



WomensHealth.gov

1-800-994-9662

TDD: 1-888-220-5446

# Premenstrual Syndrome

**Q: What is premenstrual syndrome (PMS)?**

**A:** Premenstrual syndrome (PMS) is a group of symptoms related to the menstrual cycle. PMS symptoms occur in the week or two weeks before your period (menstruation or monthly bleeding). The symptoms usually go away after your period starts. PMS may interfere with your normal activities at home, school, or work. Menopause, when monthly periods stop, brings an end to PMS.

The causes of PMS are not yet clear. Some women may be more sensitive than others to changing hormone levels during the menstrual cycle. Stress does not seem to cause PMS, but may make it worse. PMS can affect menstruating women of any age.

PMS often includes both physical and emotional symptoms. Diagnosis of PMS is usually based on your symptoms, when they occur, and how much they affect your life.

**Q: What are the symptoms of PMS?**

**A:** PMS often includes both physical and emotional symptoms. Common symptoms are:

- breast swelling and tenderness
- fatigue and trouble sleeping
- upset stomach, bloating, constipation or diarrhea

- headache
- appetite changes or food cravings
- joint or muscle pain
- tension, irritability, mood swings, or crying spells
- anxiety or depression
- trouble concentrating or remembering.

Symptoms vary from one woman to another. If you think you have PMS, try keeping track of your symptoms for several menstrual cycles. You can use a calendar to note which symptoms you are having on which days of your cycle, and how bad the symptoms are. If you seek medical care for your PMS, having this kind of record is helpful.

**Q: How common is PMS?**

**A:** Estimates of the percentage of women affected by PMS vary widely. According to the American College of Obstetricians and Gynecologists, up to 40 percent of menstruating women report some symptoms of PMS. Most of these women have symptoms that are fairly mild and do not need treatment. Some women (perhaps five to ten percent of menstruating women) have a more severe form of PMS.

**Q: What treatment is available for PMS?**

**A:** Many treatments have been tried for easing the symptoms of PMS. However, no treatment has been found that works for everyone. A combination of lifestyle changes and other treatment may be needed. If your PMS is not so bad that you need medical help, a healthier lifestyle may help you feel better and cope with symptoms.



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- Adopt a healthier way of life. Exercise regularly, get enough sleep, choose healthy foods, don't smoke, and find ways to manage stress in your life.
- Try avoiding excess salt, sugary foods, caffeine, and alcohol, especially when you are having PMS symptoms.
- Be sure that you are getting enough vitamins and minerals. Take a multi-vitamin every day that includes 400 micrograms of folic acid. A calcium supplement with vitamin D can help keep bones strong and may help with PMS symptoms.
- In more severe cases, drugs such as diuretics, ibuprofen, birth control pills, or antidepressants may be used.

Although PMS does not seem to be related to abnormal hormone levels, some women respond to hormonal treatment. For example, one approach has been to use drugs such as birth control pills to stop ovulation from occurring. There is evidence that a brain chemical, serotonin, plays a role in severe forms of PMS. Antidepressants that alter serotonin in the body have

been shown to help many women with severe PMS.

**Q: What is Premenstrual Dysphoric Disorder (PMDD)?**

**A:** PMDD is a severe, disabling form of PMS. In PMDD, the main symptoms are mood disorders such as depression, anxiety, tension, and persistent anger or irritability. These severe symptoms lead to problems with relationships and carrying out normal activities. Women with PMDD usually also have physical symptoms, such as headache, joint and muscle pain, lack of energy, bloating and breast tenderness. According to the American Psychiatric Association, a woman must have at least five of the typical symptoms to be diagnosed with PMDD. The symptoms must occur during the two weeks before her period and go away when bleeding begins.

Research has shown that antidepressants called selective serotonin reuptake inhibitors (SSRIs) can help many women with PMDD. The Food and Drug Administration (FDA) has approved two such medications to date for treatment of PMDD - sertraline (Zoloft) and fluoxetine (Sarafem). ■



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### *For More Information...*

To learn more about premenstrual syndrome, contact the National Women's Health Information Center (NWHIC) at 1-800-994-9662 or the following organizations:

**National Institute of Mental Health**

Phone Number(s): (301) 443-4513

Internet Address:

<http://www.nimh.nih.gov/>

**American Psychiatric Association**

Phone Number(s): (202) 682-6000

Internet Address: <http://www.psych.org/>

**American College of Obstetricians  
and Gynecologists (ACOG) Resource  
Center**

Phone Number(s): (202) 863-2518

Internet Address: <http://www.acog.org/>

**The Hormone Foundation**

Phone Number(s): (800) 467-6663

Internet Address:

<http://www.hormone.org/>

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This FAQ has been reviewed by Victoria Hendrick, M.D. of the University of California, Los Angeles

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