

# FAMILY LIMITATION

*by*

MARGARET SANGER

EIGHTEENTH EDITION

REVISED



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*There are three methods of  
birth control:*

*1. Absolute continence.*

*2. Sterilization.*

*3. The use of appliances  
that prevent conception.*

## INTRODUCTION

Birth Control or family limitation has been recommended by some of the leading physicians of the United States and of Europe. While the medical profession as a whole has not yet taken a united stand upon the subject, we know that the practice of birth control has already been incorporated into the private moral code of millions of the most intelligent and respected families in every country.

There is little doubt but that its general practice among married persons will shortly win full acceptance and sanction by public authorities, who will encourage the practice among the diseased and unfit and help to direct the movement into its proper channels.

In cases of women suffering from serious ailments, such as Bright's disease, heart disease, or tuberculosis, the physician usually warns the woman to guard herself against pregnancy. It is an established fact that two-thirds of the women who die from the above-named diseases do so because they have become pregnant. Therefore, it is imperative that physicians should not only warn women suffering from these diseases against pregnancy, but *they should see that they are properly instructed in methods to prevent conception.* Such responsibility on the part of physicians would reduce the maternal mortality of the world tremendously.

While the above-named diseases are not considered transmissible from the mother to the child, there are certain other diseases and conditions such as insanity, syphilis, idiocy and feeble-mindedness which are passed to the next generation.

When either the man or the woman is afflicted with any one of these diseases, it is absolutely wrong

to allow a child to be born. In such cases the man or the woman should be sterilized.

The patient should understand that such an operation does not deprive him or her of sexual desire or expression. It simply renders the patient incapable of producing children.

To conserve the lives of mothers and to prevent the birth of diseased or defective children are objects for which we need a sound educational campaign for Birth Control.

We hold that children should be:

1. Conceived in love.
2. Born of the mother's conscious desire.
3. And only begotten under conditions which render possible the heritage of health.

We want parents to be conscious of their responsibility to the race in bringing children into the world. Instead of being a blind and haphazard consequence of uncontrolled instinct, parenthood must be made the responsible and self-directed means of human expression and regeneration.

## TO THE WORKING WOMAN

The need for safe practical information on birth control is more urgent today among women than it has ever been before.

The working man and woman have begun to realize the difficulty of supporting a family of eight or ten children on a wage scarcely sufficient to decently keep two or three. They have begun also to realize that no increase of wages, obtained through long days of toil or through strikes or lockouts, can keep pace with the increased cost of living or the cost of an ever-increasing family.

It is the big battalions of unwanted babies that make life so hard for the wife of the workingman. It is the ever-increasing number of children, coming year after year into her life, that perpetuates poverty and misery and ignorance from generation to generation.

The working mother knows through her natural

instinct that she should not have more children than her husband's wages can support, yet she does not know what she can do to prevent conception. When she asks her friends or neighbors for advice, she is given remedies, usually unscientific, unauthoritative and unreliable, which her experience or knowledge warns her may be injurious.

So she is thrust back upon the possibility of taking drugs for producing abortion, or resigning herself to all the children nature will give her, which can mean from ten to twenty in one woman's lifetime.

These women resent the fact that the educated women are able to obtain safe, scientific, harmless information of birth control, while Society condemns its use among the working women who need it most. Present-day society is generous in doling out pittances for the unfit and diseased, thus encouraging their multiplication and perpetuation, while it prevents and discourages the use of scientific knowledge which would enable mothers to avoid bringing into the world children they cannot feed, clothe or care for.

I give herewith the knowledge obtained through study and through more than fourteen years' experience as a trained nurse in U. S. A.

My own experience as a mother of three children has modified some of the advice given in books.

It is my intention to present the facts to the reader in the simplest language, leaving out dogmas or religious accompaniment.

While there are various mechanical instruments such as the gold, ideal or wishbone pessary, the uterus button, etc., often used to prevent conception, I will not describe them here, because my experience has taught me that they are likely to cause irritation and trouble to the woman. There is sufficient information given here, which, if followed, will prevent a woman from becoming pregnant unless she wishes to do so. It must not be forgotten that the best results can be obtained only when the woman will see that, in every case, she follows directions. She must not get careless even once, for it needs only one union in twelve months, unprotected, to give a

woman a baby each year. Therefore, to protect herself from pregnancy the woman must use care constantly.

While it may be troublesome to get up to douche, and a nuisance to have to watch the date of the menstrual period, and to some it may seem sordid and inartistic to insert a pessary or a suppository in anticipation of the sexual act, it may be far more sordid and the condition far worse than inartistic a few years later for the mother to find herself burdened down with half a dozen "accidental" children, unwanted, helpless, shoddily clothed, sometimes starved or undernourished, dragging at her skirt, while she becomes a wornout shadow of the woman she once was.

It takes but a few years of continued pregnancies to break a woman's health. The drain on the family income is continually increasing and the standard of the whole family is lowered.

Mothers! Do not be oversentimental in this important phase of hygiene. Learn the facts of pregnancy. The inevitable fact is that, unless you prevent the male sperm from entering the womb, you are liable to become pregnant.

Women of the working class should not have more than two children today. The conditions of society do not render possible the proper care of more than this number. The average wage-earner can take care of no more than this in decent fashion.

It has been my experience that women desire only the number of children they can properly care for, but that they are compelled to have them from carelessness or through ignorance of the methods to prevent conception.

It is only the workers who are ignorant of the means to prevent bringing children into the world. It is also mainly their children who fill the child labor records, the factories, mills, jails, hospitals, poor houses. It is the workers' children who compete with their parents in the labor market for their daily bread, thereby reducing the wages of the parents—an inevitable consequence when the supply is greater than the demand.

Women of the world arise! Let us close the gates

of our bodies against the diseased, the unfit, and bring to birth only the best, as we know it, which should be, at least, a child with a sound body and a sound mind.

## IS THERE A SAFE PERIOD?

There is current among people an idea that conception does not take place at certain times of the month. For instance: the interval between ten days after the menstrual period, and four or five days before the next period. This is not to be relied upon at all, for it has been proven again and again that some women conceive at any time in the month. Do not depend upon this belief, for there is no scientific foundation for it. There is also the knowledge that nursing, after child-birth, prevents the return of the menstrual flow for several months and conception does not take place. It is well not to depend upon this too much, especially after the fifth month, for often a woman conceives again without having "seen anything" or without her realizing that she has become pregnant. She thus finds herself with one at the breast and another in the womb. Use some preventive.

## COITUS INTERRUPTUS

Perhaps the most commonly used preventive, excepting the use of the condom is "Coitus Interruptus" or withdrawal of the penis from the vagina shortly before the ejection of the semen. No one can doubt that in theory this should be a perfectly safe method; and we also find authorities who claim it is not injurious to the man, but who object to it on the grounds of lack of satisfaction to the woman.

The claim is that if she has not completed her desire, she is under a highly nervous tension, her whole being is perhaps on the verge of satisfaction when she is left in a dissatisfied state. This, without doubt, does her injury. A mutual and satisfied sexual act is of great benefit to the average woman, the magnetism of it is health-giving.

When it is not desired on the part of the woman and she gives no response, it should not take place.

The submission of her body without love or desire is degrading to the woman's finer sensibility, all the marriage certificates on earth to the contrary notwithstanding.

During several years past, however, I have come in contact with thousands of men and women who have given me their confidence and experience along these lines. The consensus of experience seems to be that there are many men who prefer to practise the method of withdrawal and have been able to control the ejaculation until after the woman's orgasm. If this is done all objections affecting the woman's satisfaction are of course removed. But the fact remains that even in such cases, with the strongest control on the part of the man, we find that pregnancy does take place. This is often due to some slight disposal on the part of the man to a seminal leakage, in which the spermatozoa escape from the male organs without the man's knowledge and before the ejaculation.

A woman physician examined a vaginal passage and found sperm deposits when absolutely no ejaculation had taken place. The results of these inquiries are sufficient for us to say that the *practice of withdrawal cannot always be counted upon as a safe preventive.*

Again, while in the quest of information regarding this practice, I have had many men say that their nervous system had suffered decidedly bad effects from this method and upon using another, at once an improved condition was felt.

Here we see how very individual all methods of contraception really are. What may give happiness and good results to one may prove injurious to another. But coitus interruptus or withdrawal, is by no means to be counted upon as either the safest or the best method of preventing conception. There are other methods more to be recommended.

## A DOUCHE IS A CLEANSER— NOT A PREVENTIVE

Although an antiseptic douche is an important factor in preventing conception, *it should not be relied*

*upon as a preventive measure in itself.* A douche is a cleanser, but it is not of itself to be advised as a reliable method to prevent conception. When one understands how conception takes place, it can be seen at once that it is quite possible for a woman to be in a state of pregnancy before she leaves the bed, or before she can reach a douche, unless the womb has been previously covered with the rubber pessary, or by the ingredients of a suppository.

Nevertheless, every woman should learn to cleanse herself thoroughly by means of the vaginal douche. Some women object to the use of the suppository because of its lubricant effect; this can be modified greatly by the use of a warm salt douche, taken just previously to inserting the suppository, cleansing the parts thoroughly of any secretion already there.

Every woman should possess a good two-quart douche bag, called a fountain syringe. Hang it high enough to secure a good, strong, steady flow.

Bulb syringes, such as the whirling spray syringes have been found satisfactory by many women for the purpose, especially where there is no bath room or toilet conveniences, as the bulb syringe can easily be used in the privacy of one's bedroom over a vessel. Directions for use come with each syringe.

## HOW TO TAKE A DOUCHE

If you have bathing conveniences, go as quickly as possible to the bath room after the sexual act and prepare a douche. Lie down upon the back in the bath tub. Hang the filled douche bag high over the tub, and let the water flow freely into the vagina, to wash out the male sperm which was deposited during the act.

Do not be afraid to assist the cleansing by introducing the first finger with the tube and washing out the semen from the folds of the membrane. One can soon learn to tell by the feeling when it is sufficiently clean. It is said, that the French women are the most thorough douchers in the world, which helps greatly in keeping the organs in a clean and healthy condition, as well as preventing the male sperm from reaching the womb to mate with the ovum.

When there are no bath room conveniences, a douche can be taken over the toilet, or, when that is impossible, it can be taken over a vessel in a squatting position.

## DOUCHES

Many women have been advised by physicians to use an antiseptic douche as a means to prevent conception. I do not advise any woman, who desires to avoid pregnancy, to rely upon a douche for a contraceptive. I wish to emphasize again that a douche used alone is not a contraceptive, because the germ from the male may already have entered the mouth of the womb before a woman can use a douche. Therefore it is absolutely necessary that some method be used to cover the womb.

A douche is a cleanser. It is a means of hygiene rather than a preventive. *Do not depend upon a douche to prevent conception.* Some women have been successful in using this for many years and then later on, to their surprise, find that pregnancy has occurred. The explanation is as follows:

When the womb is placed high out of the vagina it is not so easy for the germ from the man to reach directly into the womb. In such cases it is possible for a woman to get up and prepare a douche before the germ from the male enters the womb. There are times, however, when a woman has been standing on her feet, washing or ironing or working, and becomes over-tired. Under such circumstances the womb is pulled or dragged down into the canal of the vagina. At such times if intercourse takes place, it is much easier for the seed from the male to enter directly into the womb, unless there is some protection. It is then that a woman who has previously depended upon a douche as a preventive finds it has failed.

My advice is: Never depend upon a douche alone. It should be used *after the use of a suppository or before the removal of the pessary.*

Cold water douches are not advisable, as there is a tendency to chill and shock the nervous system. A warm or moderate douche is better.

Warm soapsuds as a douche are used by women in

France in the rural districts—just plain common soap, as a cleansing douche after the act.

## SOLUTIONS FOR DOUCHING

Following are some of the solutions to be used for the douche, which, when carefully used, will kill the male sperm or prevent its entering the womb:

*Cresol* is said to be the equivalent, chemically, of lysol and is likely to be obtained at a lower cost. Directions are much the same as those for the use of lysol.

*Zonite*.—This fluid can be obtained at drug stores and is recommended as a douche and for hygienic purposes generally. A quarter of a glassful to two quarts of warm water is enough, though a stronger solution will do no harm.

*Salt Solution*.—Mix four tablespoonfuls of table salt in one quart of warm water and dissolve thoroughly. This is good, and cheap.

*Vinegar Solution*.—Many peasants in Europe use vinegar as an antiseptic almost exclusively. One glassful to two quarts of water is the strength usually desired. Douche afterward with clear water.

Acetic acid being the sperm-killing agent in vinegar, may also be used and with the certainty of more uniformity than can be depended upon in the various grades of vinegar. A good solution is one and a half teaspoonfuls of 36 per cent acetic acid to two quarts of warm water.

*Plain Water Douche*.—This will sometimes remove the semen quite effectively without the aid of an antiseptic. But as the semen can hide itself away in the wrinkled lining of the vaginal cavity, the plain water will only impede its progress for a time. Some ingredient which will kill the sperm is to be more relied upon.

Some women use the douche before the sexual act as a preventive. If this is done, any astringent such as boric acid, alum, citric acid, hydrochlorate of quinine used in the solution will do. Only a pint of

solution is needed for this purpose, following the act a larger douche is used as a cleanser. This can also be done with the regular antiseptic douche.

## THE USE OF THE CONDOM OR "COVERS"

These are made of soft tissues which envelope the male organ (penis) completely and serve to catch the semen at the time of the act. In this way the sperm does not enter the vagina nor the womb.

The condoms are obtainable at all drug stores at various prices. There are some of skin gut and some of rubber tissue. While the rubber condom is best known, there is found to be least objection to the use of those made of soft skin gut. The skin condom is made more durable and more agreeable to use, if kept in denatured alcohol. Alcohol sterilizes and toughens the membrane. The condom should be washed before and after putting it into the jar of alcohol and should be kept tightly corked. It is almost impossible to keep skin condoms satisfactorily if they are dried. If properly adjusted they will not break. Fear of breaking is the main objection to their use. If space has not been allowed for expansion of the penis, at the time the semen is expelled, the tissue is likely to split and the sperm finds its way into the uterus. The woman becomes pregnant without being conscious of it. If on the other hand care is given to the adjustment of the condom, not fitting it too close, it will act as a protector against both conception and venereal disease. Care must be exercised in withdrawing the penis after the act, not to allow the condom to peel off, thereby allowing the semen to pass into the vagina.

It is desirable to discard the condom after it has been once used unless certain precautions are taken. If it is to be used again care must be taken to wash the condom in an antiseptic solution before drying it and placing it away for further use. A weak solution of Zonite is excellent for the condom.

The condom should be well lubricated with oil before penetration. While any lubricant will do, it is more convenient to use the Lactic Acid Jelly or the commonly known KY jelly. Smear it well over the

condom before insertion. It should always be tested for holes or breaks before using.

The condom is one of the most commonly known preventives in the United States. It has another value quite apart from prevention in decreasing the tendency in the male to arrive at the climax in the sexual act before the female.

There are few men and women so perfectly mated that the climax of the act is reached together. It is usual for the male to arrive at this stage earlier than the female, with the consequence that he is further incapacitated to satisfy her desire for some time after. During this time the woman is in a highly nervous condition, and it is the opinion of the best medical authorities that a continuous condition of this unsatisfied state brings on or causes disease of her generative organs, besides giving her a horror and repulsion for the sexual act.

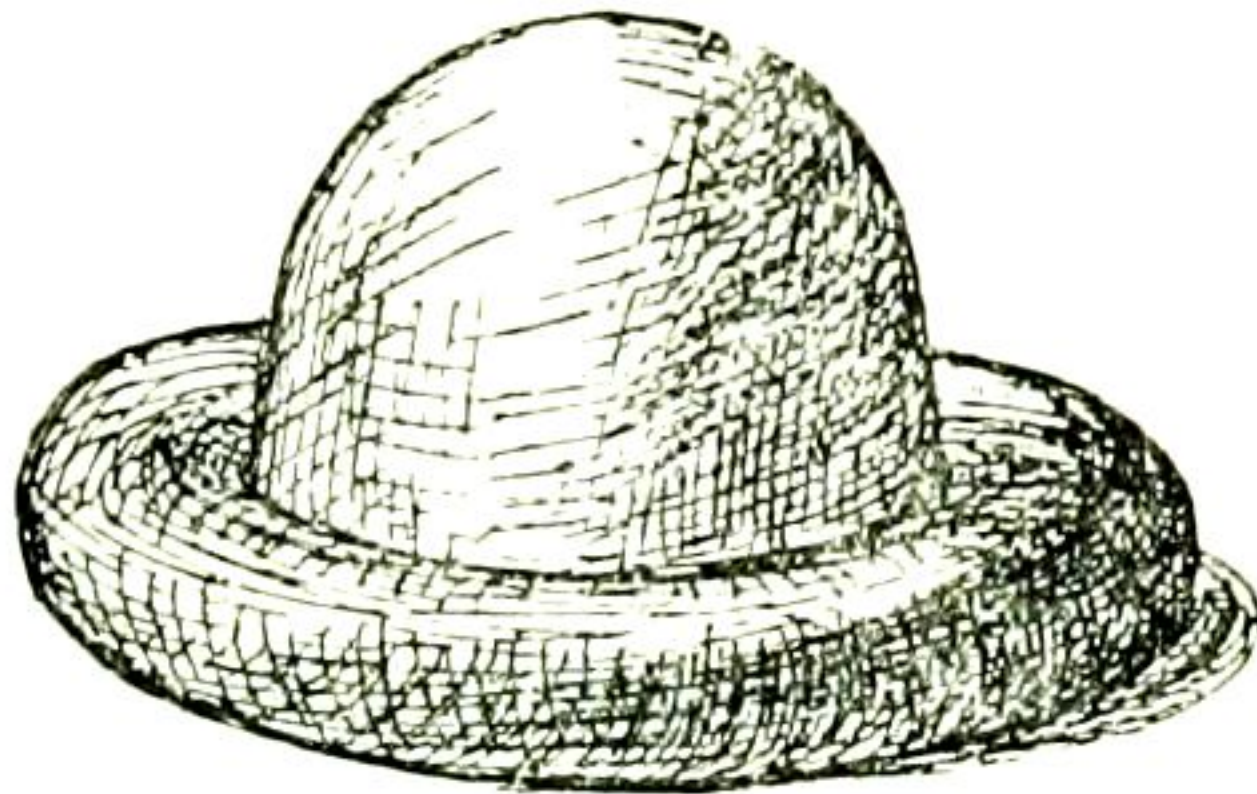
Thousands of well-meaning men ask the advice of physicians as to the cause of the sexual coldness and indifference of their wives. Nine times out of ten it is the fault of the man, who through ignorance or selfishness and inconsiderateness, has satisfied his own desire and promptly gone off to sleep. The woman in self defense has learned to protect herself from the long hours of sleepless nights and nervous tension by refusing to become interested in the act.

The condom will often help in this difficulty. and repulsion from which it takes some time to this subject, no idea of the physiology of intercourse, who upon any contact of the semen have a disgust and repulsion, from which it takes some time to recover. Much depends upon the education of the girl, but more depends upon the attitude of the man toward the relation.

## THE PESSARY—RUBBER WOMB CAP

One of the best means of prevention is the pessary or the rubber womb cap. These come in various forms and sizes, the Dutch Mensinga with its ten or twelve sizes, the Matrisalus, used also in Holland and Germany, the French cap-shaped, the Haire pes-

sary used largely in England and the Mizpah largely used in U. S. A. While the French and Mizpah pessary (see cut) may be conveniently used in many



French Pessary

cases with satisfaction, I now find the Mensinga and Ramses (both diaphragm pessaries) more reliable and more generally adjustable than the cervical or cap pessary.

The chief objection to the use of the pessary is the difficulty of adjusting it. It is very important that the proper size be prescribed for each individual case. This can only be done after a thorough gynecological examination. The condition of the perineum and the position of the cervix must be ascertained before the proper size can be recommended. This should be done by a physician and then the woman should be instructed how to introduce and remove it herself. It takes but a few minutes for the woman to learn how to do this.

The pessary can be inserted in the evening and allowed to remain in place until the following morning when it should be removed.

Before removing it, she should take part of a warm water douche and continue the douche after the pessary is out.

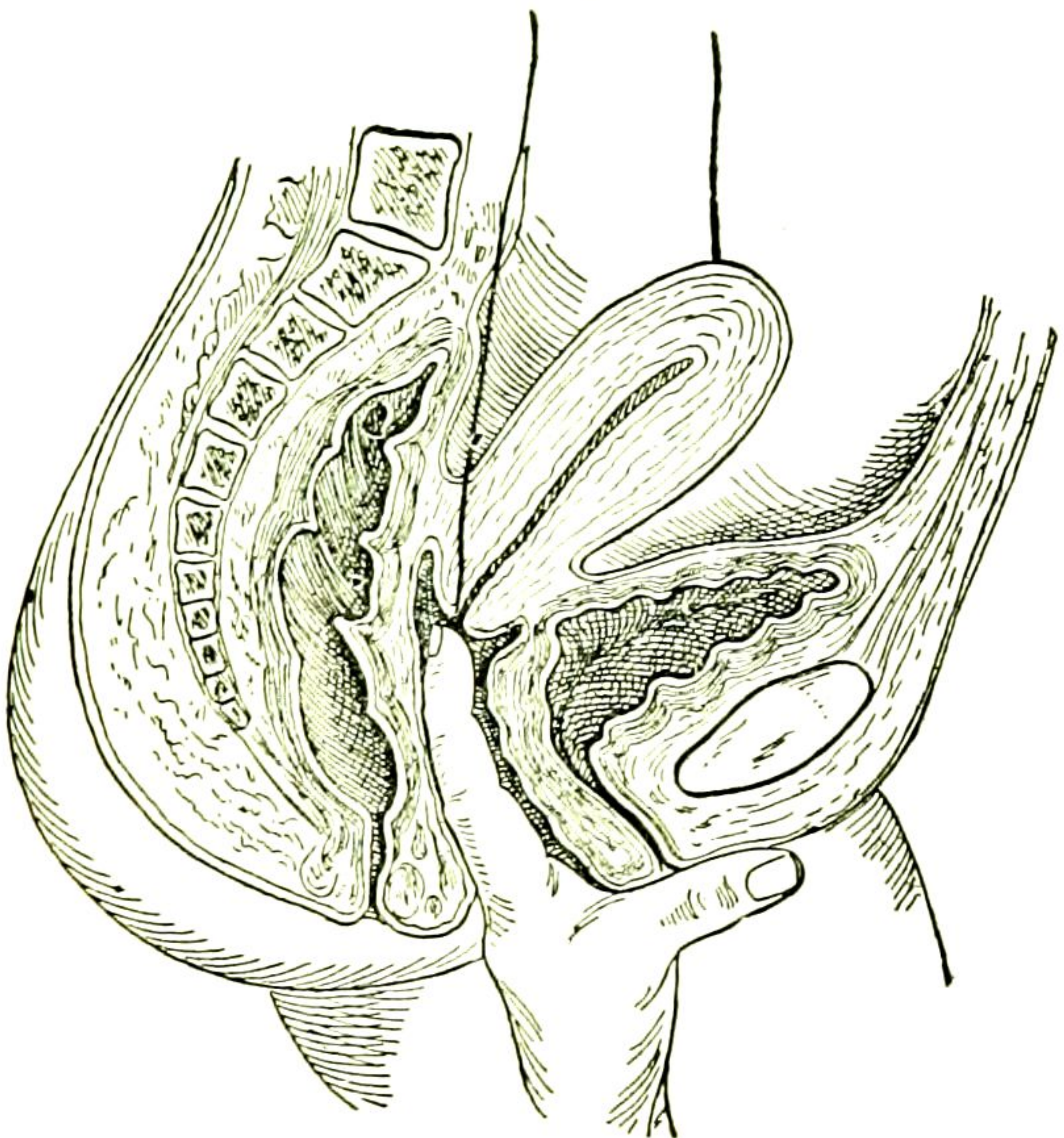
This method is the most practical of any known.

In my estimation a well fitted pessary is one of the surest methods of preventing conception. I have known hundreds of women who have used them for years with the most satisfactory results. The trouble is women are afraid of their own bodies, and are of course ignorant of their physical construction.

They are silly in thinking the pessary can go up too far, or that it could get lost, etc., etc., and therefore discard it. It can not get into the womb, neither can it get lost. The only thing it can do is to come out. And even that will give warning by the discomfort of the bulky feeling it causes, when it is out of place.

Before inserting a pessary inject into the cap a small amount of lactic acid jelly or a small quantity of bicarbonate of soda. This will act as a cement to help seal the mouth of the womb for the time being and thus doubly insure prevention.

In inserting the French or Mizpah pessary it is well to get in a position which will make the en-



Finger touching mouth of womb.  
 a—womb; b—mouth of womb.

trance easy. One foot resting on a low chair opens the parts considerably, also a squatting position brings the uterus lower and makes the fitting of the

pessary easier. Do not use vaseline or oils on rubber, they decay it. Glycerine or soap rubbed on its surface makes it smooth enough to slip easily into place.

After the pessary has been placed into the vagina deeply, it can be fitted well over the neck of the womb. One can feel it is fitted by pressing the fingers around the soft part of the pessary, which should completely cover the mouth of the womb.

If you do not feel the head of the womb through the rubber then the pessary is not on right. It should be moved backward a little or forward until the head can be felt covered. If you still cannot feel it then remove and use some other preventive, or take it to your physician and ask for instructions. The uterus may be turned or tipped back so far that a pessary could not cover the cervix.

If it is properly adjusted there will be no discomfort, the man will be unconscious that anything is used, and no germ or semen can enter the womb.

A douche is to be taken either immediately after the act or the following morning. Take part or about a quart of antiseptic douche **BEFORE** the pessary is removed; after removing it continue the douche and cleanse thoroughly. If a douche is inconvenient allow the cap to remain in place at least 12 hours after the act and then remove without douching.

There are some well-meaning advocates of birth control who have more theories than practical knowledge, who urge or advise that the pessary be left in the body for several days and claim that in this way a douche is not necessary.

The theory may work well in women who belong to the class where standing long hours on the feet is not necessary and where a daily bath in a tub of clear water helps to keep the parts clean. But my experience in the nursing field among working women has given evidence that the pessary cannot remain in place long when a woman stands on her feet, as in washing or ironing. The strain pulls the muscles of the womb down into the vagina and the pessary loses its hold and position. Also the constant contact of the rubber with the natural secretions causes an odor to emanate from the parts, which is

not pleasant. It is not advisable to wear the pessary all the time. Take it out after using, and wear it only when needed. A little experience will teach one that to place it is a simple matter.

Wash the pessary in soapy warm water, rinse and dry well and place away in the box. One should last two years, if cared for.

I consider the use of the pessary one of the most convenient, as well as the cheapest and the safest method of prevention. Any nurse or doctor will teach one how to adjust it.

The use of the pessary has many advantages over other methods of prevention. There are few women whose generative organs are in a healthy, normal condition, but who cannot find one of the various kinds of pessaries to fit her convenience.

While the pessary can be used *only* in cases where the womb is in its normal position—the sponge can be used to great advantage even when the womb is tipped back or out of its usual position.

The usual sponge used for the purpose of preventing conception has a tape attached to it. These are to be had at nearly all drug stores. They should be soaked in an antiseptic solution for a few minutes before coitus and then introduced into the vagina far up as they can be placed. Some physicians have recommended the use of the cotton plug, instead of the sponge, to be soaked in an antiseptic solution. Some of the peasants in Europe use the sponge soaked in vinegar for the same purpose and find it satisfactory. In this country a boric acid solution has been used with satisfactory results. Of course this requires a saturated solution, as, for instance, one teaspoonful of the powder to a cup of water stirred until dissolved.

Sponges and cotton plugs can be recommended as safe, if followed by an antiseptic douche before the removal of the plug or sponge, thus preventing the sperm from entering the womb. The problem is to kill the male sperm upon entering the vagina, or to wash it out or to kill it directly afterwards. A weak solution of zonite may also be used for cotton plugs and sponges, also carbolated vaseline.

Any objection to the use of the small tape sponge can be overcome by the use of a large sponge, divided into parts three or four inches in diameter and a half inch in thickness. Cut into parts while new—boil for ten minutes, as the sponge is never considered hygienically clean until boiled. Push one part up into the vagina as far as it will go, pack it tight around the mouth of the womb so that it covers completely. Douche thoroughly before and after its removal. Always keep these sponges in a solution of vinegar half and half.

One of the cheapest methods of birth control is the use of a large sponge.

## SUPPOSITORIES OR SOLUBLE PESSARIES

These are becoming more generally used than any other method of prevention. There is reason to believe these can be greatly improved upon, and the results obtained far more satisfactory than is at present prevalent in England especially.

These may be found at any reliable pharmacy. The majority of them are made from cocoa butter or gelatine, which makes it necessary that they be deposited in the vagina several minutes before the act, in order for them to melt. Special ingredients negate the effect of the male seed.

One of the objections to the suppository is the greasy feeling the cocoa butter gives. This can be overcome by douching the parts thoroughly before the suppository is inserted.

While some women object to the suppository because of the lubricant effect, other women who have a tendency to a "dry vagina" approve of the suppository because of this tendency and effect.

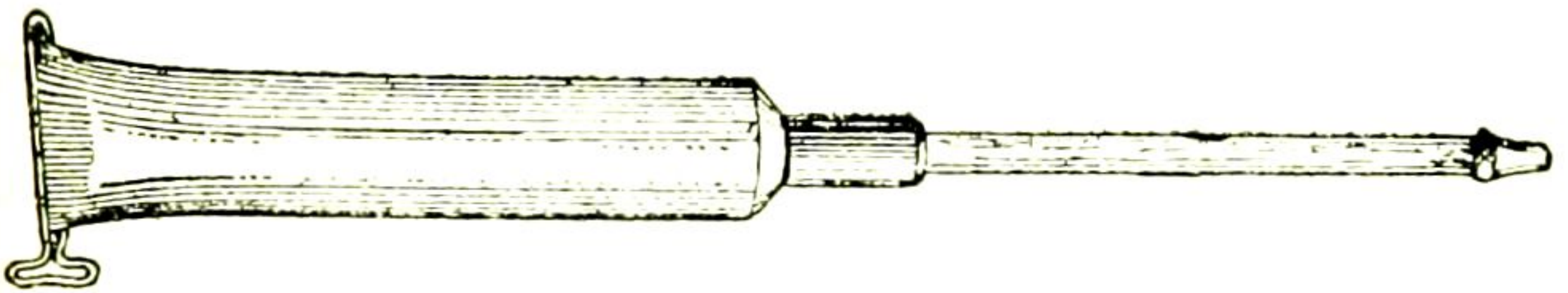
It is advisable, in the use of suppositories, which are always to be injected before the sexual act, that immediately after the completion of the act a mild antiseptic douche be used to cleanse out the secretions. This is a procedure in the use of all suppositories, and while it is true that a douche is troublesome, it is certain to give better results in preventing pregnancy, than to depend upon the suppository alone.

## JELLIES

Medicated jellies are being used quite extensively at the present time either alone or in conjunction with pessaries. This combination constitutes the most reliable method.

Jellies usually consist of a spermaticidal substance incorporated in a water soluble base. The chemicals most usually employed for that purpose are chinosol, acetic acid, lactic acid and boric acid.

Jellies are supplied in collapsible tubes to which a glass or hard rubber nozzle may be attached. By compressing the bottom of the tube either by hand or by means of a key accompanying the tube, the jelly is forced up into the glass nozzle. The nozzle is introduced into the vagina and a definite amount of the jelly (about half a turn of the key) is deposited within the vagina around the neck of the womb. The jelly destroys the motility of the sperm cells and prevents them from entering the womb. Jelly should be injected prior to coitus. A warm water douche should always be taken in the morning to cleanse the vagina from the jelly and secretions.



## SOME QUESTIONS OFTEN ASKED

### 1. What is the best preventive?

There is no one preventive to be recommended for everyone in every case. There are good and harmless preventives, any one of which can be made safe, according to the intelligence applied in using them.

I would advise the use of a recommended suppository or contraceptive jelly for the first few months in the case of a bride, until the parts are in a condition where a pessary may be inserted and worn with comfort. Sometimes it is advisable to use suppositories during the early months of marriage, using the pessary only after children have been born.

### 2. Is a douche necessary after the use of the suppository?

To be certain of good results, I would advise a douche as soon as convenient, under all conditions.

### 3. Are any of these methods recommended injurious to the health of the man or woman?

The only method which physicians claim may be injurious to one or both is the continued practice of withdrawal. This method is not generally recommended, though it is practiced largely in France and England.

### 4. Which method is safest?

All are safe if you use care and intelligence in applying them.

### 5. Which the least troublesome?

The pessary can be recommended as the least troublesome, as after it is inserted it may be left to cover the cervix until the next day.

### 6. Is there a safe period?

There is no absolutely safe period between the menstrual periods where intercourse can take place without pregnancy occurring, at least not for all

women. Some women claim this period exists in themselves, but unless you know this positively I would not advise a woman to depend upon it.

**7. How soon after menstruation ceases should intercourse occur?**

This should be left as in all cases, to the natural desire of the woman.

**8. Does nursing a baby prevent pregnancy?**

It is claimed that pregnancy does not so easily occur during the nursing period, especially during the first three or four months. There are many women, however, who have conceived, immediately giving birth to another baby eleven months after the other. I would not advise depending upon this at all. Use some preventive at once and control intelligently the time for the next baby's arrival, instead of leaving it to chance.

**9. Does fear of pregnancy affect the child?**

Fear affects everything. We do not yet know the effect upon the human race which the fear of pregnancy has caused.

**10. Is it harmful to take drugs during the first few weeks after menstruation has stopped?**

It is considered especially harmful, not only to the mother, but to the child in cases where the drugs have not the desired effect. It stands to reason that a drug which is powerful enough to eject the fertilized ovum out of the uterus must have power to affect other organs. We often find children wetting the bed up to a late age, as well as suffering from other organic weaknesses, which may be traced back to the mother's frantic attempt to "come around."

**11. Should the woman or the man take the precautions?**

Either or both, but preferably the woman. The methods to be used by the man—withdrawal and the condom—have their objections for many people. While it is true that the employment of either of these methods lessen the trouble for the woman, they also deprive her of that great sacred closeness or spiritual union which the full play of magnetism gives when not checked by fear, as in withdrawal, or interfered with, as in the use of the condom.

Some sensitive men object to the use of these methods, as also do many women. It is for each couple to decide. Many men prefer to use the condom in consideration of the woman, to lessen her trouble in douching.

**12. Should a woman have joy in the union?**

Yes.

**13. Why does she not?**

Either because her mind is occupied with fear of the results, or because of the awkwardness and ignorance of the man.

**14. Can this be overcome?**

Yes; first, by using a contraceptive which gives confidence so there shall be freedom from fear of pregnancy; second, by making the husband understand that a greater love and joy is created in the relation when the union is consummated only when the woman desires it naturally.

I have given in the foregoing pages the most commonly known means of prevention. Personally I recommend every poor woman who has had at least one child to use a well fitted pessary and learn to adjust it.

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