



EVO

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Herniated **DISC** Experiences

From Gideon (of Heidi), Pakistan

I have suffered recently from two herniated (slipped) discs. This was extremely painful, and I was bedridden for a month while recovering. I learned some things, as well as researched some articles on the Web. As many Family members experience back problems, especially as we grow older, I thought that this info might be helpful.

With regards to my personal situation, I had an x-ray, then an MRI scan. I did the scan as here in my field it is relatively inexpensive, whereas in many countries the cost of this is quite high. It is not a requirement for diagnosing herniated discs, and usually an x-ray is sufficient. An MRI is often suggested if there is continued pain ongoing after two or three months of treatment.

In my case, treatment was basically bed rest and painkillers, as well as anti-inflammatory medications. The main pain comes from the protruding disc matter pressing on the nerve, which runs down into the leg.

The doctor told me that a slipped disc does not just happen suddenly, but is the result of an ongoing process where the disc (which is the padding between the vertebrae) grows less resilient and thin, until it is finally pressed to where it bulges and puts pressure on the nerve. This comes from lifting improperly, and/or jerking or twisting and bending improperly. I believe the cause for me was in playing sports like volleyball and basketball without sufficient warm up or concern for my back.

In addition to bed rest, I also had two epidural cortisone injections over a period of a month, which helped

shrink the disc and reduce the inflammation. This was not painful and is simply an injection into the base of the spine to deliver cortisone directly to the inflamed area. This brought almost immediate relief, and was a great help. Thank the Lord for His healing!

As far as long-term care now that I'm back on my feet, I was advised to do daily exercises to strengthen my back, most of which are simple and easy to do. I was also advised to do crunches (half sit-ups) to strengthen my abdominal muscles. I also need to be careful and prayerful regarding lifting and bending and moving suddenly; to have good exercise but to be mindful of sudden jerking-type bending and moving.

I am also including here an article with some additional information on this subject, which was a blessing to me.

Herniated Disc

Orthopaedic
Connection
Web site

You've probably heard people say they have a "slipped" or "ruptured" disc in their back. What they're actually describing is a herniated disc, a common source of lower back pain.

Discs are soft, rubbery pads found between the hard bones (vertebrae) that make up the spinal column. In the middle of the spinal column is the spinal canal, a hollow

space that contains the spinal cord and other nerve roots. The discs between the vertebrae allow the back to flex or bend. Discs also act as shock absorbers.

The outer edge of the disc is a ring of gristle-like cartilage called the annulus. The center of the disc is a gel-like substance called the nucleus. A disc herniates or ruptures when part of the center nucleus pushes the outer edge of the disc into the spinal canal, and puts pressure on the nerves.

nucleus out toward the spinal canal

- bad posture
- improper lifting
- sudden pressure (which may be slight)

The fibrous outer ring may tear. As the disc material pinches and puts pressure on the nerve roots, pain results. Sometimes fragments of the disc enter the spinal canal where they can damage the nerves that control bowel and urinary functions.

Recognizing symptoms:

Low back pain affects four out of five people. So pain alone isn't enough to recognize a herniated disc. However, if the back pain is the result of a fall or a blow to your back, don't hesitate to contact a doctor. The most common symptom of a herniated disc is sciatica, a sharp, often shooting pain that extends from the buttocks down the back of one leg. This is caused by pressure on the spinal nerve. Other symptoms include:

- Weakness in one leg

- Please refer to *Eve* #11, where the feature "Relief for Back Pain" contains yet more helpful and informative material on this subject, including a list of back-strengthening exercises. For more on general back care, see also the articles "Healed by Dr. Jesus" in *Eve* #23, "Firm Believer in Exercise" in *Eve* #19 and "A Back Crack" in *Eve* #21.

How this condition develops:

Discs have a high water content. As people age, the water content decreases, so the disc begins to shrink and the spaces between the vertebrae get narrower. Also, the disc itself becomes less flexible. Other conditions that can weaken the disc include:

- wear-and-tear
- excessive weight, which can squeeze the softer material of the

Jesus speaking:

There is no disease or problem that I cannot heal. There is no pain that I cannot relieve. There is nothing in your body that cannot be touched with My power. Even when something seems beyond hope, there is always hope to be found in Me. There is always healing to be found at the touch of My hand. Sometimes I will use the help of doctors who specialize in caring for the back, but I am also able to heal, to make whole, to strengthen and to bring relief, even without their help. There is nothing beyond My power.

So ask Me for My will. Ask Me what route you should take to achieve healing. Ask Me specifically for detailed instruction, and ask Me as often as you need to until you are healed. I am your back specialist and know your back and every intricate vertebrae better than the greatest surgeons in the world. So put your trust in Me first and foremost, and have the faith to follow My lead and plan for recovery.

- Tingling (a “pins-and-needles” sensation) or numbness in one leg
- Loss of bladder or bowel control (If you also have weakness in both legs, you could have a serious problem. Seek immediate attention.)
- A burning pain centered in the back

Diagnosing a herniated disc:

Your medical history is key to a proper diagnosis. You may have a history of back pain with gradually increasing leg pain. Often a specific injury causes a disc to herniate. A physical examination can usually determine which nerve roots are affected (and how seriously). A simple x-ray may show evidence of disc or degenerative spine changes.

Treatment options:

Most back pain will resolve gradually with simple measures. Bed rest and over-the-counter pain relievers may be all that’s needed. Muscle relaxers, analgesic and anti-inflammatory medications are also helpful. You can also apply cold compresses or ice for no more than 20 minutes at a time, several times a day. After any spasms settle, you can switch to gentle heat applications.

Any physical activity should be slow and controlled so that symptoms do not return. Take short walks and avoid sitting for long periods. Exercises may also be helpful in strengthening back and abdominal muscles. Learning to stand, sit, and lift properly is essential to avoiding future episodes of pain.

Considering a Vitamin Supplement?

By Sandy Weeks,
Quackbusters
Chronicle

Myth: Vitamin and mineral supplements are always good for us.

Fact: All vitamins and minerals are necessary for our good health, but not necessarily in a supplement form. Some folks think that if one is good, then two or three must be better. Not so.

Why might we need vitamin supplements? How do we know if we need them or not?

Some of the water-soluble vitamins are not retained in our body and need to be constantly topped up. Vitamin C is a good example. Other vitamins, however, are stored in our body—for example the fat-soluble vitamins, A, D, E and K—and can reach dangerous levels if we artificially keep adding to them.

Some people may not completely absorb or properly assimilate vitamins from their diet. Also, poor nutrition, illness, prolonged periods of stress and some medical treatments deplete our body's nutrient stores and can interfere with that absorption. These types of situations call for vitamin and possibly mineral supplements to ensure our body stores are topped up and remain so.

If you are considering taking vitamin supplements, familiarize yourself with the effects of too much, just so you know if you are inadvertently overdosing. For example, try not to separate the

B-group unless for very short periods of time. The B-group vitamins all work in conjunction with each other, so taking them separately will interfere with that balance. B6 (popular for PMS relief), if taken over a long time will adversely affect nervous functions in our body. So it is safer to take it as a part of the B-group complex.

Iron is another popular mineral supplement that must be taken with discretion. If you think you need some extra iron, stop and think again—do you *really* need it? Iron is particularly abundant in red meats and vegetables. (Note: Try cooking in a cast iron

pan, which puts iron in your food as well.) It is readily absorbed by our intestine, especially in the presence of vitamin C. Iron supplements are only indicated in conditions of clinically diagnosed anemia, and if taken, should be very closely monitored. Our body is a wonderful scavenger and will store any iron that comes its way, and when all its routine storage areas are full, it will start using our heart muscle as a depot, adding an unnecessary and potentially dangerous burden for our heart to deal with. High iron levels also tend to give rise to vascular damage and increase risk of stroke.

Health Tip:

Yes, vitamins are good for us, but not if we take them indiscriminately. It's pretty difficult to overdose on any vitamin or mineral simply from dietary intake, but it's very easy to overdose if we tuck into supplemental forms without good reason. A balanced diet incorporates a bit of everything, and we do mean everything. Real food is more important than supplements, but if we decide to hit the vitamin trail, let's make that decision an informed (*Eve: And prayed about!*) one.

THE Fruits of the Law of Love

FROM A MARRIED WOMAN, AUSTRALIA

Living the Law of Love is purely a lesson of unselfish love and giving, faith, yieldedness and obedience to the Word. It's quite scary, but rewarding, and the blessings are immeasurable. I have three living fruits to show from it! Like it says in the Word, if you give love, you get love in return. I'm glad I did or I wouldn't have received His gifts of love—my beautiful and precious girls.

Each time, sharing has had its trials and struggles. When I was single it wasn't that hard; I was thankful that my needs were being met and it was the "in" thing to do. But when I got

married, selfishness crept in. Personality clashes is another hindrance—it's hard to share with someone you have a hard time getting along with; it takes lots of love and yielding to the Lord.

My husband told me something I will never forget: What if that brother's need for sex is so desperate that he would leave the Family because he can't get it here, and you are responsible? How would you feel? This really gave me a kick in the pants, and when I took one step for Jesus, He took two for me. He gave me the grace to love this brother, and a little love went such a long way. His attitude towards me changed like night and

day; since spending time together he has been so nice, kind and helpful to me. And the Lord used him to answer our prayer for a baby. I want to give the credit to my husband—he's my hero and real father to all my kids, all fruits of the Law of Love.

Just a thought: If all husbands and wives had this kind of unselfish love and sacrificial giving, we could save a lot more of our lonely and needy brethren, young and old alike. Each of my kids has their unique story of love that's written in my heart forever, and we're both so happy and thankful to have them. They're like our glue that keeps us together in spite of it all.

LOVE Is Saying You're Sorry

THE NEW INTIMACY NEWSLETTER

Do you remember the catchphrase, "Love means never having to say you're sorry"? It suggests that two people who love

one another never crash into each other, never step on each other's toes, never say or do anything hurtful. Yet anyone who's been in an intimate

relationship knows that's not true.

In fact, if love does mean never having to say you're sorry, then you are either not being fully who

“Love is never having to say you’re sorry!”—Isn’t that ridiculous? What kind of philosophy is that? My goodness! Love is saying you’re sorry—just the opposite! If you make a mistake or you hurt somebody, if you *love* them you say you’re sorry!—Dad (*ML#802:3-4*)

you are, or you’re using a simplistic interpretation of love to keep yourself from having to acknowledge that you can be insensitive, unaware, self-involved—with the result that your partner probably feels unheard, ignored, taken for granted, or hurt in some way.

What’s wrong with saying “I’m sorry”? What do you have to lose? After all, an apology is just an acknowledgment that you’ve been out of line, or maybe just too tired to have noticed.

But what if you’ve said

or done something you had no idea would be hurtful? In this case, both men and women often refuse to say, “Hey, I’m sorry you feel bad,” and even more adamantly refuse to assume responsibility for having been involved, even just slightly, in their partner’s upset.

“I didn’t do anything,” they argue. “How could I have known? So what do I have to be responsible for?”

What you are responsible for is the well-being of your relationship. That doesn’t mean you have to assume responsibility every time your partner feels bad. We don’t mean you should say, “I’m sorry” as an automatic matter of policy.

But if the well-being of your relationship is of primary concern to you, then even if you don’t feel responsible, your

being together has been disturbed and must be attended to. It’s at times like these that what’s needed is a simple, “I’m sorry I wasn’t aware of what that meant to you. What do you need so that this won’t happen again?” You don’t assume a false responsibility, yet you show your love by expressing support for your partner.

Love means saying you’re sorry when you know you are responsible, so that an apology is a simple acknowledgment of your having said or done something that was hurtful. And when you know you’re not directly responsible, or intentionally responsible, you are willing to offer an “I’m sorry” anyway. It only requires your conscious care for the feelings of the one you love, and the rewards are immense.

MASTURBATION Tips for Two FOR ADAM...

BY DAVID STROVNY, WEB REPRINT

This experience can help partners get to know each other better and in a more intimate way. How is it more intimate?

Well, being able to look into each other’s eyes whilst masturbating one another can be highly erotic, and can make both of you feel more

comfortable with one another.

Obviously, you don’t have to head straight for her vagina and get to work, and continuously

ask, “Does this feel good? What about this?” The point is to pick up on her reactions. Keep your eyes and ears open and when you think she’s being pleased, don’t speed up like you’re in a marathon; keep your rhythmic pace going.

SO THIS IS FOREPLAY:

Because a lot of women find it easier to achieve clitoral orgasms rather than vaginal or G-spot ones, masturbating her can help you achieve that goal. By watching her reaction when you rub her body, you’ll slowly begin to figure out what turns her on.

As well, although she may initially feel somewhat antsy about having you look at her, you can comfort her by telling her how much she turns you on and there’s nothing you’d like more than to watch her climax for you.

Rub her entire body; move between her thighs, glide over her hips, feel her waist, cup her breasts; travel everywhere. After all, you have all night to get each other off.

MAKING HER FEEL GOOD:

The thing about mutual masturbation is

that you can make the experience as greasy and oily as you want it to be. You can use lubrication to get her started, and even drench your penis with it so she can have her fun.

If you have all night to engage in this activity, then take the time to tease each other to the brinks of bliss. Try lighting a candle and look into each other’s eyes while you talk about your sexual fantasies, or the first time you made love or will make love. You know, it’s those kinds of conversations that can make the mind drive the body crazy.

PLAYING WITH HER FIRE:

Before you head down, place your middle finger in her mouth and make her suck it as though she were performing on your member. Use that same finger to start gently rubbing her clitoris.

Glide over her clitoris in a slow, soft, circular motion. Then slide your finger past her vaginal opening until you reach her perineum (the area between her anus and her vagina) and begin rubbing that.

Get back to her

clitoris and place it between your index and middle finger. Move your fingers up and down in a rhythmic motion, but always check for her reaction because different women like different things. Begin using both of your fingers to rub her clitoris with more gusto, but don’t be too aggressive as it has a tendency to become sensitive quite easily.

Finally, after all this, slide your finger inside of her and move in and out, all the while paying close attention to whether she wants you to go faster, slower, harder ... you know. Try to find her G-spot, but don’t be mechanical about it.

To add variety to your finger techniques, while you’re penetrating her, use your thumb to lightly stimulate her clitoris. Some women love the sensation of having both zones stimulated.

WHAT’S MY POINT?

Mutual masturbation can be a huge turn-on and a highly sensual experience that can help couples understand what the other person likes, and learn new things about themselves as well.

THE Italian Method

eve

The following is a fun how-to tip and sex spicer, which involves the use of a condom. Please refer to “Go for the Gold” for the Lord’s full counsel on your decisions along these lines. For those who do feel led to use a condom, the following article might come in handy. We love you!

FROM *HOW TO BE A GREAT LOVER*, BY LOU PAGET

The Italian Method is the application of a condom using your mouth. It has nothing to do with Italian men nor did it originate in Italy—so before you ask, no, I don’t know how it got its name.

Before you proceed you need to be able to put your mouth in a flute position, and cover your teeth with your lip while you open your mouth.

ONE:

Lubricate your lips with a water-based product.

TWO:

Remove the condom from the package, hold the nipple between your thumb and forefinger so it looks like a tiny sombrero.

THREE:

Put a jellybean-sized drop of lubricant in the nipple end of the condom. This assists the application over the most sensitive part of the penis,

and prevents that pesky stuck-to-the-top feeling.

FOUR:

Place the condom in your mouth gently with the nipple between your lips, and the lubricated end towards him.

FIVE:

Hold the shaft of his penis in one hand while positioning your mouth at the tip. Allow the condom to rest at the end while you gently use your tongue to unroll it over the area.

SIX:

While you unroll the condom down the shaft it is important to keep your lips over your teeth to keep from tearing the latex.

SEVEN:

Go down the shaft as far as you can, and finish the application with your free hand, making sure to keep the action smooth and without interruption.

If you know that intimacy is a certainty, cut the package open so when you’re ready to rock, you won’t ruin the mood with the untimely crinkle sounds the packaging makes. If you’re really good, the man won’t realize what you’ve done until it’s over. Now that could come in handy!

The Poison that Kills

Dreams

By Peggy McColl

“If someone put poison in your water, would you drink it?” The obvious answer is “no”! Chemical poisons that we can see, taste, touch, and smell can be fatal. Fortunately we are intelligent enough to know that we do not ingest poisonous substances, but what about our mind? Repeatedly, people are poisoning their minds with negativity, and though we cannot see this negativity, it is just as fatal.

Negativity is the poison that kills dreams, and we need to stop it before it contaminates our lives. Negativity starts with negative thoughts. How do we eliminate this poison?

Monitor the thoughts that you allow into your mind ... every thought! If you find yourself thinking negative thoughts, think again. Strive to think positive, empowering, and supportive thoughts.

Just as you monitor your thoughts, monitor

the words that you speak. Listen carefully to every word that is coming from your mouth. Watch for *excusitis*. Excusitis is a disease that causes people to constantly make excuses. When you hear yourself complaining, stop yourself immediately.

Create a vocabulary of a successful, positive, inspiring individual. Be passionate in your speech and express your enthusiasm with your words. The energy of the words that you speak is a powerful force that is creative.

Part of the process to shift your thought energy from negative to positive is to be grateful for the gifts in your life and to focus on what is great in every situation. Be appreciative and show appreciation to others. Gratitude will attract to you more of the things that you desire.

Negativity is the anchor that holds you back. Cut yourself free today and be the most positive, optimistic person that you know!

Jesus speaking

You can do it, dear ones! For those of you who have let this problem grow to become a strong, deep-rooted habit in your lives, reading this article might almost seem overwhelming in its simplicity. Could it really be that easy? Well, I'm sure you can guess at the answer.—Yes! Of course! With My power and especially with the keys of the kingdom that I have given you to wield in My name, *all* things are possible unto you.

You think that it is unrealistic, that your habits are too deeply ingrained, that you could never become an “up” person after being a “down” person all your life? My loves, there is nothing that cannot be accomplished by those who will avail themselves of My full power. There are no barriers! There are no obstacles! There are no hindrances in your path—none, except your lack of belief or reluctance to accept what could be.

Try Me! Put Me to the test! Prove Me now herewith, saith the Lord God of hosts, and see if I will not open up the windows of Heaven and pour down such a blessing that there will not be room enough to contain it. (*End of message from Jesus.*)

Reverse

Roles

**By Goddard Sherman,
*The Best of Bits and
Pieces***

Mary was married to a male chauvinist. They both worked full time, but he never did anything around the house and certainly

not any housework. That, he declared, was woman's work.

But one evening Mary arrived home from work to find the children bathed, a load of wash in the washing

machine and another in the dryer, dinner on the stove and a beautifully set table, complete with flowers.

She was astonished, and she immediately wanted to know what was going on. It turned out that Charley, her husband, had read a magazine article that suggested working wives would be more romantically inclined if they weren't so tired from having to do all the housework in addition to holding a full-time job.

The next day, she couldn't wait to tell her friends in the office. "How did it work out?" they asked.

"Well, it was a great dinner," Mary said. "Charley even cleaned up, helped the kids with their homework, folded the laundry and put everything away."

"But what about afterward?" her friends wanted to know.

"It didn't work out," Mary said. "Charley was too tired."

My Hot and Sexy Man

Anonymous

I've read many poems about what turns women on;
All the different kinds of men and the little things they do.
Some girls like the soft ones who cuddle with the babies...
Some girls want the strong ones, big and tough.
I've found many qualities in the man that I love.
I admire all of them but there are some that really turn me on.
When he wakes each morning, praying to be a better friend
To all those around him, that really gets me going.
The way he jumps up and down when we find new pubs in our mailbox;
I think it's just so cute that I'll never get enough!
When Mama tells us in the Letters what we've got to change,
I see him get so convicted and work for it every day.
He probably doesn't realize that this means more to me than his muscles,
But boy, oh boy, those are some things that really turn me on!
I know sometimes it's hard for him to say sexy words to Jesus,
Being the very manly type, but he does it still.
When we are making love and he's including Jesus
It makes it more exciting than any fantasy I could think of.
The way he takes time to hear from the Lord each day
Makes me just want to please him and make him smile.
He's always so open to improving himself,
There's nothing in the Word that he won't try, that he won't do.
So open, so loving, so on fire;
He loves the Word and the Family.
Free and revolutionary,
How much sexier can you get?

A Connoisseur's Guide to Fine Dining

From Gideon (of Heidi), Pakistan

On our Home's schedule, the JETTs and junior teens cook five dinners a week, and were thus a major force in the kitchen. We were eating *cook-it-as-fast-as-you-can-so-I-can-take-more-get-out* type of meals, and it was not so pleasant. So we bought some recipe books at secondhand shops and challenged them with excelling in "culinary arts." We set up our program similarly to how the *Michelin Guide* works (a fine dining handbook for rating restaurants).

Heidi and I are the ones who rate the meals, and we are tough raters, not being too lenient so that the kids really have to hit the mark. For example, the main dish is worth 14 points—7 for taste and 7 for appearance and presentation. It took quite a few meals before anyone achieved a 7-pointer in either category, going the extra mile to make it special and presentable.

Some of the guidelines

are that they have to follow the menu plan, unless they counsel with the kitchen deacon and get permission to change it. They also need to stick with the ingredients available for that meal, again unless they counsel and get permission to use something extra or special. So making a fine meal is not dependent on buying extra ingredients, or fancy items. The judging is based on how well they did with what they had to work with. For example, say liver, spinach and rice was on the menu that night. The rating would be based on how well they did in each category with what they had to work with. A typical meal like that can be "slapped together," or it could be prepared and presented in a pleasing and tasteful way, perhaps making a special sauce, or looking up a creative recipe for liver, looking up a recipe for spinach soufflé instead of simple boiled spinach, or making a rice pilaf instead of plain rice, etc. Rather than just putting it out in a serving bowl, the rice could be served on

a platter garnished with some greens, and/or carrots cut like flowers, etc. These are all simple things a restaurant will do to make a plate look good.

When each person has cooked two meals, we hand out the rewards. At first we did a first, second and third place type of reward system, but this was a bit discouraging for those who had tried hard and perhaps even did quite well, but just not as good as some others. We found it better to have a percentage system. That way they can compete against the ratings instead of each other, and all can win depending on how much they invest.

There are 50 possible points for one meal, and 100 for 2. Thus, a possible reward system could look like this (we change the reward for each set of cook-offs):

94–100: 4 scoops ice cream at local dip shop
88–94: 3 scoops ice cream at local dip shop
82–88: 2 scoops ice cream at local dip shop
75–82: 1 scoop ice cream at local dip shop

Then we change the reward for each set of cook-offs.

In the three months since starting this system, we have been eating the best meals ever, and the young people have been doing marvelously. We have to almost restrain them from spending their whole afternoon in the kitchen when it's their turn to cook! They research cookbooks and come up with far-out

recipes, as well as nice side dishes, desserts, etc.

Additionally, each JETT and junior teen in the Home has really learned how to cook well, often far outshining the senior teens' or adults' meals! They now prepare special meals and do the *Maître d'* and service when we have guests over, and have done extremely well in that also, eliciting praises and comments from the visitors on the meals.

We hope this might be a help to others facing a similar situation.

LNf: It's now been six months since we began implementing this and we no longer use the rating system. Now everyone has developed the good habit of enjoying cooking, and seeks to prepare nice meals for the Home without the need of having to use this motivation system. Praise the Lord!

Name	Point Value
Main Dish: Taste/Texture	7
Main Dish: Appearance/Presentation	7
Vegetable Dish: Taste/App/Pres.	5
Starch Dish: Taste/App/Pres.	5
Cleanliness: (follow meal-prep checklist)	4
Service: Organization, <i>Maître d'</i> , etc.	4
Timeliness: (-1 for each 5 min. late)	4
Saved Plates: (meal nicely set aside w/ proper proportions for all absentees)	4
Bonus: (based on content/quality of dish) side dish, sauce, special condiment, pickle, appetizer, dessert, salad, special beverage, etc.	5
Bonus: (based on level and success of creativity) Creativity in menu planning (i.e., new recipes, etc.)	5
Total Point Score Available	50

ALL ABOUT CESAREAN BIRTHS

What Is a C-section?

From the March of Dimes Web site

Cesarean section (C-section) is the surgical delivery of a baby through an incision (a cut) in the abdomen and the uterus. It can be a lifesaving

operation when you or your baby experience certain problems before or during labor. Most mothers would prefer a vaginal birth, but all would agree that having a healthy baby is more important than the method of delivery.

Being prepared for a

cesarean birth includes knowing when it is indicated, what can be done to reduce your chances of having one, what is involved in this surgical procedure, and being able to accept the disappointment that some women feel about not being able to deliver vaginally.

COMMON REASONS FOR A C-SECTION

A cesarean section delivery is major surgery and should only be done when the health of the mother or baby is at risk. It should not be an option for the convenience of the doctor or the parents, or for any other non-medical reason.

Cesareans can be done for the following reasons:

- Cord prolapse (when the umbilical cord falls into the vagina).
- Bleeding from the placenta.
- Abnormal pelvic structure, for example as a result of a serious injury.
- Shoulder-first presentation of the baby.
- Serious maternal

health problems (e.g., infection, diabetes, heart disease, high blood pressure, etc.) when labor would not be safe for either mother or baby.

- Dystocia (difficult childbirth), which includes labor that fails to progress, prolonged labor, and CPD (cephalopelvic disproportion) when the baby is too large to pass safely through the mother's pelvis.

- Breech presentation (buttocks or feet first).
- Fetal distress. The baby may show signs of distress such as slowing of heart rate or acid in the blood before vaginal delivery can be completed quickly.

Eve: Please note that although these are the most common reasons a cesarean is performed, the presence of such factors does not *automatically* mean that a cesarean is needed. For example, many hospitals do deliver breech births vaginally. However, as all of the above conditions are out of the ordinary, you would do well to be prayed up and prepared for the possibility of cesarean if you know that any of them will be present.

Are All C-sections Necessary?

Some experts estimate that half of all C-sections performed aren't necessary! Part of the reason some doctors may turn to C-sections is due to their fear of malpractice suits. You may *not* need a cesarean section under these circumstances:

- Repeat cesarean.

Unless there are serious medical risks, fewer than half of women who have previously had C-sections need them again.

- Breech presentation (buttocks or feet first). You may still be able to deliver vaginally. Discuss this with doctor or midwife.

- Dystocia (difficult childbirth). Often C-sections are performed at the slightest indication of difficulty.

- Over-reliance on electronic fetal monitoring. These devices aren't perfect. Even when they indicate problems,

chances are only one in four that the fetus is in danger. Actions, such as a fetal scalp blood sample test, are needed to make sure the baby is not in danger or to plan next steps.

- Fetal distress.

Monitoring for uterine pressure and testing the fetal scalp for the amount of acid in the baby can give more precise information about the baby's safety.

- Overdue delivery.

Often the conception date is not accurate.

Can Cesareans Be Avoided?

From Merryheart Psalms, USA

As I began to study midwifery, I was amazed and sometimes shocked at how the medical establishment does not always have our best interests at heart. One of a woman's most vulnerable times is during labor, and many times at a weak moment women are coerced to accept drugs, an epidural or worse.

I had all my children with a doctor, OB (obstetrician) or midwife, and all in a hospital setting. But I desperately prayed and chose who I birthed with. I left one

doctor who was adamantly insisting I have all the interventions that I did not want or need.

Hospitals are a business, with guidelines and protocols. They have to run efficiently and be cost effective or they will go out of business. Doctors come with their own protocols and desires. And many directives come from health maintenance organizations or private insurances that have their own rules and guidelines.

In writing this, I don't want anyone to get the impression I am against a mother doing what she needs to do to

get through birth. My husband knew I didn't want drugs during birth, and my birth practitioner was always versed in this as well. Invariably when I hit transition, and the contractions were a whopping 1½–2 minutes long and less than a minute apart, I would seize my husband with a wild look in my eye and say, "Find the doctor. I want something to take the edge off. NOW!" My poor, sweet husband! His eyes would usually fill with tears to see me that way! He would be stuck between a rock and a hard place, because he was already committed to my

wish to not take the drugs.

Once the doctor came in after my husband David had refused my request, so I said, "Please, Doctor, something to take the edge off!" He smiled and patted my big toe and said, "But you said you didn't want anything. Besides, you're doing just fine." That's when you want to trade places with them so they can see what "fine" feels like, ha!

"Hast thou faith? Have it to thyself before God. Happy is he that condemneth not himself in that thing which he alloweth" (Romans 14: 22). Do what you have the faith for. I am not writing these things to condemn anyone or tell them to have their birth a certain way. I am writing to share some of the things I have learned. If you don't know you have options, you don't have any.

By making some simple choices you will greatly increase your chances of having a vaginal birth.

- Choose your care provider wisely. If you choose an OB/GYN, do so carefully! OBs are trained in surgery. They are the ones who perform cesareans. And if you think a young OB might be more idealistic and not so inclined to cesareans,

consider that their education cost them about US\$50,000 a year for the past 8–10 years. Plus, the cost to go into business, major bills to pay, etc. Cesareans are more cost- and time-effective for OBs.

- If possible, choose a doctor known as a "Family Practitioner." They care for you from birth to death *and* deliver babies. It is not in their best interest to lose a client to a cesarean, so they will work with you more.

- Midwives are good choices, as they believe in educating and letting a woman go according to her faith and will support the laboring woman from start to finish.

- Be mobile. Many studies have been done that show being able to labor upright and moving around helps labor progress faster. Also use water to your advantage if you can. Having your body immersed in warm water is relaxing and can take the edge off labor.

- Have someone labor with you who is knowledgeable: either your significant other or another mother or someone who can stay with you. Two are definitely better than one during labor.

- Don't go into the hospital too soon. It gives

the doctors time to try and intervene.

- Mark your periods on your calendar. Most pregnancies are 40 weeks, give or take a week or two. Confusion over a due date can cause undue interventions and a scheduled cesarean.

All of this might sound overwhelming. My aim is not to try and put fear into anyone. I thank God for procedures and a medical profession that can help when needed. But for the most part, birth is not a sickness or pathology, and a birthing mother doesn't need to be rescued from the process. I don't want to make anyone who medically requires a cesarean fear the process or be under a cloud. As in any medical procedures, we have to pray desperately to know God's will and His leading.

My hope is simply to show that many unnecessary cesareans are being done, and how to best avoid an unnecessary one.

Sometimes I have grappled with the whole issue of a natural, no-drug, vaginal birth and I think, "What's the big deal?" and why should it even matter. I took it to the Lord, and here are some things He shared with me about it.

JESUS speaking:

I would that women, when they are in labor, cling to Me. As in other facets of their lives and health, I would that they look to Me first. The medical profession is an extension of the scientific profession. As they go through their school and seek yet more knowledge and higher learning, more faith in Me and My processes are destroyed.

People go into the medical profession usually because they want to help people stay healthy. While seeing all the pathology and “things that can go wrong” with the body, you can get hard and forget that you are fearfully and wonderfully made, and that most of the time the processes of the body work just fine. Then you start adding gadgets and gizmos that are meant to

help. And like many labor-saving devices, you start leaning on them instead of trusting and praying and watching and waiting for Me to work.

Cesarean is major surgery that takes weeks to recover from. It's a painful disruption at a pivotal time in [a woman's] life. I have given men ways and means to help women deliver their babies when an emergency—a true emergency—arises. But cesareans, like many things today, have begun to replace Me and the human touch. TV has replaced family time. Computers and video games have replaced good physical exercise. Unhealthy fast foods have replaced nourishing food that takes time to prepare. In an effort to do things quicker and more efficiently, the structures are weakening.

My children with My Spirit will never be satisfied with the ways of the world. I alert you to any bill of goods the System tries to pass off. You know the majority are most often wrong. My ways are not man's ways.

The whole health system is a complex issue and people do need to go according to their faith. But faith comes from the Word. And faith or knowledge comes from the Word too. Most people just flow along with the program because they don't know any better. They believe doctors are there to help them. They blindly trust that their care provider knows best. But doctors are people too. Not only are they not God, they are very human and make mistakes that can be very costly, and even deadly. *(End of message from Jesus.)*

MORE TIPS TO PREVENT UNNECESSARY CESAREAN BIRTHS

From the March of Dimes Web site

- Get early prenatal care.
- Stay fit and maintain a healthy lifestyle during your pregnancy. *(Eve: This is also true and important when*

you are not pregnant, especially throughout your childbearing years.)

- Watch for any signs of trouble and alert your provider immediately.
- Drink plenty of fluids during early labor and suck on ice chips during

active labor. Remember to urinate too!

- Walk around as much as possible or change positions frequently during labor. An upright position can shorten labor, but try different positions to see

what is best for you.

- Learn all you can about C-sections. Educate yourself. That way, you'll know when it's appropriate and what to expect.

- Choose the right care provider. Choose a doctor who is board-certified in obstetrics and gynecology or in family practice, or a licensed midwife, who delivers a large number of babies with a low overall percentage of C-sections.

Discuss these questions with your provider:

—Do you deliver babies in breech positions?

—Do you try to turn the baby (external cephalic version) after 37 weeks if it's breech?

—How many of your patients who have had a cesarean birth try to deliver vaginally with later babies?

—How do you help women cope with long labors?

—During labor, do you encourage women to walk around?

—What positions other than the flat-on-the-back delivery position do you use?

—Get a second opinion. If a cesarean birth is recommended prior to delivery you may want to get a second opinion.

Firsthand Experiences and Tips

From Leila (SGA, of Sam), Chile

C-sections are a big subject for me, as I have had five. One thing that is good to remember is that nowadays, C-sections are more common in society, so it's good to hear from the Lord when your doctor suggests having one. Each of my births had to be C-sections for different reasons. After praying and hearing from the Lord each time, the Lord showed us that it was necessary to go ahead with them. Thank the Lord, my babies have all been healthy and beautiful: three girls and two boys.

Just like in a natural delivery, it is incredibly helpful to know what is going on in a C-section—what to expect, what the doctors and nurses will do, etc. My first time was quite an experience, as I had no idea what was going on. It was much smoother the next time when I knew what to expect.

After the operation it's important to rest, rest, rest, and rest some more. Take it as easy as possible. They say it takes six weeks just to heal initially—before you should pick anything up (other than your new baby) or do certain jarring movements. Some folks are not aware that a C-section is not a normal birth, and that the mommy needs a *lot* of rest and help in many ways. The recuperation period is very important, especially the two months following the operation.

It's good to realize that besides having a baby, the mommy has also undergone a big operation. I've tried to make it a habit to take vitamin E after my births and throughout the following months. After a couple of my births I'd get a lot of gas welled up inside in the days after the operation, which was painful. Drinking a mild herbal tea really helped me, and I also received

Eve: Please see in FSM #313 the article "Increasing Your Potential for Normal Birth: Nutrition and Exercise."

some medicine drops to help with this. I was also recommended to start walking the day after the operation, to relieve this. I normally just try to walk around the room or down the hall of the clinic or hospital, slowly, with someone helping me.

It's also made a big difference for me to really pray and find out *where* the Lord wants me to have the baby. Thank the Lord, each time He has supplied a nice place for us and sweet doctors and nurses. It's also been a blessing that each time someone has been able to stay with me at the clinic after the birth until I can come home.

It's been equally

important for me to hear from the Lord beforehand, and get pumped up with faith so I can be strong in spirit. I was often tempted to compare negatively with other moms who have natural or easy births, and to feel maybe I didn't deserve such a blessing or that [having cesarean births] was a punishment, etc. But the Lord is so sweet and comforting, and recently told me that I will more clearly understand everything when I get to Heaven! And He has always given me the strength and faith needed. God bless my dear husband Sam and others who have been so sweet and such a support during these times.

I've heard some young mothers ask if there is much difference between a natural birth and a C-section. While there are times that some of us may need to have C-sections, I feel it's important to know that it is definitely much better to have a natural birth if you have a choice. In natural birth most women have pain during labor, whereas with a C-section the pain comes in the recuperation. I have talked to quite a few mommies who have had both natural and C-section births; they said there's a lot more pain involved in a C-section, as well as other drawbacks. So if you have a choice, a natural childbirth is the best way to go.

CESAREAN SURGERY: WHAT TO EXPECT

The Procedure

From the March of Dimes Web site

The anesthesia:

Either general or regional anesthesia (epidural or spinal) is used during a cesarean birth. If your C-section is an emergency procedure, general anesthesia may

be needed and you will be asleep during the delivery. If spinal or epidural is chosen, you will be awake for the birth of your baby, but numb from below your breasts to your toes.

The surgery:

- A catheter is placed into the bladder to drain urine during surgery.
- A needle will be inserted in a vein in your

hand or arm to give you fluids during the operation and medications if needed.

- After your abdomen is shaved and washed and you are numb, the doctor makes the first incision—a vertical (up-and-down) one from your navel to your pubic bone or a horizontal or “bikini” cut (across) just above your pubic bone.
- The second incision

is made in the wall of the uterus. A horizontal incision is preferred because there is less bleeding and it heals with a stronger scar. Sometimes a vertical incision is needed for reasons such as certain positions of the baby or the placenta.

- The doctor can then open the amniotic sac and deliver the baby. You may feel some tugging, pulling and some pressure.
- Next the placenta is detached and removed.
- Finally, the incisions in the uterus and abdomen are closed.

The procedure usually takes about an hour. If you're feeling up to it, you may be able to hold your baby in the delivery room once the baby's

nose and mouth have been suctioned and he or she has been checked, just like a vaginally delivered baby would be.

The risks:

Cesarean birth carries greater risk for both the mother and the baby. Some of the increased risks for the mother include:

- Infection. Women develop post-operative infection of the uterus and nearby pelvic organs less than 10% of the time.
- Increased bleeding. Twice as much blood loss as a vaginal birth.
- Blood clots in the legs, pelvic organs, and sometimes the lungs.
- Death. Although maternal death is very

rare, it is four times more likely with a cesarean birth than in vaginal delivery.

Major risks for baby include:

- Prematurity, if the due date is not accurately calculated. This can mean difficulty breathing (respiratory distress) and low birth weight.

- Depressed (decreased) activity due to the anesthesia being absorbed by the baby.

A cesarean birth also is more painful in the long run, more expensive, and takes longer to recover from than a vaginal birth. You can expect two to four days in the hospital, and four to six weeks before full recovery.

Make the Delivery Work for You

From the March of Dimes Web site

If you have a cesarean birth, there's plenty you can do to make your delivery the best possible. Remember that your goal is to safely have your baby.

- Plan ahead. No one can predict whether or not you'll need an emergency C-section. So prepare yourself with information.
- Request regional

anesthesia. Unless your C-section is an emergency, you should be able to have an epidural or spinal that will allow you to be awake for the birth of your baby.

- Ask that your partner be allowed in the operating room. Support during the birth of your baby is important.
- Discuss having an ultrasound screening and/or a Non-Stress Test

(NST) with your doctor or midwife to determine how well the placenta is working and the age of your baby if there is any question about your date of conception.

- Ask to wait for labor to begin before having your planned C-section. Many experts believe that even a little bit of labor gives the baby some of the advantages of uterine contractions

in stimulating breathing and ensuring maturity. If you have had a previous C-section with a vertical uterine incision or have a long way to travel to get to your hospital, this may not be advisable.

- Request a running commentary on the

delivery process and to watch the actual delivery if you would like.

- Tell the staff that you and your partner want to hold the baby right after delivery. You and your partner should be allowed to hold your baby in the

recovery room unless the baby needs medical attention. If you feel up to it, you can breastfeed immediately, too.

- Don't be afraid to ask questions throughout your labor and delivery so you are comfortable with every procedure.

RECOVERY AFTER A CESAREAN

CESAREAN RECOVERY: What Nobody Tells You

By Ann Douglas, Web reprint

It's a subject that pregnancy books tend to gloss over and prenatal instructors choose to ignore: exactly how your body will feel after a cesarean birth.

Here's what you need to know:

- It takes longer to bounce back after a cesarean delivery. A cesarean section is major abdominal surgery. Consequently there's a fair bit of healing involved. In fact, it takes approximately six months for your incision to fully heal. You can expect to feel some numbness in the area until your nerves have a chance to regenerate (something that typically happens six

to nine months after the delivery) and you should be prepared for some initial itchiness as well.

- It's normal to experience pain around the incision site during the early weeks after the birth. You can minimize your discomfort by using a pillow to support your midsection when you cough, sneeze or laugh; wearing tight bicycle shorts underneath your regular clothing; avoiding heavy lifting; and limiting the number of times you trek up and down stairs in a day until your incision starts to heal. It's also a good idea to line up some help for when you come home. After all, you don't just have yourself to take care of while you're recovering: you've also got

that new little bundle of joy.

- You may experience painful gas pains. Gas pains tend to occur during the first three days after the delivery, easing up as soon as your intestinal tract starts working again. Taking short walks, changing your position frequently and rocking in a chair will help to get rid of any trapped gas, thereby helping to reduce the intensity of the gas pains you're experiencing.
- You may have trouble urinating at first. You may experience pressure and discomfort while urinating within the first week or two of the delivery. It's a side effect of your surgery and will disappear as your body begins to heal.
- You may have to get

a little creative when it comes to breastfeeding positions. As a rule of thumb, the side-lying position and the football-hold positions work best because they help to keep

your baby away from your oh-so-tender incision site.

It's also important to keep in mind that you will also experience the usual list of postpartum aches and pains—except, of

course, for perineal pain. (At least you got off in that department!) So make a point of getting some extra rest during the early weeks postpartum. You owe it to yourself and your baby.

Exercising After a Cesarean

Q: After you've had a C-section, when is it okay to start exercising, like a good hour walk or a workout video?—Joy (of Daniel), Brazil

A: (From the Storknet Web site:) Most women who have C-sections are anxious to know how and when they can return to physical activity and exercising, according to Dr. Silverio Chavez, an obstetrician at Kaiser Permanente in San Diego.

"Thanks to the low transverse incision we do now—we call it the bikini incision—women can return to activity much sooner than they used to," he said. "We get the women up and walking the next day and this helps several things: the return of normal bowel function; preventing blood clots; returning to normal activity; and getting rid of the water weight."

As for more vigorous

exercise, Chavez suggests women wait at least six weeks before returning to the gym; four weeks or until the lochia (vaginal discharge) ceases before entering a swimming pool; and four weeks before driving.

"It's important that the incision be fully healed," he said. "And keep in mind that you must build your endurance and you may not have a lot of energy for awhile."

Cope With Emotional Issues

March of Dimes Web site

Cesarean birth can be difficult for many parents, especially if they have been planning for a vaginal delivery. Women often feel disappointed, angry or depressed; their partners may have similar feelings.

- **Ask your doctor** to explain exactly why the cesarean birth was necessary. This can help you understand why you needed this procedure this time.

- **Give up the idea** that your delivery wasn't "normal." The most important thing is the health and safety of you and your baby.

- **Accept that you can't control everything.** Many women who have C-sections feel like they have somehow "failed." You cannot control unexpected events that sometimes make cesarean birth the safest route.

- **Talk about how you**

Eve: For more on the important subject of nutrition, care and recovery after C-section surgery, please see the feature in Eve #32, "Before and After Surgery."

feel. One of the best ways to deal with your emotions is to share them with those close to you—your partner, friends, relatives, your doctor or midwife.

(Dad speaking:) It's not uncommon for some of our precious women who have gone through C-section births to come out feeling quite down, depressed and disillusioned with the way things ended up. The little tips mentioned in this article are good, but the most important thing you need to do is go to the Lord as soon as you're able. He is the One Who is in control, He is the One Who engineers such circumstances that are beyond our control, and He is the One Who works things out in our lives to suit His purpose. So if things didn't end up quite the way you expected, why not ask Him about it? He is more than able to answer, to explain, to comfort, and to give you peace with the situation, and why things happened the way they did. But if you don't ask, you won't know, and you will miss a lot of precious and wonderful things that He has to say on the subject.

So whatever you do, don't suffer in silence, and don't think that it is some lack or weakness or problem of yours that caused your birth to seem less than perfect. As the Lord has said before, how easy or difficult your birth was is no measure of His love for you or your usefulness or service to Him. He has ways that are beyond our ways; thoughts beyond our own, and the only way to know the answers to these questions is to bring them to Him and ask. He is more willing to give than we are to receive.

Speed Your Recovery

From the March of Dimes Web site

Recovery from a cesarean birth takes time. You may feel nauseated or cold from the anesthesia and your incision will hurt. But you can help yourself feel better faster.

- Plan to get out of bed and walk around 8 to 24 hours after surgery. You may not feel like it, but the movement will help your bowels move and get your circulation flowing so you don't develop clots.

- Have someone "hold down the fort." Arrange for someone to take care of your home and other children while you are in the hospital and when you return home.

- Ask that your older

children be allowed to visit you and the baby in the hospital. Take pictures of them to the hospital to put in your new baby's bassinet.

- If you feel good, request early discharge.

You may be able to go home earlier.

- Take it easy. Even after you go home, plan on resting most of the time. Getting up every now and then will help you recover, but don't overdo it. Avoid climbing stairs and lifting until you feel better. Sleep when your baby does!

- Ask for help. You probably won't be back to 100% for about six weeks. Plan ahead and have your partner, a friend or another relative on hand to help.

An Important Cure: Movement

From Robin Elise Weiss, Web reprint

One of the biggest milestones will be your first walk. I've been there three times before and it's scary. Here's my advice:

- Support your incision by holding a pillow over it. Your insides will feel like they are falling out, but they are held in places by several layers of stitches

and staples.

- Avoid the tendency to lean forward; stand up straight.

- Do not look down, but focus on an object as a goal: the chair, the bathroom, etc.

- Always begin your walking with help.

- Walk as frequently as possible, even if only a few steps.

LETTUCE In a Box

FROM THE BACKYARD HERBS WEB SITE

Dirt, seeds, a container, water, and a little sunshine—that's all you need to grow your own lettuce or *mesclun*. Mesclun is a French term for a mixture of lettuce and greens that are picked early so they are very tender. It's easy to grow and will provide you with fresh greens for your salads all summer long.

The seeds need to be planted in cooler weather to get a good crop. Planting them in the spring or the fall will give you the best results. Just plant the seeds, thin them when they begin to sprout (see details below), and give them water regularly. It's as simple as that.

What You Will Need

1. A large flat container: a wooden box, wagon, or washtub—whatever you can come up with
2. Potting soil
3. Mesclun seeds or lettuce seeds
4. Small garden shovel
5. Spray bottle filled with water

Ready to Plant

1. Fill your container

with a layer of gravel or rocks to provide drainage.

2. Cover the rocks with soil nearly to the top.

3. Sprinkle the seeds on the top of the soil. If you like neat little rows, use the handle of your garden trowel to make little trenches six inches apart and sprinkle the seeds into those.

4. Lightly cover the seeds by sprinkling on more soil. It doesn't take much to cover them. The covering soil shouldn't be more than 1/8-inch deep.

5. Use a spray bottle to thoroughly mist your greens garden. Place it in a fairly sunny spot. Mist it faithfully at least once a day. If it rains, be sure to move your garden to a

protected area to prevent your seeds from drowning or being washed away.

6. In a week or two, you will see tiny green sprouts. When these are at least an inch tall, thin them out so there is only one plant every several inches: they need to have some room to grow. If you do this very carefully, you can plant these seedlings in another spot; or they make a really fresh addition to a salad.

7. Keep the soil moist as the greens grow, but do not over-water. When the weather heats up, move the garden to a somewhat shady area: Too much heat and sun makes the greens taste bitter. Use the greens as they mature.

HOW Often to Water

OREGON STATE UNIVERSITY

The goal is to deliver water to the roots of the plants at about the same rate that it is removed from the soil by the plants and

evaporation. Consider your soil, your plants, and recent weather when determining how much and how often to water your garden. Sandy soil holds much less water

than clay soils. Larger plants consume more water than seedlings. Hot, windy weather dries out the soil.

So monitor your garden to determine your watering needs throughout the growing season. Different plants in your garden may have different needs:

- Germinating seeds and seedlings need to be kept uniformly moist without being washed away, so water them with a gentle spray every day or two.

- Developing plants need to be watered deeply, but less often, to encourage deep root growth. Water to a depth of at least six inches and then let the surface inch or two completely dry out before watering again.

- Crops such as lettuce, beets, green beans, and chard draw water from the top foot or less of soil. Thoroughly soak the rooting zone and then don't water until the plants show signs of needing additional water such as turning a dark bluish green or wilting during the hottest part of the day.

- Corn, tomatoes, asparagus, and rhubarb have deep root systems that allow them to draw

water from the top two feet of soil. Deep-rooted plants need water less frequently, but need more water to reach the rooting depth.

- As a general guideline, garden plants that have been watered properly, and therefore have developed deep roots, need a thorough watering every five to seven days in hot weather.

Avoid these three common watering problems:

- Frequent, shallow watering promotes root development in the surface

layers of the soil. Plants with shallow roots are very susceptible to drought.

- Over-watering can drown plants by filling up soil pores with water, leaving little or no oxygen for plant roots. Also, excessive watering leaches away nutrients and can contribute to groundwater contamination.

- Postponing irrigation after plants show signs of needing water can damage plants very quickly in hot weather. Observe your plants every day or two and respond to their needs promptly.

HARVESTING Your Greens

IOWA STATE UNIVERSITY WEB SITE

Harvest the outer leaves of leaf lettuce as soon as they enlarge to 4 to 6 inches. The leaves on the inside will continue to develop. Crisp-head lettuce takes longer to mature and is harvested when the head is full size and moderately firm.

Beets and turnips serve a dual purpose. Tops can be used during the thinning process while the rest of the plants are left to develop into a root crop for later

enjoyment. If only the tops are desired, seeds can be scattered in a corner of the flowerbed or garden and used as soon as they are 4 to 6 inches tall. The tops of these vegetables are an excellent source of vitamins A and C, B vitamins and calcium.

Mustard greens mature quickly and are best planted in early spring or fall. Warm, long days will cause the plant to go to seed. Harvest before the leaves are fully grown for best flavor. Spinach will

also go to seed quickly during long days. Plants are best grown in early spring or later summer for a fall crop. Harvest as soon as leaves are 6 to 8 inches long and allow the center of the plant to continue producing.

Greens that like warm temperatures include New Zealand spinach, Swiss chard, collards and kale.

Harvest New Zealand spinach as succulent leaves and young stem tips. Swiss chard is harvested by removing the large, outer leaves as they reach 8 to 10 inches long. The center of the plant continues to produce for an extended harvest. Collards will tolerate both heat and cold. Harvest the young tender leaves,

and the central plant will continue producing. Kale is harvested similarly to collards. The flavor of both collards and kale is improved by frost.

Most greens can be stored for up to two weeks in the refrigerator. After washing, place the produce in perforated plastic bags to maintain humidity.

STARTING YOUR First Veggie Garden

BY NEIL MORAN, WEB REPRINT

You're aware of the health benefits of eating fresh vegetables, and you have the space for a small garden, but just don't know where to start? Look no further. Here's all you need to know to put fresh, crisp vegetables on your dinner table.

First, think small. Don't bite off more than you can chew—or hoe. It's like starting out an exercise program by running five miles the first day. You get tired and sore, and you quit. Likewise, if you plant a huge garden the first year, you'll get uptight and turn your sore back on gardening for good. So, if you're new to gardening, start off with a garden

no larger than eight by 10 feet. You can always expand later if you can't get enough of those fresh, crispy vegetables.

Choose a location that receives as much sun as possible throughout the day. Northern gardeners should insist on full sun, six hours minimum a day is recommended. Now you're ready to work up the soil. You can rent a rear tine tiller or borrow one from a friend or neighbor for this task. Work the soil up sod and all.

Next, examine the soil. Is it predominantly clay, sand, or a sandy loam? The latter is the best. You can distinguish a sandy loam from the other two by giving it the squeeze test.

If you can take a handful of dirt and squeeze it in a ball then watch it crumble when you let go, you've got a sandy loam soil type.

If you're stuck with a predominantly sandy or clay soil it will be worth bringing in some topsoil to get you off on the right foot. If you can't afford topsoil, you can amend the soil with compost. Compost includes any biodegradable material which can be broken down into a fine, dark humus. (*Eve: You can make a compost heap out in your backyard with all of your vegetable and fruit scraps. Once it starts to decompose, it makes great compost—perfect fertilizer for your garden. You might want to put your compost*

pile in a wire cage if you have a problem with pests.) Well-rotted livestock manure is the best choice for getting a clay or sandy soil into shape. Whatever you use for compost, apply it once in the spring and once in the fall. It will take a few seasons to improve a poor soil type.

Another thing you can do is use topsoil to make a raised bed. Landscape timbers or treated 2x12s work best for this. You can stack these about five high. Besides enclosing your garden and making a good growing medium, the raised bed will make it easy to plant and weed your garden, particularly if you've got back trouble or have difficulty bending over.

Hey, I think we're ready to plant! Here's the fun part—choosing your seeds. In a small garden you may want to avoid some of the space hogs, like corn, squash and pumpkin. If you do plant corn, remember to grow it along the north side of your

garden so it doesn't shade the rest of your crops.

Easy-to-grow crops include onions, peas, beets, rutabaga and zucchini squash. These can also be planted early. Tomatoes and peppers need to be started from seed indoors about 8 weeks prior to planting time, or purchased as transplants. Be sure to space things in your small garden according to the instructions on the packets. And make sure you plant your tender crops (tomatoes, squash, beans and watermelon) after all danger of frost has passed. Ask the old timers in the area when this date is. One common mistake people make, especially in the northern climates, is to plant everything when the weather turns nice only to succumb to a frost a week or two later, thus wiping out all their hard work. Plant by the expected last frost dates, not the weather.

Unfortunately, critters (and children) may take a shine to your new garden. Rabbits, geese and deer can be a problem. For the small garden, a wire mesh surround works well. This will discourage most critters and some people. I've seen people take chicken wire and staple it to the top of their landscaping timbers on

a raised bed to keep out geese and the like.

Watch for insect infestation. If things are properly spaced in your small garden, insects shouldn't be a big problem. If you do see evidence of chewing on plants, especially things like cabbage, don't wait to fight back. Identify the insect causing the damage and attack them. Proper spacing, weeding and fertilizing is a good way to prevent disease and insect infestation without having to resort to harmful insecticides.

Soon, it will be time to harvest your garden fare. To get the full health benefits of your veggies, harvest when ripe and don't overcook your vegetables. More importantly, enjoy the experience of eating fresh, crisp vegetables you grew yourself! Happy gardening!

(Dad speaking:)

Gardening is a wonderful adventure and can be extremely enjoyable. It can be therapeutic, in that it can help to relax you after a long day of work. Getting out in the fresh air and sunshine for a little bit of gardening can do wonders for you. It can also be pretty good exercise in some cases—especially if you're doing a lot of weeding, squatting, digging, etc. Having fresh

Eve: Veteran gardeners, send in your tips! We'd love to hear any of your input, testimonies or experiences on this topic! For more on gardening, please see also *CCHB2*, pg.563–578 and *Eve #14* pg.8–10.

vegetables and/or herbs from your garden can be a real treat too.

It's also fun for children to plant the seeds and then see them grow—so why not start a project as an educational activity with some of the children in your Home? It's very

fulfilling for children to be involved in a project like a vegetable garden—taking it all the way from seeds to preparing the vegetables to eat once they're full grown. It's something they can be responsible for, and see the results of their efforts

and love and care.

Gardening has been around since the beginning of time! If you've never done it before, why not give it a try? Even if you don't feel like you have a "green thumb," you just might find it's easier than you think. (*End of message.*)

Menstrual Blues

Q: My senior teen daughter has been having irregular periods; she bleeds for two weeks, stops for a week or so and then starts again. She's very healthy, so that isn't the problem. Does anyone know of a natural remedy for helping this?
—FGA woman, USA

A: (*Eve:*) It is fairly common during the early years of menstruation to have a certain amount of irregularity. There are many factors that can cause irregular periods—travel, lack of sufficient exercise, vitamin deficiencies, poor diet, or occasionally something more serious such as cysts, etc. There are also some women whose menstrual cycle simply is not regular or predictable at all. While a 28-day cycle (counting from the first day of the period, not the last) is considered normal, a cycle can range anywhere from 18 to 40 days. Some women have the unfortunate combination of a very short menstrual cycle, and very long and heavy periods. If you ask the Lord, He can give you more specific details about your daughter's

situation, and what can best be done to help her.

There are a number of herbs, such as ginger, turmeric and others, that are said to have beneficial properties for menstruation, both for regulating the cycle and for general ease and well being at those times. Of course, many herbs are not readily available in some countries, and as we are not fully familiar with each herb and all of their properties, side effects, uses and dosage, you'd have to ask the Lord for His advice for you personally.

When we were preparing this article, we asked the Lord about herbs and their role in regulating the menstrual cycle, and He said: "Herbs should be used with great care. The menstrual cycle is a delicate thing, and playing with it unknowingly isn't wise. Taking a herb to alleviate a symptom while not delving into the root of the problem or asking Me why your cycle is the way it is, is no solution, and could in the long run cause more troubles and problems." So please be very wise and prayerful.

Another important factor is calling on the power of the keys for specific help and deliverance! There is nothing too hard for the Lord in the power He has given us, and because He has made our bodies, He can also regulate them in His Own best way. We love you and pray that He will lead you and provide a perfect solution and remedy.

If anyone has information or personal testimonies along these lines, please share it with us all. What have you found helpful? What natural remedies or changes in your physical habits worked for you? What did the Lord show you specifically? Did you receive miraculous healing and deliverance? We'd love to hear from you.