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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 linked 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 can affect menstruating women of any age. It is also different for each woman. PMS may be just a monthly bother or it may be so severe that it makes it hard to even get through the day. Monthly periods stop during menopause, bringing an end to PMS.

Q: What causes PMS?

A: The causes of PMS are not clear. It is linked to the changing hormones during the menstrual cycle. Some women may be affected more than others by changing hormone levels during the menstrual cycle. Stress and emotional problems do not seem to cause PMS, but they may make it worse.

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:

- acne
- breast swelling and tenderness
- feeling tired
- having trouble sleeping
- upset stomach, bloating, constipation, or diarrhea
- headache or backache
- appetite changes or food cravings
- joint or muscle pain
- trouble concentrating or remembering
- tension, irritability, mood swings, or crying spells
- anxiety or depression

Symptoms vary from one woman to another. If you think you have PMS, keep track of which symptoms you have and how severe they are for a few months. You can use a calendar to write down the symptoms you have each day or you can use a form to track your symptoms. If you go to the doctor for your PMS, take the form at the end of this FAQ with you.

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, at least 85 percent of menstruating women have at least one PMS symptom as part of their monthly cycle. Most of these women have symptoms that are fairly mild and do not need treatment. Some women (about three to eight percent of menstruating women) have a more severe form of PMS, called Premenstrual Dysphoric Disorder



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(PMDD). See the question, “What is Premenstrual Dysphoric Disorder (PMDD)?” below for more information.

PMS occurs more often in women who:

- are between their late 20s and early 40s
- have at least one child
- have a family history of depression
- have a past medical history of either postpartum depression or a mood disorder

Q: What is the treatment for PMS?

A: Many things have been tried to ease the symptoms of PMS. No treatment works for every woman, so you may need to try different ones to see what works. If your PMS is not so bad that you need to see a doctor, some life-style changes may help you feel better. Below are some lifestyle changes that may help ease your symptoms.

- Take a multivitamin every day that includes 400 micrograms of folic acid. A calcium supplement with vitamin D can help keep bones strong and may help ease some PMS symptoms.

Amounts of Calcium You Need Each Day

Ages	Milligrams per day
9-18	1300
19-50	1000
51 and older	1200

Pregnant or nursing women need the same amount of calcium as other women of the same age.

- Exercise regularly.
- Eat healthy foods, including fruits, vegetables, and whole grains.
- Avoid salt, sugary foods, caffeine, and alcohol, especially when you are having PMS symptoms.
- Get enough sleep. Try to get 8 hours of sleep each night.
- Find healthy ways to cope with stress. Talk to your friends, exercise, or write in a journal.
- Don't smoke.

Over-the-counter pain relievers such as ibuprofen, aspirin, or naproxen may help ease cramps, headaches, backaches, and breast tenderness.

In more severe cases of PMS, prescription medicines may be used to ease symptoms. One approach has been to use drugs such as birth control pills to stop ovulation from occurring. Women on the pill report fewer PMS symptoms, such as cramps and headaches, as well as lighter periods.

Q: What is Premenstrual Dysphoric Disorder (PMDD)?

A: There is evidence that a brain chemical called serotonin plays a role in a severe form of PMS, called Premenstrual Dysphoric Disorder (PMDD). The main symptoms, which can be disabling, include:

- feelings of sadness or despair, or possibly suicidal thoughts
- feelings of tension or anxiety
- panic attacks
- mood swings, crying
- lasting irritability or anger that



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- affects other people
- disinterest in daily activities and relationships
 - trouble thinking or focusing
 - tiredness or low energy
 - food cravings or binge eating
 - having trouble sleeping
 - feeling out of control
 - physical symptoms, such as bloating, breast tenderness, headaches, and joint or muscle pain

You must have five or more of these symptoms to be diagnosed with PMDD. Symptoms occur during the week before your period and go away after bleeding starts.

Making some lifestyle changes may help ease PMDD symptoms. See the question, "What is the treatment for PMS?" above for more information.

Antidepressants called selective serotonin reuptake inhibitors (SSRIs) that change serotonin levels in the brain have also been shown to help some women with PMDD. The Food and Drug Administration has approved three medications for the treatment of PMDD:

- sertraline (Zoloft®)
- fluoxetine (Sarafem®)
- paroxetine HCl (Paxil CR®)

Individual counseling, group counseling, and stress management may also help relieve symptoms. ■



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For More Information...

For more information about premenstrual syndrome, call womenshealth.gov at 1-800-994-9662 or contact the following organizations:

**National Institute of Mental Health
(NIMH), NIH, HHS**

Phone Number: (866) 615-NIMH (6464)

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

gov

The Hormone Foundation

Phone Number: (800) 467-6663

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

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

Phone Number: (800) 762-2264

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

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