than 90% of couples out there struggling to make their parenting dreams come through.

You are not just knowledgeable, you have the tools to conceive and make your dream come through.

What is left now?

Take action.

Steps you should take now?

1. Consult a fertility specialist if you haven't started the journey already (you can reach our consultant to begin with).
2. Go for fertility tests and checks to determine the specific problem.
3. \*Start with The fertility cleanse/detox.
4. Then balance your ovaries and hormones, then fallopian tubes and womb.
5. Go purchase all the medications and supplements as listed in this program-according to your specific need.
6. Enjoy your baby making especially during your most fertile days (from the day you see your menses to day 15th -18th) depending on your cycle.

\*\*You can still join our one on one coaching by sending an email to [joyashiedu2000@gmail.com](mailto:joyashiedu2000@gmail.com)

## **Bonus Program.**

**The Sperm Booster Program-** The Secret to Boosting Sperm Count, Get rid of Infection and Restore Motility and Your fertility as a man.

## **Baby Sex Selection Guide:**

How to optimize your selection process, so you have a high chance of conceiving the sex of the baby you want.

## Access to Our 4 Weeks One-One Coaching Program.

This material actually gives you access-at a discounted rate- to our 4 weeks one-one coaching program.

You can reach me via whatsapp (+234 7037913319) or email (joyashiedu2000@gmail.com) for further clarifications on the coaching and also to book our consultant at a discounted rate.

Our 4 weeks online fertility coaching school provides a more elaborate and personalized guide to all that has been delivered via this eBook.

And, we prayed for you before you even purchased these program and we can't wait to receive your testimonials.

Do send your testimonials or feedback via any outlet you may have purchased this program such as Amazon by leaving us a review or send me a mail directly to joyashiedu2000@gmail.com.

I wish you success

## References

-<https://www.glowm.com/>

-<https://www.mayoclinic.org/diseases-conditions/female-infertility/symptoms-causes/syc-20354308>

-<https://hormonesbalance.com>

[hormones.org](https://hormones.org)

-How to Boost Fertility Naturally - NUNM<https://nunm.edu>

-Hormonal Imbalance and Infertility - Loma Linda Fertility<https://lomalindafertility.com>

-<https://www.yourhormones.info/endocrine-conditions/female-infertility/>

-medicalnews today

-healthline.com