

THE PMDD PROJECT

HOW TO GET A PMDD DIAGNOSIS

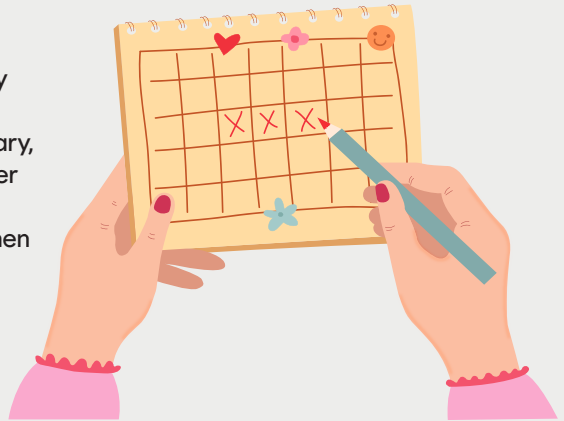
Receiving a PMDD diagnosis can be a long and challenging journey, often taking an average of 12 years.

Many individuals face struggles in articulating their symptoms and advocating for their needs, leading to feelings of frustration and vulnerability. It's crucial to persist through this process, even when faced with misdiagnoses or a lack of understanding from healthcare providers.

Here are our key tips to help you navigate the path to obtaining a PMDD diagnosis.

Track your symptoms:

Start by tracking your symptoms daily for at least two menstrual cycles. You can use a symptom tracker app, a diary, or download the free symptom tracker on our website. Record when your symptoms start, their severity, and when they stop. PMDD symptoms typically appear in the two weeks before your period and fade shortly after it starts.



Consult your GP:

Book an appointment with your GP or healthcare provider, preferably one who specialises in women's health, gynaecology, or endocrinology. When booking your appointment, be sure to note that you suspect you have PMDD. This allows the healthcare provider to review your concerns before your visit and prepares them to look into it effectively.

Take your symptom diary with you, as it's crucial for identifying the pattern of PMDD. Your GP will ask about your medical history, do a physical exam, and possibly run some tests to rule out other conditions like thyroid issues or mental health disorders. Sometimes, receiving a diagnosis may require speaking to a psychiatrist or psychologist, who can provide further assessment and refer you accordingly.

Ruling out other conditions:

PMDD can be confused with conditions like anxiety, depression or bipolar, so your GP may explore these options. However, the key to diagnosing PMDD is the cyclical nature of your symptoms, which should improve within a few days of starting your period and disappear until the next cycle.

Meet diagnostic criteria:

To receive a diagnosis of PMDD, you must have at least five symptoms, which one being mood-related. These symptoms should occur during the majority of your menstrual cycles over the past year and significantly disrupt your daily life, including work, relationships, or general wellbeing.

Consider a referral to a specialist:

If your GP isn't familiar with PMDD, or if your symptoms are complex, they might refer you to a specialist like a gynaecologist or psychiatrist. Specialists with experience in hormone-related mood disorders can offer further insight and support.

The key mood-related symptoms include:

Mood swings

Irritability or anger

Anxiety or tension

Depression or hopelessness

Additionally, you may experience physical symptoms like:

Bloating

Fatigue

Breast tenderness

Difficulty concentrating

Be prepared for the journey:

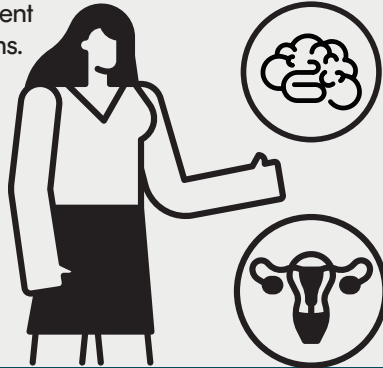
It's important to note that, on average, it can take up to 12 years to receive a PMDD diagnosis. This lengthy process can be tough, as it requires you to be vulnerable with healthcare providers about your thoughts and symptoms, which can feel very personal and invasive. It can be disheartening when you continue to be misdiagnosed or ignored, but it's vital to keep advocating for yourself.

Don't hesitate to seek out a new GP or specialist until you find one who recognises PMDD, and take as much information as possible to your appointments.

Persistence is key, and finding a supportive healthcare provider can make a significant difference in your journey towards diagnosis and treatment.

Get your diagnosis:

Once your doctor confirms your symptoms match PMDD and occur in a cyclical pattern, you should be able to receive a diagnosis. This can be a huge step in understanding your health and exploring treatment options to manage your symptoms.



TOP TIPS TO TAKE CONTROL IN THE DOCTOR'S ROOM

Come prepared:

Bring credible resources about PMDD to help educate your doctor quickly if they are not familiar with the condition.

Use the right terminology:

Mention that PMDD is a severe, hormone-based disorder and not just bad PMS.

Ask about next steps and follow ups:

Ensure you leave with a plan.

Describe your symptoms clearly:

Take a symptom tracker and be really specific with what you're saying.

Be clear with what you need:

Bring a support person if possible:

Don't be afraid to seek a second opinion:

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