A major part of TheETG mission is to expand the area of what is possible in competent self-care in medicine and psychology. TheETG’s primary method of achieving that is to proliferate applied science based information by way of free packets containing plain language info for anyone seeking to move themselves or others forward in these areas.

As you continue to acquire and apply more information you continue to expand the area of what is possible. Data-less conclusions founded upon faulty assumptions are the mother of all screw-ups. They lead to human belief systems that quickly get set in stone. Put data ahead of dogma. Follow the data -not- the crowd.

TheETG packets attempt to address the following:

- "......the benefits that US health care currently deliver may not outweigh the aggregate health harm it imparts."
  [Journal Of The American Medical Association...Volume 302 #1...July 1, 2009...page 89 - 91]

- "Not enough doctors adapt appropriately to new scientific findings.....An insufficient number of medical faculty members are well prepared, effective educators, and too few medical schools prepare their students for a lifetime of learning and change."

- ".....takes an average of 17 years to translate 14% of original research into benefit.....average of 9 years for interventions recommended as evidence-based practices to be fully adopted."

- "......1.5 million U.S. residents are harmed or killed each year because of medication errors, according to an Institute of Medicine report."  
  [Nature Medicine -- Volume 12 #9 -- September 2006 -- page 984 - 985...News In Brief]

- "It is estimated that more than 700,000 individuals are seen in hospital emergency departments for adverse drug events each year in the United States."
  [Centers For Disease Control -- 2015]

- "Most drugs are only effective for a small percentage of people who take them."
  [Michael Leavitt -- U.S. Secretary of Health & Human Services 2005 - 2009]

- ".....A recent study for example, found that only half of all cardiac guidelines are based on scientific evidence."<p>
  [President Barack Obama -- Speech to the American Medical Association -- June 15, 2009]

- "All the good things....they don’t teach us in medical school, because the drug companies pay for our education."  
  [Dr. John Sessions M.D.]
Ovulation detection is the most effective form of birth control.
Put data ahead of dogma.
Discussion of this subject tends to be frozen in time 2 decades ago even though science and technology have marched on.

Stone-age....pills on one extreme, abstinence on the other. Stone-age....everything else is risky, might get pregnant.

If -not- getting pregnant is the subject matter, there is a way to achieve that without pills, surgery, or abstinence. Zero errors, zero mistakes, zero undesired outcomes. If that's the subject matter.

In my experience over the last couple decades of engaging in this debate, I don't think that's the subject matter or the objective.

The objective is to take a pill. That's the subject matter.

Anything that doesn't comport with that is unacceptable.

In our culture the pill is a flag, a badge, and a banner.
Any idea, research, information, or person trying to take down or replace that flag, badge, or banner is to be opposed.
--- **Ovulation**......Females have 2 small round pouches [ovaries] that contain eggs. Approximately once each month, an egg is released from one of the ovaries, a process called ovulation.

--- **Pregnancy**......The uterus is attached to another tube called the vagina. Pregnancy is caused by a sperm from a male deposited in the vagina, going up into the uterus and into a fallopian tube, then penetrating into the egg of a female [fertilization].

--- **Prevention of Pregnancy**......No egg = no pregnancy. A yet to be fertilized egg can survive in the fallopian tube for only about 24 hours. The sperm can survive in the fallopian tube for about 6 days. Thus there are only about 7 days each month when pregnancy can occur. To prevent pregnancy, find out when approximately when those 7 days occur, and avoid introducing sperm into the vagina during those 7 days.

--- **No egg = no pregnancy**......To find out when ovulation occurs, use an ovulation testing kit. They're sold in local grocery stores and drug stores. Cost ranges from $30 - $60. Product suggestion......
Clear Blue Ovulation Kit
birth control pills and cervical cancer

"Combined oral contraceptives are classified by the International Agency for Research on Cancer as a cause of cervical cancer. As the incidence of cervical cancer increases with age the public-health implications of this association depend largely on the persistence of effects long after use of oral contraceptives has ceased."

"Individual data for 16 573 women with cervical cancer and 35 509 without cervical cancer were reanalysed centrally."

"Among current users of oral contraceptives the risk of invasive cervical cancer increased with increasing duration of use"

"The relative risk of cervical cancer is increased in current users of oral contraceptives and declines after use ceases. 10 years’ use of oral contraceptives from around age 20 to 30 years is estimated to increase the cumulative incidence of invasive cervical cancer by age 50....."

The Lancet....Volume 370 #9599........November 10-16 2007......page 1609
International Collaboration of Epidemiological Studies of Cervical Cancer
Cervical cancer and hormonal contraceptives: collaborative reanalysis of individual data for 16 573 women with cervical cancer and 35 509 women without cervical cancer from 24 epidemiological studies

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National Cancer Institute.......Oral Contraceptives and Cancer Risk: Questions and Answers

“…..women who were current or recent users of birth control pills had a slightly elevated risk of developing breast cancer. The risk was highest for women who started using oral contraceptives as teenagers. “

“Evidence shows that long-term use of oral contraceptives (5 or more years) may be associated with an increased risk of cancer of the cervix (the narrow, lower portion of the uterus)."
"We assessed associations between the use of hormonal contraception and the risk of invasive breast cancer in a nationwide prospective cohort study involving all women in Denmark between 15 and 49 years of age....."

"Among 1.8 million women who were followed on average for 10.9 years.....11,517 cases of breast cancer occurred."

"After discontinuation of hormonal contraception, the risk of breast cancer was still higher among the women who had used hormonal contraceptives for 5 years or more....."

"Women who currently or recently used the progestin-only intrauterine system also had a higher risk of breast cancer than women who had never used hormonal contraceptives."

"The risk of breast cancer was higher among women who currently or recently used contemporary hormonal contraceptives......and this risk increased with longer durations of use....."

L.S. Mørch, et al
Contemporary Hormonal Contraception and the Risk of Breast Cancer
Vitamin B12 levels and abnormal pap smears......

"This study aimed to explore the risk of abnormal cervical cytology in relation to serum folate and vitamin B12 levels......"

"A case-control study was carried out among women attending the gynecology clinic for cervical cytology screening."

"103 cases with abnormal cervical cytology of the cervix and 175 controls with cytological normal smears......"

"The mean vitamin B12 level of cases was significantly lower than that of controls."
"The results of this study suggest that lower vitamin B12 levels are associated with abnormal cervical cytology."
The Pill Problem: How to Protect Your Health from the Side Effects of Oral Contraceptives

http://www.amazon.com/The-Pill-Problem-Protect-Contraceptives-ebook/dp/B00BEJ1AX2
“Oral contraceptive use reduces peak aerobic capacity...."
This study aimed to examine the influence of oral contraceptive use on peak performance (peak power output) and physiological adaptations after sprint interval training in recreationally active women.”

“....oral contraceptive use dampened V˙O2peak and Q˙peak adaptation.”

“Therefore, oral contraceptive use should be verified, controlled for, and considered when interpreting physiological adaptations to exercise training in women.”

M.A. Schaumberg, et al
Oral Contraceptive Use Dampens Physiological Adaptations to Sprint Interval Training
Medicine & Science in Sports & Exercise — Volume 49 #4 — April 2017 — page 717