

Puberty

The Sign

Compiled statistics on the average, young girl's reaction to the first menstrual period that 25 per cent of all young girls knew nothing of the causes of the sudden hemorrhage, and that furthermore 13 per cent of those 25 per cent were so terrified as to suffer nervous shock. Six per cent thought they must have been wounded and consequently took some cold baths which caused all of them more or less serious chronic complaints.

Menstruation is the definite sign of puberty in women, and is evidence of physical and psychological female development. The menstruation may occur as young as nine years old and it is also nature's warning to sexual ignorance. It is a natural sign to the body that it is prepared for physical changes and child birth to take place.

The physical changes is characterized by intensified activity of the genital glands, development of the breasts and pelvis, growth of hair in the underarms and external genital, change of voice, and sometimes even an alteration in the colour of the hair, etc. All finally develops into the harmony of the adult female figure.

The first appearance of periods and even before, the normal girl begins to take an interest in everything concerning love. The normal girl falls in love at this time with anyone and everyone, and makes frequent changes in the object of her affection; now it is the teacher, man or woman, now the young or middle-aged man next door. Love letters are exchanged and they arrange their first meeting.

In the boy, the desire for independence is manifested by a rebellious attitude towards paternal authority. Whereas in the girl, this revolt may find expression in jealousy of her female family members. The growing girl is conscious of her sexual personality and begins to see rivals in her mother and older sisters. She wants to be considered a woman and no longer a child.

Sexual Beginning

The entire sexual development of woman under present day social, from childhood to motherhood, are better educated and informed. But sex education for the young child remains a dilemma for parents. We know the appearance of menstrual is a sign of puberty but, at the same time, it is also the beginning of sexual contact. All parents being protective towards their child, the word sex or subjects related to sex have been deliberately kept in ignorance, the small girl is hardly informed of the primary facts of sex.

At this stage, the child naturally and unconsciously perform masturbation or infantile masturbation which is partly of a biologically natural character during this transition phase, they are curious about their new development. Occasionally, erotic dreams and daydreams which lead to girls orgasmic sensations.

Thus, safely say that masturbation constitutes an almost inevitable transition phase in the

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sexual development of the young girl or even boy in present day. The practice is relatively harmless so long as it remains confined to this transition phase and it is a temporary character, and as long as it is not considered later on preferable to normal sexual intercourse. It becomes harmful if involve permanent neurotic complications, are induced by warnings, scares and threats of punishment, or disease resulting from masturbation. Once, the late Dr. Magnus Hirschfeld, pioneer of sexology reported the experience of a young girl who, despite threats and warnings, could not but continue to obey the irresistible impulse:

"... I did it when I was at home, and lying in bed. I do not remember whether I thought anything of it when I did it. I only know that it was quite dark and quiet. I was doubled up under the bed-clothes. When it was over I often cried to myself. I went to bed frightened and could not go to sleep without praying. My spiritual condition went from bad to worse, and I kept on promising myself never to do it again, until I finally comforted myself and went to sleep. I never kept my promise. It happened again, I do not know how long after, and I think not more frequently than once a month. A year ago, I gave it up as my mother caught me at it and gave me a lecture. So out of love for my mother, i gave it up until a little while before menstruation."

Then I felt such a tickling and itching that I did it again with great passion. Next morning I found that I was bleeding and had pains in the knees and the thighs and could not get up. I told my mother that I had done it again and that I was bleeding, for I thought this was a consequence of it, and cried bitterly. Mother comforted me and gave me a second talk. I was then thirteen years old."

The child inevitably reacts to this with a mixture of curiosity and horror. The curiosity springs from the natural impulse, the horror grows out of the automatic reflection that these forbidden and "indecent" practices were and are carried on by her own parents, and that in fact she owes her very existence to this baseness of which the parents also speak with stern distaste.

Sexual Curiosity

In the earlier years of sexual studies, some scientists without exception acknowledge that nearly 100 per cent of all men and women masturbated during this transition phase. This view is supported by statistical investigation we are quoting below statistics on the frequency of masturbation, as compiled by various senior sexologists (see Encyclopedia of Sexual Knowledge):

Dr. Marcuse (Munich) 93.9%

Dr. Deutsch (Budapest) 96.7%

Prof. Duck 90.8 %

Dr. Rohleder (Enquiry among students) 90.1%

Dr. Dukes (Enquiry among English students) 90-95%

Dr. Searley (Enquiry among American students) 85.3%

Dr. Hirschfeld (Berlin) 96%

Dr. Desider Hahn (Enquiry among workmen) 96%

Dr. Brockman (America) (Enquiry among theological students) 99.3 %

Dr. Young (America) : 100%

It is also no exaggeration to say that the first arrived period also inevitably constitutes a minor emotional hurt to the little girl who is kept in unnatural ignorance. A feeling of being unclean, self-disgust, is nearly always connected up with the bad conscience which sees bleeding as punishment for actual masturbation, and "dirty thoughts." Even at present, the young girl has sufficient knowledge to know that such direct casual connection does not exist, there is still some a vague conviction that bodily uncleanness is caused by spiritual impurity is generally maintained in the subconscious. The widespread frequency of this attitude and its effects contribute a great deal to the sexual misery especially in conservative or religious culture. The subject sex is often abstain in strict tradition families.

When a young girl questioned her mother about the origin of babies, she was told 'You don't need to know. Those are dirty things with which you must not stain the purity of your little soul,' etc. Anna had no idea that she herself, her mother and her little brothers owed their existence to those 'dirty things' the nature of which remained a mystery for her. Always closely chaperoned by her governess she never even had an opportunity to discuss the subject with her friends. One day, in the course of a gymnastic lesson, she noticed that climbing up a pole gave her 'a pleasant sensation'; then she found that she could induce the same sensation by pressing her legs tightly together. She would have mentioned it to her mother, but she vaguely suspected that her discovery was not unconnected with the 'dirty things.'

One day little Anna woke up and saw bloodstains on her sheets and nightgown. She immediately concluded that she had defiled herself with those dirty things, and fallen ill. God had punished her, and her mother would learn Anna was an abject being. She decided to die, and going to the kitchen, turned on the gas. She was rescued at the last moment, after she had already become unconscious."

"The terror of the uninitiated girl at the sight of this inexplicable haemorrhage is such that she frequently regards it as a punishment for having masturbated and harboured impure thoughts. She often sees no other solution than suicide. Dr. Stekel cites the case of little Anna.

Transformation

The beginning of menstruation (for some) came as a shock which may terminate the young girl's development to maturity. It forms a decisive turning-point in her life, as well as a definite symbol of puberty, the transition to sexual maturity. During puberty the genital glands start to work at full pressure, breasts and pelvis attain feminine roundness and fullness, the pubic hair begins to grow, the figure as a whole becomes feminine and more completed.

This almost physical transformation of the young girl is accompanied by emotional crisis. The appearance of menstruation and even before, the girl begins to take an interest in everything concerning love and romance... The normal girl falls in love, at this stage, with anyone and everyone, and frequently changes the object of her affection; now it is the teacher, man or woman, now the young or middle-aged man next door.

Love letters are exchanged and they arrange their first meeting. At this time even friendship assumes a tempestuous. The duration of the transition period varies from case to case, lasting from a few months to several years. Its outcome is the finished product, the sexually mature virgin.

From here the woman continues her development in a less turbulent manner. However, the foundations of her sexual attitude and sensitivity were laid in those decisive years of development up to puberty, and we have seen what brittle and inadequate foundations they are. Even more often they remain sub-conscious until years later, with marriage and sexual activity. The following will reveal how large a proportion of frigidity and other sexual disturbances in a woman.

The Mature Girl

We have seen that, long before the girl becomes sexually mature, desires of a vague and confused sort have sprung up, and promoted by the contradictory atmosphere with which sex is surrounded. By this we mean insistent reference to sex on the one hand (in the elements of culture), and rigid suppression of frankness and enlightenment on the part of society, parents, teachers and etc. Already the ground is prepared to make of sex a spicy, a forbidden subject instead of that easy spring which feeds refreshment and natural enjoyment.

Apart from her primary basic instinct, there is sex all around her, in the books she reads, the pictures she sees, theatre, cinema, song and dance, and now in the cyber. Sexual information came by directly and indirectly, sexual contact; mental and physical, she proceeds to guard and close up against this her body and mind. Because she blushes at as little as a prolonged handshake, because she must giggle at the slightest remark that may be interpreted as ambiguous, because at this point of awakening she is hypersensitive.

Where the girl physical constitution does not allow the physical body to stop growing and of the sexual instinct, sexual curiosity and unconscious sexual desire can be diverted by occupying time on the right interest. Example of swimming and plays tennis till she drops goes for long walks in the course of which her desires are deflected into an unnatural love of nature. Therefore a lofty interest is fostered and developed. Then there is also music that helps release themselves. The predominately erotic origin and character of modern jazz are commonly recognized. No wonder, then, that some sex-starved women are "mad" on music. No wonder either, that they swoon and have old-fashioned palpitations when listening to Beethoven, who was a great master of the art of delaying musical climax to the most tantalizing degree.

The intermediary stage between the relatively harmless and the less harmless release for the sex impulses is supplied by the modern industrialized form of platonic idol or film star worshipping. The dream and fantasy is as it were mass produced by the screen, the press, and advertising.

However, this trend already transgresses the harmless far more than one would suppose.

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Centered in a shadow image, the woman's desires by and by become too unreal for reality, concrete and tangible, ever to evince in her feeling and response. The Image stands guard with a fiery sword over the entrance to her soul, and with it, to her body, thus preventing her sensitiveness to the touch of reality. In the arms of her flesh and-blood lover, she will lack the capacity of giving herself, for all the time she will be thinking: "What would it have been like with --?" The real lover will always remain to her a substitute; an instrument, to put it crudely, for masturbation.

The longer the period of waiting and starvation of sexual desire, the longer ersatz-satisfaction is substituted and indulged in as a drug, the wider the gulf between imagination and reality will become. There are all too many of the type of woman in whom the repressive training has been only too "successful" by reason of, let us say, a sexually unhappy mother who dinned into the child's ear her martyrdom and the father's sex bestiality.

Grown up, the girl and woman will recoil from sexual contact completely, and let her days pass unfilled. It is after the menopause, when the normal woman's sex life is ended, that the "time of her life" sets in. Now she begins to mention at every possible opportunity the way men used to "go mad about her," whilst she, the pure would have none of them. Often a mysterious fiance will suddenly fill her conversation, the only man whom she, the much-desired, loved, but who unfortunately disappeared before his time, preferably through consumption; though sometimes he was stolen by another woman who ensnared him by means of the baser instincts.

With this we have arrived at the border line of pathological deflection. We have been able to survey step by step the consequences, of systematic sex suppression, from the harmless asexual type of sporting girl, to. The point of grave psychological disorder.

Period

Menstruation is the release of blood and endometrial tissue through the vagina that occurs as part of the normal menstrual cycle. Menstrual disorders may involve the absence of menses (amenorrhea), abnormal vaginal bleeding or other conditions related to menstruation example toxic shock syndrome.

A woman's menstrual history begins with her first period (menarche) and continues until menopause. It includes average cycle length, and common associated symptoms, such as menstrual cramps, ovulation pain, premenstrual syndrome (PMS) or premenstrual disorder.

Menstruation is understood an external haemorrhage from the sexual organs, is only the outward and visible sign of a highly complex process. Menstruation occurs at intervals of 25 days or four weeks and ceases after a varying number of days. The other and more important part of the menstrual cycle is not outwardly perceptible and consists in the release of an ovum from the ovary.

In a woman's life, she may experience temporary interruption of menstruation during pregnancy and nursing. It may also be affected by illness, nervous disorders or malnutrition.

Normally, menstruation occurs regularly throughout the period during which a woman is sexually mature, that is usually from about the fourteenth to the forty-ninth year. But there are exceptions. The periods often begin at twelve or even earlier at nine years of age, some as late as the twentieth year. The menstruation usually ceases in the fortieth or fiftieth year, uncommon instances in the thirtieth. There have been cases where some women continued with perfect regularity until the sixtieth year. It is understood, in normal, the earlier the appearance of menstruation the longer the capacity for child-bearing, and vice-versa.

Symptoms of Menstrual

There are factors that influence the date of the first menstruation. Menstrual period is strongly affected by poor diet or health, organs abnormality, climates and lifestyle habitual. Puberty is reached earlier in some southern countries than in northern ones, as is also the menopause. Before or during period, the female body will signal or carry some symptoms to sense the arrival of menstrual. For an example, contraction in the lower abdominal, a feeling of heaviness, constipation, swelling or pain in breasts, and sensitive nipples. Some complain of thirstiness and backache. There may be nervous symptoms, headaches, irritability, feverish etc. In short, women at that time feel "unwell." This feeling is usually relieved when the menstrual flow begins. However, often it remains throughout the menstruation period.

All these complaints are part and parcel of the natural process and there are few women who menstruate without discomfort and pain. But if these typical symptoms become intensified and constant in every period such as; violent spasmodic cramps and the pains become intolerable, if simple dislike to food turns nausea, or if slight nervousness becomes a real psychosis. Then it is no longer normal but a disturbance of menstruation which must be diagnosed and *treated.

*Menstrual pain can be very agonizing if not properly treated. Many girls and women gave up their studies, work or activities temporarily and seek medical leave for a day or two every month, some even spend two or three days in misery owing to menstrual pain.

In such cases a doctor should be consulted. Firstly, to find out the reason for the pain, in each individual case, only after the cause has been accurately diagnosed is it possible to make a successful attempt to cure it. There are many cases where the pain is due to incomplete development of the uterus (twisted uterus) associated with the presence of a curve in the organ. Instead of the blood flowing out freely, it is dammed back at the point where the curve or twist is, and the uterus has to make spasmodic contractions in order to force it past the obstruction. Hence, these contractions cause the pain.

There are many prescribed drugs for the relief of menstrual pain. Some are effective in the relief of menstrual pain but not advisable to take frequently.

This applies also to the cycle and duration of the flow. Take for instance the healthy woman as standard. If menstruation occurs irregularly or if it fails to occur at all, interruption or disturbance of the genital system may be presumed.

Menstrual Calendar

The duration of the menstrual cycle in four-weekly or three-weekly cycles. With these records, it is the easiest way to obtain data concerning menstruation and pregnancy. It was only when experiments with healthy women were made that the regularity of the menstrual cycle clearly emerged.

It was found that; 90% of women as a rule have a regular monthly cycle lasting twenty-eight days. 97% of cases the duration of the menstrual cycle were always regular. 22% of these women menstruated punctually every twenty eight days while 39% every thirty days, and 11% every thirty-two days. That makes a total of 72% proportion of women in whom menstruation was most regular. The remaining menstruated at shorter or longer intervals, but these intervals recurred quite regularly. Only in 3% of the selected healthy women was there a considerable irregularity.

It is a characteristic fact that the great majority of women whom themselves are unaware how long their menstrual cycle lasts. Many women, if asked, say they have a regular twenty-eight day cycle, but if they are observed for several months it is found that the cycle lasts either twenty-seven or twenty-nine days, or even alternately twenty-seven, twenty-eight or thirty days. Some experience shorter cycle of twenty to twenty five days.

Tracking menses

First draw a simple table with vertical column and indicate January to December, and draw horizontally 30 columns and indicate 1-30 as days. The duration of the actual menstruation is of no importance. Mark the date of commencement of the following menstruation in the particular column and do so for the next month. Now, count the days that have elapsed between the commencement of the first and second menstruations (including the first day of the first period, but not the first day of the second menstruation).

If the result is the same for a whole year, in such a case, a woman has a regular menstrual cycle and therefore a so-called "simple menstrual cycle," that is to say, one which always lasts exactly the same number of days. A "simple menstrual cycle" may also last twenty-seven, twenty-eight, twenty-nine, thirty-one days, etc.; the important thing is that it should always last an equal number of days.

But if the duration of the menstrual cycle is, for instance, one month twenty-seven days and the next thirty days, it is no longer a simple, but a so-called "double menstrual cycle."

Finally, it may happen that a woman has on one occasion a twenty-seven-day cycle, on the second occasion a twenty-eight day cycle, and on the third occasion a thirty-day cycle. This is called a "triple menstrual cycle."

Tracking ovulation

Take for example a woman that has a simple menstrual cycle of thirty days. She knows that, for

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instance, her menstruation begins on May 1st, it will end on the 30th of that month. Now, if she counts fifteen days backwards from May 30th, she will know that her ovulation takes place on May 16th. She is also able to tell in advance that her next menstrual cycle will end on June 29th, and if she again deducts fifteen days (always including the last day of the menstrual cycle) she can establish in advance that her ovulation during that cycle will take place on June 15th. Thus women with simple menstrual cycles are able to calculate their ovulation dates far ahead. A calendar made up in this manner is what we call an Ovulation Calendar.

The matter is somewhat more complicated in the case of women with double or multiple menstrual cycles. Here is a practical example: This woman first menstruated since beginning the calendar on March 1st, and her next menstruation began on the 28th of that month, so that on this occasion she had a twenty-seven day cycle. Deducting fifteen days, her ovulation must have taken place on March 13th. The third menstruation began on April 29th, so that this cycle lasted thirty-two days, and going back for fifteen days, we find that ovulation must have occurred on April 14th. The fourth menstruation began on May 29th, i.e., thirty days after the previous menstruation on April 29th, so that this time her cycle was thirty days and, deducting fifteen days from the last day of her cycle, i.e., from May 28th, her ovulation during this cycle must have occurred on May 14th.

Now, this woman, according to her menstrual calendar, sometimes had a twenty-seven-day cycle, and sometimes a thirty or thirty-two-day cycle. In this case it is not easy to fix the day of ovulation, as the woman cannot know in advance whether her current menstrual cycle will last twenty-seven, thirty or thirty-two days. She only knows that she ovulates fifteen days earlier than the last day of her cycle, but she cannot determine the date of that fifteenth day.

It will be seen that a woman with a double or multiple menstrual cycle can never determine the exact day of her ovulation. However, there is no reason for her to despair. She knows that the maximum duration of her cycle is, say, thirty-two days, and also that the minimum duration is twenty-seven days, having kept her menstrual calendar for a whole year. If she wishes to calculate the date of her next ovulation, she will reason it out as follows: My last menstruation began on May 29th.

If my next cycle is of the minimum duration, i.e., twenty-seven days, then my next menstruation must begin on June 25th, in which case the ovulation would fall on June 10th. If, however, the next cycle happens to be of the maximum duration, i.e., thirty-two days, then my next menstruation will fall on June 30th, and ovulation on June 15th. And if the cycle is one of thirty days, my next menstruation will fall on June 28th and ovulation on the 13th. I am able to establish from this that whatever the duration of my next cycle is going to be, ovulation cannot take place either before June 10th or after the 15th, therefore it falls between those two dates.

It will be seen from the above that a woman with a simple menstrual cycle can calculate the exact date of ovulation, while a woman with a double or multiple menstrual cycle can only calculate the exact period of days during which ovulation must take place, and she can do this with all the greater care, the shorter the difference is between the maximum and minimum

duration of her cycle.

Influences of Period

A few days before the period starts, and even later at the time of the flow, some girls find themselves in an abnormal condition like lowered resistance and a decrease of physical capacity. They also tend to manifest various nervous and mental anomalies, loss of self-control and emotional intensity being the cause of many of the offences committed during that time.

This mental breakdown, which easily degenerates into depression, may lead to suicides. And since emotional feelings are greatly intensified at that time, it is easy to understand that the young girl at the time of her first menses needs especially attention and affectionate care, it is not without reason that a young girl may demand to be excused at that time from her studies or activities.

There was a movement in America years back which demands twelve months' complete holiday at this critical period. The young girl is to spend the year in the country and receive special tuition, so that her studies are not interrupted. Seemingly, these demands hardly permit the realization of such ideals. Only a few parents could afford the expense that is required.

Nevertheless, it is strongly advisable that parents pay more attention, particularly to their young daughter's physical health when she reaches puberty. Especially if her menstruation is accompanied by disturbance. Menstrual irregularities and disorder behaviours may take a cruel revenge if their importance is not recognized and ignored.

A break in menstruation occurs in normal healthy sexed women and in during normal pregnancy. Such a disturbance sometimes takes place as a form of a fake pregnancy but after a physical examination has convinced the woman of her mistake, menstruation soon resumes its normal course. It may also occur as a result of a serious psychological disturbance, but that is extremely rare. In cases where the period is missed for a month only, it could be due to some stress, didn't eat properly or trouble sleeping, or an inaccurate record of the date.

The interruption of menstruation without pregnancy was common in both married and single women. Some period appeared without definite symptoms and passed over without any special disturbances that lasted for weeks and to the extreme even to months, especially towards menopausal.

The menstrual process can be greatly influence by poor diet or health and various other conditions, supposing due to the hectic life, stress, sexual or mental disturbance. However, the disturbance in the genital organs was the consequence of under-nourishment. The ovaries suffered a certain degree of degeneration caused by the breaking up of the graafian follicles, followed later by shrinking of the uterus. Hence, the arrest of function of the internal genital organs, and amenorrhea (no period). In order to expect the period resumed its normal functions, a change of general diet with a better supply of proteins, fats and vitamins, will help

menstruation reappear.

Menstruation affects not only the genital organs but the entire body. Most women feel 'unwell' when their period arrives and too weak to do anything strenuous are therefore strongly urged to rest. All unnecessary strain, physical and mental, even tiring social engagements, are avoided during that time.

During menstruation, the breasts engorged and pain, are more sensitive, so all constriction of tight bras and corsets are advisable to avoid. The abdomen as well as the breasts must be free from all pressure to prevent injury to the external and internal organs. Constriction of the congested intestines and genital area can obstruct the normal course of the menstruation. It is also advisable to detox the intestines one or two days before the flow. This will also have the advantage of stimulating the frequently sluggish bowels.

For nourishment concern, starchy and strongly spiced foods, liquids which tend to increase blood pressure, like red wine and strong coffee should be avoided during that time.

Feminine Hygiene

Menstrual hygiene is of great importance to a woman's health. The most important is careful personal cleanliness. In some Asian countries, the old superstition that the vagina must not be washed is a hygienic heresy. Fortunately, with the creation of sanitary pads to super absorption tampons (a pencil-shaped dressing, which is inserted into the vagina and is capable of absorbing a considerable amount of menstrual discharge) and feminine wash to ensure vaginal cleanliness.

Sanitary Pads

The use of these pads, have the disadvantage of frequently chafing the sensitive skin of the inner thighs and external vagina. While inserting tampons may be another solution but it needed some practice. The best-known, Tampax, was popular among women in the 80s and 90s. At initial, some people object to the use of tampons as though putting foreign body inside them but they fear most is it will involve dilation or destruction of the hymen or 'virginity'.

However, an increasingly large number of women are ceasing to any attached sentimental value of the hymen and there is no evidence of real "chastity." A woman's hymen may be widely dilated, or have even disappeared entirely, even though the fact that she has never indulged either in sexual intercourse and preserve her hymen quite intact, or involve in masturbation.

Tampons

Most tampons users wear it for longer than the advised hours and some absurd case, strings torn and a doctor assistance is needed to take it out, or simply forgotten to withdraw it out. Soon these tampons users were contracted with vaginal infections.

In fact, the more the menstrual discharge, the more often the user must change a new pad or tampon. If the discharge is very heavy, it may be necessary to wear a pad as well. Unlike pads, the use of the tampons prevents being 'feeling' so soaked with discharge as to cause discomfort.

In present times, some cultures and religion beliefs still considered a menstrual woman dirty or unclean. And yet, when one considers the careless habits (stains, leaks) of some women during menstruation, there would seem to be a certain justification for the old belief.

Feminine Wash

It is essential at that time that the genital parts should be washed daily with lukewarm water and soap, then dried and powdered, the latter as a protection against abrasion. The vagina may be douched daily with lukewarm water, and baths taken, but very hot or very cold baths should be avoided until after the flow has ceased. Last, panties may be changed as often as desired.

Ovaries, hormones, vagina

The female organ is our capacity to experience and enjoy love naturally. Playing the most important role in the reproductive system, feminine hormonal changes and natural sexual apparatus. The genital organs are described into small parts for easy understanding.

- ◆ Ovaries and hormone producer
- ◆ Ovum
- ◆ Vagina, hymen and virginity
- ◆ Clitoris

1. In the female reproductive system, the ovaries are the most important organs. The ovaries, of which there are two, are the female germinal glands. They are situated one on each side of the uterus, and are approximately almond-shaped. It has been found that each ovary contains about 30,000 ova or eggs. Ova (also called ovum or eggs) are produced in the ovaries. Ovaries are two small organs set in the pelvic cavity below and to either side of the navel. The ovaries also secrete, in cyclic manner, the hormones estrogen and progesterone (see menstruation).

2. The ovum is a globular cell which is enclosed in a tiny bladder known as the Graafian follicle. In it filled with a fluid. The follicles containing the ova are situated on the outer layer of the ovary. After an ovum matures, contractions arise in the ovary, which cause the follicle enveloping the ovum to burst, and shed its contents, together with the ovum, it passes into the uterine tube, or fallopian tube and into the abdomen.

An inner uterine layer of tissue, called the endometrium, undergoes cyclic changes as a result of the changing levels of the hormones secreted by the ovaries. The endometrium is thickest during the part of the menstrual cycle in which a *fertilized ovum would be expected to enter the uterus and is thinnest just after menstruation. If no fertilized egg is present toward the end of the cycle, the thickened endometrium degenerates and sloughs off and menstruation occurs; if a fertilized egg is present it becomes embedded in the endometrium about a week after fertilization. The developing embryo produces trophoblastic cells and these, along with cells from the endometrium, form the placenta, the organ in which gas, food, and waste exchange between mother and embryo takes place. The embryo also forms the amniotic sac within which it develops.

*If sperm are present as a result of sexual intercourse or artificial insemination, fertilization occurs within the tube. The ovum, either fertilized or unfertilized, then passes down the fallopian tube and into the womb or uterus, a pear-shaped organ specialized for development of a fertilized egg. These cyclic changes take place every four weeks, or in general, a few days earlier or later.

3. The vagina is a passage connecting the uterus at the lower end, called the cervix, with the external genitals into the vagina. It is to receive the penis and the sperm ejaculated from it during sexual intercourse. It also serves as an exit passageway (known as vaginal vault) for menstrual blood and for the baby during birth. The external genitals, or vulva, include the clitoris, erectile tissue that responds to sexual stimulation, and the labia, which are composed of elongated folds of skin. At its entrance, the vaginal canal is closed by a thin membrane, known as the *hymen. A vagina that has not experience the penetration of penis, sexual intercourse and where the entrance of vagina is intact are often called as *virgin. The hymen is not so elastic and its diameter is smaller than further up in the vagina. The length of the vagina ranges between 6 and 16 centimetres depending on the position of the uterus.

The vagina also produces secretion from the mucous membrane, a thick and sticky white mucous containing acid. (The white colour is acquired from cells shed by the vagina.)The secretion may frequently increase to a highly inconvenient flow known as leucorrhoea or "the whites." Coincidentally, it also serves as a natural lubricant during intercourse.

*The hymen is a membrane which completely or partially occludes the vaginal opening in human females, and because sexual activity or rough penetration would usually puncture this membrane. However, the hymen is a poor indicator of actual virginity. Most women break theirs through masturbation, tampon use, or non-sexual activity before having sexual intercourse. Also, some females with intact hymens have had sexual intercourse. On the contrary, among some primitive peoples, virginity is an object of contempt.

Among more civilized people, a woman's chastity in woman is considered a primary virtue, and a man has the right to demand that his fiancée be pure. This was the case with the Egyptians, the Hebrews, the Arabs and the Greeks. The man had the right to send the young woman back to her parents if he discovered that she was not a virgin. She was then publicly tortured to death. In Egypt, it was customary among the Arabs and Copts for a matron, or even the fiancée himself, before the marriage and in the presence of witnesses, to introduce the forefinger wrapped in linen into the girl's vagina in order to obtain proof of her virginity by the appearance of blood.

The prestige of virginity, therefore, is merely a social phenomenon consequent on the development of civilization. If we were to discuss the problem of pre-nuptial continence, to question whether or not sexual intercourse is desirable before the legal marriage, we should be departing from the purely scientific stand point which guides us in this work, and taking our stand on the uncertain ground of social controversy.

However, that is not our intention. While taking up a purely biological point of view, we must

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nevertheless stress the fact that, according to the statistics of several specialists, psychological and physiological disorders of various kinds may be induced by prolonged continence. If, therefore, our social system prohibits sexual intercourse without the sanction of marriage, and at the same time places economic difficulties in the way of marriage, the conclusion is clear. We stumble here on to one of the failures of social system. So long as contradictions exist between biological exigencies and the demands of present day civilization, the solution of the problem will rest with the conscience of the individual, and depend on her sense of responsibility towards herself, her partner, and her children.

4. At the exterior of the vagina is the clitoris. It is situated at the point where the two small lips meet above the entrance of the vagina. Usually about two centimetres long, but only the tip, the so-called glans, projects, while the body of the clitoris is hidden. The clitoris serves to arouse voluptuous sensations in the woman, and is even more abundantly supplied with sensitive terminal nerves than the male glans. Also, like the penis, it has cavernous bodies which fill with blood when the adjacent mucous membrane is subjected to excitation. This causes the volume of the clitoris to increase to about three centimetres, and through this "erection" it comes into closer contact with the male member during the sexual act.

Between the vaginal canal and the small lips there is a pair of important glands, known as Bartholin's glands. To the right and left of the small lips are the large lips (labia majora) which are formed by two raised folds of skin, which contain adipose tissue. Their average height is two centimetres. In virgins the large lips lie close together, in older women they are more and more parted.

In the upward direction the large lips merge into a triangular fatty mound, which is covered with hair. Graaf, who discovered the follicle named after him, was of the opinion that the object of this mound, which is called mons veneris, is to prevent the pubic bones of the partners from knocking against each other during sexual intercourse.

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