

Psychological symptoms of premenstrual syndrome (PMS) -Can dietary supplements reduce the severity of symptoms?

writy of the symptoms

S. Parsay, PhD*, M. Esfarayeni, EdD, CHES**,

* Shahid Beheshti University of Medical Science and Health Services, Tehran-Iran **City University of New York (CUNY), New York



Results									pos	st interv	
y of the Symptoms before Intervention											
	Mild		Modera te		Sever		Total				Syn
	No	%	No	%	No	%		%			أسبا
	32	42	38	50	6	8%	76	100		-	Δ
al	52	%	50	%	U	0 /8	10	%		gica	 Δr
	51	67	23	30	2	3%	76	100	ÖÖ	Dep	
		%		%				%		λch	Cr
	67	88	9	12	0	0	76	100	Ps	/tear	
		%		%				%			Lon
ency of PMS Severity in Intervention									smo	Tiredne er	
Groups									ptc	Ins	
~~~~~~									l Syn	Cha sexua	
94 68									aviora	Dif conce	
32									Beha	Food over	
L											Hea
5 0 Preintervention Protein Supplement									oms	Bi tende sw	
Carbs. Supplement										npt	Bac
Carbs. Food										Syl	Abdon
hole genet									sical	Muscle	
Severity							ĥ	Weig			
erences among the intervention groups									-	Na	
erences among the intervention groups											

in different categories of symptoms.

Symptoms	Carb Food Group	Carb. Supplem ent Group	Protein Supplem ent Group	F	p value
	Mean c				
Psychological	40±.28	75±.54	58±.51	289.2	<.001
Behavioral	27±.25	65±.38	50±.39	274.8	<.001
Physical	09 ± .2	42±.29	33± .27	254.2	<.001
PMS	26±.18	62±.34	47±.32	375.5	<.001

post intervention in Carbohydrate food and supplement groups						
	Symptoms	Carb . Supplement Group	Food Group	t paired test/ P value		
		Mean of Diffe				
	Irritability	.75 ± .84	.14±.33	t=6.01, p<0.001		
a	Anger	.80±.71	.80±.40	No difference		
gi	Anxiety	.96±.76	.20±.39	t= 8.76, p<001		
헐	Depression	1.12±.78	1±.66	No difference		
Psyc	Crying /tearfulness	.34±.48 <b>1±.30</b>		t=4.20, p<0.001		
	Loneliness	.55±.73	.08±.39	t=5.73, p<0.001		
smo	Tiredness lack of energy	.81±.65	.11±.41	t=8.87, p<0.001		
۲ă	Insomnia	.43±.50	.13±.40	t=4.52, p<0.001		
l Syn	Changes in sexual interest	.28±.42	.47±.29	t=4.61, p<0.001		
aviora	Difficulty concentrating	.71±.62	.10±.36	t=7.74, p<0.001		
Beha	Food craving/ over eating	1±.66	1±.31	No difference		
	Headaches	.52±.56	.1±.26	t=6.29, p<0.001		
toms	Breast tenderness & swelling	.51±.55	.08±.34	t=6.72, p<0.001		
ם	Back pain	.52±.51	.11±41	t=5.29, p<0.001		
sical Syr	Abdominal pain	.43±.49	.1±44	t=4.88, p<0.001		
	Muscle and joint pain	.46±.59	.08±.56	t=4.69, p<0.001		
Phy Phy	Weight Gain	.22±.45	.08±.34	t=2.57, p<0.001		
Ľ	Nausea	.42±.49	.10±.40	t=5.1, p<0.001		
	Edema	.28±.35	.03±.33	t=5.31, p<0.001		

an of difforance of se

Spearman tests indicate that there is a positive and significant correlation between effect of carbohydrate consumption in forms of supplement or food and reducing PMS symptoms (r=.83, r=.35 p<.001)respectively). It means adding carbohydrate supplements could reduce more symptoms in severer PMS.

## Conclusion

Consumption of carbohydrate supplement powder might be useful in patients who suffer form different level of PMS and can improve moderate to severe psychological and behavioral symptoms of PMS.