

 M.I.N.D

PMDD



Premenstrual Dysphoric Disorder (PMDD)

Introduction

Premenstrual dysphoric disorder, or PMDD, is a severe form of premenstrual syndrome (PMS). The symptoms of PMDD are similar to those of PMS, but are severe enough to interfere with work, social activities, and relationships.

Overview and Facts

PMDD occurs in 2-10% of menstruating women. Women with a personal or family history of depression or postpartum depression are at greater risk for developing PMDD.

Symptoms

The symptoms of PMDD can include any of the following:

- Mood swings
- Depressed mood or feelings of hopelessness
- Marked anger, increased interpersonal conflicts
- Tension and anxiety
- Irritability
- Decreased interest in usual activities
- Difficulty concentrating
- Fatigue
- Change in appetite
- Feeling out of control or overwhelmed
- Sleep problems
- Physical problems, such as bloating

Causes and Risk Factors

As with PMS, the exact cause of PMDD is not known. Most researchers, however, believe PMDD is brought about by the hormonal changes related to the menstrual cycle.

Recent studies have shown a connection between PMDD and low levels of serotonin, a chemical in the brain that helps transmit nerve signals. Certain brain cells that use serotonin as a messenger are involved in controlling mood, attention, sleep and pain. Therefore, chronic changes in serotonin levels can lead to PMDD symptoms.

Tests and Diagnosis

If you have any of the above listed symptoms, you should see your doctor. He or she will review your symptoms and medical history and give you a thorough medical examination. Psychiatric evaluation may also be included.

Before a doctor makes a diagnosis of PMDD, he or she will rule out other emotional problems, such as depression or panic disorder, as the cause of the symptoms. In addition, underlying medical or gynecological conditions, such as endometriosis, fibroids, menopause, and hormonal problems that could account for symptoms, also must be ruled out.

PMDD is diagnosed when at least five of the above listed symptoms (including at least one of the first four) occur for most of the time during the 7 days before menstruation and go away within a few days of the start of the menstrual period. If these symptoms are present every day and do not improve with menstruation, they are unlikely due to PMDD.

Treatment

Many of the same strategies used to treat PMS may also be helpful in relieving symptoms of PMDD. The four main forms of treatment are:

- **Good nutrition:** Many health experts recommend that women with PMDD limit their intake of salt, caffeine, refined sugar and alcohol. Supplements, such as calcium, vitamin B6, vitamin E and magnesium may be recommended. The effectiveness of any of these approaches hasn't been well established.
- **Exercise:** Regular aerobic exercise such as walking or swimming appears to improve premenstrual symptoms. It's unclear whether it can treat PMDD.
- **Medications:** Several antidepressants may be used to treat PMDD. These medicines can be taken continuously or intermittently, just during the 14-day premenstrual period. Taking them intermittently may decrease the side effects of these drugs. Some over-the-counter pain relievers such as aspirin, ibuprofen and naproxen may help some symptoms such as headache, breast tenderness, backache and cramping. Diuretics, or water pills can help with fluid retention and bloating.

If anxiety is a component of the symptoms, an anti-anxiety medication may be recommended. Currently, none are approved to treat PMDD.

Hormones can be used to treat PMDD. Ovulation can be stopped either using medication or surgically (as a last resort). Medicines used to stop ovulation include birth control pills. The second hormonal approach to treat PMDD is the use of progesterone or estrogen to relieve symptoms. It's unclear whether this approach is effective.

- **Counseling:** Therapy to help women with PMDD develop effective coping strategies may help some with PMDD. Relaxation therapy, meditation, reflexology and yoga may also help, but these approaches have not been widely studied.

Sources

www.webmd.com