Pre-Menstrual Syndrome (PMS)

What is PMS?

Premenstrual syndrome (PMS) is a term that refers to a group of physical and emotional symptoms that occur in a cyclic pattern during the second half of a woman's menstrual cycle and interfere with some aspects of her life. Mild PMS symptoms can affect up to 75% of women with regular menstrual cycles. The most common symptoms are bloating, fatigue, irritability, and anxiety. Other symptoms can include:

- Breast Tenderness
- Mood Swings
- Depression
- Food Cravings
- Increased appetite
- Feeling overly sensitive, crying easily
- Feelings of isolation
- Headache
- Forgetfulness
- Gastrointestinal upset
- Poor Concentration
- Hot Flashes
- Dizziness

What is PMDD?

Premenstrual Dysphoric Disorder (PMDD) is a severe form of PMS. PMDD symptoms are severe enough to interfere with a woman's daily life and activities. PMDD can also negatively impact relationships with family and friends. Approximately 3-8% of women have PMDD.

Women must have at least 5 or more symptoms and meet diagnostic criteria defined by the Diagnostic and Statistical Manual of Mental Disorders, 4th Editions (DSM-IV).

What causes PMS/PMDD?

The cause of PMS and PMDD is not clear but studies suggest that rising and falling estrogen and progesterone levels cause changes in brain chemicals including serotonin which affects mood. It is not clear why some women develop symptoms of PMS or PMDD and others do not. It may be that some women may be more sensitive to the hormonal fluctuations than others.

How is PMS diagnosed?

PMS is not diagnosed with a blood test but is assessed by keeping track of symptoms and when they occur during the menstrual cycle for at least 2 full cycles. Blood tests may be ordered to help rule out other disorders. A careful history will be taken about symptom timing, severity of symptoms and how long symptoms last with each cycle. Other problems like depression and anxiety have similar symptoms but are usually noticeable throughout the cycle.

How is PMS treated?

Some women with PMS will experience relief of symptoms with regular exercise and relaxation techniques to reduce anxiety, tension and fatigue. Vitamin and mineral supplements can also be helpful. These recommendations have few or no side effects. Calcium carbonate supplements of 600mg twice daily have been shown to reduce symptoms after 3 months in some women. Vitamin B6 (up to 100mg daily) may also have some benefit.

Maintaining a healthy diet, avoiding salt, caffeine, alcohol and nicotine will contribute to feeling better overall.
Prescription medications can be added as a second option. Selective serotonin reuptake inhibitors (SSRIs) are anti-depressant medications that have been proven to be very effective in reducing symptoms of PMS and PMDD. These medications may need to be taken every day or sometimes for the 2 weeks before the next period starts. SSRIs need to be taken for at least 2 menstrual cycles to decide if they are relieving symptoms.

Birth control pills may relieve symptoms of PMS/PMDD in some women but may worsen symptoms for others. Continuous use of birth control pills may prevent the cyclic hormonal changes that affect mood. One birth control pill (Yaz) has been approved for treatment of PMDD.

Other suggested treatments have been proven to provide no benefits. These include progesterone, diuretics, and other anti-depressant medications. Dietary supplements also proven to provide no benefit include evening primrose oil, ginko biloba and essential free fatty acids.

**What to Expect...**

You may see some relief in the first month but expect gradual improvement over 2-3 months. Because PMS/PMDD is an ongoing process, it takes time to regulate it. It is important to maintain commitment to lifestyle changes and give supplements or medication time to reduce symptoms.

**The following web sites may be helpful with additional information about PMS/PMDD:**
www.mayoclinic.com
www.healthywomen.org

**Suggested Readings:**

**No More Menstrual Cramps and Other Good News.**
Budoff, Penny Wise, MD

**Self Help for Premenstrual Syndrome.**
Harrison, Michelle, MD
P.O. Box 740, Cambridge, MA, 02238:

**Premenstrual Syndrome Self-Help Book.**
Lark, Susan, M.D.
Celestial Arts, 1984.

**Every Woman’s Body.**
Korte, Diana