بسم ا لله الرحمن الرحیم

به نام خداوند بخشنده مهربان

IN THE NAME OF GOD



Premenstrual Symptoms in Medical Science Students in Tehran

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- Premenstrual syndrome (PMS) is a common disorder during women's reproductive ages, which are characterized by a range of cyclical physical and psychological symptoms. **(Speroff et al, 2011)**

- Symptoms and discomfort level not only vary from one to another, but also vary from month to month also there may even be symptom-free months. This cause various report of syndrome **(Berke et al, 2012)**




I HATE HAVING P.M.S.
I HATE IT!!!
LOOK, YOU'RE NOT GOING TO DIE OF P.M.S.
NO, BUT YOU MIGHT!
mimiandeunice.com

Since cause of PMS is not clear, but it is thought that
hormonal change,
neurotransmitters,
prostaglandins,
diet,
drugs,
and lifestyle

could effect on it. **(Speroff and et al, 2011)**



- There are many evidences, which had showed that PMS is caused primarily by cultural factors **(Rittenhouse and Amanda, 1991)**

- Singh et al (1998) said: 30%- 80% of women report PMS.

- Dikerson (2003) reported 2-10 percent of women have significant PMS, that separate from the normal discomfort associated with menstruation.



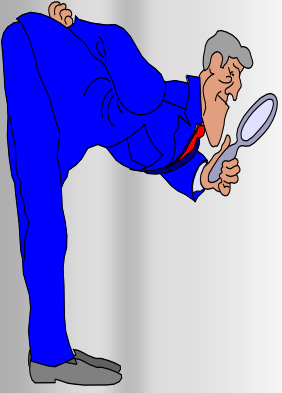
- In west of Iran (2009) rate of PMS in 300 University Students were 98.2% **(Bakhshani and et al),**
- In north east of Iran (2009) rate of PMS in 210 University students were 48.1% **(Talayee and et al)**



Aim:

- To determining the frequency and severity of PMS in dorm students of one of University of Medical Sciences, in Tehran.

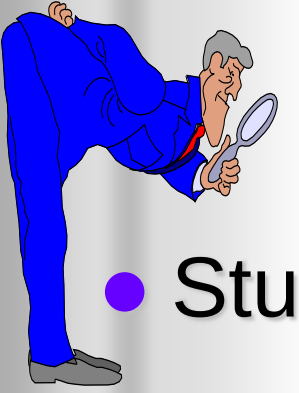




Material & Methods:

* This study was a cross sectional study, which was the first phase of RCT, which had received grants from Research Department of Tehran University of Medical Sciences. (2011-2013)

* 571 volunteer healthy Medical students, with age 17- 34 years, who accommodated in dorms of Iran and Tehran University of Medical Sciences in Tehran, were involved after filling in informed consent.



- Study questioner had three main parts:

- Socio- demographic (Age, age at menarche, menstrual duration, field of Educational study, occupational status and economical status…)
- 4th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV)
- Visual analog scale (VAS) for assessing severity of premenstrual symptoms.

Results:

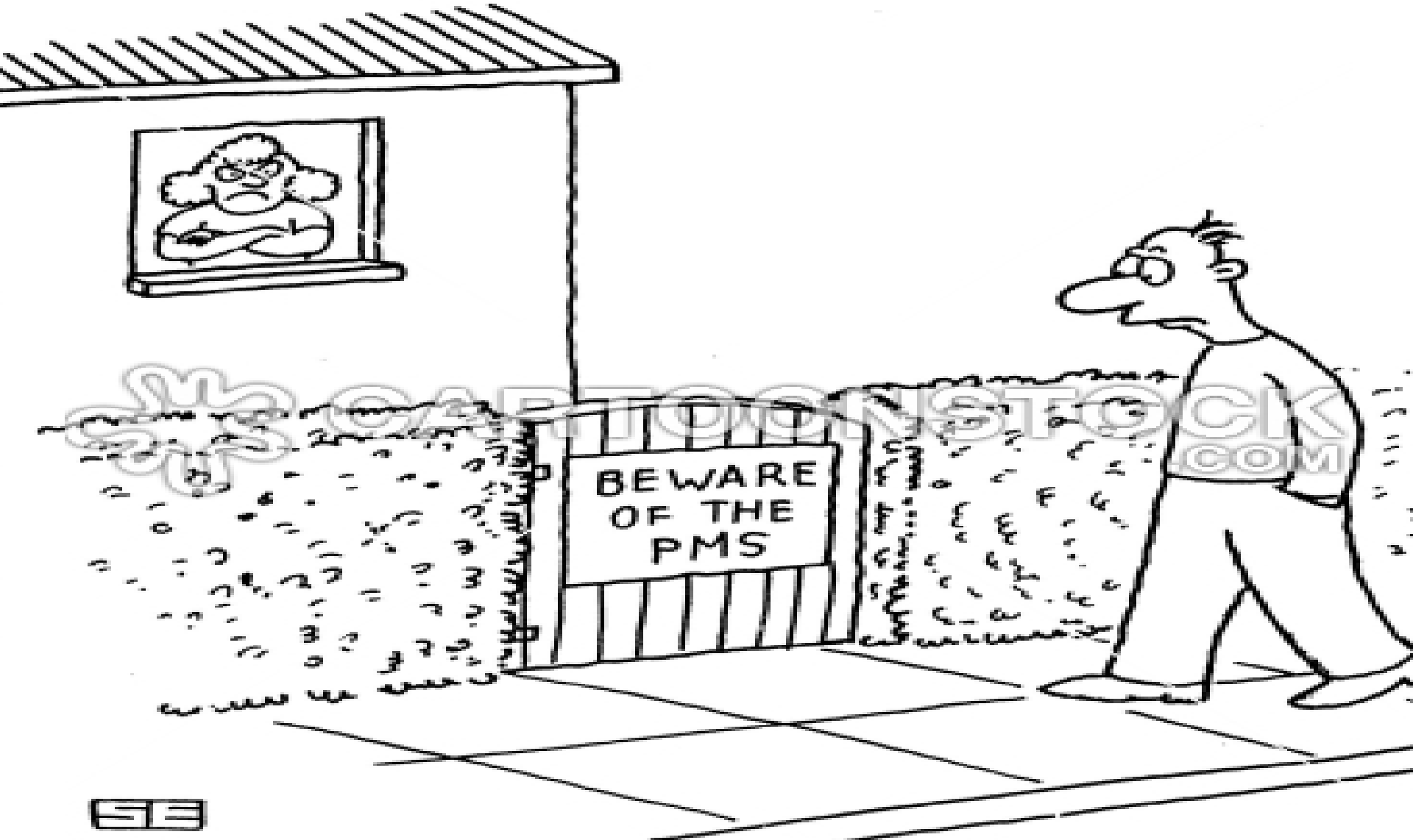


TABLE1. PERSONAL CHARACTERISTIC HIGHEST GROUP

Characteristics	Highest Group	No	%	(Mean ± SD)
Age (year)	21-24	271	47.5	21.63± 2.63
Age at menarche (year)	12-14	407	71.3	13.37± 1.35
Menstrual duration (day)	5-7	327	53.5	6.18± 1.38
Field of Educational study	Medicine	163	28.5	-
Occupational status	Unemployed	542	94.9	-
Economical status	Mild	309	54.1	-

Regarding to DSM-IV:

- Bakhshani et al, 2004, Zahedan, Iran **98.2 %**
- Sadock and Sadock, 2007 **35- 95%**

(Treatment)

- Derman et al, 2004, Turkey **61.4 %**
- Silva et al, 2006, Brazil **60.3%**
- Sveinsdttir et al, 2002, Scandinavian **50 %**
- Talayee, 2009, Mashhad , Iran **48.1 %**
- Tenkir, 2003, Ethiopia : **27%**
- Chayachinda et al, 2007, Thailand : **25.1 %**
- Banerjee et al, 2000, India: **6.4%**
- Rojnic Kuzman, 2007, Croatia: **5.8%**

In our study:

89.2%

of Medical Science Student had PMS



Highest symptoms:

Our study

Decreased interest in usual activities: 85.4%
Affective liability: 83.8%
Persistent and marked anger or irritability: 81.4%
Lethargy, easy fatigability: 76.3%
Markedly depressed mood: 71.7%
Difficulty in concentrating: 68.4%
Physical symptoms: 62.3%
Marked anxiety: 60.7%
Marked change in appetite: 57.5%
A subjective change of being overwhelmed: 53.1%
Hypersomnia: 58.6%
Insomnia: 39.9%

Pearlstein et al 2000, on 276

Anger/Irritability: **76%**
Anxiety/Tension: **71%**
Tiredness/Lethargy**: 58%**
Mood swings: **58%**

Disabling symptoms: 2-10%



Bakhshani et al 2009, 0n 300

Tiredness or lethargy: **84%**
Depressed mood: **72.3%**
Sudden feeling of sadness or tearfulness: **70.3%**
Anxiety: **70%**
Sleep problems: **66%**

physical premenstrual symptoms: **backache: 69%**
Psychological symptoms: **tiredness (84%)**

Table 2. Severity of PMS Symptoms according to VAS

No	Symptoms of DSM-IV Categories	Highest Group	No	%	(Mean ± SD)
1	1. Markedly depressed mood	1-2	103	25.2	3.67± 3.26
	2. Feeling of hopelessness or self-depreciating thoughts	1-2	107	27	3.47± 3.29
2	1. Marked anxiety	1-2	122	32.3	2.94± 2.96
	2. Tension and feeling of being "Keyed up" or " On edge"	1-2	105	35.2	2.26± 2.86
3	1. Marked affective liability (e.g. feeling suddenly sad or tearful or increased sensitivity to rejection)	5-6	108	23	4.67± 3.34
4	1. Persistent and marked anger or irritability or increased interpersonal conflicts	5-6	102	22.4	4.36± 3.32
5	1. Decreased interest in usual activities (e.g. work, school, friends, hobbies)	5-6	123	25.3	4.15± 3.02
6	1. Subjective sense of difficulty in concentrating	1-2	113	29.5	3.10± 2.98
7	1. Lethargy	5-6	128	26.4	4.56± 3.01
	2. Easy fatigability or marked lack of energy	5-6	134	27.4	4.32± 2.97
12.5	**1. Marked change in appetite**	1-2	139	37.3	2.65± 2.76
	2. Overeating or specific food cravings	1-2	97	36.2	1.98± 2.73

No	Symptoms of DSM-IV Categories	Highest Group	No	%	(Mean ± SD)
9	1. Hypersomnia	5-6	86	26.5	2.85± 3.09
	2. Insomnia	1-2	116	52.3	1.27± 2.10
10	1.A subjective change of being overwhelmed or out of control	1-2	89	28.9	2.55± 3.04
11	1. Breast swelling	1-2	114	36.2	2.26± 2.77
	2. A sensation of bloating	1-2	125	32.3	2.85± 2.79
	3. Edema	1-2	96	43.2	1.45± 2.32
	4. Weight gain	1-2	127	49.8	1.54± 2.33
	5. Breast tenderness	1-2	91	29.4	2.56± 4.32
	6. Headaches	1-2	136	44.6	2.07± 2.72
	7. Joint or muscle pain	1-2	114	31.2	2.76± 2.89
	8. Back ache	1-2	116	28.4	3.34± 3.03
	9. Stomach/abdomen pain	1-2	98	27.6	3.01± 3.11

Various results could be because of:



- Methodological difference
- Diagnostic criteria
- Various Age group
- Cultural and geographical influences
- Level of confidentiality in the study
- Willingness of participant to disclose
- Previous information, experience and awareness of emotional and physical status
- …?

Conclusions:

- Due to having experience of PMS in 89.2% of student, which is high, it is necessary to do a study for finding its associated factors, for finding the way for prevention





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Thank you

Graci

Danke Schon

سپاسگزاره

Merci Beaucoup

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