

Women's Health: The Menstrual Cycle

Introductory Remarks

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Synopsis

These discussions will encompass important areas which relate to the pathophysiology of the menstrual

cycle. Unfortunately, only a narrow window of the pathology that is associated with the menstrual cycle will be presented. For instance, areas not to be covered include menstrual dysfunction associated with drug abuse, environmental toxins, the effect of systemic illness on the menstrual cycle, the effects of weight and exercise on the menstrual cycle and, finally, genetic abnormalities that are associated with menstrual dysfunction. The menstrual cycle should be looked upon as an early warning system for signaling that something is wrong, intrinsically or exogenously, with the individual. Hence, it raises a "warning" for a woman during her reproductive lifespan to seek medical help, simply because she may have a systemic illness which is not evident, but from which subsequent problems may arise and for which therapy may be available.

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Premenstrual Syndrome

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Synopsis

Premenstrual syndrome (PMS) is a difficult disorder to study because there is no convincing evidence for a simple, basal, physiologic lesion associated with it. PMS is characterized by a cyclic recurrence of symptoms of varying severity and is temporally related to menstruation, with exacerbation of symptoms during the luteal phase. Some new models are being developed to aid in studying PMS.

UNTIL RECENTLY, premenstrual syndrome (PMS) research has been characterized by confusion as a result of the failure of investigators and clinicians to define carefully the entity under investigation and to ask relevant questions.

The first question that one should ask is, "What is it that you want to study or diagnose?" I have defined a menstrually related mood disorder as follows: a cyclic recurrence of symptoms that are of sufficient severity so as to interfere with some aspects

of menstruation and that occur with a consistent and predictable relationship to onset of menses.

In order to break down this preliminary definition into workable units, we must address several questions that are inherent in the definition. Those questions are as follows: What are the symptoms about which we are talking? What is their intensity or severity? When do they occur in relation to menstruation? What is the symptomatic baseline upon which symptoms occur? By what methods can one