A LINE ON LIFE

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Managing the Monthly Menace *

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To varying degrees, women suffer from symptoms related to their menstrual cycle. Some women suffer from **PMS** (premenstrual syndrome). Symptoms vary from unexplained mood changes to a vast array of physical problems. With most women, when the menstrual flow begins, these symptoms end. Then, with their menstrual period, many women suffer from **cramps**. If you suffer from either of these problems, what can you do to feel better?

As you may notice, beyond helping with menstrual problems, some of these recommendations also promote general good health.

For Premenstrual Syndrome

- Avoid tobacco and alcohol. In most women, these substances accentuate PMS symptoms.
- Exercise moderately. This should include about 30 minutes of aerobic exercise 3-4 times a week. Aerobic exercises increase heart rate and oxygen flow to the tissues. They also increase production of *endorphins* substances that give you a feeling of well-being. Yoga exercises can also be helpful.
- Balance your diet. Eat moderate amounts of protien and ample portions of carbohydrates. (Carbohydrates include fresh fruits and vegetables, whole-grain breads and cereals, beans, rice and pasta.) Have more frequent and smaller meals rather than 2-3 large meals each day. Minimize salt intake to reduce fluid retention. Even though some women with PMS crave chocolate, eating chocolate may increase negative symptoms. Try substituting fruit or popcorn to reduce the chocolate craving. With some women, a daily 300 mg dose of vitamin B6 may be helpful. (However, large doses of B6 over long periods can cause neurological problems.)
- Seek medical help. If PMS symptoms are severe, *progesterone* can be administered. (The internal production of the hormone, progesterone, drops off a few days before the menstrual flow begins. Although progesterone therapy reduces symptoms in some women, there is still controversy among physicians about its effectiveness.) *Prostaglandin inhibitors* can help to relieve premenstrual headaches and cramping. (Prostaglandin is a hormone that among other things causes the uterus

to contract.) If reducing salt intake does not reduce bloating symptoms, diuretics may be prescribed.

• Seek social support. Talking with other women with PMS symptoms can help with issues that are related to the stress of struggling with PMS. This can include PMS support groups or group therapy.

For Menstrual Cramping

- **Relax.** Painful cramping can be reduced by getting enough rest and sleep. Relaxation exercises also help, especially if combined with the options listed below.
- **Apply heat.** Almost any moderate heat source (heating pad, hot-water bottle, a friendly hand) on the abdomen can help to reduce cramps. Warm baths are also helpful.
- **Get a massage.** Various forms of message, especially in the lower back, can be helpful. One guide to menstrual massage is found in the book, *The New Our Bodies* (Boston Women's Health Book Collective, 1992).
- Use herbal remedies. Some women find herbal teas, especially raspberry leaf, helpful. Health food stores stock a variety of teas, tablets and other preparations that can be helpful.
- Use antiprostaglandins. As with PMS, prostaglandin inhibitors can reduce uterine and abdominal cramping. Both *aspirin* and *ibuprofen* are over-the-counter prostaglandin inhibitors, and ibuprofen is the stronger of the two. As a side effect, aspirin will increase the menstrual flow slightly, while ibuprofen reduces it. Even stronger antiprostaglandins can be prescribed. The effectiveness of antiprostaglandins is increased if they are taken when cramping first starts. Don't wait until the pain is severe.
- **Have orgasms.** With some women, orgasms relieve the discomfort of menstrual congestion and cramping. (The orgasms can occur with or without a partner.)

Rather than passively suffering each month, most women can actively manage menstrual problems.

Since each woman is different, you may have to explore these various options before you find some that help. With any option, following procedures as directed yields the best results. If you experience problems or uncomfortable side effects with any option, stop using it.

If these methods are ineffective in managing your symptoms, consult your physician. The symptoms may indicate more serious underlying problems, like **endometriosis** (excessive growth of the inner lining of the uterus) or **PID** (pelvic inflammatory disease). If your physician is indifferent to "female problems", get another physician.

^{*} Adapted from Bryan Strong, Christine DeVault & Barbara Werner Sayad, *Core Concepts in Human Sexuality*, Mayfield Publishing, 1996, pages 78-79.