"For three weeks before my period I am a calm layed back person. I can cope with three teenage boys and a full time job. I enjoy working in the yard and playing with my children. But the week before my period I feel like life is a living hell!"

This quotation was sent to me by a patient who suffered from P.M.S. Jodi's story is not unusual, millions of women go through P.M.S. with symptoms ranging from bad to worse.

Sometimes, Jodi gets so depressed a week to ten days before her period that she feels she could kill herself. She is constantly fatigued; her clothes are too tight; she has a headache and muscle spasms that last for days. She is constantly angry and attacks anyone who talks to her.

Jodi is normally a very social person, but during P.M.S. she avoids everyone and even calls in sick. She knows this behavior is wrong but feels helpless to control her negative feelings. Once her period starts she is a different person and feels fine.

Jodi's body and brain undergo a multitude of changes and all available amino acids and needed nutrients are used leaving her in a depleted state. Premenstrual is a general term describing a wide range of symptoms including breast tenderness, abdominal bloating, weight gain, headaches, muscle spasms, back pain, irritability, depression, anger and a craving for sweet or salty foods. The range and severity of these symptoms are not the same in all women, or even in the same woman from one cycle to another.

One or more of these symptoms can occur up to two weeks before menstruation, during what is referred to as the luteal phase of the menstrual cycle. The luteal phase is the period between ovulation and the start of menses or menstruation. P.M.S. symptoms usually increase in severity up to the menses and then abruptly recede or disappear for a week to ten days.

Although P.M.S. is a disorder of premenopausal women, those who undergo partial hysterectomy may experience similar problems. There are five major categories of P.M.S., some women may have symptoms of one or more.

**P.M.S. - A** - These symptoms are anxiety, depression, irritability, mood swings, nervous tension, anger and restlessness. These symptoms occur in sixty-five to seventy-five percent of all women. Nutrient requirements are:

- Vitamin B-6 - 100 milligrams a day
- Magnesium - 400 to 600 milligrams a day
- Tyrosine (for depression and anger) - 500 to 1,500 milligrams daily
- Anxiety Control 24 (for anxiety) - four to six capsules daily
- Ashwagandha, a herb from India, is excellent for promoting a sense of well being as well as feeling in control - 300 to 600 milligrams daily
- Melatonin (for those who have a sleep disturbance) three milligrams is beneficial.

**P.M.S. - C** - Symptoms seen are for the craving associated with symptoms like headaches, sweets, increased appetite, heart pounding, fatigue, dizziness and fainting. This P.M.S. type occurs less frequently in about a quarter to a third of women with P.M.S. symptoms. Nutrient requirements are:

- Vitamin B-6 can be effective in the management of this form.
- Chromium Picolinate is extremely helpful in controlling the craving for sweets and insulin level in the bloodstream.
- Zinc
- Vitamin C (Ester C)
- GLA - which comes from the oil of evening primrose.
- Magnesium must also be added for the heart pounding, and Mag Link is the most effective form. Dosage is two to three tablets daily.

**P.M.S. - D** - For depression the major symptoms of P.M.S. are depression, forgetfulness, crying, confusion and insomnia. Extreme cases of these
symptoms can be very serious and could reflect suicidal behavior! P.M.S. D is not as common and affects only about one quarter to a third of all women. Beneficial supplements are:

- Tyrosine for depression - 800 to 1500 mg daily
- Calcium and Magnesium complex
- Anxiety Control 24 - four to six capsules daily, divided
- Carnitine - 500 to 1,000 milligrams daily.
- Tryptophan (available by prescription) - 500 to 1,000 milligrams nightly.

P.M.S. - H - For the heavy, weight gain, water retention symptoms. In this P.M.S. type, temporary weight gain, swelling of the extremities, breast tenderness and abdominal bloating are the major symptoms. P.M.S. H occurs in fifty to sixty percent of women. Because stress is a major component stress management and regular exercise, along with magnesium and B-6 are required. In P.M.S. - H the consumption of refined sugars or excessive fats is particularly aggravating to the condition. Cutting down on refined sugar should go along with stress reduction and regular exercise. Beneficial supplements are:

- Magnesium must also be added and Mag Link is the most effective form. Dosage is two to three tablets daily.
- Vitamin B-6
- Vitamin E for breast tenderness - 150 to 800 IU's daily.

P.M.S. - P- For pain Vitamin E is an extremely important nutrient for P.M.S.- P women. Symptoms are: Extreme breast tenderness, nervous tension headaches, confusion, edema, abdominal bloating, weight gain. Beneficial supplements are:

- Vitamin E - 150 to 800 IU daily is helpful in reducing breast tenderness.
- Mobigesic is for the other symptoms relating to tension headaches, which contains 325 milligrams of Magnesium Salicylate. Mobigesic is an anti-inflammatory which is effective for pain, tension headaches and muscle spasms.

Mobisyl cream is effective for sore shoulders and muscles.

During P.M.S. leave out caffeine, reduce salt intake and alcohol. Set aside time for using relaxation techniques, once you master these techniques you will use them the rest of your life. A healthy life style, good amino acid, herb and multivitamin/multimineral supplement program can give you a better quality of life and avoid lost time due to P.M.S.

This article is not intended to give medical advice or replace the services of a physician.
It is for educational purposes only.