

Premenstrual Syndrome and Indian Men

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Abstract

A woman is the most complex creation of nature. A woman's womanhood is a result of a dramatic interplay of various hormones naturally present in her body. These hormones impact a woman's reproductive cycle and also impact her body both physically and mentally. After the menarche, a woman goes through the menstrual cycle for almost 4-5 decades, during which she goes through enormous physical and emotional changes. The premenstrual syndrome or PMS is an inherent part of the lives of many women across the world. PMS is not a permanent condition, and it occurs during the luteal phase of the menstrual cycle and ends after the start of menstruation. During this time, women experience a lot of physical symptoms, like body ache, headache, fatigue, cramps, bloating and also behavioral symptoms, including mood swings, crying spells, forgetfulness, depression, irritability etc. A range of medicines can be found helpful in treating physical symptoms like pains and bloating but certain symptoms like fatigue and even the behavioral symptoms need to be dealt with differently. The solution to this problem of PMS lies in the support and understanding from the closed ones in the family. Husbands/partners or even mothers can play a crucial role in combating the PMS symptoms. Awareness of PMS and how to deal with PMS through educational intervention via active participation of family doctors, gynecologists and health workers can work wonders in leading to PMS-free women. This study throws a light on the involvement of men in understanding women going through PMS and also aims at gaining knowledge about, if the men are observant and if they are aware of how to deal with PMS.

Keywords Premenstrual syndrome, PMS, Women and Men

Introduction

Amongst the human race, women have to be considered as structurally complex counterparts as compared to men, owing to their hormones. Hormones play a very critical role in women's life and are responsible for both psychological and physiological changes in women. Premenstrual syndrome or PMS is a combination of physical, psychological or behavioral symptoms that many women go through after the ovulatory phase and before the actual start of menstruation. PMS is thought to be happening because of the changing hormonal levels. After ovulation, if the woman is not pregnant, the estrogen and progesterone levels begin to fall dramatically, which may be the cause of PMS.

The signs and symptoms of PMS are different in different women and can range from physical symptoms like headache, joint pain, acne, diarrhea or constipation, bloating, weight gain, fluid retention, fatigue etc. When concerned with the psychological or emotional symptoms women can experience mood swings, irritability, crying spells, forgetfulness, tension or anxiety, depressed mood, food cravings, lack of interest in any activity, insomnia etc. For some women the severity of physical pain and emotional stress could be strong enough that it affects their day to day activities. Regardless of symptom severity, the signs and symptoms generally disappear within a few days after the start of the menstrual period for women. During PMS, the physical symptoms can be taken care of by some medications but most of the women feel helpless as there is no control over the psychological or emotional symptoms. This can also lead to relationship problems in their household, especially with their husbands or partners.

As the PMS symptoms are not permanent, these generally do not require any medical treatment but the women going through this phase definitely need emotional support by their closed ones so that they can go through this phase without feeling guilty or helpless and without getting their routine life much affected. The role of a spouse or partner can be of immense importance while combating the symptoms of PMS. Studies have found that a spouse's supportive behaviors can substantially reduce PMS symptoms in women.

Literature Review

Premenstrual syndrome (PMS) is a cyclic disorder that occurs during the luteal phase of the menstrual cycle. PMS is identified by the presence of physical, psychological and behavioral changes that may interfere with the interpersonal relationships and may also disrupt the quality of life of affected women. PMS is thought to be affecting almost 75% of women of childbearing age. As there are no diagnostic tests to confirm PMS, the confirmation can be made only through observations and by finding out patterns of PMS related symptoms. PMS symptoms occur during the luteal phase of the menstrual cycle and disappear with the onset of menstruation or within a few days of menstruation. The cause of PMS is still uncertain, but it is likely to be associated with changing hormonal levels, especially estrogen and progesterone during the menstrual cycle (1). PMS can be identified by emotional and behavioral symptoms like anxiety, depression, crying spells, mood swings, irritability, appetite changes and food cravings, insomnia, social withdrawal, poor concentration. The physical symptoms may include body pain, headache, fatigue, weight gain, abdominal bloating and breast tenderness (2). Combating PMS symptoms can be challenging as the root cause is still not very certain. Women are advised to do aerobic physical activity on a daily basis (3). Physical activity may help in reducing symptoms such as depression, difficulty concentrating, and fatigue (4). It is found that in some cases, the impact of PMS symptoms could result in increased conflict, disturbed communication, decreased participation in family and social activities. Majority of the male spouses were found to be offering support but some responded by expressing anger, ignoring the wife, seeking marital counseling etc. (5). Educational intervention to spouses/partners of women may play a significant role in decreasing the PMS symptoms. A three-month study revealed that post intervention the score of spouse's supportive behaviors increased significantly as compared to before the educational intervention and the control group. A significant decrease was observed in both physical and behavioral symptoms of women in the intervention group as compared to before the intervention and control groups. Spouse's supportive behaviors resulted in reduction of PMS symptoms in women. In conclusion, Healthcare systems organizing educational intervention could be helpful in increasing spouse supportive behaviors and eventually in decreased PMS symptoms in women (6). Social support, especially by key family members, for example, spouse/partner and mother impact positively on the PMS symptoms (7). In a study where men's perception of premenstrual changes were studied, it was concluded that women with partners or spouses who acknowledge the existence of premenstrual changes are more likely to have a supportive environment during that time (8).

Objectives

The objective of this study was to check if urban middle-aged Indian men are observant enough about the physical or emotional changes that their wives or partners are going through during each menstrual cycle. And also if they are aware of this concept known as "PMS". This study also aimed at understanding how the men are dealing with the PMS phase of their wives or partners and their perceptions of their partners' or wife's experiences of PMS.

Methodology

A questionnaire containing a set of multiple-choice questions related to observations and symptoms with respect to the menstrual cycle of the wives/partners, was given to Indian men aged between 35

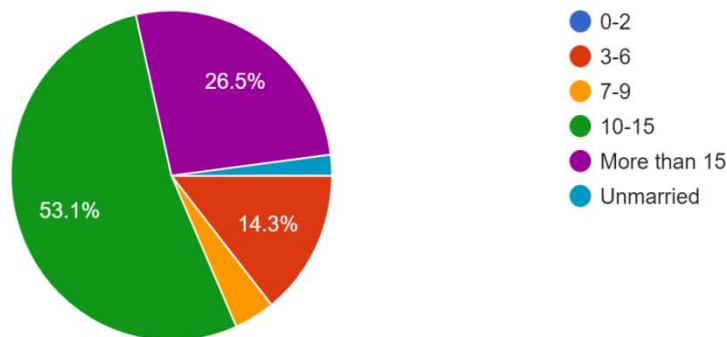
to 50 years. Total 50 responses were received. Out of the 50 responses received, more than 85% of men were of age between 35-45 years.

Based on the 50 responses we received, the collected data was converted into Pie charts and bar graphs. The final conclusion was made based on the percentage of men adhering to a certain response with respect to a specific question.

Findings and Analysis

Marital status

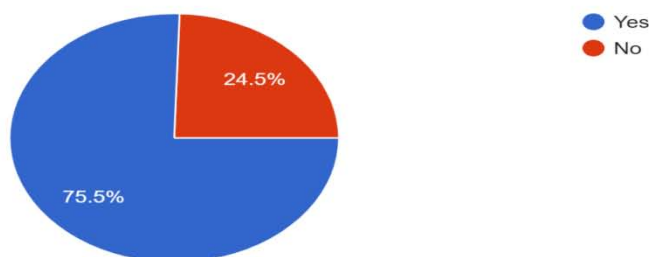
It is often found that the understanding between the partners depends upon the marital status and also the number of years spent together. The significant percentage of respondents of this study were married men. Of all the respondents, 53.1% were married for 10-15 years, 26.5% men were married for more than 15 years, 14.3% men were married for 3-6 years, 4.1% men were married for 7-9 years and a very small percentage (2%) were unmarried but were in a relationship.



Awareness of Partner's Menstruation Date

Men's perception and understanding towards their wives or partners with respect to the menstrual cycle can be truly found out by this simple question - Whether they are aware of the menstruation dates of their wives or partners.

It was found that the majority of respondent men (over 75%) were aware of their wife's or partner's menstruation dates and the remaining 24.5% men were found to be not keeping track of menstruation dates.



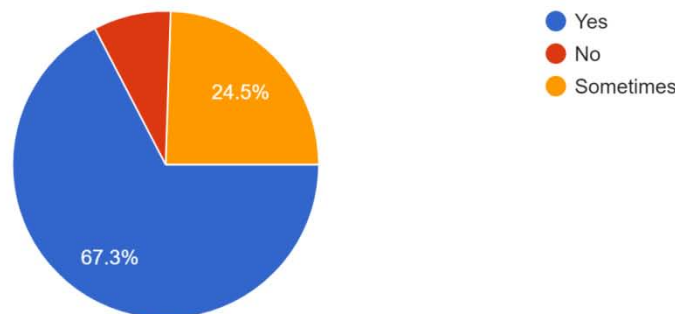
Noticing the Behavioral and/or Physical Changes

Before the start of menstruation, almost 75% of women experience PMS. These symptoms start around the luteal phase which is around 10-12 days before the menstruation. Often, a specific pattern of symptoms is seen in women during this phase. The physical symptoms include headache, joint pain, acne, diarrhea or constipation, bloating, weight gain, fluid retention, fatigue etc. And when concerned with the psychological or emotional symptoms women can experience mood swings,

irritability, crying spells, forgetfulness, tension or anxiety, depressed mood, food cravings, lack of interest in any activity, insomnia etc.

As the significant percentage of the respondent men were found to be aware of the menstruation dates of their wives or partners, the next question was to identify if they are observant or if they are aware of the pattern in which these symptoms occur.

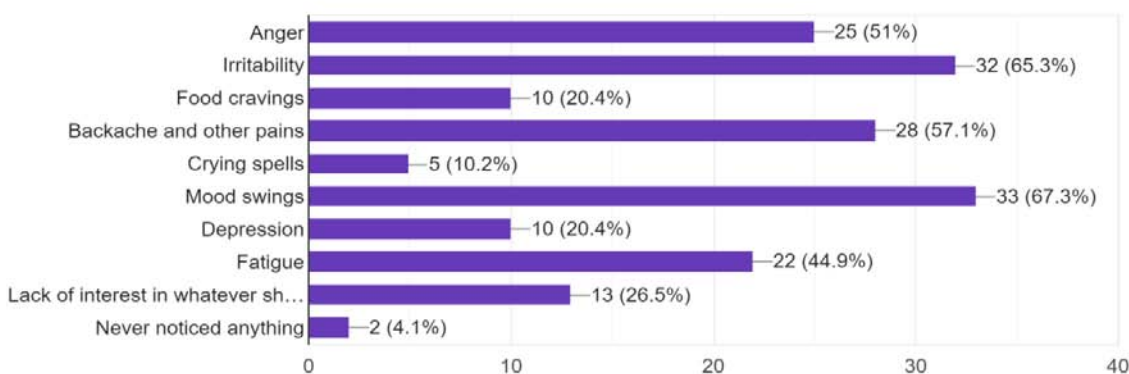
Over 67% of the respondent men said that they were aware of certain symptomatic patterns that they found in their wives or partners before the start of menstruation. Over 24% of the respondent men mentioned that they notice such symptomatic patterns in their wives or partners only a few times. And 8.2% of the respondent men were not observant about the symptomatic patterns that their wives or partners must be experiencing.



Type of Symptoms Observed By the Husband or Partners

As found in literature women go through a variety of physical and psychological symptoms during PMS ranging from body pain, headache, fatigue, weight gain, abdominal bloating, breast tenderness to anxiety, depression, crying spells, mood swings, irritability, appetite changes and food cravings, insomnia, social withdrawal and poor concentration.

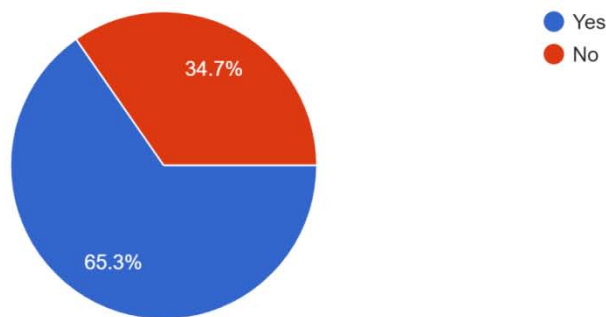
Of all the symptoms observed by the respondent men, mood swings were ranked at the first position, with over 67% of the respondent men claiming to be observing it in their wives or partners. Irritability was ranked at second position with over 65% of the respondent men mentioning it. It was then followed by backache and other pains (57%), anger (51%), fatigue (over 44%), lack of interest (over 26%), followed by depression and food cravings (20.4% each) and crying spells (over 10%).



Awareness of the Term Premenstrual Syndrome or PMS

Premenstrual syndrome or the PMS is an inherent part of most of the women's lives. They experience it each and every month. With husbands and partners being aware of this term, a positive picture can be painted where women are supported by their closed ones during PMS.

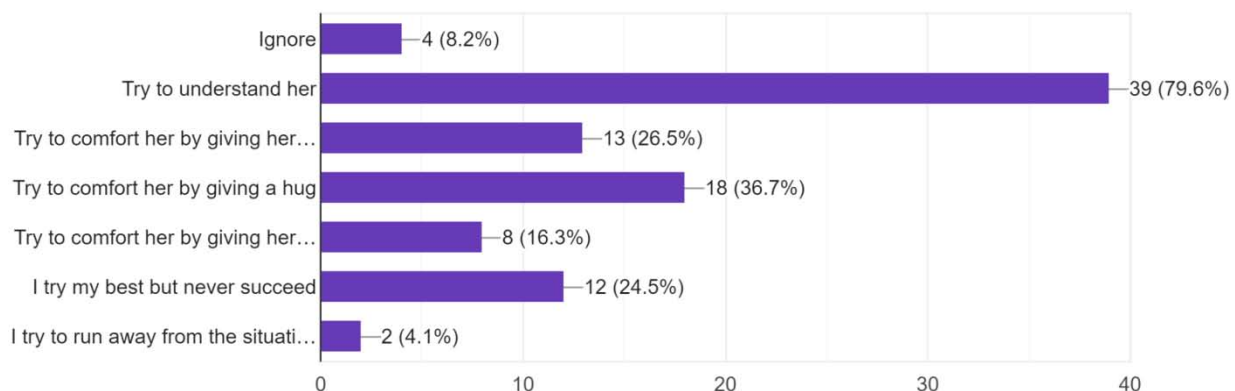
Of all the respondent men, over 65% claimed that they were aware of the term PMS and the remaining (almost 35%) responded that they have not heard of this term



How Do the Men Deal With PMS

Support from the spouse or partner can be of immense importance while a woman is going through PMS. Studies have found that a spouse's supportive behaviors can substantially reduce PMS symptoms in women. Women with partners or spouses who acknowledge the existence of premenstrual changes are more likely to have a supportive environment during that time.

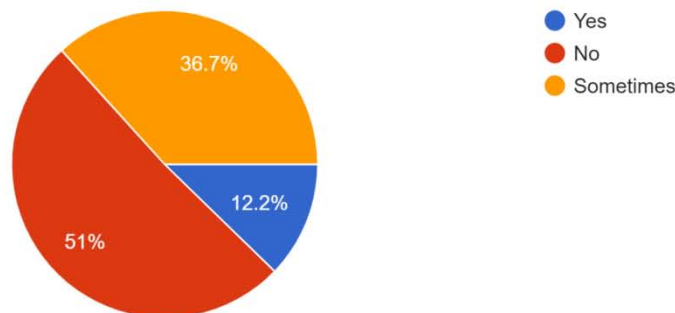
Men were asked about the way in which they deal with the PMS of their wives or partners. Majority of the respondents (over 79%) mentioned that they try to understand the condition their partner is going through. 36.7% men mentioned that they try to comfort their partners/wives by giving them hugs, Over 26% respondents claimed to provide comfort food to their partners, Over 16% of men said that they comfort their partners by giving them medicines. A significant percentage (24.5%) of respondents claimed that they try their best in dealing with the situation but never succeed in it. 8.2% men claimed to completely ignore their wives/partners while 4.1% of the respondents mentioned that they try to run away from such a situation.



Consulting A Doctor?

PMS symptoms are not permanent and these generally do not require any medical treatment. Women going through this phase may feel guilty and helpless and may need emotional support. Consulting a doctor on how to deal with such a situation or discussing with behavioral psychologists might solve the problem.

Men were asked if they felt the need of a doctor's consultation. Majority of the respondents (51%) mentioned that they do not think a medical consultation is needed. Over 36% of men claimed that they feel the need of medical consultation sometimes and 12% of men mentioned that they feel that a medical consultation is required to deal with PMS.



Conclusion and Recommendations

Based on the findings of this study, a majority of Indian men are aware of the premenstrual syndrome and are observant enough to understand that their wives or partners are going through some physical and emotional changes which they cannot control. It could also be interpreted from this study that a significant percentage of men want to help and support their wives or partners but are not well aware of how to do it. Which might then be eventually leading to men giving up on their wives during the phase of PMS. As per the literature, educational intervention to husbands/partners could be a solution for this problem. A study revealed that educational intervention significantly increased spouse's supportive behaviors leading to a significant decrease in PMS symptoms of their wives/partners, both physical and behavioral.

In conclusion, Healthcare systems organizing educational intervention could be helpful in increasing spouse supportive behaviors and eventually a substantial decrease in PMS symptoms can be achieved. In India, health workers, family doctors, gynecologists should actively participate in educating the men in the society about PMS and how to deal with PMS. Acknowledging the symptoms of PMS and helping the spouse go through the situation by providing immense emotional support may eventually result in a PMS-free menstrual cycle and PMS-free Indian women.

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