



References

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Premenstrual Dysphoric Disorder (PMDD)

FAQs

Essence Byrd



Premenstrual Dysphoric Disorder (PMDD) is a severe form of PMS where women experience a severe form of the emotional symptoms of PSM which include irritability, anger, anxiety, and labile mood.

Q: What are the common symptoms of PMDD?

A: Difficulty with interpersonal relationships, deterioration in functioning at school or work, abdominal bloating, decreased interest in usual activities, difficulty concentrating, overeating and marked changes in appetite, insomnia or hypersomnia, feeling of being out of control or overwhelmed,, marked lack of energy.

Q: How is PMDD diagnosed?

A: There aren't many diagnostic tests other than a physical examination, pelvic exam, and health history.

To diagnose PMDD, the following requirements must generally be satisfied:

You must experience five or more symptoms (see above) that start the week before your period and end a few days after it begins for most menstrual cycles over the course of a year.

The presence of symptoms must be connected to a serious problem. Or they have to interfere with your capacity to operate in professional, social, or other contexts.

There is no connection between the symptoms and any underlying medical problem.

Q: What causes PMDD?

A:PMDD's precise cause is unknown. It might be an abnormal response to the periodic changes in hormones that occur with each menstrual cycle. A serotonin deficit may result from the hormonal changes. Serotonin is a chemical that occurs naturally in the gut and brain. It narrows blood vessels, alters mood, and can have physical effects.

Q: What are the risks factors associated with PMDD?

A: Although PMDD can affect anyone, the following individuals may be more susceptible:

Cigarette smokers and those with lower level of education.

Those who have a history of depression, postpartum depression, or other mood disorders, either personally or through family.

Individuals who have a family history of PMDD or PMS.

Q: How can PMDD be treated?

A: Medications

- Hormone therapy: Drospirenone and estrogen
- Anxiolytics
- Antidepressants,
- Mood stabilizers

Nonpharmacological treatments:

- Acupuncture
- Relaxation techniques
- Light therapy
- Cognitive-behavioral therapy

Oral contraceptives

Diuretics

Q: How can PMDD be prevented?

A: The goal of treating PMDD is to prevent or minimize symptoms, and this may involve using:

- Nutritional supplements. Getting 1,200 mg of calcium a day might help lessen PMDD symptoms. L-tryptophan, magnesium, and vitamin B-6 may also be helpful; however, before taking any supplements, consult your doctor.
- Natural solutions. More research is needed, although some studies suggest that chasteberry may help with PMDD symptoms such as irritability, mood swings, breast tenderness, swelling, cramps, and food cravings. Consult your physician before using any herbal supplements because the US Food and Drug Administration does not regulate them.
- Diet and way of life adjustments. Reducing coffee intake, abstaining from alcohol, and quitting smoking may also help with symptoms. Getting enough rest and practicing mindfulness, meditation, and yoga, among other relaxation practices.