

## Do SSRI's help premenstrual syndrome and premenstrual dysphoric disorder?

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**Clinical Question** How effective and safe are selective serotonin reuptake inhibitors (SSRIs) when used to treat premenstrual syndrome (PMS) and premenstrual dysphoric disorder (PMDD)?

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**Bottom Line** SSRIs are likely effective in reducing symptoms of PMS and PMDD, whether taken continuously or during the luteal phase, with continuous use showing slightly better results. The treatment helps with psychological, physical, and functional symptoms, although effect sizes are generally small to moderate. SSRIs can reduce premenstrual symptoms significantly and although not providing a cure they could potentially reduce severe symptoms enough to improve quality of life.

However, SSRIs are associated with adverse effects, including nausea, fatigue, gastro complications and sexual dysfunction, which can impact quality of life. Long-term use can lead to persistent issues in these areas. Despite these side effects, SSRIs remain a valuable option for managing PMDD and potentially PMS, especially in cases with severe symptoms.

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**Caveat** Studies indicate a high relapse rate of premenstrual symptoms after discontinuing SSRIs, with 60% relapsing after four months and 41% after 12 months of sertraline therapy. Relapse risk is highest in women with severe baseline symptoms, regardless of treatment duration. These findings suggest the need for careful consideration of treatment length.

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**Context** PMS affects 15-20% of women, leading to substantial distress and impairing daily functioning, with symptoms ranging from mood swings and depression to physical discomfort like bloating and headaches. The severe form, PMDD, affects 3-8% of women and is recognized as a distinct medical condition. SSRIs may be effective in treating PMS and PMDD because they influence serotonin levels, a neurotransmitter involved in mood regulation. Since PMS symptoms are linked to hormonal fluctuations affecting neurotransmitters like serotonin, SSRIs can help stabilize mood and reduce symptoms. Their rapid efficacy in PMS suggests they may target different receptor sites than those involved in traditional mood disorders.

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**Cochrane Systematic Review** Jespersen C, Lauritsen MP, Frokjaer VG, Schroll JB. Selective serotonin reuptake inhibitors for premenstrual syndrome and premenstrual dysphoric disorder. Cochrane Database of Systematic Reviews 2024, Issue 8. Art. No.: CD001396. DOI: 10.1002/14651858.CD001396.pub4. This review contains 34 trials which included 4563 people.

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Systematic review link:

<https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD001396.pub4/full>