

Premenstrual SYNDROME



PREMENSTRUAL SYNDROME

Premenstrual syndrome (PMS), also known as premenstrual tension (PMT) or premenstrual dysphoric disorder (PMDD), is the term used to describe some of the physical and emotional changes which occur before the period. These changes can occur a few days to more than a week before the beginning of the period and usually resolve when the period starts. It is caused by the usual hormonal changes of the menstrual cycle, which can result in wide range of symptoms which some women find unpleasant and distressing.

Hormonal changes vary from woman to woman and from month to month. Most women experience some emotional and physical changes during the cycle, but for women with PMS these changes are particularly noticeable.

Sometimes women develop PMS symptoms as they get older. This is called premenopausal PMS and the symptoms are often indistinguishable from the symptoms of menopause.

SYMPTOMS

Symptoms include:

- a bloated feeling in the abdomen
- food cravings, usually chocolate or carbohydrate
- headaches
- migraines
- sleeplessness
- tiredness
- skin problems
- difficulty in concentrating
- decreased efficiency
- changes in sexual interest
- tension
- anxiety
- mood swings including depression, irritability and anger.

Some women suffer many of these symptoms some only a few. In some women the symptoms are mainly physical and in others emotional symptoms are the most prominent. If your symptoms begin every month before your period then you may have PMS. You can keep a diary for three to six months so you can see if there is a pattern.

COPING WITH PMS

Your general health will affect how you cope with PMS. For optimum health you need to eat well, control fluid retention, exercise and learn ways to handle stress and anxiety.

Diet

A balanced diet supplies vitamins and minerals necessary for good health. Though vitamin and other diet supplements are used by some women to help control premenstrual symptoms, their efficiency and safety are not necessarily supported by formal medical research.

Avoiding caffeine, alcohol, chocolate and tobacco is definitely recommended. Eating small frequent meals and avoiding foods which are high in sugar is often helpful. If fluid retention is a particular problem, decreasing salt in your diet will help with this.

Don't forget that heavy periods can lead to iron deficiency and result in anaemia or excessive tiredness this can make PMS more difficult to cope with. Make sure your diet includes iron-rich foods such as liver, meat, seafood, dried fruits, wholegrain cereals, egg yolk and dried peas, beans and lentils. If you think you are deficient in iron, see a doctor. You may need iron supplements.

Nutritional Supplements

Calcium supplements have been shown to be effective in PMS. Extra calcium may help symptoms, especially if your diet is low in foods containing calcium.

Exercise

Women who exercise regularly report fewer headaches, less premenstrual irritability and less period pain. Studies have shown that regular exercise that increases your heart rate is beneficial for premenstrual symptoms. Choose any activity you enjoy, such as swimming, cycling, dancing, aerobics, yoga or walking.

Handling Stress

Stress and anxiety are known to make PMS symptoms worse. Such stresses include family, financial and sexual problems; pressures of school, work or retirement; boredom or loneliness; and health worries. It's important to:

- balance your family, work and personal responsibilities
- put time aside each week for something you really enjoy
- talk over your worries with your family, friends, doctor or other counsellor
- share household tasks
- don't commit yourself to more than you can handle comfortably, especially in the premenstrual week
- relaxation and meditation exercises may help.

TREATMENT

When the simple measures outlined above are not enough to control symptoms, medications may help.

Oral contraceptive pill

For some women this is an effective treatment. It eliminates the 'ups and downs' of the menstrual cycle which can lead to PMS. In the past, progesterone has been advocated for PMS however several clinical trials have shown no benefit.

Oestrogen

As a woman gets older the symptoms of PMS may become worse and may begin to blend in with the symptoms of menopause, such as hot flushes. This usually a sign of the beginning of the menopause. In this situation hormone replacement therapy containing oestrogen is an effective treatment.

Antidepressant medication

When PMS symptoms, such as moodiness and depression, are particularly severe and unresponsive to simple measures, your doctor may consider using antidepressant medication. These have been shown in many clinical trials to be effective even when taken only in the premenstrual week. You should discuss this with your doctor.

PMS and other illnesses

Many women with other medical problems, including depression, arthritis, asthma and many other unrelated diseases find that the symptoms of these diseases are worse in the premenstrual phase. This is quite common and is not strictly PMS but an effect of changes in female hormones on the other diseases. Discuss this with your doctor.

Further information and assistance

Your nearest Women's Health Centre

Rosalie Gollan Centre for Women's Health

Sir Charles Gairdner Hospital
Telephone: (08) 9346 4014

Women's Health Care House

(Northbridge)
Telephone: (08) 9227 8122
(Appointment required)

Family Planning Association of Western Australia (Inc.)

Telephone: (08) 9227 6177

Quarry Health Centre

(Fremantle)
Telephone: (08) 9430 4544

HealthDirect

Freecall: 1800 022 222

Other brochures within the
Women's Health Information Series include:

Pelvic Floor Muscle Exercises
Menopause
Osteoporosis
Postnatal Anxiety, Stress and Depression
Sexuality After Your Baby
Physiotherapy Before and After Childbirth

To order any of the resources
contact **HealthInfo** on
1300 135 030

Produced by Population Health Division.
March 2002



Department of Health
Government of Western Australia