



News

Primary Care Women's Health Forum

Introduction

The introduction this month is written by Carolyn Sadler, GP and board member of the PCWHF. Carrie is well known for her work with the National Association for Premenstrual Syndrome (NAPS) and is an advocate for increasing the awareness and management of this under-represented concern.

Premenstrual disorders PMD – a new approach

Dr Carolyn Sadler, GPwSI in Gynaecology, Clifton Road Surgery, Ashbourne

25% of women in the reproductive age group experience significant symptoms premenstrually [1]. It is estimated that between 5% and 8% suffer severely.

So what do we call the condition: premenstrual tension, premenstrual syndrome or premenstrual dysphoric disorder?

During 2008, a group of international experts (the International Society for Premenstrual Disorders, ISPMDD) attended a series of meetings in Montreal, Canada. Their aim was to reach a consensus on the definition of premenstrual disorders and the criteria for their diagnosis. They hoped their work would lead to the development of a consistent approach to diagnosis and treatment, and aid research in the field. Together they produced what is now termed the Montreal Consensus [2,3], which defined 'core premenstrual disorder', and four other variants.

Core premenstrual disorder

Definition: Symptoms occur regularly in ovulating women during the luteal phase of the cycle, resolve by the end of menstruation, and are followed by a symptom free interval. Substantial

impairment of daily activities at work or school, social activities and hobbies, and interpersonal relationships is a key feature.

- and the four variants:

Premenstrual exacerbation of an underlying physiological or medical condition

Physical conditions, such as asthma and epilepsy, and psychological conditions, such as depression and anxiety, can all worsen premenstrually.

Premenstrual symptoms in the absence of menstruation

This may happen when amenorrhoea has been induced by insertion of a progestogen-releasing intrauterine system (IUS), following an endometrial ablation or hysterectomy with conservation of the ovaries.

Progestogen-induced premenstrual syndrome

In susceptible women, giving cyclical progestogen in the form of sequential HRT or combined hormonal contraceptives can induce symptoms.

Non-ovulatory premenstrual disorders

This disorder is poorly understood but it is thought that, in some women, follicular activity can precipitate symptoms even if ovulation does not occur.

Key aspects of management

Guidelines on the evidence based management of premenstrual disorders are detailed in the RCOG Green Top guidelines [4]

[View here.](#)

and our guidelines are free to download from the NAPS [5] website. <http://www.pms.org.uk>

Ten Top Tips

1. Encourage the woman to complete a menstrual chart over two cycles recording the frequency and severity of symptoms.

A popular one is the Daily Record of Severity of Problems or there is menstrual chart that can be downloaded from the NAPS website. www.pms.org.uk/support/menstrualdiary

There are phone apps that can track symptoms, for example, Pre MentricS

These can be very useful not only in clinching the diagnosis but also monitoring response to treatment

2. Over two hundred different symptoms have been described and both physical and psychological are weighted equally in the Montreal Consensus.
3. All women should be advised of general lifestyle changes that could improve symptoms
Including good nutrition, regular meals and exercise
4. Cognitive Behavioural Therapy has been shown to be effective in the treatment of PMDs.
5. Agnus castus has been shown to be effective in some women.
6. Evidence-based therapies include certain combined hormonal contraceptives, transdermal estradiol, selective serotonin re-uptake inhibitors (SSRIs) and GNRH analogues
7. Progestogens and progesterone can induce symptoms in sensitive women
8. Any specific treatment may take up to three months to be effective. If a woman's symptoms are severe refer for specialist support.
9. GNRH analogues and the ultimate, hysterectomy and bilateral oophorectomy can be offered in resistant cases
10. The National Association for Premenstrual Syndrome provides support for sufferers, their personal carers and the health professionals who care for them

These tips are also available on our website [here](#).

We offer a patient and health professional enquiry line, a public forum and regular conferences which cover the whole range of gynaecology and sexual health.

As part of our work NAPS has a database of doctors and specialist nurses who are able to see women for advice and treatment of premenstrual disorders. Not all prescribe GNRH analogues. Referring to a health professional with knowledge of the options and a listening ear can do a world of good!

If you would like to be added to our database please send your details, the contact details of your clinic/service and how GPs can refer to you to my e-mail carolynsadler@nhs.net

Finally, I am delighted to announce that at The Royal Horticultural Society Hampton Court Flower Show (5th-10th July 2016) we have a garden designed by Emma Bannister, a Chartered Landscape Architect. It is called PMS: Outside Inside for NAPS

So pay us a visit and help us to raise the awareness of the impact of premenstrual disorders on women and their families and how, as health professionals we can make a difference.

Carolyn Sadler
East Midlands Lead of the Primary Care Women's Health Forum

Meetings & Events

Primary Care Women's Health Forum Conference 2016



Primary Care Women's Health Forum

Women's Health - What's New in 2016

The Primary Care Women's Health Forum's 8th annual conference will be held on **Wednesday 23rd November 2016** at the **St. John's Solihull**. Once again the sessions are relevant for the work done in primary care and our speakers will challenge us to provide care fit for purpose for our female patients.

Since launching this year's conference we are pleased to say we have received an overwhelming response. The conference provides an exceptional networking and learning opportunity for those with an interest in female health. Click [here](#) to book now to avoid disappointment.

There is also a further opportunity for you to enter the **Best Practice Award** and share your work.

In addition, delegates will be eligible to gain up to **6 hours of reflective learning**.



[More Information](#)

[Book Now](#)

PCWHF Women's Health Webinars



Primary Care
Women's Health
Forum

The Primary Care Women's Health Forum will be holding a series of webinars on Women's health matters, sponsored by MEDA Pharmaceuticals. The Webinars will cover a range of topics, including the UKMEC, Managing the Menopause and PCOS.

MEDA Pharmaceuticals has had no involvement in the design or content of the webinars.

These webinars will offer 1 hour's worth of CPD points and will be hosted by the PCWHF's own expert members. To register or for more information, please follow the links below.

Previous webinars such as the very popular UKMEC are available to view [here](#).



EllesteTM
estradiol +/- norethisterone

[More Information](#)

[Book Now](#)

A One Day Update on Gynaecology

The National Association of Premenstrual Syndrome will be holding their 'A One Day Update on Gynaecology' conference on the 1st July at Nottingham University Sutton Bonnington Campus.

You can register [here](#).

Delegates will be eligible to gain 5 hours of reflective learning

Useful Papers & Guidelines

Recent Papers

[Pregnancy Activity](#)

This paper on Activity in pregnancy for patients with a history of pre-term birth may offer some help for that question we are often asked in primary care about how much exercise should a pregnant woman be doing.

This may be accessed [here](#).

Incontinence

Everything you ever needed to know about incontinence – a fantastic resource written by the leading international experts can be found via this [link](#)

Foetal Movements

This infographic may be used for display purposes to help pregnant women understand the importance of reduced foetal movements, can be viewed [here](#).

NHSE

The NHSE have published a pocket guide to help to identify those at risk of Child Sexual Exploitation, attached [here](#).

The BMS

The BMS have recently published news that HRT may prevent heart disease, you can read more [here](#).

Patient information

Useful App

Women's health concern - patient fact sheets:

<https://www.womens-health-concern.org>

The new fact-sheets include the following topics:

- The menopause
- Breast cancer: risk factors
- Breast care and self-examination
- Complementary/alternative therapies for menopausal women
- Contraception for the older woman
- HRT
- HRT: Benefits and risks – what you should know
- HRT: The history
- HRT: Summary
- Menopausal Hair Loss
- Osteoporosis: bone health following the menopause

- Ovarian cancer
- Prolapse: Uterine and vaginal

Request for Help

Request for help from Judy Shakespeare

Help with finding answers to those questions we never have the research from Judy Shakespeare – RCGP clinical lead for women's health.

The Miscarriage Priority Setting Partnership (PSP) has moved into the next stage of the process to identify the most important questions that still need to be answered by miscarriage research.

The Miscarriage Priority Setting Partnership (PSP) aims to help women and those affected by miscarriage work together with professionals to agree which are the most important research questions. We hope this will help direct research and address existing gaps in understanding, for both women and those affected by miscarriage.

To do this we need your help. We need to identify the questions that matter to you the most. The survey can be completed by women who have had a miscarriage, those affected by miscarriage and professionals. We would appreciate if you could complete this survey and share it with your networks to allow as many people as possible the opportunity to take part.

The survey can be found at www.miscarriagepsp.org/survey. Further information about the Miscarriage Priority Setting Partnership can be found at our website.

You can also download the survey to print from [here](#).

[Attached](#) is a publicity sheet with suggested tweets and text that can be adapted and shared to promote the project.



Please visit our [website](#), where new members can also [join the Forum for free](#).

[Unsubscribe from this newsletter](#)