

We will begin shortly.

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Is It More than PMS? Learn About PMDD



Introduction by: Andrea Wijtenburg, Ph.D. NIH National Institute of Mental Health (NIMH)

Marybeth Bohn

International Association for Premenstrual Disorders

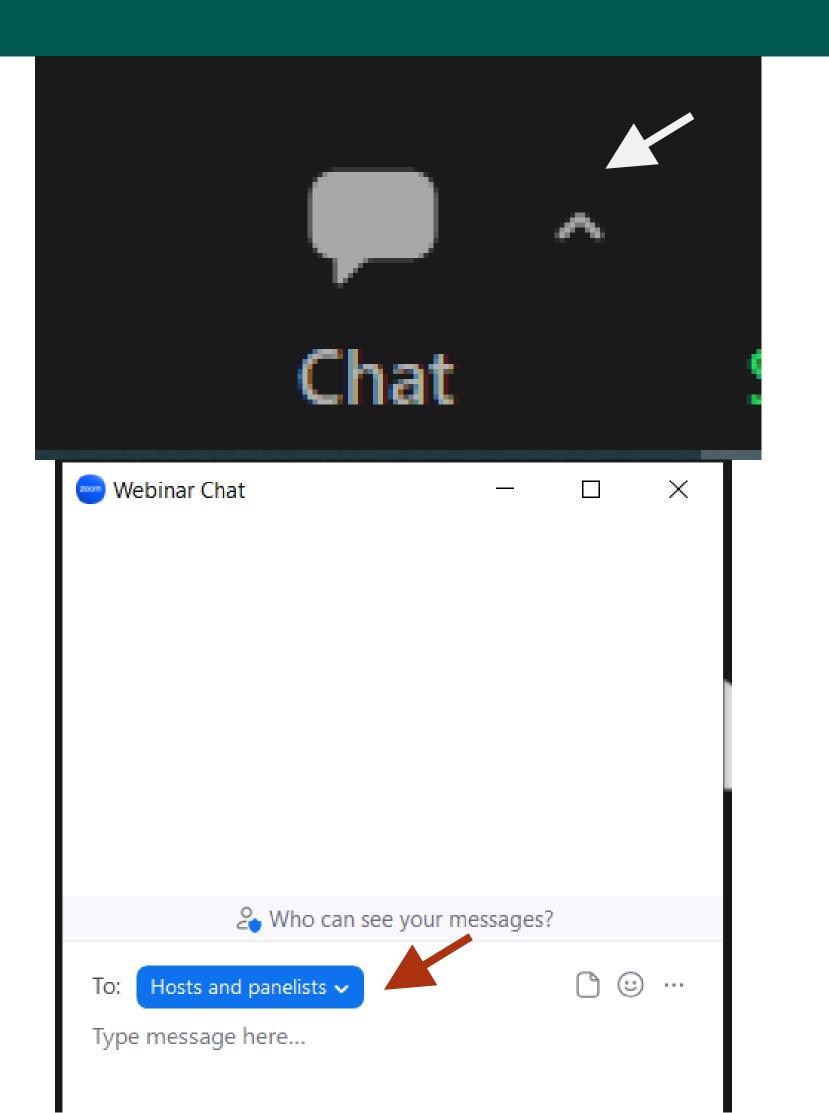
Sandi MacDonald

Co-Founder & Executive Director

International Association for Premenstrual Disorders







Upcoming Q&A Session Please send us your questions via the Chat pod directed to **Hosts and Panelists**

Please use the Chat pod to request technical assistance





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International Association for Premenstrual Disorders

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Co-Founder & Executive Director International Association for Premenstrual Disorders

Introduction by: Andrea Wijtenburg, Ph.D. Chief, Brain Circuitry and Dynamics Program NIH National Institute of Mental Health (NIMH)







Is It More Than PMS? Learn About PMDD

NIH Prevention in Focus Webinar March 27, 2024

Honored to be here



Sandi MacDonald IAPMD Executive Director and Co-founder





Marybeth Bohn **IAPMD Board of Directors** and Mother of Christina Elizabeth Bohn





Sandi MacDonald Marybeth Bohn

I have NO financial disclosures or conflicts of interest in relation to this presentation.





Who is IAPMD?

- * Patient-Founded in 2013 by Sandi MacDonald & Amanda LaFleur
- * Patient-Led lifeline of support, evidence-based information, and
 - resources for women/AFAB with Premenstrual Dysphoric Disorder
 - (PMDD) and other Premenstrual Disorders (PMDs)
- * Patient-Focused Helped over a million people from more than 100
 - countries find answers, community, and hope
- * Patient Voices The leading voice in the PMDD community



Support. Information. Resources.



Objectives

- * To help you gain a deeper understanding of premenstrual conditions
- * To bring the PMDD experience to life through first-hand experiences
- * To generate "lightbulb" moments
- * To inspire action









Prevention

- * NOT AN OPTION (at this time)
- * Suspected cellular disorder
- * May be some genetic influence
- * Some studies suggest it is a combination of genetic factors and environmental factors * Risk factors: family history of PMS/PMDD,
- depression, postpartum depression, or other mood disorders
- Awareness is critical *
- * Symptom management can help







Is it PMS or PMDD?

PMS

Normal set of physical (and sometime mild emotional) symptoms

Symptoms occur in the week before menses onset

Usually doesn't cause much, if any, life disruption



	PMDD Severity & Emotionality
es	Severe, life-impairing emotional symptoms (and sometimes also physical symptoms) including depression, anxiety, mood swings or rejection sensitivity, and anger/irritability.
	Symptoms occur anywhere from 1-2 weeks prior to menses onset
e	Very disruptive to life and relationships; Typically requires medical management, prescription medication, including antidepressants



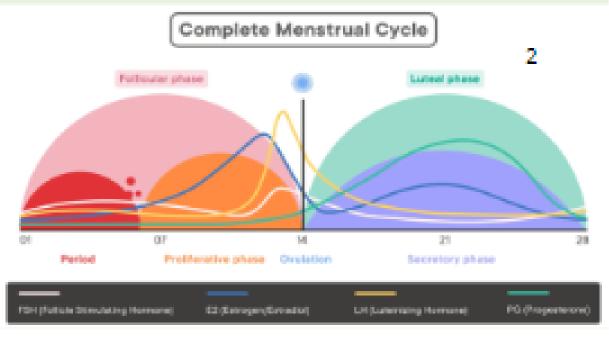




Premenstrual Dysphoric Disorder (PMDD) is a cyclical, hormone-based mood disorder with symptoms arising during the premenstrual, or luteal phase of the menstrual cycle and **subsiding** within a few days of menstruation.

A severe negative reaction to the natural rise and fall of estrogen and progesterone each month between ovulation and menstruation.





While PMDD is directly connected to the menstrual cycle, it is not a hormone imbalance.





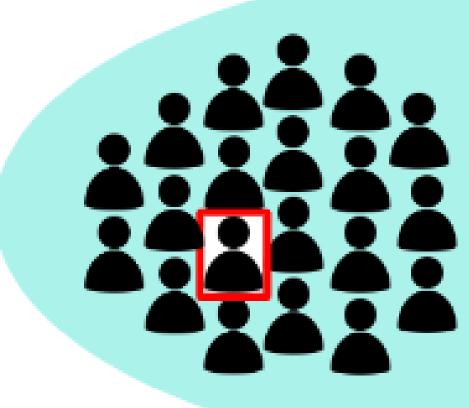


It is a suspected cellular disorder in the brain. Symptoms can worsen over time and/or around reproductive events.

- The first period
- Pregnancy
- Birth
- Miscarriage
- Perimenopause \checkmark



1 in 20!



An estimated 5.5% or (1 in 20) women/AFAB individuals of reproductive age have PMDD⁴

Underdiagnose Misdiagnosed







As many as 4.2 million* women/AFAB individuals in the US may have PMDD.

*824,000 in the UK; 475,000 in Canada; 328,000 in Australia; 19,700 in The Netherlands; 1.3 million in Japan; 20 million in India





An official diagnosis worldwide

* PMDD was added to the **DSM-5 in 2013** as a depressive disorder. Previously, PMDD was included in the appendix of the DSM as a condition for further study. The symptoms of PMDD are remarkably similar to those of Major Depressive Disorder (MDD). * PMDD was added to the ICD-11 in 2019 as a disease of the genitourinary system, cross-listed as a depressive disorder. This classification helped to validate PMDD as a legitimate medical

diagnosis worldwide.





PMDD Symptoms (DSM-5)

In the majority of menstrual cycles, at least **five** symptoms below must be present in the final week before the onset of menses, start to improve within a few days after the onset of menses, and become minimal or absent in the week postmenses.

At least ONE of the following core emotional symptoms (*in bold*) MUST be present

- * Marked depressed mood, feelings of hopelessness, or self-deprecating thoughts.
- * Marked anxiety, tension, and/or feelings of being keyed up or on edge.
- * sensitivity to rejection).
- * Marked irritability or anger or increased interpersonal conflicts.
- * Decreased interest in usual activities (e.g., work, school, friends, hobbies).
- * Subjective difficulty in concentration.
- * Lethargy, easy fatigability, or marked lack of energy.
- * Marked change in appetite; overeating; or specific food cravings.
- * Hypersomnia or insomnia.
- * A sense of being overwhelmed or out of control.
- "bloating," or weight gain.



Marked affective lability (e.g., mood swings; feeling suddenly sad or tearful or increased

* Physical symptoms such as breast tenderness or swelling, joint or muscle pain, a sensation of



Difficult to diagnose

- * No blood test
- * A diagnosis of PMDD requires the presence of at least five "emotional
 - symptoms" as included in DSM
- * The use of oral contraceptives suppresses natural ovulation, which
 - makes it impossible to diagnose PMDD
- * To confirm the diagnosis, two months of daily symptom ratings are recommended to differentiate between PMDD, PME, and non-cyclical symptoms.
- * Diagnostic resources are available at <u>iapmd.org/provider-resources</u>.













Limited treatment

- * Complex
- * Every patient is unique no "one size fits all"
- * Evidence-based therapies: SSRIs, oral contraceptives, GNRH
 - Analogues, total Hysterectomy with Bilateral Salpingo-Oophorectomy,
 - **Cognitive Behavioral Therapies**
- * Treatment Guidelines are available on *iapmd.org*









Is it PMDD or Premenstrual Exacerbation (PME)?





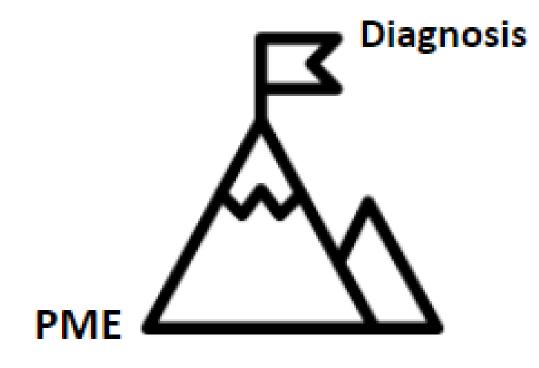
Refers to the **worsening of the symptoms of** another disorder, such as major depressive disorder or generalized anxiety disorder.

Symptoms are present throughout the entire cycle but **become more severe** in the premenstrual phase (before your period).³



Research on PME is Lagging Behind

PME remains a phenomenon studied in research but not yet diagnosed and treated clinically





Patients are struggling





Every time, it hits like a bus. PMDD is here again. And I sorrow. I ache. I mourn. For the life I am losing. For the pain I will cause. For another month, another round, another destroyer coming through to take down all I tried to build these past two weeks. "This Is PMDD - Day 20" by Clarissa

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IAPMD

Families are struggling

"My fiancé suffers with PMDD, and it's crushing how debilitating it can be. Sometimes it feels like she needs to put her life on hold for a week or two at a time to deal with the symptoms and the fallout..."



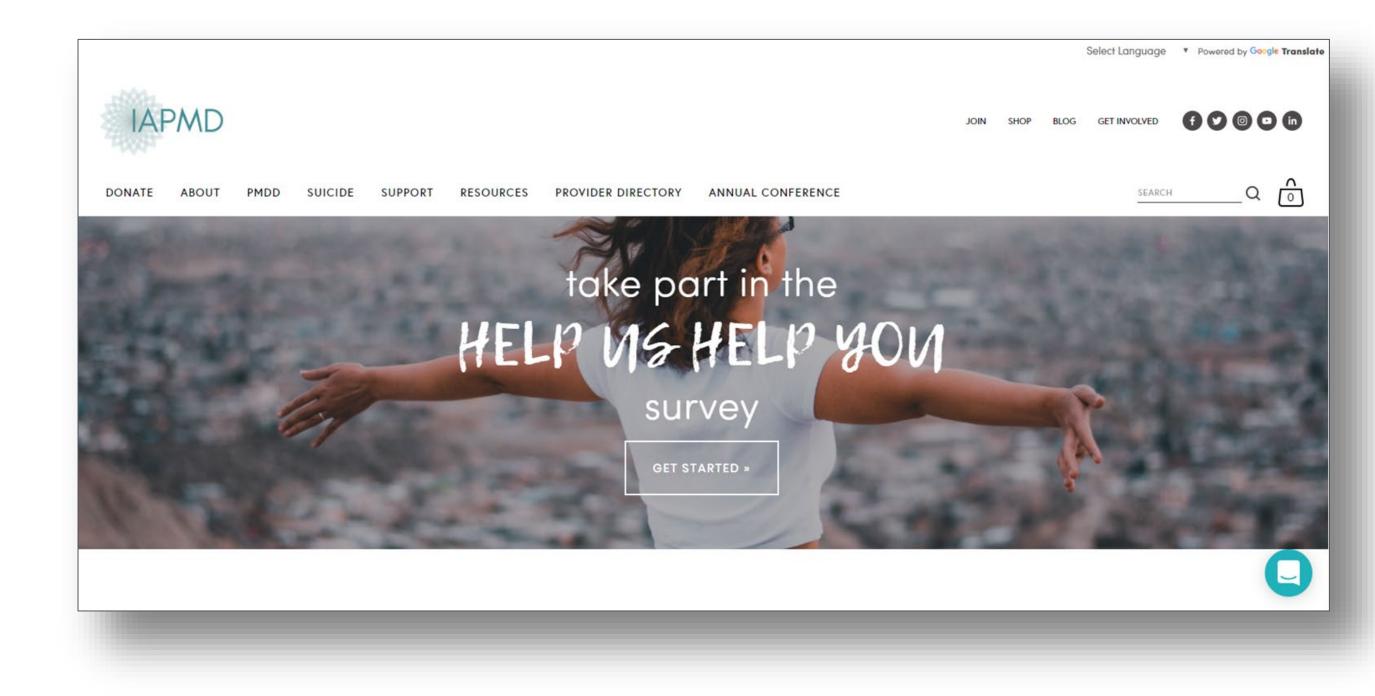


IAPMD - Bringing the patient's voice to the conversation * 2018 - Global Survey of

Premenstrual Disorders (GSPD)

* 3,153 people from over 56 countries participated anonymously in the online questionnaire survey * 1,425 of those were prospectively-confirmed patients with PMDD









Findings

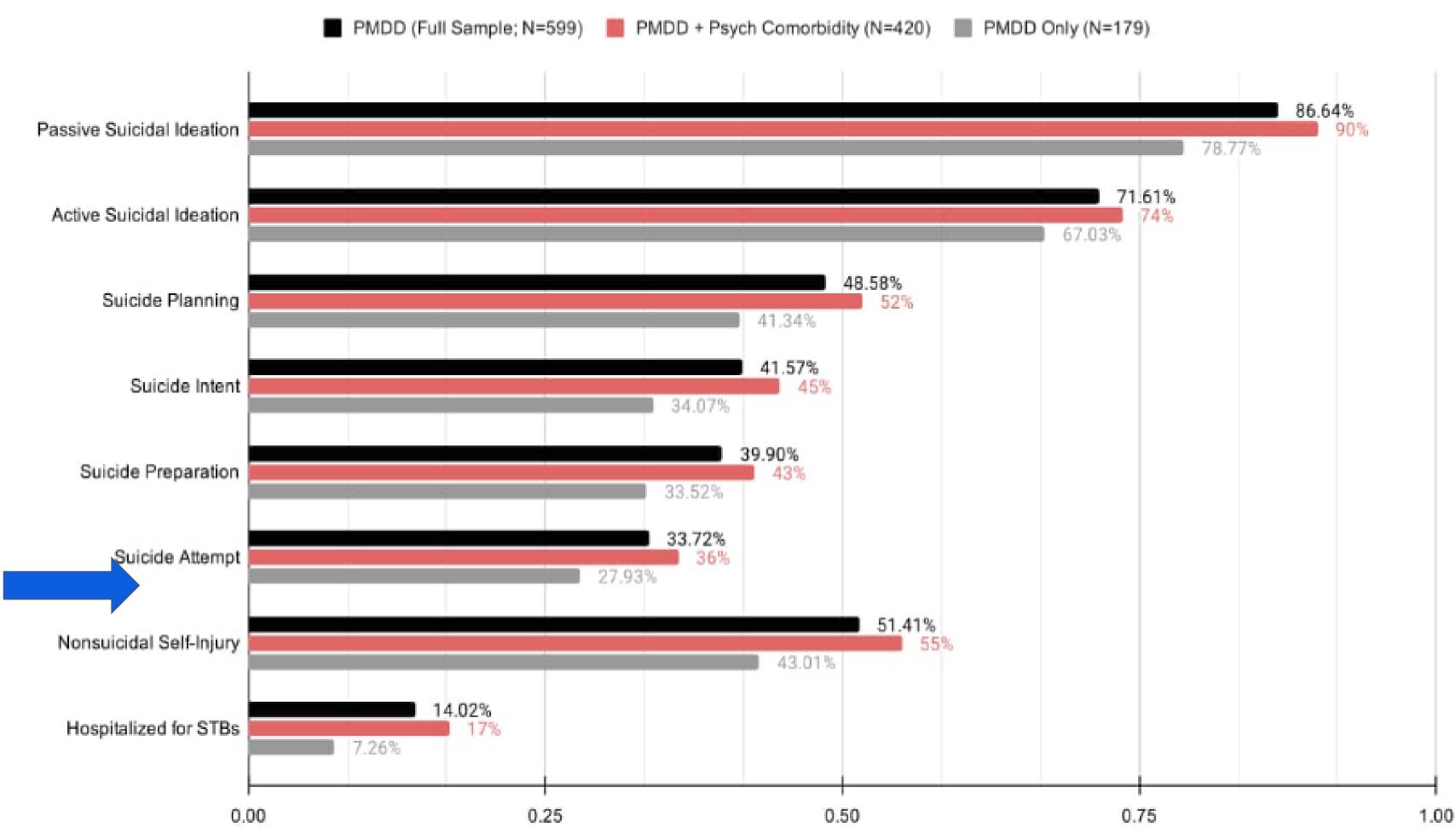
- * 12 years average to get a correct diagnosis
- * 6 providers before gaining an accurate diagnosis
- * Clear knowledge gap exists across medical specialties and the ability of providers to deliver quality care to PMDD sufferers¹
- * 19% hospitalized while in PMDD crisis
- * 57% lost an intimate partner or significant other
- * 16.8% reported having lost a job due to PMDD
 - 1. Hantsoo L, Sajid H, Murphy L, Buchert B, Barone J, Raja S, Eisenlohr-Moul T. Patient Experiences of Health Care Providers in Premenstrual Dysphoric Disorder: Examining the Role of Provider Specialty. J Womens Health (Larchmt). 2022 Jan;31(1):100-109. doi: 10.1089/jwh.2020.8797. Epub 2021 Apr 1. PMID: 33978482; PMCID: PMC8785767.





34% with PMDD have attempted suicide

Prevalence of Self-Injurious Thoughts and Behaviors in Prospectively-Confirmed PMDD



Eisenlohr-Moul, T., Divine, M., Schmalenberger, K. et al. Prevalence of lifetime self-injurious thoughts and behaviors in a global sample of 599 patients reporting prospectively confirmed diagnosis with premenstrual dysphoric disorder. BMC Psychiatry 22, 199 (2022). https://doi.org/10.1186/s12888-022-03851-0









Christina Elizabeth Bohn





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How does PMDD look in everyday life?

What we witnessed.

Might be absent from work or school **in a cyclical**/ pattern

> Wants to end relationships / quit jobs during the luteal phase

Makes hateful comments/

> May say, "I have never felt better in my life than when I was pregnant" or may have prenatal and/or postpartum depression

Might wear a mask

Brain fog, can't concentrate, can't get their work or homework done

Outbursts

from someone

who is normally

pleasant

self to others



"A great liar and a great thief" -Marybeth Bohn

* PMDD can strike at any age during the reproductive years * PMDD is a spectrum disorder, but it can become worse the longer it is undiagnosed and untreated * There are young girls/AFAB individuals who already have serious symptoms of PMDD, and many have been in behavioral health units for suicidality and delusions * One size does not fit all. One treatment option may help one patient, but hurt another-careful monitoring is important













Three potentially life-saving questions

Ask these three questions - Known as "Christina's Questions" 1. When was your last period? 2. When are you expecting your next period? 3. What is "PMS" like for you?

"Christina's Questions" should be asked in ERs, doctors' offices, therapists' offices, and in schools (consider annual screenings)







American Psychological Association -The "Fifth Vital Sign"

- * July 2023 the APA encouraged mental health providers to treat the menstrual cycle as a "fifth vital sign" * IAPMD worked with the APA to develop questions patients should be
 - asked about their periods to help psychologists improve diagnoses and identify treatments that work:
 - - 1. Do you menstruate?

 - 2. Does your menstrual cycle affect your emotional health? 3. Have you been diagnosed with any other emotional or
 - behavioral disorder?
 - 4. Have you tried any PMDD treatments before?

APA thanks Tory Eisenlohr-Moul, PhD, Liisa Hantsoo, PhD, Jaclyn Ross, PhD, and the International Association for Premenstrual Disorders for helping to develop this fact sheet.





2021 Patient Centered Outcomes Research Institute Work - Two Landmark Resources

*** "A Strategic Plan To Advance Patient-**Centered PMDD Research" - an

assessment of the current state of knowledge related to PMDD, previous and current research, and future directions for expanding the research, knowledge, and approaches that could address the gaps in PMDD research and treatment

*** "A Guide To Conducting Rigorous,** Patient-Centered PMDD Research" -

This guide is designed to provide general guidance for researchers interested in learning how to conduct rigorous research on Premenstrual Dysphoric Disorder (PMDD) while taking a patient-centered perspective.





A NEW LIGHT ON PMDD RESEARCH

-CENTERED PMDD RESEARCH

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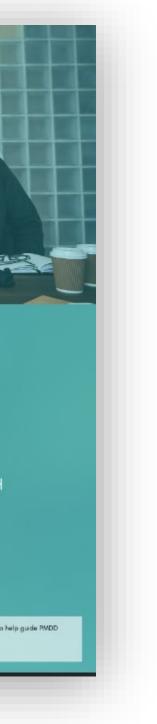
A GUIDE TO CONDUCTING

RIGOROUS, PATIENT-CENTERED

PMDD RESEARCH

2022

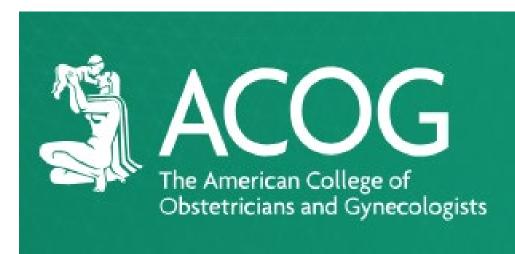






ACOG Clinical Practice Guidelines

- Dec. 2023 The American College of Obstetricians and Gynecologists released new Clinical Practice Guideline, Management of Premenstrual Disorders
- IAPMD's work helped inform these guidelines
- Our 2018 Global Survey of Premenstrual Disorders (2018 GSPMD) that found an extremely alarming number of people - 34% - with premenstrual dysphoric disorder (PMDD) have attempted suicide, published in BMC Psychiatry, is referenced
- IAPMD is included as a resource for patients and families







Driving Awareness

* IAPMD partnered the Bohn family in the state of Missouri to pass the Nation's first **PMDD Awareness Day in** Missouri - October 2, 2023, Christina's birthday

* April is Annual PMD Awareness Month



PMDD Awareness Is Suicide Prevention



Join us on Oct. 2nd for Missouri's PMDD Awareness Day

· ★ · ★ · ★ · ★ · ★ · ★ ·



In Loving Memory Christina Elizabeth Bohn 1988 - 2021



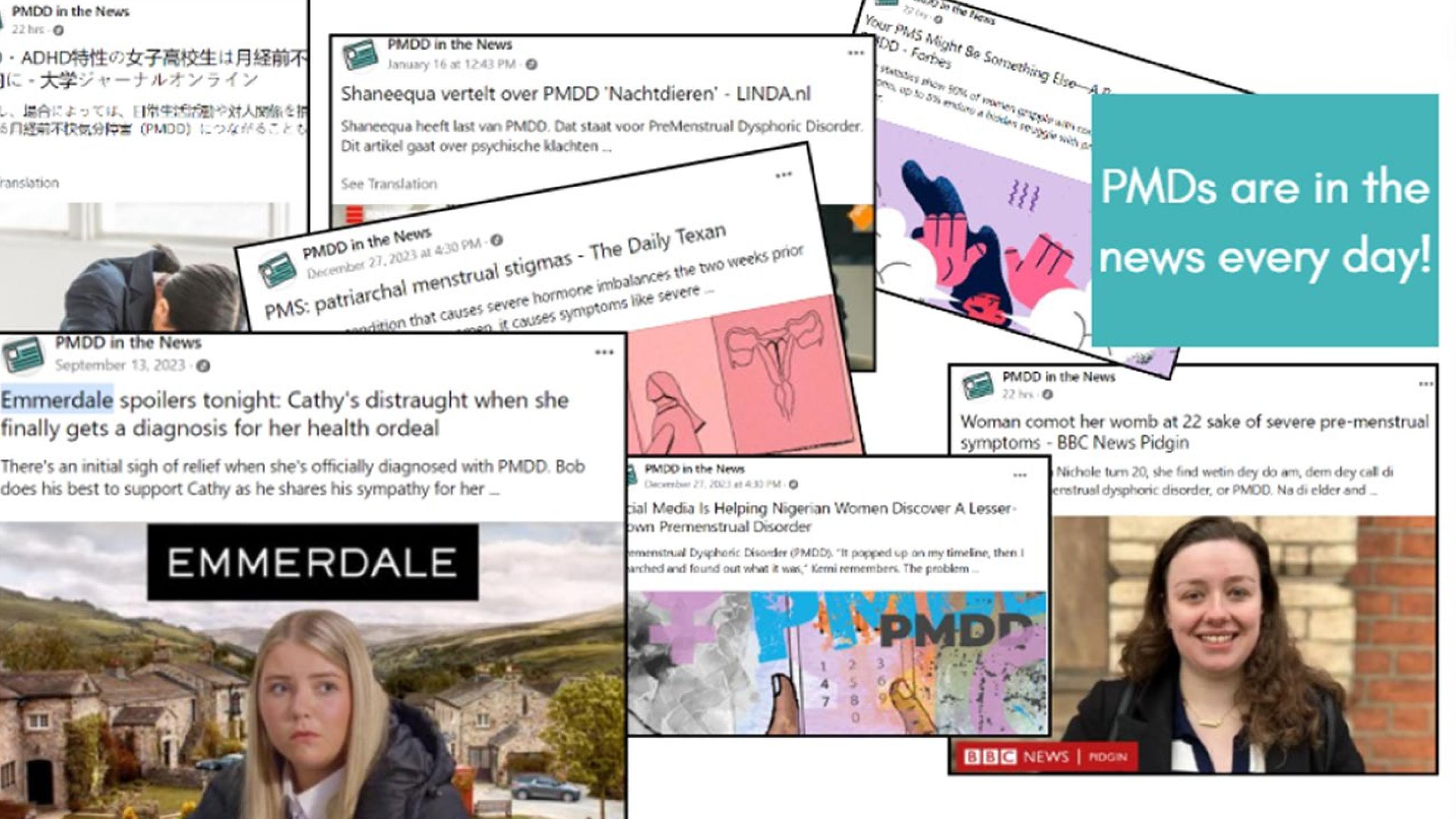


Shining a Light on PMDs

- * Build Evidence Grants, position papers, collaborations
- * Build Influence Global PMD Awareness Month, Influencer Meetings, advocacy work
- * Build Empowerment Peer Support, education and training, website resources, eBook, workplace strategy



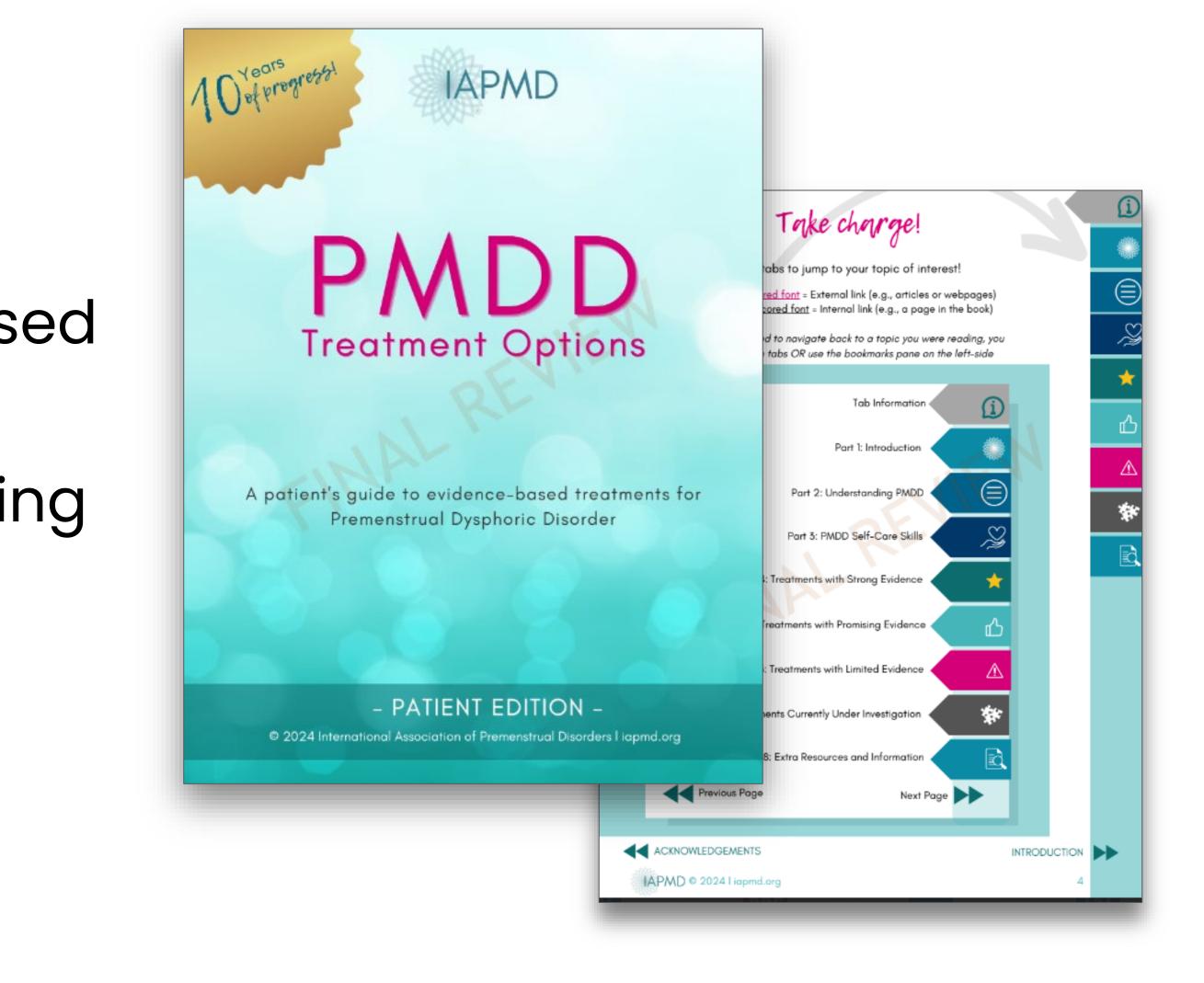




Patient Treatment Guidebook

- * April 2024 Release
- * First-ever guidebook for patients on evidence-based treatment options
- * "Take Charge!" Empowering
- * Patient-focused
- * Interactive









Closing the Women's Health Gap - a \$1 Trillion Opportunity!

- * 2024 McKinsey Global report "Closing the Women's Health Gap" cites PMDs as key economic factor
- * "Health education, including menstrual education, is one of the most effective ways to help women learn about their bodies."
- * "Premenstrual syndrome (PMS), depressive symptoms, and migraines—could make up more than **50 percent of the economic** impact"



WORLD

FORUM

n collaboration with the McKinsev Health Institute

Closing the Women's Health Gap: A \$1 Trillion Opportunity to Improve Lives and Economies

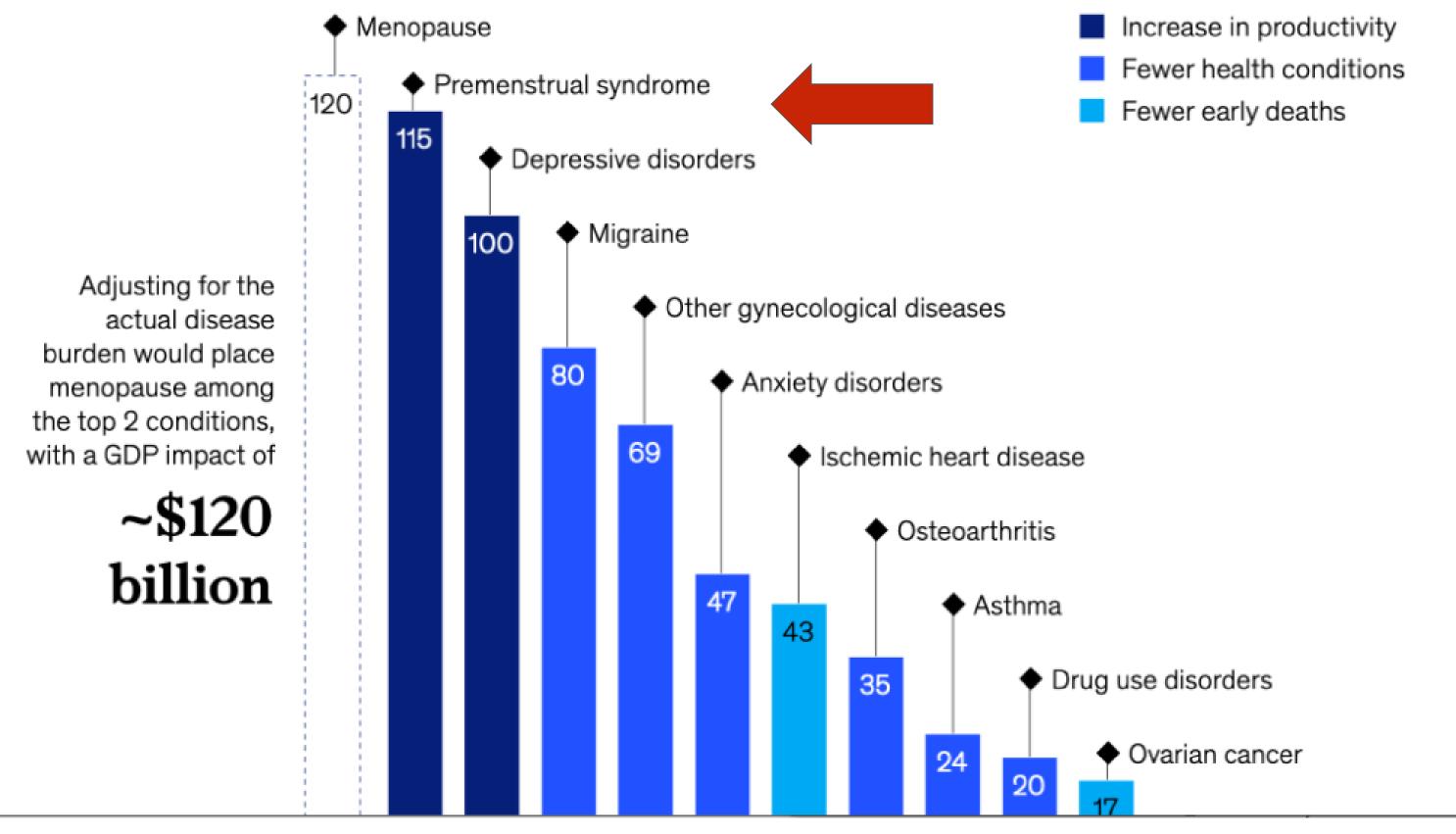
INSIGHT REPORT **JANUARY 2024**





IAPMD Addressing PMS (PMDs) – a \$115 billion impact!

Ten conditions would contribute more than 50 percent of the total GDP impact related to closing the gap in women's health.



Top 10 conditions by GDP impact of closing the women's health gap,¹\$ billion



PATIENT ORGANIZATIONS NEED MORE **FUNDING!**

- Dr. Jill Biden
- women's health research.



• "Every woman I know has a story about leaving her doctor's office with more questions than answers. Not because our doctors are withholding information, but because there's just not enough research yet on how to best manage and treat even common women's health conditions. In 2023, that is unacceptable,"

New White House Initiative - investment of \$12 billion in new funding for

 Create a Fund for Women's Health Research at the NIH to advance a cuttingedge, interdisciplinary research agenda and to establish a new nationwide network of research centers of excellence and innovation in women's health



IAPMD.org

- * Go to <u>IAPMD.org</u> website
 - Education/Resources
 - Self-Diagnostic Test
 - Symptom Tracker/App
 - Appointment Sheets
 - Support Groups
- * Find the right doctor <u>IAPMD.org</u>
- * Talk about PMDD







* Ask how you can support someone and what they need from you



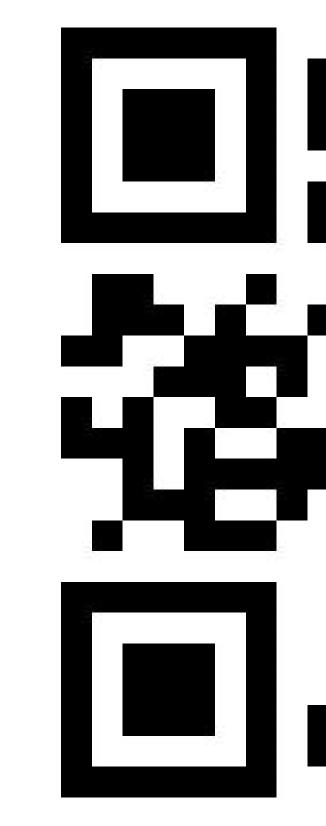
Resources for the-Professional Community

- both Cycle Science and Clinical Practice.
- * Webinar Library
- eNewsletter best practices, latest research, new information on PMDs
- * Provider Directory
- * Full array of provider resources

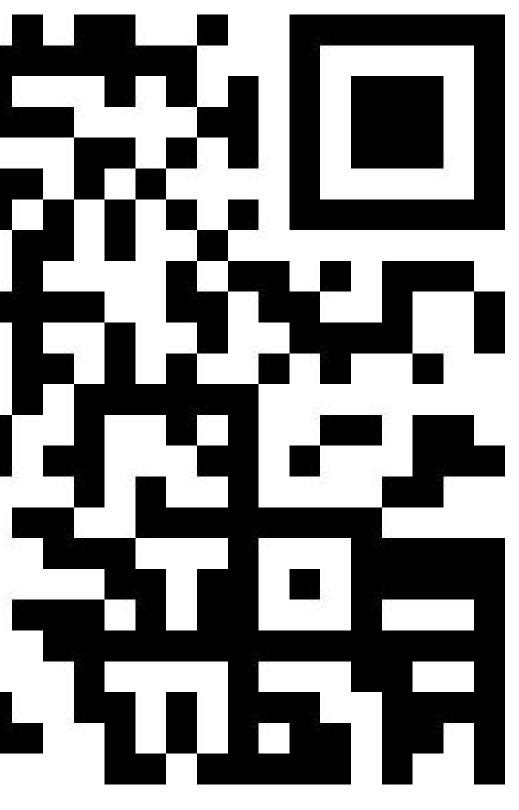


* Monthly educational webinars on PMDD and PME covering

Visit us at <u>IAPMD.org</u>









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Webinar Topic: Intimate **Partner Violence and Abuse Screening Among Pregnant** and Postpartum Women

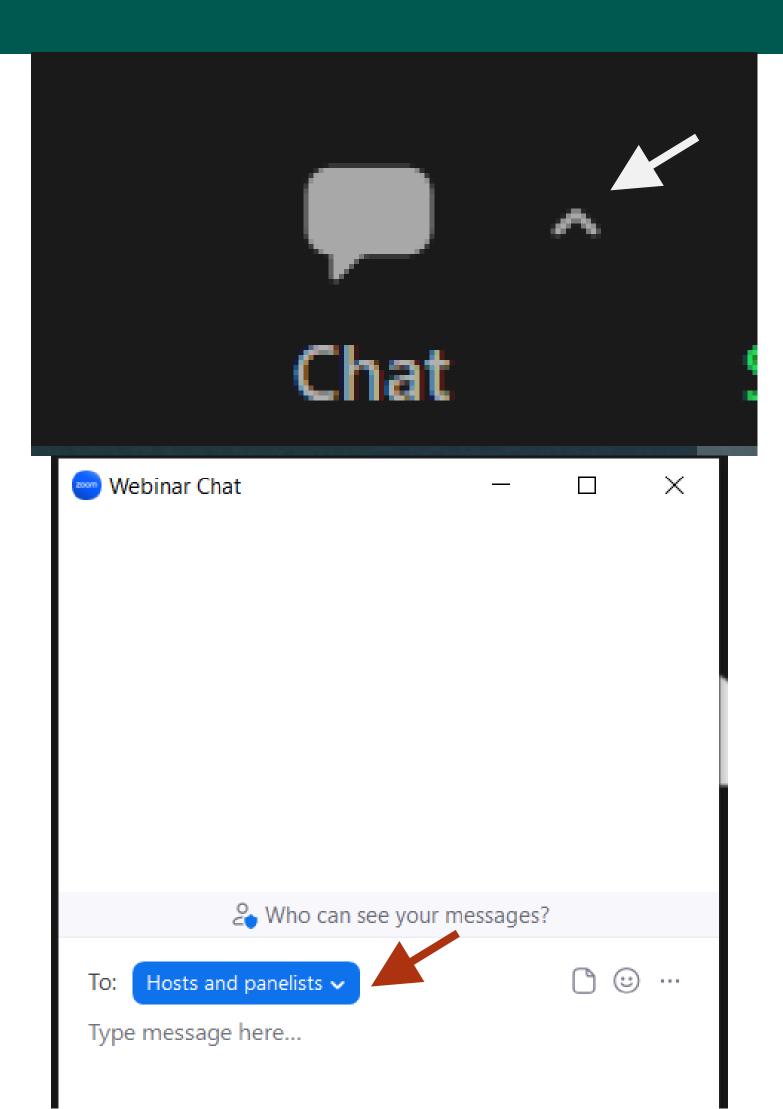
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June 3, 2024 1 pm – 2 pm EST







Q&A Session







on June 3, 2024!

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