

FAQs

Premenstual Syndrome (PMS)

Frequently Asked Questions

What is premenstrual syndrome (PMS)?

Many women feel physical or mood changes during the days before menstruation. When these symptoms happen month after month, and they affect a woman's normal life, they are known as premenstrual syndrome (PMS).

What are some common symptoms of PMS?

Emotional symptoms include

- depression
- angry outbursts
- irritability
- crying spells
- anxiety
- confusion
- social withdrawal
- poor concentration
- insomnia
- increased nap taking
- · changes in sexual desire

Physical symptoms include

- thirst and appetite changes (food cravings)
- breast tenderness
- bloating and weight gain
- headache
- swelling of the hands or feet
- aches and pains
- fatigue
- skin problems
- gastrointestinal symptoms
- abdominal pain

How is PMS diagnosed?

To diagnose PMS, an obstetrician-gynecologist (ob-gyn) must confirm a pattern of symptoms. A woman's symptoms must

- be present in the 5 days before a period for at least three menstrual cycles in a row
- · end within 4 days after a period starts
- interfere with some normal activities

Keeping a record of your symptoms can help your ob-gyn understand if you have PMS. Each day for at least 2 to 3 months, write down and rate any symptoms you feel. Record the dates of your periods as well.

Can other conditions mimic PMS?

Symptoms of other conditions can mimic PMS or overlap with PMS. Some of these conditions include

- depression
- anxiety
- perimenopause
- chronic fatigue syndrome
- irritable bowel syndrome (IBS)

thyroid disease

Depression and anxiety disorders are the most common conditions that overlap with PMS. About half of women seeking treatment for PMS have one of these disorders.

The symptoms of depression and anxiety are much like the emotional symptoms of PMS. But women with depression often have symptoms that are present all month long. These symptoms may worsen before or during their periods.

Your ob-gyn will want to find out whether you have one of these conditions if you are having PMS symptoms.

Can PMS make other conditions worse?

In addition to depression and anxiety, symptoms of other disorders can get worse right before your period. Examples include seizure disorders, migraines, asthma, and allergies.

What is premenstrual dysphoric disorder?

If PMS symptoms are severe and cause problems with work or personal relationships, you may have premenstrual dysphoric disorder (PMDD). PMDD is a severe type of PMS that affects a small percentage of women. Drugs called selective serotonin reuptake inhibitors (SSRIs) can help treat PMDD in some women. These drugs are used to treat depression.

Can PMS be treated?

If your symptoms are mild to moderate, they often can be relieved by changes in lifestyle or diet. If your PMS symptoms begin to interfere with your life, you may decide to seek medical treatment. Treatment will depend on how severe your symptoms are. In more severe cases, your ob-gyn may recommend medication.

Can exercise help lessen PMS symptoms?

For many women, regular aerobic exercise lessens PMS symptoms. It may reduce fatigue and depression. Aerobic exercise, which includes brisk walking, running, cycling, and swimming, increases your heart rate and lung function. Exercise regularly, not just during the days that you have symptoms. A good goal is at least 30 minutes of exercise most days of the week.

What relaxation methods can help relieve PMS symptoms?

Finding ways to relax and reduce stress can help women who have PMS. Your ob-gyn might suggest relaxation therapy to help lessen PMS symptoms. Relaxation therapy may include breathing exercises, meditation, and yoga. Massage therapy is another form of relaxation therapy that you may want to try. Some women find therapies like biofeedback and self-hypnosis to be helpful.

Getting enough sleep is important. Regular sleeping habits—in which you wake up and go to sleep at the same times every day, including weekends—may help lessen moodiness and fatigue.

What dietary changes can be made to help relieve PMS symptoms?

Simple changes in your diet may help relieve the symptoms of PMS:

- Eat a diet rich in complex carbohydrates. A complex carbohydrate-rich diet may reduce mood symptoms and food cravings. Complex carbohydrates are found in foods made with whole grains, like whole wheat bread, pasta, and cereals. Other examples are barley, brown rice, beans, and lentils.
- Add calcium-rich foods, like yogurt and leafy green vegetables, to your diet.
- Reduce your intake of fat, salt, and sugar.
- Avoid caffeine and alcohol.
- Change your eating schedule. Eat six small meals a day rather than three large ones, or eat slightly less at your three meals and add three light snacks. Keeping your blood sugar level stable will help with symptoms.

Can dietary supplements help with PMS symptom relief?

Taking 1,200 milligrams (mg) of calcium a day can help reduce the physical and mood symptoms that are part of PMS. Taking magnesium supplements may help reduce water retention ("bloating"), breast tenderness, and mood symptoms. One study has shown that vitamin E may help reduce symptoms of PMS.

There are many products that are advertised to help with PMS. Most of these products have either not been tested or have not been proved to be effective. It is important to talk with your ob-gyn before taking any PMS product or supplement. Taking excess amounts of them or taking them with some medications may be harmful.

What medications reduce PMS symptoms?

Drugs that prevent ovulation, such as hormonal birth control methods, may lessen physical symptoms. But not all may relieve the mood symptoms of PMS. It may be necessary to try more than one of these medications before finding one that works.

Antidepressants can be helpful in treating PMS in some women. These drugs can help lessen mood symptoms. They can be used 2 weeks before the onset of symptoms or throughout the menstrual cycle. There are many kinds of antidepressants. If one does not work for you, your ob-gyn may prescribe another.

If anxiety is a major PMS symptom for you, an antianxiety drug can be tried if other treatments do not seem to help. Antianxiety drugs are taken as needed when you have symptoms.

Nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen, can help reduce pain. Talk with your ob-gyn before taking NSAIDs. Long-term use of NSAIDs may cause stomach bleeding or ulcers.

Diuretics ("water pills") are drugs that help reduce fluid buildup. Your ob-gyn can prescribe a diuretic if water retention is a major symptom for you. Tell your ob-gyn what other drugs you are taking, especially NSAIDs. Using NSAIDs and diuretics at the same time may cause kidney problems.

Glossary

Antidepressants: Drugs that are used to treat depression.

Depression: Feeling of sadness for periods of at least 2 weeks.

Diuretics: Drugs or substances that increase the production of urine.

Irritable Bowel Syndrome (IBS): A digestive disorder that can cause gas, diarrhea, constipation, and belly pain.

Menstrual Cycles: The monthly process of changes that occur to prepare a woman's body for possible pregnancy. A menstrual cycle is defined as the first day of menstrual bleeding of one cycle to the first day of menstrual bleeding of the next cycle.

Menstruation: The monthly shedding of blood and tissue from the uterus that happens when a woman is not pregnant.

Nonsteroidal Anti-Inflammatory Drugs (NSAIDs): Drugs that relieve pain by reducing inflammation. Many types are available over the counter, including ibuprofen and naproxen.

Obstetrician—**Gynecologist (Ob-Gyn)**: A doctor with special training and education in women's health.

Ovulation: The time when an ovary releases an egg.

Perimenopause: The time period leading up to menopause.

Premenstrual Dysphoric Disorder (PMDD): A severe form of premenstrual syndrome (PMS) that interferes with a woman's daily life. Symptoms may include sharp mood swings, irritability, hopelessness, anxiety, problems concentrating, changes in appetite, sleep problems, and bloating.

Premenstrual Syndrome (PMS): A term used to describe a group of physical and behavioral changes that some women experience before their menstrual periods every month.

Seizure Disorders: Any condition that causes seizures, which cause changes in movement, consciousness, mood, or emotions. Epilepsy is one kind of seizure disorder.

Selective Serotonin Reuptake Inhibitors (SSRIs): A type of medication used to treat depression.

If you have further questions, contact your ob-gyn.

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