Master Your Menstrual Cycle For Fertility Transcript

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Introduction and Guest Welcome

Welcome back to the super fertility Summit. I'm your host, Dr. Cleopatra, and I have an incredible guest here with us for this session. Nicole Jardim is here.

Nicole, you're a certified women's health coach, author of Fix Your Period, which I love, by the way, and the creator of the Fix Your Period Collective, a first of its kind membership experience that provides an interactive roadmap to help women achieve lasting hormone balance and improve everything from PMS, period pain and heavy periods to irregular and missing periods.

Your work has impacted the lives of tens of thousands of people around the world by addressing the root cause of what's really going on in their bodies and minds, rather than treating just their symptoms.

You passionately believe that the fundamentals to healing any hormonal imbalance lies in an approach that addresses the unique physiology of every woman, and this is essential to reclaiming and maintaining optimal health and vitality at any age.

Nicole, I want to welcome you to the Super Fertility Summit. Thank you so much for being here today. Hi, Cleopatra, thank you so much for having me. I'm so, so thrilled to be with you.

I'm so excited to have you here. I always love our conversations, and I'm thankful to have this addition to the Super Fertility Summit, because your expertise, when it comes to periods and different types of period challenges is incredible.

I love your book. I love everything that you teach, and I would love to start by asking you to think from the end of today's conversation. So when we wrap up our conversation today, what do you want the person listening to our voices to take away with them?

That's an interesting question. I love that we're going all the way to the end and we're going to come back. And yes. This is this is something that I feel so strongly about that we really need to have a foundational understanding of how our menstrual cycles work, because that is like the bedrock for our health throughout the entire menstrual life cycle.

Why the Period Is a Vital Sign

And so that is really what I would love everyone to take away is even if it's just like a basic understanding or a tidbit about their menstrual cycle or their period that they didn't understand before and they now do, that is that's definitely my goal for the end of this call.

I love that so much. And one of the things that you talk about is the period as a vital sign, which I think is related to this idea that you just you kicked us off with.

And I love, I love starting that way because I'd like us to have a through line. And I want I want people to remember the thing that they can take away from this conversation.

So talk to us about the period as a vital sign. Yes, absolutely. So I think that our menstrual cycles have traditionally been viewed as a bodily process that happens solely for reproduction.

And I feel like that means that the menstrual cycle has it's often really been dismissed and kind of poorly understood, particularly in mainstream medicine as we know.

Right. It doesn't matter what you're going to the doctor for, generally speaking, they're going to prescribe a certain number of things. That's usually the birth control pill or an IUD, or maybe a surgical procedure or something along those lines for all manner of period related problems.

And I think that this viewpoint, thankfully, is finally changing as there's more research, research that's published on the system wide benefits of having consistent ovulatory menstrual cycles.

And, you know, as a society, I think we're also moving in that direction of the menstruation is not so much an inconvenience or a curse. Even, it's now becoming more, recognized as a natural body process that we really have to pay attention to.

And so the way I talk about this is if you think about the medical dramas on TV, like E. R. and all of those things, they talk about emergency situations where the doctors and nurses are saying things like, we have to monitor the patient's vital signs.

And what they're meaning is that they have to monitor heart rate and respiratory rate, blood pressure or body temperature, which are established vital signs.

And so we like to refer to the period, building on that as also a vital sign too, like your sis, the vital sign. And in 2005, the society for Menstrual Cycle Research actually cosponsored a scientific forum called the Menstrual Cycle as a vital sign.

And then about ten years later, finally, the American College of Obstetricians and Gynecologists acknowledged that menstruation should be recognized as this vital sign.

And and this applies to everyone at the time they recognize it for girls and adolescents, which makes so much sense because you're in a developing body.

And then, but, you know, for me, I actually like well, this is for all of us because it really is a barometer of our overall health. And so, as I was saying earlier, really, what this means is menstrual cycle awareness and understanding is truly the bedrock for creating vibrant health for ourselves.

And really becoming well versed in this topic can serve us for our entire lives, whether we're in puberty or impaired. In a pause. That's exactly right.

And when we talk about a vital sign, what we're really saying is that there's an observational sign or signal that tells us how we're doing on the inside.

Right? That's what our temperature is. That's what our pulse rate is. That's what the the period and the menstrual cycle as a whole are. And so that's really important.

And we have this growing body of scientific data to show just how critical this vital sign is, because women who have long and irregular periods are more likely to die early and experience cardiovascular events.

And a number of other health problems. And on the flip side, people who live longer are more likely to have had children in their mid to late 30s and in their 40s.

For example, there's this there was a study of centenarians that showed that centenarians are almost four times as likely as the average person to have had children in their 40s, which means that the period and the menstrual cycle as a vital sign is, an indicator.

Our reproductive longevity is an indicator of our overall longevity. And having problems with the menstrual cycle is an indicator that longevity may be compromised and health may be compromised.

So this is such, an important issue that isn't talked about enough. And I'm I'm glad. I'm really glad that we're having

the conversation in here. And this is also not just an issue for females.

Obviously, the period in the menstrual cycle are. But when it comes to fertility, we see the same kinds of patterns people with who have been diagnosed as infertile or having fertility challenges, both male or female, all genders have greater risk for certain cancers, cardiovascular events and earlier death.

So this fertility in general is a vital sign for people of all genders and has significant, significant implications for lifespan.

What Period Symptoms Reveal About Health

And so when I when people ask me about, you know, is primestering only for people who want to have a super baby, I'm like, well, that's why it was designed.

But even if you have no interest in having super babies, care about your fertility, care about your reproductive health, care about your menstrual health because of what it means for all of these other parts of your health and well-being and your life.

I could not agree with you more. I think about this all the time. I get these questions like, you know, how do I suppress my fertility? Because I don't want to get pregnant.

And I'm like, well, you don't actually want to do that because your fertility is the indicator of your overall health. Menstrual cycle. Health and fertility are not mutually exclusive components.

They are they are essentially the same thing. So I completely agree with what you're saying. And, you know, we are going to get into this, this idea that what you were saying earlier, your period is not just your period, right?

What it indicates so much about your overall health and your fertility and your longevity or your your potential longevity, longevity. So there's there's so much packed into it.

Tell us okay, let's dive into that. Let's start unpacking it a little bit. So what what is the I mean I kind of talked about some of these things, but what's what's the period telling us.

So many things I just want yes I yeah. You know because like we all grew up kind of thinking oh your period, you know, it's just such a pain and and there's nothing good about it.

And I hate that message. You know, I hate that we're given that message from such a young age, because I feel like it really does set us up for these having these preconceived notions about our bodies and what you know, what they are and what they're not.

And I really my hope is always that, you know, younger people are getting better education, about their menstrual cycles so that they can have a better relationship with them throughout their lives.

And so I always talk about your period is or your menstrual cycle as a whole is your body's early warning system. It kind of will sound the alarm if your body needs attention.

And it's going to do this via symptoms. Right. So your body speaks in the language of symptoms. We speak the language we speak. And oftentimes the wires get crossed and we don't really understand, you know what what all of it means, because we were never really taught that.

And so when I think about something like irregular periods, for instance, which are very common, not normal, but common, you know, you think about your period not arriving consistently every 25 to 35 days.

So think about when, when your period arrives. that could indicate that your body is under too much stress or there are nutrient deficiencies, or there's a condition like PCOS or even low ovarian reserve.

There are multiple reasons. And I know you just mentioned to these irregular cycles and the research that shows that, you know, there's mortality that happens earlier and a variety of other conditions that can show up if there is an irregular ovulation, you know, consistently throughout the lifespan.

And that alone should tell us that, wow, okay. Irregular periods are not normal. But what happens is all of my clients and many women in my community are just put on the pill to, quote unquote, regulate their cycle.

And then they never, ever address the underlying cause of the irregular period. And then the other one I see most often, so often is painful periods, especially the ones that leave you, you know, in the fetal position on the couch or the bathroom floor.

And this can indicate a number of things. So whether that's system wide inflammation, pelvic floor dysfunction, a condition like endometrium cyst, uterine fibroids, adeno meiosis.

So there are multiple reasons why one might have painful periods. And again, not something to, just, you know, medicate away or ignore because they're normalized.

And then another one I think is that's important is is heavy periods. And so that can be linked to uterine fibroids, polyps a meiosis which is a condition that a lot of people don't know a lot about.

But essentially it's it's like when the uterine lining tissue is growing into the muscular wall of the uterus and it causes it to thicken. So kind of like a sponge and you end up with very heavy periods.

And I mentioned endometriosis, even low thyroid function. so all of these could be underlying causes of why you have a heavy period. And they're also connected to PCOS because oftentimes those with PCOS, they don't ovulate consistently.

They don't make enough progesterone to counteract the effects of estrogen on the uterine lining. And, you know, because estrogen thickens aligning. Whereas progesterone kind of sends it out.

So there's there's multiple things happening there that we would want to investigate if someone potentially had heavy periods. And I'd say the last one just for the sake of time, is missing periods.

And that means you're not ovulating. So you're not making the sex hormones that you need to make each month to build up that endometrium, which is the lining of your uterus, and then subsequently shed it.

And so oftentimes if you have PCOS or, you have, you know, some other kind of condition like hypothalamic amenorrhea, where there's a disconnect between your hypothalamus and your ovaries, then your periods disappear or they're extremely infrequent.

And, and this is because elation is not happening. And so there are a multitude of reasons for why those symptoms might be showing up. And again, I think that it's it's important for us to be looking at those underlying causes.

I could go on, you know, I could talk about long and short cycles and what your period blood looks like and all of these things. But generally speaking, if those four things, one of those four things are happening for you, it's important for you to start to investigate further.

I think that what you said about when you go to the doctor, there is a reliable set of things that will be offered to you, and likely going on the pill to regulate your cycle will be one of them.

And I think this is really interesting. So I love this saying that if the only tool you have is a hammer, then every problem will be a nail, right? That's true.

And so it's so true. Just like a surgeon is oriented to doing surgery, right? Or a radiologist is oriented to doing x ray or, you know, whatever, whatever it may be.

So it's really important to understand that the type of doctor that you're going to is going to, in large part, determine the types of questions that are asked in the type of types of answers or solutions that are provided.

And that doesn't mean that those are going to be the best set of answers and solutions for you. So you really want to be a critical consumer of information.

I always taught my PhD students in master's students at UCLA or USC that you have to be a critical consumer of information and part of that is examining the source and understanding the biases of the source.

Right. And that includes us.

Why Hormonal Birth Control Can Mask the Problem

So I'm biased toward the idea that people should pride master, that they should actually prime and prepare before getting pregnant so that they can have healthy fertility, pregnancy, and super babies.

You are biased in the direction of paying attention to what your period is is speaking to you in the language of symptoms in your menstrual cycle in general, as opposed to slapping a Band-Aid over the problem and not getting at the root causes.

I mean, we share we share biases in common, right? But so every, every source, including the most credible ones, like the ones you're listening to here on this summit, come with the biases of the lens in which they're trained.

They work and they see the world, etc.. So that's very important to be a critical consumer of information. But let's talk about the pill to regulate your period, because that's not really regulating anything.

What it's doing is introducing exogenous synthetic hormone that's forcing your body into a cycle that isn't your body's natural cycle or the cycle that your body's creating naturally.

So I constantly hear among the mamas who come to us for help, come into the Prime Esther protocol because they're having trouble getting pregnant or staying pregnant, I constantly hear.

I always had a 28 day cycle my whole life, and then I went off the pill and it went bonkers and I'm like, but that wasn't your cycle. That was the pill cycle.

And you didn't get a chance to see what your body was doing. And I should say that I am not anti hormonal birth control. I believe in women being free and being free to choose what's best for themselves, their bodies and their lives.

So I want to say that I do think that there are a lot of downsides to introducing synthetic hormones and not allowing the opportunity and space to see what your body does on its own, naturally.

And if it's doing something that's a signal that something's not right, to then get at the root cause so that you can correct it. So can you talk to us a little bit more about this regulating of the period through the introduction of hormonal birth control and the call for sure.

You know, you bring up so many great points. And of course, I'm in agreement with all of them. And I think one of the bigger concerns for me is that girls are being put on the pill at such young ages and, you know, and sometimes they're not even teenagers.

I had a woman tell me that she was put on the birth control pill for migraines at the age of eight. I can not fathom. I mean, how how has how has your physiology been changed?

Your brain, you're still developing. You know, I didn't even say this, but we teach in the Prime Minister protocol that our brain is our most important fertility organ.

And you alluded to this when you said the disconnect between the hypothalamus and the ovaries. So people think of the uterus, the ovaries, etc., but it all starts in the brain.

And and the way that being on synthetic exogenous hormones changes your brain. I mean, I cannot imagine starting someone so young. That just blows my mind.

I know, I mean, she. Didn't even have a menstrual cycle. She was eight and had migraines, so it makes zero sense at all. But those are the kinds of things that are happening.

And so really what mostly happens though, is someone between the age of like 12, 13, 14, 15, somewhere around there is put on the pill because they either have heavy periods or extreme period pain or, they have irregular cycles.

So I had all three of those, and that was why I was put on the pill as a teenager. So I feel like I have a lot of personal experience with it. And and so I think that that's highly problematic. Right.

Because as you said, what I think the amount of change, the physiological changes that are happening in that decade from puberty into your early 20s are just remarkable.

And what is happening there? How are we interfering with that? we don't really have any research to show what is happening. And I think that that's really concerning, too, is that we're not really doing the research on that.

And I find that what happens is and this was my experience, so I'll speak to my experience, is that my doctor just put me on the pill, you know, in a very matter of fact fashion, she was just like, okay, sounds great.

You have all these problems. Let's start you on the birth control pill. And I was like, great, sign me up. This is the period I've been looking for my whole life.

And and it really was initially. And so what I, what I think is most concerning is that of the research that is there now, doctor Sarah Hill, she, she wrote your brain on birth control and it's a phenomenal book.

And she actually speaks about more recently about the fact that if you're going to go on birth control, wait until you're at least 19. based on her research history and what she's uncovered about brain development in, teenagers and during puberty.

And so I thought that was so interesting. but of course, that rarely happens, right? Most of the time we're put on it as teenagers. And so what then is happening as we were talking about.

Right. There's this disconnect that's created because you're now introducing these synthetic endogenous hormones or exogenous hormones, that are sort of overriding your endogenous hormones.

And you're ending up in a situation where, your ovaries are like, oh, okay, I don't even need to do this job anymore. Okay, so your brain is getting the estradiol and the from the synthetic estradiol that's coming from the pill.

It's getting the progestin or the synthetic progesterone in the second half of, you know, the the pack of pills you're taking. and then when you stop them, you get this bleed.

But what a lot of people don't even realize is that when the pill was first developed, there was no bleed. And they actually introduced a bleed because women were so freaked out by the fact that they weren't bleeding.

And so if we look back at the history of all of this, I think it helps us understand a little bit more about what we're doing now and the processes now of why, you know, why we do certain things.

And so I think that having a period or a natural cycle is feels very natural to women. And so I think that I was like just shutting it all down is just highly problematic over the long term as we have seen.

Right? We want to ovulate, we need to ovulate. And I think about just and again, I don't want to scare anybody. And I agree with you completely that we should all make our decisions, but they really should be informed decisions about the type of birth control we use or the treatments that we're going to use for PCOS or long cycles or, you know, heavy periods or whatever.

It is. Like we should have all of the options laid out for us. And I think that that's fundamentally my big issue is that, as you said, right. There's if you're a hammer, everything's going to look like a nail.

If you're a surgeon, everything, you know needs surgery. you know, if you're a conventional ObGyn, the pill seems like the right solution to all of these female ills.

And so ultimately, I just think that if we had the education and the understanding from a young age about how our menstrual cycles work and the fact that we're only fertile for, you know, basically 24 to 48 hours on our own?

Of course not. When sperm is introduced every single cycle, it would I think it would fundamentally change the landscape of women's health. That you said something so important.

I want to I want to highlight it. So we there's only approximately one day per month or menstrual cycle when a woman can conceive. That's because an egg has to be present and alive in order to be fertilized by sperm.

And once ovulated, the egg only lives for approximately 24 hours, sometimes as few as 12 hours. And there's also research that shows that in the general population, not in a fertility sample, that there are on average 1 to 2 and ovulatory cycles per year for women.

So 1 or 2 menstrual cycles a year, women on average are not ovulating. So what that translates into is 10 or 11 days per year only for the average woman when she can conceive when an egg is president is present to be fertilized.

Now that the conception day is not the same thing as the fertile window, that's a whole different story. I won't get into that. That more recent research shows can be up to nine days, and typically when the tools that you're using are telling you it's six days, we we teach you all about this.

And the Prime Minister protocol, but I think it's really important what you just said, Nicole, which is that we should be educated about these things when making the decision that if you if you if you're if you have intercourse with a male, that person is fertile every single day of the year, but you are only fertile about 10 or 11.

And if you're if you're blessed, if you're not among the average, then 12 days per year, right? Right. So that's insane when you put it like that. Yeah, really, really critical.

It also means that if you're 35 or 40 and you still want to have your super baby or super babies, then you've got maybe five times 12, you know, or five times 1050.

Ovulation, Fertility, and Long-Term Health

days total left to conceive or, you know, maybe a little bit more than that, depending on how long your reproductive span is going to be, which is not not to not to be frantic.

So I like to to think about the difference between urgency and hurry. And the biological clock loves and need speed. It needs urgency, but it doesn't need hurry, which is chaotic and frenetic and all over the place.

It needs a very directed urgency. So this is really, really important to be aware of. when making the decision about introducing synthetic hormones in the form of birth control.

yes. I couldn't agree more. And I think about that if we understood the, the critical nature of ovulation and, and having regular ovulation and as you said, the majority of us only get about ten ovulation days a year.

It's it's not that much. And the, the sheer volume of sex hormones, our estradiol, our progesterone and our testosterone that we make as a result of that ovulatory process, every cycle is just is so incredible.

And and if we understood that not only are those hormones necessary for, you know, optimal fertility and, and pregnancy, but they were, you know, they're the driver for so many other aspects of our health, like libido and bone density and energy levels and muscle mass and our skin health and our cardiovascular health.

And, you know, our hair, everything, it would, you know, even our personalities. Right. So much changes. And if we were really in tune with that, what would that look like.

And and so I just I think about all of these different aspects of our health. Like I said, you know, just from like breast cancer and uterus uterine cancer and, how our thyroid works and how our brains work, which, you know, we touched on, it's there just it's just infinite almost.

And and we don't really know any of that. And so we would I think that we would have a completely different idea of, of what our health should look like.

and maybe higher expectations for our health and our well-being. If we we had that education and understood that that ovulatory process, even though it only happens once a cycle and, you know, and it doesn't happen that many times in the ER would would really be game changing.

And to also, like you said, remember that we are fertile for such a short period of time. So taking a birth control pill every single day of our lives for years on end, I mean, I've met women who've been on the pill for 20 years and didn't know otherwise. Right?

And if you had known that, would you have made a different choice? And, I think the majority of us might have. Many people would have. Absolutely. Well, I hope now with people like you out there doing your work with us, that, that, that that cultural shift is taking place, that we have more education and understanding.

But there's still a lot more work to do for sure. And I we're here just I think also like you started this conversation by saying that we've been taught to dread our periods and to almost have a disdain for the parts of our bodies that are feminine and the feminine functions of our bodies.

And I believe with all my heart that having our super babies, making them, growing them, raising them requires all of us, both our masculine and feminine parts.

Like we get to be the mama bear in, in, you know, the most fierce and active ways, which maybe is actually the more masculine parts of ourselves. But we also get to embrace the femininity, the curves of our bodies, not like, curse them away and wish that all of our body fat would go away so we don't have enough body fat to even reproduce in the first place.

And we we got we want to have our periods because they, they are the, our reproductive power and potential. And if we were taught these things early, it would be so different.

It would be so different. Not to mention to build on what you said, Cleopatra, about the fact that we have these different phases of our menstrual cycle.

And, you know, we have that initial menstruation phase, and then we move into that follicular, the non menstruating follicular phase and then ovulation.

And then the first half of the luteal phase, the second half of the luteal phase and the hormonal fluctuations that come with that and how that changes our physical health, our mental and emotional health.

It has such a profound impact on us. And when you don't have a, you know, an understanding of that, it's almost like you're just walking through the world without a roadmap in a way.

Right? You don't really know who you are to some degree, because your cycles are governing your life, and yet you don't really realize it. And things are happening.

And I think oftentimes so many women feel so out of control because of their cycles, because they don't really even know why they're feeling the way they're feeling in the first place.

And so I think that once you harness that understanding of the four phases of your cycle, and when ovulation is happening, regardless of your fertility aspirations, it changes the whole trajectory of your life.

I mean, it truly has for me and probably thousands of my clients over the years. I love that so much. How you said so many women feel so out of control, and they don't understand why or what's happening to them, and nobody said to them, hey, have you ever mapped this onto your cycle to see?

So there's actually a predictable pattern here. And if the pattern isn't something that you like, there are nutritional and other types of movement, other types of interventions that can help support you to create a pattern that does feel good to you.

I think that that is so, so important because so much of life, we think is our will, our personality, and we've no idea how much of our will and our personality are dictated by hormones and neurotransmitters, which.

Everything. Is. Yeah. And intimately, intimately tied to and determined by our, our hormones and what phase of the menstrual cycle we're in. So I think that that that's so, so beautiful to say you can take this power into your own hands and improve your own quality of life.

But first, you need to know that there's even something to pay attention to there, which no one is teaching. And definitely not teaching young girls when they're going into the doctor's office and then being handed a prescription for the birth control pill.

So this is so, so such critical credit. It kind of makes me emotional, you know, makes me feel like crying because I can't imagine that happening to my daughter Sultana Bliss.

Nutrition as the Foundation for Fertility

But it will never happen to her because I'm there. Right. But we don't we don't all have have that. I didn't have that. You didn't have that. And so many.

And the women in the world still today don't have that. What do you do if, if, if someone could only do one thing to take care of their future fertility and their future, the health of their future super babies, in your mind, what should that one thing be?

I know it's really. Hard to pick out. Like, I think smushed into one thing. Yes. You know, I asked I asked my clients a series of questions about, you know, what's going on with their health.

you know, and that's really what I based the foundation on. And question number one is, are you eating enough food? Are you eating three meals a day? I know it's controversial with all the fasting recommendations out there and whatnot.

but women need to eat and we need to keep our blood sugar from diving multiple times a day because of the subsequent problems that come with that. And we need specific nutrients consistently.

And so I personally think that comes in the form of three meals a day. And, you know, again, if intermittent fasting and or eating two meals a day works for you and you feel amazing and your fertility is great, and all of these things, that's amazing for you.

And I love that. but oftentimes I found that just are you eating three meals a day? And are you getting the nutrients

that you need? And are you stabilizing your blood sugar?

Because with unstable blood sugar comes a lot of inflammation and a lot of other problems that we definitely don't or that our ovaries definitely don't need.

And so, that's that's to me is the number one thing. It's a foundation and everyone's like, but what about stress and what about sleep? And I'm like, yeah, but those are probably equally as important.

But if you have the nutrient to sustain you, you're going to feel like you can actually handle those things a lot better. So I always say let's let's start there.

I love that so much. We, we call nutrients both in the form of food and supplements. The third most important epigenetic input. And it's just based to the fertility and pregnancy system.

And it's based on sheer frequency with which we are exposed to those pieces of information. Right. Because we spend a total of almost, I believe, five years of our lives eating.

And if you really over I believe I have that estimate correct off the top of my head. Yes. So that's it is critically important. And it's also, in my mind, low hanging fruit because everybody is eating it to some degree and taking in nutrition to some degree.

But you bring up a really important point, which is that in this world today, where you know, like smaller, thinner bodies are, have become so revered and it feels like girls and women are taught to be as small as possible as opposed to the fullest expression of themselves.

it's so many people are not eating enough food or over exercising, and those things can really harm your period and can really harm your fertility. Yeah.

I mean, when you think about the fact that, you know, there's a great study, it's called ovulation, a sign of health. And in it, the authors talk about the fact that the first sign of an underlying problem a woman may experience.

And this is a teenager, too. And again, their cycles are still regulating. So that's slightly different. But that first sign is an abnormality in ovulation followed by irregular cycles or amenorrhea.

And so when there are not, you know, consistent reasons why you might not have that pregnancy, lactation, menopause, things like that. that's the first sign.

And almost across the board that has to do with what you're eating and how much you're eating and your body fat. And so that's really where I feel it's so critical for us to start.

And of course, there is there are so many, disordered eating patterns that we see in the modern world. And I, you know, so much of that is is based on a lot of other things.

We don't need to get into right now. But like, if we can start to regulate that, that's where I see consistent ovulation start to return for the majority of my clients.

And so that's really what what I think is most important, in addition to obviously, all the other things that we we talk about, right, the stress and the sleep and all of those fun things.

Yeah, absolutely. I agree with you. It's so critically important.

What Super Fertility Means

What does super fertility mean to you? What does it evoke for you? Every time I think of that, I think of what a healthy period looks like, what a healthy menstrual cycle looks like.

And and so, as I've said repeatedly throughout this call, it's you're are you getting a consistent period? Are you tracking your ovulation? Do you know that you're ovulating?

Are you ovulating? you know, a certain time frame in your cycle? do you feel like you have energy? do you have, you know, do you have a relatively event free menstrual cycle like, you're not, you know, struggling through the last half of your cycle?

you know, with major mood issues and things like that. And, you know, is your period pain free for the most part and, you know, symptom free for the most part.

And so that's really what I think of when I think of that. It's like actually a billboard term menstrual cycle looks like that's what comes out. I love that so much of billboard of what your menstrual cycle looks like.

This has been so informative. It's been incredible. Thank you, Nicole, for the work you do in the world, and thank you for sharing it here with us at the Super Fertility Summit.

I appreciate it. Thank you so much. I'm honored to be here and you're such an amazing interviewer. I really appreciate all the time that we took. Thank you.

Thank you, and thank you so much for being here with us for this session. And I will see you on the next one.