

FACTS has reached over 6,000 parents and teens in Oregon. Curriculum and workbooks for junior and senior high students and parents, along with teaching aids are available nationally. NW Family Services also provides inservice presentations on teaching sexual abstinence to both public and private schools. In 1990, the name of the agency was changed from Northwest Natural Family Planning Services to Northwest Family Services to reflect the broader scope of services offered.

Northwest is currently piloting a new program, *Keys to Sexual Freedom*. This is a Catholic teen abstinence program that integrates the fruit of Dr. Weed's research with Catholic teaching in a positive setting that involves and empowers

parents and teens to live the gospel message.

The third educational effort began in 1991. Working with teens and married couples, it seemed only natural to complete the continuum by addressing the needs of adults preparing for marriage. Piloted in the Archdiocese of Portland, *Always Faithful* utilizes the Rite of Marriage to "unpack" both the theology of marriage and practical issues. In five sessions, couples become familiar with the Catholic theology of marriage, the wedding liturgy itself, and examine issues such as family of origin, communication styles, conflict resolution, financial realities, sexuality, and NFP. Over the course of the series, participants meet five couples who share strong faith, a deep commitment to the Church's

teaching on marriage and family life along with a great sense of humor. *Always Faithful* works in partnership with parishes and pastors.

Paul VI in *Humanae vitae* speaks of married couples and says,

To them the Lord entrusts the task of making visible to men the holiness and sweetness of the law which unites the mutual love of the husband and wife with their cooperation with the love of God, the author of human life. (HV, #25)

This is the mandate the staff of Northwest Family Services seek to live out and the truth they seek to illuminate.

Beth Wells is the Youth Coordinator for Northwest Family Services. ■

NFP PIONEERS: "A Life Time of Service, Edward F. Keefe, M.D."

Edward F. Keefe, M.D. with Theresa Notare

Several months back DDP Special Assistant, Theresa Notare, gave me a call and asked if I would write on my years of teaching selective continence for fertility control. Something she said particularly struck me; she asked, "How did you become a pioneer in natural family planning?" My astonishment was not unlike the character who learned he had been speaking prose all his life when he thought it was just simple talk—a "pioneer?"—"me?" That said, I will try to give you an idea of how I became involved in the NFP movement.

My story goes back more than half a century; City College and Cornell Medical School. As a medical student I learned about Latz's *The Rhythm* (1933) and while interning in 1937, I coached a couple in "periodic continence" guided by Latz's book. But it wasn't only science which concerned me, I was also guided by the encyclical letter of Pius XI, *Casti connubii* (1931). A later Pope said the indications for responsible parenthood were indeed broad; and another said that he hoped scientists would improve our ability to spot the woman's fertile days. That was

what I wanted to do even then. Later, when the Pill came onto the scene, some began to question the Church, I never did.

On returning from service with the Armed Forces in WWII, and resuming my practice as a gynecologist, I read how the woman's waking temperatures rose 0.6F after ovulation and fell at menses. While most women could see if a fever-thermometer registered in the black or in the red part of the scale, to read it in numbers and to graph the daily reading was beyond some. So I designed a special open-scale thermometer graduated in tenths Fahrenheit (0.1F) instead of fifths (0.2F) and helped produce it in the industry. Thus was born the Ovulindex Thermometer. I described it in 1948 in the medical literature. I next designed (in 1951) a form on which a woman circled a number each day. On that form I emphasized that changes in the mucus from the cervix were to be observed to supplement the temperatures. Having studied a few less practical accompaniments of approaching ovulation, I had settled on rheology; i.e., the study of the properties of flow of the cervical

mucus as reported by A.F. Clift [*In Proceedings of the Royal Society of Medicine* 39:1 (1945)] as the most convenient guide. Their changes, along with the temperature and some other signs, indicated the days for continence to avoid pregnancy (or those on which to concentrate to assist pregnancy.)

At this point I would like to interject that it was never my intention to design a "method" of family planning. I had simply wanted to help Catholic couples live the Church's teachings. It was always my aim to conform to the teaching of the Church; and yet I did want to make things easier for couples. In my experience with practicing medicine, I had had many patients complain that the period of continence for postponing a pregnancy was "too long." I wanted to "cut" the number of days of continence. At that time I wasn't even interested in method successes. It was, and is my opinion, that a method which burdens the user excessively is soon slighted. In my practice I had also seen the extreme of continence; e.g., "We're going to live like brother and sister." (Yes, I used to hear that!) Such an approach to family planning while 100% effective in avoiding a pregnancy was subject to an eventual failure. And so, I attempted to teach what I called "timely continence" based upon the observation of a variety

of the signs of fertility. I simply left it up to the wife and her husband to decide which signs to chart.

In the second edition of the handbook I wrote for my thermometer (1953) I went into details, now well known, about the changes in the mucus. I illustrated with a drawing "Spinnbarkeit", that is, the capacity of mucus to form threads (which Cliff's paper had put me on to.) My patients confirmed the findings for me. I was also encouraged by a book by the Dutch gynecologist J.G.H. Holt, *Marriage and Periodic Continence*, a real pioneer in the field of "natural fertility control" (he later was made a Knight of St. Gregory.)

Because the source of the mucus we were

following was the cervix, at that time it seemed reasonable for the woman we were studying to gather it directly from the cervix. Because of this practice, the women discovered that the cervix went through changes along with the mucus. I began to study that change. In addition, I began to take medical photographs of these changes. I described in a paper how women followed these changes "to distinguish potentially fertile days" for continence, always along with the changes in the mucus and the temperature. Some important medical journals turned this paper down—one editor even said to me that the procedure was "of no value now that the pill was available." At last the *Bulletin of Sloane Hospital*, my alma mater, published it in 1962. I distributed 6,000 reprints of it and they became so popular that I decided to copy the important parts of it into the guide that went along with the Ovulindex Thermometer.

Since my early work, how often have I read, or heard, that the Sympto-Thermal method "combines the Billings ovulation and temperature methods." Not really! Sympto-Thermal, as a natural method of family planning has its own rules backed by its own research. STM was in use and named before the

Drs. Billings or OM became well known. Dr. John Billings wrote his book, *The Ovulation Method* with the subtitle, *The Rhythm Method, the Temperatures and Midcycle Symptoms*, in 1964. He kindly had sent me a copy in 1965 after he visited St. Vincent's Hospital in New York. I recall how some of our OB/Gyn staff turned around to smile at me (they weren't very encouraging) while he (un-



Edward F. Keefe, M.D.

wittingly apparently?) was confirming my own observations about the value of mucus at the vulva as a guide to what even he called at the time "the safe period." He favored the mucus sign that I had already described as valuable in 1953. By the time of his visit I had published (1962) as well

about the signs in the cervix itself mentioned above. Ten years later the Doctors Billings concentrated exclusively on the mucus symptom and turned away from the temperature check. Today, the Billings Ovulation method clearly teaches that temperature charting is not needed, and certainly that self examination of the cervix is not to be done, nor is cervical mucus ever to be collected from the cervix itself.

In promoting understanding and interpretation of all the signs of fertility, it was never my intention to exclusively focus upon any one sign. I always insisted that primary signs like the type and volume of mucus, and the changes in temperature should be considered along with secondary signs, such as breast tenderness, and even mood changes. Adding the physical signs in the cervix to all the others reduces uncertainty regarding timing of fertility. Despite my own thoughts, I have also found that most women will eventually settle on a favorite sign of fertility. Some will glance at the calendar, others will obsessively chart their temperatures, and still others will rely upon mucus only. I always left it up to the patient which sign(s) she should observe and how seriously she should apply them.

And yes, I have often heard the crude but practical question, "Is it safe today?", even though I had given all the information I could offer to a patient. It takes a great deal of time to help people look beyond their immediate concerns.

In a 1962 paper I suggested that knowledge of the changes in the cervix, its mucus and self-examination might become universal. Reflecting back upon these 30 years, it pleases me greatly to know that because of my efforts and those of other prominent physicians, the cervical signs have become known world-wide. These signs are part of the ST methodology in the manuals of John Kippley and Paul Thyra (Fr. Jan Mucharski) in the USA, Josef Roetzer, MD, in Austria, Sr. Paulette in India, Fr. Frank Richards in Australia, and Suzanne Parenteau-Carreau, MD, in Canada. We also know that in addition to the work of the Billings, Odeblad, and Hilgers on cervical mucus, today other researchers are studying the "validity" of the cervical signs; e.g., Loewit et al., reported in "Geburtshilfe und Frauenheilkunde," ("Obstetricians and Therapeutics for Women," 1987) on a "Selbstbeobachtungs methoden (SBM) der Familienplanung" (self observation method of family planning). I can't help but be proud of my colleagues who, like myself, have persevered

... in promoting on every occasion the discovery of solutions inspired by faith and right reason, let them strive to arouse this conviction and this respect in their associates. (HV, #27)

What do I now look forward to? It is my hope that others in my profession will take up the challenge to continue the work to refine the signs of the fertile time; and that all Catholic physicians will eventually promote these methods which truly uphold the laws of the Divine.

Edward F. Keefe, M.D. contributor to the ST method of NFP and inventor of the Ovulindex Thermometer, is now retired and lives in Greenwich, Connecticut. The Ovulindex Thermometer is made by Linacre Laboratories. NFP programs can purchase it directly from Linacre Laboratories or through wholesale and retail drugists. ■