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## Letter from Canada

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## Letter From Canada . . .

The razzle dazzle of political party conventions, the election of new leaders for our countries, the invasion of Czechoslovakia and the brutality of race riots, have all captivated our attention. The crisis of conscience precipitated by the papal encyclical and the attempts to resolve this currently dominate our thoughts.

Statements have been issued of profound acquiescence, by groups of clergy and hierarchy, as though none have doubts or reservations. Equally unrealistic have been the protestations of those who do not like this Papal pronouncement. They attack, with some validity, the lack of proof within the context of the Encyclical, but do not themselves propose a theologically acceptable alternative. I would guess that many doctors, patients and confessors have, in these years since the Council, resolved for themselves a course of action that satisfied their consciences. These are not now likely to be seriously troubled by a papal directive, that relies for its strength on papal teaching authority alone.

However, for those who face the problem of childbirth regulation, within the framework of that ruled as licit by the Church, there can be only a renewed interest in Rhythm, both natural and artificial. Because of these pressures, I would like again to present my current experience in creating an artificial rhythm by regulating ovulation.

Since I last wrote, I now have followed one hundred and sixty couples for a minimum of six months to a maximum of three years. The wives of these have been taking Ortho-Novum, (either 1 or 2 mg.) from day 15 to day 25 inclusively in each cycle. Unless a pregnancy was in anded, the couples avoided marital relation from day 9 to 16 inclusively.

Out of one hundred and six couples in this series, five pregnancies conceived. One has already normal baby. One may represent the system, but I cannot be the these cases, when taking Orthoday 15 to day 25, ovulation is not inhibited.

This artificial Rhythm requires less days of abstinence to avoid concession and is very accurate (as opposed Rhythm) in that ovulation Side effects are minimal, as pregnancy. Patient acceptable of this system by peoples of all behavior and other past contraceptive practices, his been good.

Collecting statistics is indeed show and I would welcome hearing om other controlled series, so that our probled efforts may warrant making this available to all who wish it.

I also believe, but have not yet proven, that the days of abstinence may be able to be shortened to days 11 though to 16 inclusively. When, (and if) the time of abstinence can be reduced to five days, it certainly should not be difficult to practice moral birth control.

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