

It's not you it's me. It's not me, it's PMDD

Surviving Premenstrual Dysphoric Disorder (just barely)

Author: Sandra Sheils

"A captivating journey through the depths of human emotion and resilience. A must-read!" - Emily Watson, Bestselling Author of "Echoes of Tomorrow"

"Intricately woven with heart-wrenching prose, "It's PMDD" is a testament to the power of love and forgiveness." - Thomas Parker, Award-winning Novelist

"Sharon Joseph's storytelling prowess, shines brightly in her daughters work in this unforgettable tale of hope and redemption." - Sarah Bennett, Literary Critic for The Book Review

"An inspiring narrative that will linger in your thoughts long after you've turned the last page." - Jessica Reynolds, Editor-in-Chief, Storyteller's Quarterly

Foreword by Dr. James P. Hurren

As a psychologist deeply invested in the promotion of mental health, I am proud to endorse “It’s Not You, It’s Me. It’s Not Me, It’s PMDD.” Sandra Sheils’ mission to illuminate the often-overlooked challenges of PMDD is not only timely but essential. This book serves as a vital resource for individuals navigating the complexities of this condition, empowering them to take an active role in their health journey.

By sharing a patient’s perspective, this work bridges the gap between personal experiences and medical care. The inclusion of practical tools alongside healthcare providers’ plans equips readers to manage their symptoms more effectively and with greater confidence. This holistic approach fosters empowerment 24/7, ensuring that those affected by PMDD have the support they need at every stage of their cycle.

Moreover, the innovative box subscription service reflects a commitment to ongoing support and engagement, reducing the overall impact of PMDD on daily life. This comprehensive initiative not only promotes understanding but also encourages resilience among those facing these challenges.

I wholeheartedly support Sandra in her mission to inspire and uplift, making this book an invaluable companion in the journey towards understanding and managing PMDD.

Dr. James P. Hurren

Doctor of Psychology

In this book, I will share my journey with PMDD, from the early confusing days of adolescence to the eventual diagnosis and management strategies I've developed. My goal is to provide awareness, promote self-advocacy, and offer practical tips for control and adaptation.

Through personal stories and practical advice, I hope to help you; identify the signs of PMDD, observe the patterns, anticipate your responses, and ultimately take control of your life.

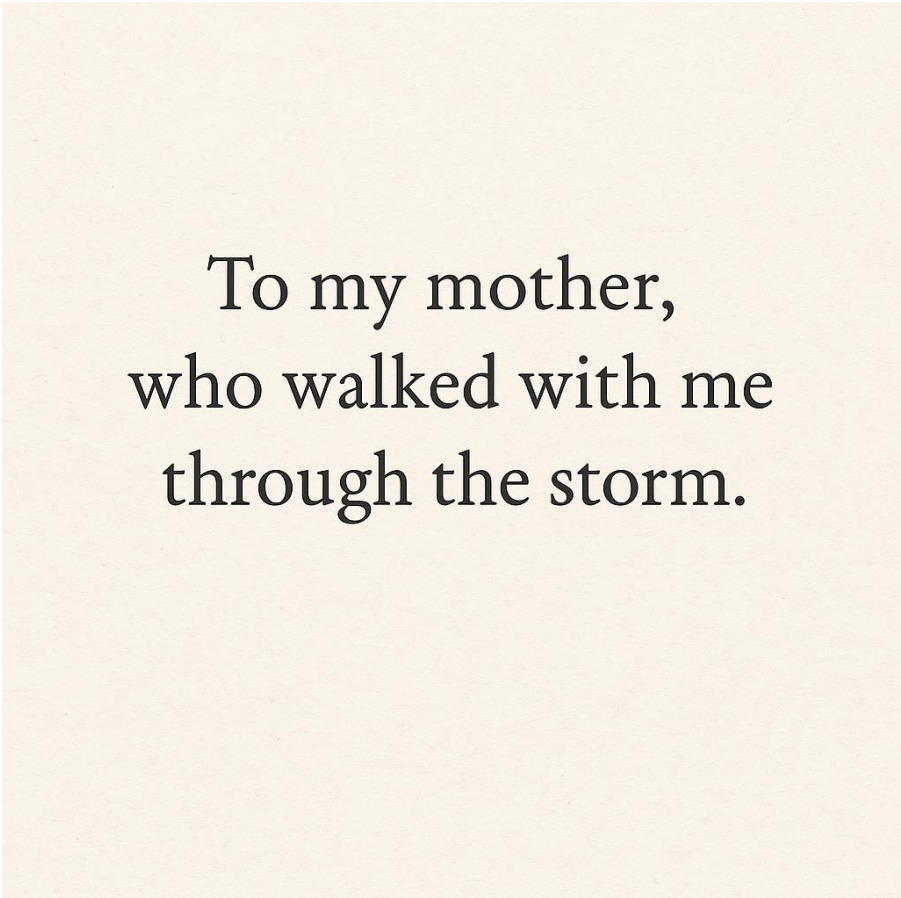
When you know what you're dealing with, you can begin to manage it effectively.

This book is for anyone who has felt lost in "the cycle", for those seeking understanding, and for those wanting to reclaim their lives from PMDD.

This book is a journey of discovery, understanding, and empowerment. The skills that you will acquire to self-manage will help you cope with the turbulence.

I dedicate this book to my mother, an author and storybook mom who opened my mind to see the smallest details in the universe and appreciate those. I also dedicate this book to my father, an investigator who trained me to see the facts but seek the reasons why.

Let's embark on this journey together with tools and grace.



To my mother,
who walked with me
through the storm.

DISCLAIMER

The experiences shared in this book are deeply personal and are meant to provide insight and understanding of PMDD. They are not a substitute for professional medical advice, diagnosis, or treatment. If you suspect you have PMDD or are experiencing severe symptoms, please consult a healthcare professional. Self-care is essential, but it should be complemented by appropriate medical care and support.

Additional caution, some may be triggered by harsh language, suicide ideation, controversial topics and violence.



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Preface: Taking Responsibility for Self-Care During PMDD Episodes

Before you dive into the pages of this book, I want to take a moment to address a crucial aspect of living with PMDD (Premenstrual Dysphoric Disorder), the responsibility to care for yourself during an episode.

PMDD is a severe and chronic medical condition characterized by extreme mood swings, irritability, and other symptoms that can significantly impact daily life. It's not just about coping with the physical pain; it's about managing the emotional and psychological turmoil that comes with it. It is not a mental disorder; it is a physiological disorder.

PMDD episodes can be overwhelming and sometimes dangerous. It is vital to:

Recognize the signs. Be aware of your symptoms and how they manifest.

Seek support. Reach out to friends, family, or support groups who understand what you're going through.

Get professional help. Don't hesitate to consult with healthcare providers for proper diagnosis and treatment options.

Develop a self-care routine. Create a plan that includes strategies for managing your symptoms and maintaining your well-being.

Your health and safety are paramount. Use this book as a guide and a source of comfort, but always prioritize seeking professional help when needed.

Overview of PMDD

Premenstrual Dysphoric Disorder (PMDD) is a severe, chronic medical condition that affects individuals who menstruate. Unlike typical premenstrual syndrome (PMS), which can cause mild discomfort and mood swings, PMDD is characterized by extreme emotional and physical symptoms that disrupt daily life. These symptoms usually begin in the luteal phase of the menstrual cycle (the time between ovulation and the start of menstruation) and can last until the first few days of menstruation.

The luteal phase is a crucial part of the menstrual cycle, occurring after ovulation and before the start of menstruation, typically lasting around 14 days. During this phase, the corpus luteum secretes progesterone, which prepares the uterine lining for a potential pregnancy. Estrogen levels also rise again after an initial drop post-ovulation. These hormonal changes lead to physical effects such as a thickened endometrium and a slight increase in basal body temperature.

Many women experience mood swings, irritability, anxiety, depression, bloating, breast tenderness, fatigue, and headaches during this phase, symptoms collectively known as premenstrual syndrome (PMS). For those with premenstrual dysphoric disorder (PMDD), the sensitivity to these hormonal fluctuations can result in severe emotional and physical symptoms. The hypothalamus and pituitary gland play a critical role in regulating the menstrual cycle by releasing hormones that control ovulation and the subsequent luteal phase. Understanding the luteal phase's impact is essential for diagnosing and managing PMDD, with treatments often aiming to stabilize hormone levels or mitigate their effects on the brain and body.

This is significant. PMDD affects an estimated 3-8% of menstruating individuals and is recognized by the American Psychiatric Association as a mental health disorder. The exact cause of PMDD is unknown, but it is believed to be related to hormonal fluctuations and the brain's response to these changes.

Symptoms and Diagnosis

PMDD symptoms can vary widely from person to person, but common symptoms include:

Emotional symptoms. Severe mood swings, irritability, anger, depression, anxiety, feelings of hopelessness, and crying spells.

Behavioral symptoms can be disruptive. Difficulty concentrating, changes in sleep patterns, food cravings or binge eating, and social withdrawal.

Physical Symptoms include fatigue, bloating, breast tenderness, headaches, joint or muscle pain, and gastrointestinal issues.

To be diagnosed with PMDD, these symptoms must be validated by a medical professional:

1. Symptoms present in the majority of the 12 month cycles.
2. Interfere significantly with work, school, social activities, or relationships.
3. Not be an exacerbation of another disorder, such as major depressive disorder or anxiety disorder, although these conditions can coexist with PMDD.

Understanding the Impact

The impact of PMDD goes beyond the individual experiencing it. It affects their relationships, work, and overall quality of life. Understanding PMDD is the first step in managing it. By recognizing the patterns and symptoms, individuals can better anticipate and prepare for their episodes, reducing the disorder's overall impact.



“I can’t believe I’m stuck in this hell again! Will it ever end?”

“I’m so tired of fighting. Maybe it would be easier if I just disappeared.”

“I hate myself for feeling this way. I don’t deserve to feel happy.”

“Everything feels pointless. What’s the point of going on?”

“I’m screaming inside, but no one can hear me. I’m utterly alone.”

“I’m a shadow of who I used to be. Why can’t I just be normal?”

“This darkness is consuming me. I can’t see a way out!”

“I feel like a monster, and I don’t know how to control it.”

“What if I hurt myself? It might be the only relief.”

“Why can’t I just escape this prison of my own mind?”



Premenstrual Dysphoric Disorder (PMDD) is a severe form of premenstrual syndrome that affects an estimated 3-8% of menstruating individuals, typically during their reproductive years, from youth to menopause. These are the many faces of PMDD.



Surviving with PMDD: A journey of awareness, self-advocacy, control, and adaptation

For 42 years, or 504 cycles, I have lived with PMDD *unknowingly*—a relentless journey marked by emotional, physical, and psychological challenges. Each cycle has been a unique experience, blending phases of intense struggle with moments of insight and growth. Through these years, I have learned through hindsight, the vital importance of awareness, self-advocacy, control, and adaptation. This book is my attempt to share my story, help you identify your own patterns, and provide the tools necessary to navigate the turbulent waters of PMDD with the foresight of my experience. Mostly, I intend to leave you with hope.

Awareness: Recognizing the Patterns

For a long time, I was adrift in a sea of confusion, unable to grasp what was happening to me. My emotions seemed like unmanageable waves of anger, sadness, and despair, crashing over me with no warning. After several years of experience with these cycles, I sought testing for Lupus, Rheumatoid Arthritis, Multiple Sclerosis, and any other auto immune disorder that was similar. I had a clear cycle of symptoms.

It wasn't until later in life that I discovered the term PMDD and began to recognize the related cyclical patterns in my behavior. This revelation was a turning point, offering me a clearer understanding of my condition.

Awareness is the bedrock of managing PMDD. By identifying the distinct cycle of symptoms that rise and fall with your menstrual cycle, you gain a powerful tool. This knowledge empowers you to anticipate changes and prepare yourself mentally and emotionally. When you know what to expect, you can better equip yourself to face the challenges that arise.

Self-Advocacy: Finding Your Voice

Once you become aware of the patterns, the next crucial step is self-advocacy. I spent years feeling isolated and misunderstood, my symptoms often dismissed as mere “female problems” or mood swings even a sharp personality. It isn't personality though. It took tremendous courage to find my voice and insist on being taken seriously.

Self-advocacy means seeking out knowledgeable medical professionals, educating those around you about your condition, and standing up for your needs. It's about asserting, “This is real, and I deserve support and understanding.”

Demand the care and respect you deserve, and don't settle for less.

Control: Mastering Your Response

Surviving with PMDD can often feel like riding a roller coaster without a safety harness. However, through awareness and self-advocacy, you can begin to take control. Understanding your triggers and symptoms allows you to develop strategies to manage them.

Anticipating the onset of a PMDD episode enables you to take proactive measures to mitigate its effects. This might involve adjusting your schedule, practicing self-care, or communicating your needs to loved ones. Control doesn't mean eradicating the symptoms—it means managing them in a way that allows you to live your life on your terms.

Adaptation: Embracing Change

PMDD is a part of my life, it always has been. It does not have to define me but I am afraid until now, it has. Adapting to its presence has been a journey filled with trial and error, learning and unlearning. Each cycle has taught me something new about myself and how to cope. Adaptation involves being flexible, open to change, and willing to explore different approaches to find what works best for you.

Accepting that there will be good days and bad days is also part of this process. It means granting yourself grace on the tough days and celebrating the small victories. Adaptation is about building a life that accommodates your needs while still pursuing your goals and dreams.

When You Know, You Know

One of the most challenging aspects of living with PMDD is the uncertainty. When you are unaware of what is happening, it can feel as though you are losing control. However, once you understand your condition, a tremendous weight is lifted. The clarity that comes with knowing what you're dealing with is both empowering and liberating.

“When you know, you know.” This simple truth can transform your experience. By identifying the issue, observing the patterns, and anticipating your responses, you gain the power to control the outcome. Knowledge is indeed power, and understanding PMDD equips you to take charge of your life.

A Journey of Release

This book is more than just a collection of my experiences; it is a guide designed to help you navigate your own journey. By sharing my story, I hope to release myself from the burdens of the past and offer you a roadmap for understanding and managing PMDD.

Together, we can break the silence, shatter the stigma, and create a supportive community. As you read these pages, may you find the courage to recognize your patterns, advocate for yourself, take control of your responses, and adapt to the challenges with resilience and grace.

Welcome to the journey of awareness, self-advocacy, control, and adaptation. Welcome to a life where you can confidently say, “It's not you, it's me. It's not me, it's PMDD.”

The Blueprint for Crazy: A child's experience



Growing up in the 70s, my childhood seemed average on the surface, but beneath it lay an emotional complexity that shaped much of my early years. My mother, a hopeful and idealistic Catholic school girl, dreamed of the perfect marriage and family, embodying love and domestic bliss. My father, a young 20-year-old businessman, had his trust damaged by a prior relationship.

Entering into a traditional marriage with my mother, he faced expectations that were challenging for him. Within the first year of their marriage, my mother became pregnant, and my father found himself navigating his new role while my mother's focus shifted to her delicate condition. When I was born, I became the center of my mother's world, which left my father feeling somewhat sidelined. This dynamic contributed to a strained relationship between my father and me.

As a child, I often experienced the tension between my father's frustration and my mother's disappointment. I was frequently disciplined, sometimes for reasons I can't fully recall or that seem insignificant now. I remember the feelings of anger that followed. Bedtimes were often a struggle because I wasn't tired or because I suffered from frequent nightmares. If I didn't go to bed, my father would then keep me up all night watching TV as a consequence for not going to bed on time. If I nodded off, he would wake me, reminding me of my decision to stay up late. School the next day didn't seem to factor into these moments.

Elementary School: A Battlefield of Emotions

In elementary school, I was an easy target for teasing—chubby, with a heavysset mother, and different from the other kids. Today I can hear the name-calling and the mean teasing. The sting of their taunts cut deep, but it wasn't just the bullying that left scars. I grappled with something much more elusive and terrifying. Thankfully, when I entered fourth grade, we moved to a new town,

offering a sliver of hope for a fresh start. But even with this new beginning, the shadows of my inner struggles clung to me, refusing to let go.

As a “tomboy”, a shy child, and a creative soul, I was already out of sync with my peers. But my life was also overshadowed by anger, night terrors, and family struggles that in themselves felt like cruel, unending nightmares.

I would wake up in the dead of night, drenched in sweat, my heart racing as if it were trying to escape from my chest. These nightmares were more than just childhood fears; they were intense, emotionally charged, and left me feeling drained and anxious. The terror was so overwhelming that I would stumble to my parents’ room, seeking refuge on the floor of their bedroom, which I now recognize as early symptoms of PMDD.

Research suggests that PMDD is influenced by fluctuations in hormones like estrogen and progesterone, which can affect the brain's neurotransmitters, such as serotonin, that regulate mood and sleep. Even before menstruation ever begins, hormonal changes during puberty can trigger these early manifestations. The nightmares I experienced were likely a result of my body's sensitivity to these hormonal shifts, foreshadowing the more severe emotional and physical symptoms that would emerge with the onset of my menstrual cycle.

The Emergence of Anxiety: A Distorted Reality

By the time I was 12, the intensity of my anxiety had reached new heights. I started to vomit when I wasn’t ill. It was from the sheer stress and dread that gripped me—before school, during class, after school, and even at home. It wasn’t an eating disorder but a profound reaction to the anxiety that seemed to have a life of its own. Each instance of vomiting was a stark reminder of the internal chaos I could not escape.

Gym class in junior high became another arena of suffering. While some girls were allowed to sit out due to their periods, my days on the bench were frequent and prolonged. The gym teacher's harsh judgments and cruel labels—calling me lazy and fat—further isolated me from my peers. It was as if my body’s natural reactions were a source of scorn rather than understanding. The emotional storm within me intensified as my body became a battleground, constantly under siege. Every month, or every two to three weeks I physically became depressed or immovable. Others might view me as lazy, but I literally had no will or drive to participate in life. Unusual for an otherwise vibrant child of this age.

The Unseen Battle: Living with PMDD

The relentless bullying at school, coupled with the harshness of the anger within my home, left me feeling as though I was constantly sinking beneath an ocean of despair. Comfort was difficult to find and when it was found it was difficult to hold on to. The vomiting was my body’s desperate cry for help, a physical manifestation of the emotional turmoil that raged within me. Each day felt like I was caught in a storm with no escape, my sense of helplessness growing with every passing moment.

As I navigated these turbulent years, I began to notice the early signs of what would later, decades later, be identified as PMDD. The emotional upheaval, with its crushing weight of anxiety and

depression, the physical symptoms of bloating and cramping, and the constant feeling of being different from others, were all clues that pointed to a deeper more complex issue.

Without PMDD I might have experienced the typical ups and downs of childhood and adolescence—worries about school, friendships, and fitting in—but these concerns would be less consuming and more manageable. Their struggles might be painful but would not be compounded by the profound, cyclical emotional and physical upheaval that defines PMDD. For them, gym class might be a place to test their athletic skills or socialize, not a battlefield where their body's natural reactions are met with scorn. My anxiety would not manifest in physical symptoms as severe as vomiting, and their sense of isolation would not be as pervasive.

I lived, I mean, *I live* a different experience.

The journey through childhood and adolescence for me was marked by confusion and pain, with each cycle of symptoms leaving me more bewildered.

As I reflect on these formative years, I recognize the profound impact of living with PMDD from such an early age. The torment, the isolation, and the unanswered questions were all part of a struggle that many would not fully understand. Yet, it was this very struggle that shaped my path and ultimately led to a deeper understanding of myself and my condition. It's not me, it's PMDD.

What I experienced was not just typical growing pains. Although PMDD is commonly associated with the luteal phase of the menstrual cycle, its roots can often reach back to pre-menses years, especially for those genetically predisposed or particularly sensitive to hormonal fluctuations.

My emotions would swing on the clock—one moment I'd be basking in joy, and the next, I'd be engulfed by an intense, inexplicable sadness or irritability. These mood swings were not just fleeting whims but deep, unrelenting shifts that made everyday interactions feel like navigating a stormy sea.

In these early years, the endocrine system starts its rhythmic dance, orchestrated by the hypothalamus and pituitary gland, releasing signals that direct the ovaries to produce estrogen and progesterone. These hormones play crucial roles in regulating not only the reproductive system but also the delicate balance of neurotransmitters in the brain, such as serotonin and dopamine.

For those with a predisposition to PMDD, this hormonal interplay takes on a more intense and often disruptive form. The fluctuations in estrogen and progesterone can lead to significant changes in the levels of serotonin, a neurotransmitter that is vital for mood regulation. When serotonin levels drop, it can trigger a cascade of emotional and physical symptoms that are hallmark characteristics of PMDD.

As puberty approaches, you may begin to experience mood swings, irritability, or anxiety, even before the menstrual cycles become regular. This is because the brain's response to hormonal signals is amplified, leading to an exaggerated response to normal hormonal changes. The body's chemical sensitivity is not a defect but rather a heightened responsiveness that, under different circumstances, might have served as an adaptive trait.

During the luteal phase, the second half of the menstrual cycle, progesterone levels rise. For most, this phase is marked by mild changes, but for those with PMDD, it can trigger a significant drop in

serotonin. The body's natural opioids, which help to stabilize mood, may also be less effective during this time, leaving individuals more vulnerable to the emotional and physical symptoms that characterize PMDD.

This biochemical sensitivity can be traced back through family histories, often revealing a lineage of women who have struggled with mood disorders or menstrual-related symptoms. This genetic predisposition means that the brain's serotonin system may have subtle differences that make it more reactive to the hormonal milieu of the menstrual cycle.

Understanding the chemical and hormonal underpinnings of PMDD is crucial for those seeking to manage its impact. It sheds light on why symptoms can feel so intense and overwhelming, and why traditional approaches to mood disorders may not always be effective. This awareness can also foster compassion and self-acceptance, recognizing that PMDD is not a matter of willpower or weakness, but a complex interplay of biology and environment.

Persistent anxiety shadowed my childhood. I would often find myself overwhelmed by worry and unease, my mind racing with fears that seemed out of proportion to the actual situations. The constant dread was a silent, unseen weight that colored every aspect of my young life.

There were days when hopelessness seeped into my soul, casting a dark veil over activities I once loved. The joy I had felt in simple pleasures vanished, leaving me feeling detached and devoid of purpose. The loss of interest in what once brought me happiness was a painful echo of the inner turmoil I couldn't yet name.

My irritability was a relentless force, often directed at those closest to me without a clear reason. The frustration would build up, leading to outbursts of anger that left me feeling more isolated and misunderstood. It was as if I was perpetually on edge, unable to escape the internal storm.

The night terrors that plagued my sleep were particularly harrowing and persisted through age fifteen.

Physical Symptoms: The Hidden Agony

While the emotional and psychological symptoms are often the most debilitating, physical symptoms also play a role, though they seem less overtly disruptive to those around me.

The exhaustion I felt was not simply from a lack of sleep but a persistent weariness that clung to me, no matter how much rest I got. It was as if my body was constantly running on empty, dragging through each day with a heavy, unshakable fatigue. I was a difficult child to wake up in the mornings.

My sleep was a battlefield. I struggled to fall asleep, would wake frequently throughout the night, or wake up far too early, only to be haunted by those lingering shadows of my night terrors. The disrupted sleep compounded the sense of never truly resting, leaving me more vulnerable to the emotional upheavals of the day.

The physical complaints—stomachaches, headaches, and generalized body pain—felt like a cruel irony. They were not easily explained but were a constant reminder of the underlying distress. These

physical symptoms seemed to mirror the emotional and psychological chaos, creating a feedback loop of discomfort and suffering.

I found myself retreating from friends and family, preferring solitude over social interaction. The emotional distress made it difficult to engage with others, leaving me feeling isolated and detached from the world around me.

At such a young age this seemingly effected every aspect of my life and consequently forming the person I would become.

Concentrating on schoolwork became increasingly challenging. The combination of emotional turmoil and physical discomfort made it hard to focus, complete tasks, and perform well. The academic struggles reflected the broader difficulties I faced in managing my internal world. I struggled with difficult analytical topics and breezed through others where my own thoughts and mind were less constrained in the work.

Sudden outbursts of anger or tears seemed to come out of nowhere, triggered by seemingly minor events. These unpredictable reactions were a manifestation of the internal storm, leaving me feeling out of control and bewildered.

All this fed into a strained young family dynamic. I felt constantly overlooked and misunderstood.

The realization that these early experiences were part of a larger condition offers a new perspective on the challenges I faced and a greater sense of empathy for the struggles of those with similar experiences. Understanding this now, I can acknowledge the depth of my journey and the resilience it has required to navigate these hidden storms.

Predictability of PMDD

PMDD is often cyclical and predictable once menstruation begins, typically aligning with the luteal phase (the two weeks before menstruation). However, in pre-menses individuals, the symptoms can be more sporadic and harder to predict. The following factors can provide some predictability:

If there is a family history of PMDD or other mood disorders in the family, there is a higher likelihood of developing PMDD. However, this is Impossible to know prior to 2013.

Early onset symptoms include emotional and behavioral symptoms that appear in childhood.

Hormonal sensitivity, or an allergy to your own system. Individuals who are highly sensitive to hormonal fluctuations may experience mood swings and other symptoms even before the onset of menstruation.

“Even before my periods started, there was always this underlying feeling that something wasn't right. The night terrors and the constant anxiety felt like a dark cloud hanging over me. I didn't understand why I felt so different from the other kids. The emotional outbursts and the overwhelming fatigue were my body's way of crying out for help, even though I couldn't articulate it at the time.”

Self-Help Advice:

Recognize and address emotional and behavioral symptoms early on. Seeking help from a mental health professional can provide strategies to manage these symptoms.

Parents should be observant of their children's emotional and physical health, providing a supportive and understanding environment.

Establishing a consistent daily routine can help manage anxiety and mood swings, providing a sense of stability.

Understanding that these symptoms were early signs of PMDD can provide a sense of clarity and validation. It highlights the importance of early recognition and intervention, paving the way for better care and quality of life.

Navigating PMDD Without Medical Support

Living with an undiagnosed condition can be incredibly challenging, especially when the medical community has not yet recognized or understood the symptoms. In the case of PMDD, which wasn't formally recognized until the DSM-5 in 2013, many individuals like me struggled to navigate the condition without proper medical support or understanding. This section explores those struggles and offers advice for parents on how to observe and seek help for children displaying similar symptoms.

As a child, my life was an emotional roller coaster. My mood swings, anxiety, and night terrors were dismissed or misunderstood by those around me. One of the most vivid memories I have of being dismissed in this manner was at 11 years old when my mother took me to the pediatrician. She was worried about my constant fatigue and emotional distress. As the pediatrician looked at me, he said to my mother, "Well, look at her, put her on a diet, paint her room yellow and get her some sunshine." I remember feeling both confused, hopeless and insulted. I didn't understand why I was feeling the way I did, and it seemed like no one else did either. The suggestion to paint my room and get more sunlight felt like a dismissal of my very real struggles. This wasn't the medical advice my mom hoped to hear either.

"Hearing the doctor's casual dismissal made me feel like my issue wasn't real. How could a coat of yellow paint possibly fix the storm raging inside me? The frustration and helplessness I felt only added to the emotional turmoil I was already experiencing. I felt unseen, unheard, and misunderstood by the very people who were supposed to help me. One of the reasons I was heavy was because of the biochemical sensitivity."

Self-Help Advice:

Trust your instincts. If you feel that something is wrong, trust your instincts and seek a second opinion. Your experiences are valid, and it's essential to find a healthcare provider who listens and takes your concerns seriously.

Document symptoms. It is extremely important to keep a journal of your symptoms, noting the frequency, intensity, and any patterns you notice. This can be a valuable tool when seeking medical help, as it provides a clear record of your experiences.

Seek support. Reach out to support groups or online communities where you can connect with others who understand what you're going through. Sharing your experiences and hearing from others can provide comfort and valuable insights.

Throughout my childhood and teenage years, I had to navigate my symptoms without the support of a formal diagnosis as did us all until 2013. The medical community's best guesses often fell short, leaving me to cope with the emotional and physical challenges on my own.

“Every month, I felt like I was drowning in a sea of emotions. The anger, sadness, and anxiety were overwhelming, and I had no idea why I felt this way. I often wondered if there was something fundamentally wrong with me. Without a diagnosis or understanding, it was like trying to solve a puzzle without all the pieces.”

Advice for Parents

For parents, it can be challenging to understand and address the emotional and physical symptoms their children may be experiencing. However, early recognition and intervention can make a significant difference.

Observing symptoms is key to identifying patterns. Symptoms rise and can be tracked with predictability. It's this predictability that will differentiate between a hormone disorder and something else.

Emotional changes. Be aware of sudden or intense mood swings, persistent sadness or irritability, and unexplained anxiety.

Behavioral changes. Notice any changes in behavior, such as social withdrawal, academic struggles, or increased conflicts at home.

Physical symptoms. Pay attention to complaints of fatigue, sleep disturbances, and unexplained physical discomfort.

While the emotional and psychological symptoms of PMDD often dominate discussions, the physical symptoms are no less debilitating. They add another layer of complexity and challenge to an already overwhelming condition. For many, these physical manifestations can make each cycle feel like an unrelenting battle against our own body.

One of the most common physical symptoms of PMDD is severe headaches. These are not just mild, fleeting discomforts but often intense, throbbing migraines that can incapacitate a person for hours or even days. The headaches come with a force that feels like a relentless hammering, making it difficult to focus, work, or even carry out simple daily tasks. Light and noise sensitivity often accompany these headaches, forcing sufferers to retreat into dark, quiet spaces to find some relief. The pain can be so overwhelming that it overshadows every other aspect of life, reducing productivity and increasing irritability and fatigue. For me, thankfully I only have them once or twice a month.

Physical anxiety is another pervasive symptom of PMDD. Unlike typical anxiety, which is primarily psychological, physical anxiety manifests through bodily sensations. A person might feel their heart racing, palms sweating, and muscles tensing involuntarily. This physical tension can lead to a

constant state of readiness, as if the body is perpetually preparing to face a threat. This heightened state of arousal can be exhausting, draining energy and leaving us feeling perpetually on edge. The anxiety can also cause gastrointestinal disturbances, such as nausea or irritable bowel syndrome (IBS), further complicating the physical discomfort.

Joint and muscle pain are also frequent companions of PMDD. The pain often mimics the symptoms of autoimmune diseases, where the immune system overreacts to hormonal changes, causing inflammation and pain. This inflammatory response can lead to achy, stiff joints and sore muscles, making movement and physical activity a painful ordeal. This pain can be particularly challenging because it often lacks a clear cause or specific injury, making it difficult to treat or manage effectively. The chronic nature of this pain can lead to a cycle of inactivity and further discomfort, as the body becomes less conditioned and more prone to pain. I literally grind to a halt on these days.

This overreaction can lead to a range of symptoms, from general malaise and flu-like symptoms to even more specific inflammatory responses. The body's immune system, in its attempt to respond to what it perceives as a threat, ends up causing more harm than good. This can result in swollen lymph nodes, skin rashes, and increased susceptibility to infections during the luteal phase of the menstrual cycle.

Fatigue is a hallmark symptom of PMDD, characterized by an overwhelming sense of tiredness that is not relieved by rest. This fatigue goes beyond feeling sleepy; it's a profound, all-encompassing exhaustion that affects every part of the body. Coupled with this fatigue are sleep disturbances, such as insomnia or hypersomnia. Individuals may find it difficult to fall asleep, stay asleep, or feel rested upon waking. The night can become a battleground of restless tossing and turning, further exacerbating daytime fatigue and impacting overall quality of life.

Gastrointestinal symptoms are also common in PMDD. Many experience bloating, abdominal pain, and changes in bowel habits, such as diarrhea or constipation. These symptoms can be particularly distressing, as they not only cause physical discomfort but also social embarrassment and anxiety. The connection between the gut and the brain means that the physical symptoms of gastrointestinal distress often worsen the psychological symptoms, creating a vicious cycle of discomfort and distress.

The Cumulative Impact

The physical symptoms of PMDD are varied and complex, each adding a layer of challenge to the daily lives of those affected. It's important to recognize that these symptoms are not separate from the emotional and psychological aspects of the disorder but are intertwined in a way that can amplify overall distress. Managing PMDD requires a holistic approach that addresses both the mind and the body, understanding that the physical manifestations are just as real and impactful as the emotional ones.

For those living with PMDD, understanding these physical symptoms is crucial in developing effective coping strategies and seeking appropriate medical support. It is not just a matter of "dealing with" these symptoms but actively seeking ways to mitigate their impact and improve

quality of life. Through awareness, self-advocacy, and a compassionate approach to treatment, individuals can navigate the complex terrain of PMDD with greater resilience and hope.

Seeking Help:

Listen and validate. Take your child's concerns seriously. Listen to them without judgment and validate their feelings.

Medical evaluation. Seek a comprehensive medical evaluation to rule out other potential causes and explore possible diagnoses.

Mental Health support. Consider consulting with a mental health professional who specializes in pediatric or adolescent psychology. They can provide valuable insights and support.

Self-Help Advice for Parents:

Educate Yourself. Learn about PMDD if you suspect this is the problem as well as related conditions to better understand what your child might be experiencing.

Create a supportive environment. Provide a stable and supportive home environment. Encourage open communication and let your child know they can come to you with their concerns.

Advocate for your child. Be an advocate for your child's health. If the initial medical opinions don't seem to address their needs, seek additional support and resources.

Understanding that PMDD can manifest symptoms even before the onset of menses is crucial. With the right support and intervention, it is possible to navigate these challenges and provide the necessary care for children displaying early signs of PMDD management and support as one transition into adolescence and adulthood.



First Blood: The beginning of change

My “period” arrives (ugh, I hate that word even today). I understand why now. Anyway, it started late in 1981. I remember the day exactly. I was at school camp in the fall of 6th grade, and they called

my mom. She drove up a gigantic suitcase-sized box of “Carefree Maxi Pads.” I cried and cried alone in the cabin about this embarrassment and menstrual onset thinking my childhood was now over. My Mom wrote a note: “You are a woman now, Love Mom.” Oh my GOD! I was mortified. I cried, mourned nearly daily until the cycle was over for the loss of childhood. What’s next, death?

I detested these things “maxi-pads”. I would peel them open, unpack them, unfold them, and stick them on, whoops, upside down. These things were horrifying. It felt like a mattress between my thighs, and I was chunky myself, so they would always crush to a flat-nothing in the middle. Discarding them was as unpleasant as using them.

During winter break, my family took a long road trip. As the hours stretched on, I became increasingly uncomfortable, lying in the back of the vehicle and desperately hoping for a stop to find some relief. There was no obvious physical pain or bleeding, yet a deep sense of discomfort persisted. My emotions were in turmoil; I argued with my family, feeling unseen and discarded. Anger and confusion overwhelmed me as I struggled to understand what was happening inside me.

“As a pre-teenager, these experiences were overwhelming. The physical discomfort, the emotional roller coaster, and the sense of isolation were intensified during my PMDD episodes. Every minor inconvenience felt like a major catastrophe. I felt like my body was betraying me, and no one seemed to understand or care. The embarrassment and frustration were unbearable, making me lash out in anger and despair.”

Self-Help Tip: Journaling

Start a journal to track your symptoms, emotions, and triggers. Writing down your thoughts can help you identify patterns and better understand your emotional and physical responses. It also provides a safe space to vent your frustrations and process your feelings. It will be important to both count the days of your cycle as well as what symptoms and what severity.

Flashforward to Diagnosis

Looking back from 2023, I can see that my early experiences with menstruation were more than just typical teenage angst. I recall that time my mom took me to the pediatrician, concerned that all I did was lay around. The doctor suggested painting my room yellow and getting me some sunshine. In hindsight, this was likely the second week of my luteal phase, where I could sleep 14 hours straight for 3-4 days a month, every month, seemingly every three weeks or so.

Now, as an educated adult with a diagnosis, I understand that those early signs were critical. The fatigue, the mood swings, the physical discomfort—all were symptoms of PMDD. Recognizing these patterns has been crucial in managing my condition.

Self-Help Tip: Professional Help

Seek out a medical professional who specializes in hormonal disorders. A proper diagnosis can lead to effective treatment options, including lifestyle changes, medication, and therapy. Don't be afraid to advocate for yourself and insist on being taken seriously.

Piecing It Together

When you know something is wrong, but no one listens, it can be incredibly isolating and frustrating. For years, I felt like I was fighting a battle on my own. But understanding PMDD has given me the tools to manage my symptoms and advocate for my needs. If you notice a distinct cycle in your symptoms, observe the patterns, anticipate your responses, and take control of the outcome. Knowledge is power, and when you know, you know.

Living with an Explosive Volcano

Growing up, my relationship with my father was often a struggle, leaving me with emotional scars and a lingering sense of self-doubt. His temper was unpredictable, and his harsh words frequently echoed in my mind, making me question my worth. These experiences made me feel like I was always walking on eggshells, trying to avoid any triggers that might set off his outbursts.

One vivid memory stands out. I decided to cut the grass as a gesture of goodwill, hoping to give him a break and perhaps gain some appreciation. However, when he returned home, his reaction was one of frustration and disappointment, criticizing the job I had done. This moment, like many others, underscored a theme of striving for perfection and meeting high expectations.

As I got older and began to assert myself, the physical aspect of his anger lessened, but the emotional impact remained. During my teenage years, while struggling with PMDD, these experiences were particularly intense. My father's words and actions seemed to cut deeper during my luteal phase, exacerbating my already fragile emotional state. The hormonal changes heightened my reactions, making his outbursts feel even more personal and devastating. This left me questioning whether it was his temper or my own heightened emotions that made our interactions so challenging.

The emotional turmoil from these experiences affected every aspect of my life. I often found myself lashing out, feeling both furious and powerless. My room became both a sanctuary and a prison, a place where I could vent my frustration in solitude but also feel the weight of my isolation. Each encounter left me feeling more disconnected and misunderstood, amplifying the emotional chaos already affecting my mind and body.

Self-Help Tip: Recognize and validate your feelings. It's crucial to acknowledge that your emotions are valid, especially in the face of such trauma. Journaling can be a powerful tool to express and process your emotions. Writing down your thoughts can help you gain clarity and release some of the pent-up pain. Engage in physical activities like yoga or walking to release energy and tension from your body. These activities can provide a sense of grounding and relief. Additionally, mindfulness and relaxation techniques, such as deep breathing exercises or guided meditation, can help manage stress and emotional triggers, providing a moment of peace amidst the chaos.

Living with an explosive volcano meant that each day was unpredictable, fraught with tension and fear. It was a relentless struggle to find my footing in a world that felt inherently unstable. Yet, through acknowledging these experiences and seeking ways to cope and heal, there is hope for breaking the cycle and finding a path to resilience and self-worth.

The Impact on Family Dynamics

Our family was caught in a web of confusion and fear. My mother, often the silent witness to these outbursts, struggled to keep the peace. She was torn between protecting me and appeasing my father, her own emotional state stretched thin. My younger brother would have felt the ripple effects of this toxic dynamic, each of us dealing with the fallout in our own ways.

The emotional torment was a shared burden, though rarely acknowledged. I was in a volatile mix that permeated every aspect of our family life. There was a constant undercurrent of tension, an ever-present fear of the next eruption. Each of us developed coping mechanisms—some healthy, some not—to navigate this turbulent environment.



First Love and First Illusions

At sixteen, I was a girl adrift in a sea of self-doubt, desperately seeking an anchor in a world where I felt awkward, overweight, and unwelcome at home. My mother's dreams for my future—a polished, successful life—seemed like a distant fantasy. I lived in a reality marred by verbal abuse and self-loathing, my aspirations crushed beneath the weight of my father's harsh words and my own insecurities. In this turbulent period, I met a 22-year-old machinist from a small, fundamentalist religious community called the Berean Christadelphians.

The Berean Christadelphians were a sect that adhered strictly to their interpretation of the Bible.

They believed in the imminent return of Christ, the importance of living a righteous life, and the rejection of mainstream Christianity's doctrines such as the Trinity and the immortality of the soul.

Their fundamentalist beliefs encompassed a rigid moral code and a lifestyle that eschewed many modern conveniences and societal norms. This unyielding worldview was a stark contrast to my own family's beliefs, and it understandably caused concern for my parents.

He was different from anyone I had ever met. Charismatic and brimming with manic energy, he was a whirlwind of confidence and enthusiasm. Diagnosed with Bipolar Disorder, his life was a race car from ordinary to extreme highs. He was a perpetual dreamer, someone who made me believe that incredible things were not only possible but within my reach. His charisma was intoxicating, drawing me in with promises of adventure and love.

For a girl like me, starved for affection and validation, his attention was like a drug. He made me feel seen, special, and capable of anything. When he told me I was beautiful, I believed him, if only for a moment. He filled my head with grandiose dreams, some healthy and inspiring, others reckless and perilous. He was the catalyst for my desire to escape the confines of my home and my life, to break free from the expectations that had always felt like chains.

Our relationship was an effervescent dance of emotions. His manic episodes fueled our adventures, leading us to new places and experiences I had never imagined. We would sneak out at night, driving for hours with no destination in mind, simply enjoying the thrill of the unknown. His laughter was infectious, and his boundless energy made me feel alive in a way I had never felt before. For the first time, I tasted the sweetness of rebellion and the exhilaration of living on the edge.

However, the euphoria came with a darker side. His mania also drove him to risky behaviors that often left me frightened and conflicted. He would push me to skip school, take risks in public and defy authority in ways that set my heart racing with both excitement and dread. I found myself caught between the allure of his wild freedom and the fear of the consequences that loomed over our every move.

My parents were understandably alarmed by my involvement with him and the Berean Christadelphians. They saw the danger in his unpredictable behavior and the restrictive, dogmatic beliefs of his community. Their concern was not only for my physical safety but for the potential indoctrination into a belief system that was at odds with our own. They feared that Bob's influence would lead me further away from the life they envisioned for me and deeper into a world of instability and fanaticism.

Despite their warnings, I was enamored with the idea of a different life—a life where I wasn't the awkward, overweight girl from a dysfunctional home, but someone loved and valued. He offered me a glimpse of that life, and I clung to it with all my might. In his eyes, I saw a future where I could be free from my father's abuse and my own self-doubt, a future where I could reinvent myself.

Breaking Point

At sixteen, the stress of a serious relationship was already more than I could handle, but adding my parents' reactions into the mix made it nearly unbearable. My father, already a volatile figure in my life, pushed back even harder against the idea.

His verbal assaults grew more intense. Every interaction became an opportunity for him to remind me that I was worthless and destined for failure. The words "You're good for nothing" echoed in my mind, a constant reminder of his disdain. His anger was a sharp, unforgiving blade that cut deeper with each exchange, leaving me emotionally raw and desperate for escape.

I didn't understand it. I was a good kid all in all.

The pressure at home was suffocating. My relationship was charismatic and full of manic energy, was both a refuge and a source of further conflict. While he made me feel seen and valued, his presence in my life only seemed to amplify my father's rage.

The tension reached a breaking point on what I can today only describe as a particularly challenging day in my cycle. My emotions were already frayed, and a minor argument with my mother escalated into a confrontation that would change everything. As I started to box up my belongings with my 18th birthday on the horizon, she questioned what I was doing, and I snapped back, "What do you think? All I ever hear from Dad is how he can't wait until I'm out of the house and on my own. And you just stand by, Mom. Why is that?"

Her response was a cold dagger to the heart. "Well, why wait until you're 18? Just go now then."

The words hung in the air, heavy and irrevocable. Her suggestion, meant perhaps in a moment of frustration, felt like the final rejection. It was the confirmation of my deepest fears: that I was not wanted, not valued, not loved. The decision was made in an instant. With no money, no schooling, no resources, and no plan, I left home three months before my 18th birthday.

The Night of Escape

It was a warm Michigan summer night in July, the kind where the air is thick with humidity and the fireflies dance in the dusky twilight. I stood in my room, my heart pounding as I threw everything I owned into my car. Clothes, books, cherished mementos—all hastily stuffed into bags and boxes. The house, usually filled with my father's harsh words and my mother's silence, seemed eerily quiet, as if it too was holding its breath, waiting for the inevitable explosion. He was still at work. My brother was off playing with friends.

As the sun dipped below the horizon, I took one last look at the place I had called home all of it seemed to blur as tears filled my eyes. I couldn't stay another moment in a house where I felt so unwanted, so unloved. With a final, deep breath, I climbed into my car and drove away, leaving behind a lifetime of pain and rejection.

The drive over to his new apartment felt surreal. The roads were familiar, yet every mile put more distance between me and the suffocating grip of my father's anger. The night was warm, the windows down, and the wind tangled in my hair as I navigated the winding streets. The city lights twinkled in the distance, a promise of a new beginning, even if it was one fraught with uncertainty. I passed those same fields where my dad drove us on these summer nights in the convertible to watch the stars and the fireflies.

When I arrived at the apartment complex, the reality of my situation hit me like a tidal wave. He himself had just moved in, and his apartment was still a mess of unopened boxes and scattered belongings. I burst through the door, tears streaming down my face, and collapsed into his arms. "I left home, I had to," I sobbed, the weight of those words pressing down on me. Even now, I stand by that statement, because leaving felt like the only choice I had left.

With his boundless energy and manic optimism, he held me tightly, whispering words of comfort. He understood my pain in a way few others could, and in that moment, he was my lifeline. But his

roommate, a conservative and serious man named Tony, looked on with concern. Tony was a priest in study, slightly older than his roommate, and the presence of a volatile 17-year-old girl in his apartment was clearly troubling.

Tony's disapproval was palpable, and I could see the worry etched on his face. Still, he liked me on my bubbly fun days, and he was compassionate. However, to him, I was a ticking time bomb, a potential disaster waiting to unfold. He knew that having me there was bad news, both for his own studies and for the stability of their new living arrangement. Yet, despite his reservations, he didn't turn me away. Perhaps he saw the desperation in my eyes, or maybe he simply couldn't refuse Bob's impassioned pleas on my behalf.

That first night was a blur of emotions. Bob did his best to reassure me, to make me feel safe in the chaos of his unpacked apartment. Bob spoke of our future; of the adventures we would have and the life we would build together. His words were like a soothing balm on my wounded soul, giving me a glimmer of hope amid my despair. He treated me like a princess, and he called me his "jewel".

Tony, however, kept his distance. He watched me with a mix of caution and pity, as if he couldn't quite decide whether to intervene or let things play out. His presence was a constant reminder that I was an outsider, a source of disruption in their carefully balanced world. But in that moment, I didn't care. All that mattered was that I had escaped, that I was no longer trapped in a home that felt like a prison.

As the night wore on, the oppressive heat of the day gave way to a cooler, more forgiving breeze. Bob and I sat on the small balcony, the city sprawled out before us, and for the first time in a long while, I felt a flicker of freedom. It was fragile, precarious, but it was mine.

Leaving home that night was not just an act of desperation; it was an act of defiance as much as it was a consequence of rejection. It was a declaration that I would no longer be defined by my father's scorn or my mother's passivity. I was stepping into an uncertain future, but it was a future I had chosen for myself.

The days and weeks that followed were filled with challenges and doubts. Living with Bob and Tony was far from easy, and the reality of my situation often felt overwhelming. But through it all, I held onto the belief that I could carve out a new path, that I could rise above the shadows of my past and create a life of my own making.

That warm Michigan night in July marked the beginning of a journey—one filled with both trials and triumphs, heartache and healing. It was the night I chose to believe in myself, despite the odds, and set out to find a place where I truly belonged.

A Night defined by PMDD

What made that night what it was is the underlying force of PMDD. The emotional rollercoaster, the impulsivity, and the overwhelming anger were all magnified by the hormonal storm brewing within me. Looking back, I realize that my mother's words were the spark that ignited a firestorm of emotions, fueled by the intense volatility of my PMDD symptoms.

Through the lens of PMDD my mother questioned my actions, her voice seemed to pierce through the fragile veneer of control I was desperately trying to maintain. The feelings of worthlessness,

rejection, and isolation that had simmered beneath the surface for so long erupted with a ferocity that even I couldn't fully understand. Her response was like a dagger to the heart. "Well, why wait until you're 18? Just go now then."

In that moment, my impulsivity took over. The rational part of my brain was overwhelmed by a tidal wave of emotion, driven by the intense hormonal fluctuations of PMDD. I felt like a volcano on the verge of eruption, and there was no turning back. The decision to leave was not a calculated choice; it was a desperate reaction to an unbearable situation.

My parents did follow me there. They followed me and begged me not to leave, not to go in and to return to home. I just couldn't.

Leaving home that night was not just an act of defiance; it was a desperate attempt to find some semblance of control in a life that often felt dictated by the unpredictable whims of my own body. It was a moment of clarity amidst the chaos, a decision made in the throes of an emotional and hormonal storm.

As the days and weeks unfolded, the challenges of living with PMDD became even more apparent. The highs and lows of my relationship with Bob, the constant tension with Tony, and the struggle to find my footing in a new and uncertain world—all were colored by the intense emotional volatility of my condition.

PMDD Advice for Navigating Turbulent Times

Finding yourself in a situation where emotions are running high, and impulsive decisions seem unavoidable, is challenging, especially when dealing with PMDD. The hormonal fluctuations that drive PMDD can exacerbate feelings of anger, hopelessness, and desperation. Here are some practical tips and advice to help manage and navigate through these difficult moments:

Understanding that your intense emotions are being influenced by PMDD can be the first step in gaining some control. Keep track of your menstrual cycle and note any patterns in your emotional and physical symptoms. Awareness can help you anticipate when you might be more vulnerable to PMDD's effects.

Practice deep breathing or mindfulness techniques to help calm your mind. Taking slow, deep breaths can reduce anxiety and help you feel more centered.

Writing down your thoughts and feelings can provide an outlet for your emotions and help you process what you're experiencing. It can also serve as a valuable tool for identifying triggers and patterns in your PMDD symptoms.

Engage in regular exercise, which can help release endorphins and improve your mood. Even a short walk can make a significant difference.

Sharing your feelings with a friend, family member, or therapist can provide emotional support and perspective. It's important not to isolate yourself during these times.

Connecting with others who understand what you're going through can be incredibly validating. Online forums or local support groups for PMDD can offer a sense of community and shared experiences.

Create a Safety Plan

Identify safe spaces. Determine where you can go if you need to leave a situation quickly. This could be a friend's house, a park, or a quiet room where you feel safe. Fight or Flight can be dangerous during this time.

Prepare an Emergency Kit: Pack a small bag with essentials like medications, toiletries, some money, and a change of clothes. Having this ready can reduce the stress of leaving in a hurry.

Set Boundaries.

Communicate your needs. Clearly communicate to those around you what you need during PMDD episodes. Whether it's space, understanding, or specific actions, setting boundaries can help manage your environment.

Protect your emotional space. Limit interactions with people who trigger negative emotions or escalate your stress. Prioritize your well-being by avoiding unnecessary conflicts.

Seek Professional Help:

A therapist can help you develop coping strategies tailored to your specific needs and provide a safe space to explore your feelings.

In some cases, medication can help manage the symptoms of PMDD. Consult with a healthcare provider to explore your options, which might include hormonal treatments, antidepressants, or anti-anxiety medications.

Practice Self-Compassion.

Be Kind to Yourself. Acknowledge that dealing with PMDD is challenging and that it's okay to feel overwhelmed. Treat yourself with the same kindness and understanding that you would offer a friend in a similar situation.

Celebrate small victories. Recognize and celebrate the small steps you take to manage your PMDD. Whether it's a day where you managed to stay calm or an instance where you communicated your needs effectively, each victory is significant.

Create a calming routine. Having a predictable daily routine can provide a sense of stability. Include activities that you enjoy and that help you relax.

Prioritize Sleep. Ensure you get enough rest. Sleep disturbances can exacerbate PMDD symptoms, so create a calming bedtime routine to improve sleep quality.

Use Distraction Techniques:

Engage in Hobbies. Find activities that you enjoy and that can distract you from negative emotions. This could be reading, crafting, cooking, or any other hobby that brings you joy.

Watch or listen to uplifting content. Choose movies, shows, music, or podcasts that uplift your mood and provide a positive distraction.

Navigating through the time with PMDD is undoubtedly difficult, but with the right strategies and support, you can manage the symptoms and make it through even the most challenging moments. Remember that seeking help is a sign of strength, and taking care of your mental and physical health is paramount.

Living with Bob was a rollercoaster of highs and lows. His manic energy could be infectious and inspiring, but it could also be exhausting and overwhelming. We shared moments of joy and creativity, dreaming of a future that seemed bright and boundless. But there were also moments of doubt and fear, when the weight of my decision pressed down on me like a heavy fog.

I knew my parents were worried. Despite the harsh words and the conflict, I was still their child. But their pushback had driven me away, and now I was determined to prove them wrong. I was determined to show them that I could survive, even thrive, without their support. The journey ahead was uncertain, filled with challenges and unknowns, but it was my journey to take.

In those first days away from home, I learned more about myself than I had in years of living under my father's shadow. I learned that I could endure hardship, that I could find strength in my own resilience. And most importantly, I learned that I was not defined by my parents' expectations or their lack of belief in me. I was my own person, capable of charting my own course, no matter how difficult it might be.

Strong disapproval was vocalized and the relationships at home with everyone became more than tested. Despite my father's disapproval, our relationship persisted. His family ran a small ecclesia in the United States, and their religious fervor clashed with my father's more logical approach that is to simply come home.

Instead of an embracing approach my parents took a hard love cut her off approach.

My parents refused to allow him to join family functions, berated me for my choices, and restricted their support. By the time I graduated high school I was determined to escape. By December, we had eloped at the courthouse, spurred on by his father's demands. What should have been a joyous start was marred by misunderstanding, the desperate need for love and acceptance, and my own low self-esteem.

“As a teenager with PMDD, my relationship was a refuge from the chaos at home. My father's relentless criticism drove me further into the relationship, seeking the acceptance and love I craved. During my luteal phase, the pressure and stress from my family would intensify, making me more desperate to escape and find solace. Eloping felt like a way to break free from my father's control, but it also set me on a path fraught with its own challenges.”

Self-Help Tip: Build a support system outside of your immediate family. Trusted friends, mentors, or support groups can provide emotional stability. Focus on self-compassion and recognize your worth beyond others' criticisms. Therapy can also help unpack and heal from emotional wounds.

A Life of Hardship and Struggle

The next seven years were arduous. After eloping in December, we moved out of that two-room apartment with the college roommate. The rush to marriage was driven by a sense of righteousness

and a desire to start our lives together. However, the reality of our situation quickly set in. I was earning \$4.25 an hour and expected to pay my own way. We struggled to make ends meet, often resorting to desperate measures like dumpster diving behind catering truck stations or the local snacks manufacturer. I subsisted on day old sandwiches, box lunches, and expired sides, risking food poisoning because there simply wasn't enough.

Despite the hardships, I refused to return home. My family didn't understand why, but leaving him was not an option for me. His unwavering support during these times was invaluable. He indulged me, literally carrying me to the shower on days when my PMDD symptoms were overwhelming. He did his best to care for me while also navigating his own mental health challenges and the strained relationship with my father.

He experienced a few manic episodes, and his mental instability exacerbated our financial and legal woes. My PMDD, though not recognized at the time, added another layer of complexity. Despite these challenges, he supported me emotionally and financially, providing stability amidst the chaos.

“As a teenager and young adult with PMDD, the financial and emotional struggles were overwhelming. During my luteal phase, the stress of our living situation would become unbearable, leading to intense emotional outbursts and feelings of hopelessness. His support was a lifeline, but the instability of our situation often left me feeling trapped and desperate for a way out.”

Self-Help Tip: Develop a budget and seek financial counseling to manage money effectively. Create a self-care routine to cope with stress, including activities that bring joy and relaxation. Reach out to mental health professionals for support in navigating both your own and your partner's mental health challenges.

I remember vividly the day my PMDD drove me to an act I never thought I was capable of. On a severe red day, the overwhelming emotions and lack of impulse control led me to commit retail fraud. I stole items I didn't need, items for others, and items I wanted for comfort and necessity. I was driven by a strange mix of anger, despair, and a desperate need for some semblance of control.

The stress of moving out, leaving behind familiar comforts, and not having my basic needs met exacerbated my condition. The upheaval in my life created a sense of instability and insecurity, which only intensified the PMDD symptoms. The guilt and shame that followed were immense, and I was left grappling with the consequences of my actions. This incident was a wake-up call, highlighting the severe impact PMDD had on my life and the urgent need for effective coping mechanisms. At this time, I did not even know its name.

Legal Troubles and Emotional Manipulation

When my legal troubles escalated, it was my father who got an attorney for me. Working with the legal department at the railroad, he arranged for an attorney to represent me in three arrests and a felony retail fraud case. Thanks to his intervention, these cases were taken under advisement and never appeared on my permanent record—a gesture I appreciated deeply, though it came with its own emotional cost.

Despite this support, my father's anger and disappointment in me were palpable. He used these incidents as further proof of my worthlessness, often reminding me that I would be in prison if it weren't for him. It was yet another instance where his actions left me feeling inadequate and burdened by guilt.

I watched very closely every aspect of the legal process unfold, perhaps to understand it and prevent it from happening again. More significantly, it marked a turning point. I made a conscious decision never to steal again, not because life became easier—hardship continued to be a constant companion—but because I chose to break the cycle. This pivotal moment spurred me to pursue a career in criminal justice, driven by a desire to understand the system that had both punished and protected me.

“As a teenager and young adult with PMDD, my legal troubles were a source of immense shame and anxiety. During my luteal phase, the stress and guilt would magnify, leading to intense emotional breakdowns. My father's support, though appreciated, was tainted by his constant reminders of my failures. It felt like an inescapable cycle of guilt and shame, pushing me to seek a way out through understanding and education.”

Reflect on your experiences and learn from them. Set personal goals and create a plan to achieve them. Consider vocational training or further education to build a career. Engage in therapy to address feelings of guilt and shame and develop healthier coping mechanisms. When you create a budget do not forget items for self-care.

Reflecting on the Past and Moving Forward

Reflecting on these experiences, I can see how my childhood experiences of emotional manipulation and abuse played a role in shaping my decisions and actions. A perceived lack of emotional support and resources, coupled with the intense impact of PMDD on my mental health, pushed me into challenging circumstances. However, amidst the turmoil, I found moments of clarity and determination. Each setback became a lesson learned, propelling me forward on a path of self-discovery and healing.

As an adult with PMDD, looking back on my teenage years, I can see how the disorder influenced my emotions and decisions. The intense feelings of anger, sadness, and hopelessness during my luteal phase shaped my responses to the challenges I faced. Understanding PMDD has given me the tools to navigate my emotions more effectively, and I am committed to healing and moving forward.

Today, I continue to navigate the impact of PMDD on my life, striving to understand its complexities while forging ahead on my path to healing and self-discovery. The journey has been fraught with hardships, but it has also been a testament to my perseverance and ability to find moments of joy and fulfillment amidst the chaos.

Embrace self-compassion and acknowledge your resilience. Practice mindfulness and meditation to stay grounded. Seek continuous support from mental health professionals and build a network of understanding friends and family. Continue learning about PMDD and advocate for yourself and others dealing with similar challenges.

When I left home that warm Michigan summer night, my heart pounded with a mix of anger, fear, and a desperate need for escape. The decision to pack everything I owned into my car and leave wasn't just a rebellious act; it was driven by the overwhelming surge of emotions that PMDD can bring. The impulsivity, the anger, the feeling of being cornered—these were all amplified by the hormonal storm raging inside me.

Understanding PMDD's role in these decisions is crucial. It explains why, even with my parents' desperate pleas, I felt compelled to continue on my chosen path. PMDD can cloud judgment, intensify emotional reactions, and drive impulsive behaviors. Recognizing this can help others empathize with the struggles faced by those living with the disorder.

Managing PMDD-Driven Decisions

Pause and reflect when you feel symptomatic. When you feel a surge of emotion driving you to make a significant decision, try to pause and take a moment to reflect. Deep breathing or stepping away from the situation for a few minutes can provide clarity.

Seek support when things don't feel right. Reach out to a trusted friend, family member, or therapist who understands PMDD. They can offer a different perspective and help ground you in moments of emotional upheaval.

Create a plan for your safety. Having a pre-made plan for dealing with intense emotions can be incredibly helpful. This could include a list of calming activities, people to call, or safe spaces to go to when you feel overwhelmed.

Practice self-compassion and give yourself grace. Acknowledge that managing PMDD is challenging and that it's okay to struggle. Treat yourself with kindness and patience as you navigate these difficult times.

By understanding the impact of PMDD on decisions and reactions, you can begin to develop strategies to manage the disorder's influence on your life. It's a journey of learning and adapting, but with awareness and support, you can find ways to regain control and make decisions that are true to your long-term well-being.

Thankfully today my relationship with my dad is welcoming, loving and open. We discuss everything. He accepts my condition and is willing to understand it. I understand and accept my fathers' outbursts and anger growing up and understand the cyclic dynamic was contributory to that as well as some of that was perception through the lens of chaos.

Job after job, cycle upon cycle

Leaving home and stepping into the world of adulthood was a difficult transition, especially while grappling with PMDD. The life I found myself in was starkly different from the modest middle-class upbringing I had known. With little more than \$4.50 an hour to live on, I faced a reality that was difficult and unforgiving.

I started my journey in the workforce at a drive-through McDonald's at the mall. The job was a far cry from glamorous, but it was a starting point, a steppingstone to independence. However, my struggles with PMDD, particularly the sleep difficulties, often made it hard for me to show up on

time. The relentless fatigue and insomnia wreaked havoc on my schedule, leading to frequent tardiness and a growing sense of anxiety about my reliability. Echoes of my past haunted me “You’ll never make anything of yourself”.

The constant battle with my own body and mind made it clear that I needed a fresh start, so I applied for a new job at KFC. The change brought a brief sense of hope and a chance to reset. But the challenges persisted. The cycles of PMDD didn’t relent; if anything, they seemed to intensify under the stress of my new circumstances.

A few months into my new job, I found myself calling in sick repeatedly. The physical symptoms of PMDD—headaches, joint pain, and overwhelming fatigue—made it impossible to muster the energy to go to work. The emotional turmoil was even worse. Anxiety gripped me every time I thought about returning. I felt a suffocating sense of dread, imagining the disapproval and disappointment of my managers and coworkers.

Eventually, the anxiety became too much. I couldn’t bring myself to return to KFC, and I “no showed” during what was certainly a PMDD episode. This pattern repeated itself throughout the years, leading to a string of 26 jobs that I couldn’t hold onto. Each job came with the same cycle of initial hope, mounting stress, and eventual collapse under the weight of my symptoms. I left. Just like I left home. Just like I leave everything.

Living on such a meager wage added another layer of difficulty. I struggled to make ends meet, often having to choose between necessities like food or gas. There was little room for error, and every unexpected expense felt like a crisis. The constant financial strain only exacerbated my PMDD, creating a vicious cycle of stress and symptoms.

My father’s refusal to pay for my college classes was a devastating blow, rooted in his disdain for Bob and the life choices I made. By punishing me, he not only limited my opportunities but also shaped the trajectory of my future, leaving me with a heavy burden to carry. The weight of that decision echoes through my life, making every step toward my goals feel like an uphill battle. Living with PMDD complicates this struggle even further, as the emotional turmoil often clouds my judgment and amplifies feelings of inadequacy. Despite my relentless efforts to make up for lost time, the shadows of those missed opportunities linger, reminding me that certain decisions have lasting consequences that can ripple through every aspect of my life. Maybe there were other or underlying reasons like they were not well off, the family made too much for financial support, and being the girl, perhaps my destiny was to be someone’s wife instead of a college graduate.

The emotional and psychological toll was immense. I felt trapped in a life I hadn’t chosen, a life where my dreams and aspirations seemed unreachable. The instability of my employment situation made it hard to envision a future where I could thrive. My self-esteem took hit after hit, each job loss reinforcing the belief that I was incapable and unreliable.

Despite the hardships, there were moments of resilience. I learned to navigate the challenges as best I could, finding small ways to cope and survive. I sought solace in the few constants in my life, clinging to the hope that things would eventually get better. My experiences at these jobs taught me about perseverance and the importance of advocating for myself, even in the face of seemingly insurmountable obstacles.

Years in the future the continuous struggle to maintain employment led me to start my own business. It was a bold move born out of necessity, but it allowed me to create an environment where I could work around my PMDD. I could set my own hours, manage my workload, and build something that accommodated my needs. It was a turning point, a chance to reclaim some control over my life and redefine my path.

During this time living on less than a livable wage as a high school graduate with zero experience was a harsh reality, but it was also a crucible that forged my resilience. The challenges of those years, intertwined with the struggles of PMDD, shaped me into someone who could adapt and persevere. The journey was far from easy, but it led me to a place where I could finally start to build the life I wanted.

Living in the Eye of the Storm



As our relationship persisted, the reality of Bob's condition became harder to ignore. His manic episodes grew more intense, and the line between thrilling adventure and reckless endangerment blurred. I found myself questioning the path I was on, torn between my longing for love and the growing realization that Bob's world was not the escape I had hoped for. The charismatic illusion began to crack, revealing the instability and chaos that lay beneath.

As I moved into my peak childbearing years, the hormone shifts became increasingly pronounced, sharper than the initial onset of my struggles but far less intense than the undulating waves of perimenopause that loomed ahead. Each cycle felt like a battleground, with PMDD infiltrating my spirit and stealing away my youth and vitality. What began as a hopeful journey into adulthood transformed into a relentless fight against a tide of despair that sapped my strength and resolve.

"The desire to start a family is a natural expectation, a yearning rooted deeply in the human experience. Despite knowing that resources were tight, my heart couldn't help but dream of the day I would cradle my own child. Every week, I would set aside \$5-10 and visit the dollar store, carefully selecting baby items—tiny socks, soft blankets, and adorable onesies. Each purchase was a small act of hope, a tangible piece of my dream. I would gently place these treasures in a special cabinet, imagining the day they would be used. This ritual became a comforting reminder of my hopes and

aspirations, a sweet and tender gesture towards a future I deeply longed for. The sight of that growing collection filled me with warmth and anticipation, tugging at my heartstrings and keeping my dreams alive amidst the challenges.”

The once bright promise of my life dimmed under the weight of intrusive thoughts, with random flashes of suicidal ideation creeping in like unwelcome shadows. Each month, I felt further from the vibrant person I once was, caught in a cycle of emotional chaos that threatened to consume me entirely, leaving me questioning not just my choices but the very essence of who I was becoming.

The cycle was vicious. My body prepared for potential life, the symptoms of PMDD would surge, drowning me in intrusive thoughts and feelings of inadequacy. I was trapped in a cruel paradox, yearning for a family while battling the darkest corners of my mind. Those suicidal ideations began to creep in with alarming frequency, each thought more desperate than the last, exacerbated by the profound sense of failure that enveloped me each month when pregnancy tests returned negative.

It was nearly a decade later that the roots of my heartbreak would surface, revealing a shocking truth about Bob. Unbeknownst to us during those naive years, his father had made a decision that would alter the course of Bob’s life irrevocably. Diagnosed with Bipolar Disorder as a child his parents had him chemically castrated, a fact hidden in the shadows of his upbringing. This revelation not only shattered my understanding of our shared dreams but also deepened the chasm of disappointment that had formed between us. Also wasting precious time.

What was meant to be a partnership filled with hope and promise instead felt like an endless cycle of heartache. Each failed attempt to conceive weighed heavily on my heart, compounded by the swirling chaos of PMDD. As I grappled with my own mental health, the profound loss of the family I had envisioned became a dark specter, haunting my every thought and deepening my struggle for identity in a life that felt increasingly out of reach.

My thoughts turned dark every month, like a postpartum depression without the joy of a child. Over and over, cycle after cycle. Looking back the dark thoughts were always there but when the situation seemed unsurmountable they became loud, deafening at times. Childbearing years were not fruitful.

Unraveled Dreams

As the years passed, my dreams of a traditional family felt more like distant echoes than attainable realities. Each month brought with it a wave of hope, followed by crushing disappointment that reverberated through my entire being. My expectations for motherhood were rooted deeply in love and stability, but the relentless grip of PMDD turned every cycle into a heavy burden. With each new month, the emotional turmoil intensified, magnifying the pain of unmet aspirations. I found myself spiraling deeper into despair, the weight of longing suffocating my spirit.

My Second Marriage: A Tale of Friendship and Heartache

My journey into a second marriage began almost immediately after my manic frenzied relationship with Bob came to an end. During this vulnerable time, a great friend of mine, who was experiencing upheaval in his own home life, needed a place to stay. I opened my home to him, and before long, our lives seamlessly melded together. He was faithful, smart, and hardworking—a truly good

partner and an even better friend. Yet, as the months passed, I felt an inexplicable void; something crucial was missing from our relationship.

He was not to blame, for he did everything right by me. However, after five years together, I found myself craving something more, something different that I couldn't quite articulate at the time. This led me to start chatting with someone online, seeking the elusive something I felt was absent. My actions, though not intentional, were misguided.

On the night of the great American blackout, amidst the chaos and confusion, a PMDD episode influenced my decision-making process. I impulsively told Marty that he needed to move out by Monday. The words left my mouth before I fully grasped their impact. Marty was stunned, understandably so. His pain was palpable, and the gravity of my rash decision hit me soon after. It was a moment of regret that I still carry with me. I acted hastily, driven by the distorted thinking that PMDD so often provokes, without considering the full weight of my words.

Marty didn't deserve the sudden end to our cohabitation—nor the manner in which it was delivered. I loved him and his family; they had become as dear to me as my own. The guilt of how I handled the situation lingered long after he moved out. Thankfully, time has been kind, and Marty has since found happiness in a fulfilling relationship. Our friendship has endured the trials of that period, and for that, I am immensely grateful. I love him dearly and forever hope that he can forgive me in his heart for the hurt caused during those tumultuous times.

This chapter of my life underscores the profound impact PMDD can have on decision-making and relationships. It serves as a reminder of the importance of understanding and managing the disorder not just for one's own wellbeing but also for the wellbeing of those we love and care for.

Love, Loss, and a Violent Turn

Now at 32, I found myself navigating the wreckage of two failed marriages and twenty-six jobs left in the wake of my PMDD. It was during this vulnerable period that I met Jason, a charming man I connected with online and impulsively moved in with. He had the allure and appeal of my first love but came with a dark twist of abuse. Despite my previous mistakes and the realization that I was deeply damaged, I stayed in this relationship, ignoring the red flags and my family's concerns.

Jason insisted I go on birth control to prevent an accidental pregnancy. I complied. At first, it seemed like a good match, soothing my mental state but wreaking havoc on my body. I bled continuously for sixty days, a brownish discharge that never stopped. I often forgot to take doses, and the situation became a mess. Ninety days in, I found myself pregnant. At seven weeks, I knew I was carrying a child, but I had no prenatal care, no financial stability, and no life security. At 32, I couldn't even count on myself.

This pregnancy was something I had hoped for all my life. I wanted to be a mother like my own, to give her a grandchild. But I was only allowed to dream of being pregnant for twelve more days. For those twelve days, I apologized to the baby growing inside me, promising I would find him again when the time was right. Jason demanded I terminate the pregnancy, threatening to kill me and my entire family if I didn't comply. He painted a horror story of how he would get us all when we least expected it. He promised we would have a child, just not now.

I remember agreeing, but not in an amenable way. My pregnancy hormones fueled my PMDD rage, and I was filled with terrifying anger. No way would I have this disgusting man's child. "GET IT OUT OF ME NOW, YOU FUCKER," I remember thinking. Gabriel Seth Joseph, 8.5 weeks, has ended. Despite my beliefs, when faced with a PMDD rage, there was no consoling myself. I acted, and though I regret those actions, I am at peace with that decision. That violent shooting star of a relationship ended less than six months later, thankfully.

I moved on and remarried for a third time, this time to a nice Catholic guy with values like my mother's. He was five years younger and wanted a family as he was part of a large one. I felt this was my future. But our seven years together ended childless after thousands of dollars spent on fertility treatments and alternative techniques to conceive. The money we spent could have finished my college degree, but my goal was obtaining a family.

In my forties, experiencing this led to the darkest PMDD episodes to date. I often felt overwhelmed by my identity as a widow without children. Naturally, I think about what my life could have been—reflecting on dreams of family gatherings, watching kids grow, and sharing those moments with a partner. Yet, in the depths of PMDD, my thoughts spiral into darkness. I start questioning my worth, feeling like a failure for not fulfilling those life milestones.

The fear of the future looms large. I think about being 40, alone, and wonder what's next for me. The natural thoughts about seeking new adventures or friendships become overshadowed by PMDD-driven fears. Instead of feeling hopeful about exploring new opportunities, I become paralyzed by anxiety, fearing I'll always be alone and unloved.

In those moments, I grapple with the contrast between what I know to be true and the weight of my internal chaos. I recognize healthy thoughts, like the possibility of building a fulfilling life, yet they struggle to break through the haze of despair that PMDD brings. It feels like I'm caught in a storm, battling against waves of hopelessness while yearning for a glimpse of light on the horizon.

It's crucial to recognize the signs of an abusive relationship and seek help immediately. Build a support network of trusted friends and family who can provide guidance and support. Therapy can offer a safe space to explore your feelings and develop strategies to cope with the intense emotions of PMDD. Remember, you deserve to be treated with respect and kindness, and there is always help available.

Understanding Suicidal Thoughts in PMDD

Suicidal thoughts are a particularly distressing symptom of Premenstrual Dysphoric Disorder (PMDD). The hormonal fluctuations that occur during the luteal phase of the menstrual cycle can profoundly affect neurotransmitters in the brain, particularly serotonin. This disruption can lead to intense feelings of despair, hopelessness, and emotional pain, culminating in suicidal ideation.

The repetitive nature of PMDD means that these symptoms recur every menstrual cycle, creating a cyclical pattern of emotional suffering. For 5-8 days each month, individuals with PMDD may feel overwhelmed by these thoughts, making it difficult to maintain a sense of stability and hope. Here's a descriptive portrayal of what living with these thoughts can feel like, from adolescence to adulthood.

For 5 to 8 days every month, my mind descends into a mental torture chamber. Suicidal thoughts with PMDD are not what you might imagine. They are not self-pity or depressive rumination but sudden, automatic realizations that intrude like uninvited guests. These thoughts are as matter of fact as reaching for a hairbrush and finding a loaded firearm in your hand instead. They slip in so effortlessly, so seamlessly, that they become part of the routine—a sinister backdrop to daily life. It's not a gradual descent but a plunge into a chasm where the light barely penetrates, and the air is thick with despair.

At twelve, these thoughts crept in, uninvited, as I struggled to understand my own changing body and emotions. They whispered to me during classes, during family dinners, during moments that should have been filled with innocence and joy. They were not loud, screaming demands but quiet, insidious suggestions that life would be easier if I simply ceased to exist.

By twenty, they were old companions, lurking in the background of my mind. During college exams, job interviews, and budding relationships, they were there, casting long shadows over every success, every failure. They dulled the colors of life, making everything seem bleak and unworthy of effort.

At thirty, they became more pronounced, triggered by the stress of balancing work, family, and personal ambitions. Every month, like clockwork, they arrived, making me question my worth, my purpose, and my very existence. The automatic nature of these thoughts was terrifying—they didn't feel like conscious decisions but unavoidable truths.

Now, at fifty, with perimenopause in full swing, these thoughts have evolved into something more relentless and consuming. Each month feels like postpartum depression, with waves of hopelessness and a sense of being trapped in an unending cycle of despair. The suicidal thoughts are no longer whispers but roars, demanding attention and action. They strip away the facade of control, leaving me vulnerable and desperate for relief.

Living with suicidal thoughts 5 to 8 days a month, every month, is a unique kind of torment. It's a battle against an unseen enemy that strikes with predictable regularity but with unpredictable intensity. It's a fight to maintain a sense of self, to cling to the fleeting moments of clarity and joy, and to believe that there is more to life than this endless cycle of pain. The emotional toll is immense, and the struggle to find meaning and purpose amidst the darkness is a testament to the strength and resilience of those who endure it.

Looking over the history of 42 years of cycles I can lay down the experience in decades now.

The Bewilderment of Adolescence

At 12 to 15, the world is supposed to be full of discovery and growth. But for a young girl with undiagnosed PMDD, it can feel like a never-ending storm. The shift from carefree childhood to the burdens of adolescence is abruptly marked by the onset of menstruation. Each month, for nearly a week, a dark cloud settles over the mind.

"I don't understand why I feel this way. One moment, I'm laughing with my friends, and the next, I'm consumed by a sadness so deep it feels like I'm drowning. I cry for no reason, and the weight of everything is crushing. It's like being trapped in a dark room with no way out. I

feel worthless, like I'm a burden to everyone. There are days when I think, 'What's the point of all this? Maybe everyone would be better off without me.'"

Age 16-20: The Turmoil of Young Adulthood

As the cycles grow on, the stakes get higher. High school, relationships, and the looming pressure of adulthood amplify the emotional rollercoaster. The depressive episodes deepen, and the thoughts of self-harm become more frequent.

"It's like a switch flip in my brain. I can't control it. One moment I'm fine, and then suddenly, I'm overwhelmed with this unbearable sadness. I isolate myself because I don't want anyone to see me like this. My parents don't understand, they think I'm just being dramatic. But they don't know what it's like to feel this kind of pain, to have thoughts that scare you. I'm afraid of what I might do. Sometimes, the only thing that seems to make sense is to make it all stop."

Age 21-30: The Challenge of Independence

Entering adulthood, difficulties navigating the responsibilities of a job, relationships, and maybe even thoughts of starting a family. But the cycle continues. The persistent shadow of PMDD makes it difficult to hold down a job or maintain stable relationships. The emotional instability is exhausting.

"I'm trying so hard to keep it together. But every month, it feels like I lose control of my life. I can't focus at work, I lash out at my partner, and I feel like a failure. The thoughts come back, stronger than ever. I'm scared to be alone with them. It's a constant battle in my mind. 'Why can't I just be normal? Why can't I just be happy?' I start to believe that maybe the world would be a better place without me. It's a dark, terrifying place to be."

Age 31-40: The Weight of Experience

By now, most might have children or a career, but the pattern of PMDD has not changed. The familiarity of the depressive episodes does not make them easier to bear. The emotional toll continues to be significant, and suicidal thoughts persist.

"I've been living with this for so long, and it never gets easier. The sadness, the anger, the hopelessness – it all comes back every month like clockwork. I feel like I'm failing everyone around me. The thoughts are a whisper in the back of my mind that grows louder and louder. 'Maybe everyone would be better off without me.' It's a horrible thought, but it feels so real in those moments."

Age 41-50: The Struggle for Stability

Approaching menopause, the hormonal fluctuations may become even more unpredictable, intensifying the symptoms of PMDD. Despite years of coping strategies, the suicidal thoughts are still a recurrent and haunting presence.

"I've spent my whole life dealing with this, and I'm exhausted. Every month, I brace myself for the onslaught of emotions, but it still hits me like a freight train. I've learned to hide it well, to put on a brave face, but inside I'm struggling. Suicidal thoughts are like an old enemy"

that I can't defeat. 'Is this really how my life will always be?' I wonder if there will ever be peace, if there will ever be a time when I don't have to fight these thoughts. I want to believe it, but the darkness feels so permanent."

Age 45 "The Change" Begins

As I reached my mid-40s, the familiar pattern of PMDD began to change. Perimenopause crept in slowly, and with it came a new wave of emotional turbulence. The hormonal fluctuations became even more erratic, and the symptoms of PMDD intensified. Each month now felt like a deep, unrelenting wave of postpartum depression.

"I thought I had seen the worst of it, but this is different. It's like a new kind of hell every month. The sadness and despair are deeper, the anger more explosive. It's like I've lost myself completely. Every little thing sets me off, and I feel like I'm drowning in my own emotions. The suicidal thoughts are back with a vengeance. 'How much longer can I keep doing this?' I wonder if there will ever be relief, or if this is my new normal."

Age 46-48: The Intensification of Symptoms

During these years, the emotional and physical toll of perimenopause can be overwhelming. The depressive episodes feel like postpartum depression, with a sense of hopelessness and exhaustion that was all-consuming. The unpredictability of my cycle made it hard to anticipate the emotional lows, and each month felt like a new battle.

"It's relentless. One moment I'm okay, and the next I'm in the depths of despair. I can't trust my own mind anymore. It's like living with a constant black cloud over my head. The smallest things feel impossible, and I'm exhausted all the time. The suicidal thoughts are stronger, more insistent. 'What if this never ends?' The fear of living like this for the rest of my life is overwhelming. I feel like I'm losing my grip on reality."

Age 49-50: The Struggle for Stability

As I approached 50, the symptoms of perimenopause reached their peak. Each month was a struggle to maintain any semblance of normalcy. The depressive episodes felt endless, and the emotional pain was unlike anything I had experienced before. It truly felt like postpartum depression every month.

"I don't recognize myself anymore. The person I used to be is gone, replaced by this shell of a woman who can't get out of bed, can't find joy in anything. Suicidal thoughts are my constant companions. 'Why do I have to suffer like this?' I question everything. The emotional pain is so deep, so all-encompassing, that it feels like I'm being torn apart from the inside. I'm desperate for relief, for anything that will make this stop."

Finding Hope and Seeking Help

Living with PMDD especially through perimenopause is a profound challenge that affects every aspect of life. The hormonal changes can lead to intense emotional suffering, making each month feel like a cycle of postpartum depression. However, it's important to remember that help is available.

Self-Help Tips for Managing Perimenopause and PMDD:

Exercise. Physical activity can boost endorphins and improve mood. Aim for regular exercise, even if it's just a daily walk.

Healthy diet. Eating a balanced diet rich in nutrients can support overall health and hormonal balance.

Sleep hygiene. Prioritize good sleep habits to ensure you're getting enough rest, which is crucial for emotional stability.

PMDD and Suicidal Ideation: The dark cloud of suicidal thoughts

Living with PMDD means enduring a relentless cycle of emotional and physical turmoil. For many, one of the most harrowing aspects is the frequent and intense suicidal ideation that accompanies the disorder. These thoughts aren't just fleeting moments of sadness; they are pervasive, intrusive, and profoundly distressing. For me, these thoughts were as usual as deciding what to wear. I hadn't realized how impactful, or unusual, these thoughts were until much later in life.

The Framework of Suicidal Ideation in PMDD

Suicidal ideation in PMDD is characterized by a sense of hopelessness and despair that intensifies during the luteal phase of the menstrual cycle. This phase, which occurs after ovulation and before menstruation, is when symptoms of PMDD are at their peak. The hormonal fluctuations during this time can lead to severe mood swings, anxiety, and depression, creating a perfect storm for suicidal thoughts to take hold.

The Impact of Suicidal Thoughts on Thriving

The constant presence of suicidal ideation can significantly affect one's ability to thrive. It disrupts daily life, interferes with relationships, and hampers personal and professional growth. The emotional weight of these thoughts can lead to a sense of isolation and alienation, making it difficult to seek or accept help.

"The thoughts of suicide made it hard to focus on anything else. Schoolwork, friendships, and hobbies all took a backseat to the overwhelming feelings of despair. It was like living in a fog, where everything felt pointless and unimportant."

A Life-Saving Conversation

In my late twenties, a person from my past made a surprise visit. He had returned from a hard tour of military service and opened his wallet to reveal my high school picture. Flat, torn, and faded, it was at least ten years old. He hugged me so hard and lifted me from the ground. He asked if I recalled a conversation we had while closing the store one night. He reminded me that I was ruminating on suicidal thoughts. I shared this with him as casually as a person would their weekend

plans. However, he found meaning in our conversation, and it carried him with purpose. He saved my life that night, and it meant something to him. I barely recalled the conversation, not to undercut his interest or effort in me today, but to explain how matter of fact suicidal ideation can be with this disorder.

“Looking back, it’s chilling to realize how normal those conversations felt. The suicidal thoughts were so ingrained in my daily life that I didn’t see them as alarming or unusual. They were just another part of my existence.”

Reflect on Positive Memories. Remembering moments where others have shown care and concern can help counteract feelings of isolation.

Focus on Purpose. Identify and engage in activities that give your life meaning and purpose. This can help shift your focus away from negative thoughts.

Share Your Story. Sharing your experiences with others can provide support and reduce the stigma surrounding mental health issues.

The Underlying Reasons

Understanding why suicidal ideation is so prevalent in PMDD involves recognizing the complex interplay of hormonal, genetic, and environmental factors. Hormonal fluctuations, particularly the sensitivity to changes in estrogen and progesterone, play a significant role. Additionally, genetic predispositions and stressful life events can exacerbate the condition.

Navigating life with PMDD is incredibly challenging, but understanding the nature of suicidal ideation and its impact is a crucial step toward finding relief and building a fulfilling life.

The Fear and Reluctance to Seek Help

Seeking help for suicidal thoughts is often fraught with challenges. The stigma surrounding mental health can make reaching out feel shameful or embarrassing. Many people fear being judged or misunderstood, the fear of “being locked up” leading them to suffer in silence. For those with PMDD, this stigma can be amplified by the cyclical nature of their symptoms. One moment they may feel stable and rational, and the next, they are engulfed by overwhelming despair.

The fear of seeking help can be paralyzing. The thought of admitting to someone that you are having suicidal thoughts can be terrifying. What if they don't understand? What if they overreact and you end up hospitalized? The potential consequences can feel worse than the pain you are already enduring. There is also the concern about the impact on one's career, relationships, and overall life. Will people see you differently? Will they treat you differently?

As a young adult, these fears are magnified. The pressure to fit in, to be seen as capable and strong, can make it even harder to admit that you need help. The fear of being labeled as "crazy" or "unstable" can be overwhelming. It can feel easier to hide the pain, to put on a brave face, and to pretend that everything is okay.

The Importance of Self-Advocacy

Despite these fears, it is crucial to seek help. Self-advocacy is a vital part of this journey. Recognizing that these thoughts are a symptom of a treatable condition and not a reflection of personal failure is the first step. Taking proactive measures, such as creating a safety plan, reaching out to trusted friends or family, and consistently following up with mental health professionals, can prevent harm.

It is essential to find moments of lucidity, even in the darkest times, to advocate for yourself. This might mean writing down your thoughts and feelings to share with a therapist, setting reminders to take your medication, or asking a friend to help you make an appointment. These small steps can make a significant difference.

Freedom from these harmful thoughts is possible, and it is essential to prioritize your well-being and mental health. Seeking help is not a sign of weakness but a courageous step toward reclaiming your life and finding relief from the torment of PMDD.

Intrusive Thoughts: Understanding and managing

Intrusive thoughts are unwanted, involuntary thoughts that can be distressing and hard to ignore. They can be violent, sexual, or just plain bizarre, and they often come with a lot of guilt and shame. For someone with PMDD, these thoughts can be particularly troubling, especially when they involve self-harm or suicide.

Intrusive thoughts can make you feel like you are losing control, like your mind is betraying you. But it's important to understand that these thoughts are just that – thoughts. They do not reflect your desires or intentions. They are a symptom of the disorder, not a reflection of who you are as a person.

Managing intrusive thoughts involves several strategies and techniques:

Acknowledgment. Recognize that the thoughts are a symptom of PMDD. They are not a reflection of your true self or your desires.

Mindfulness. Practice mindfulness to observe your thoughts without judgment. Acknowledge them and let them pass without engaging with them.

Cognitive Behavioral Therapy (CBT). CBT can help you challenge and reframe these thoughts. A therapist can guide you through this process.

Distraction. Engage in activities that can distract you from intrusive thoughts. Exercise, hobbies, or spending time with loved ones can help.

Support System. Reach out to trusted friends or family members. Sharing your thoughts can reduce their power and help you feel less alone.

As a young adult, dealing with PMDD and suicidal thoughts can feel like an insurmountable challenge. The world expects you to be finding your path, building your future, and enjoying your youth. But instead, you are trapped in a cycle of despair that clouds every aspect of your life.

You might feel like a burden to your loved ones, like you are failing at life. The contrast between what you think you should be and what you are experiencing can be devastating. The intrusive thoughts make it hard to focus, to study, to work. Every day feels like a battle, and you are exhausted.

But it is crucial to remember that you are not alone. Many people have walked this path and found their way to a better place. Seeking help, advocating for yourself, and managing your intrusive thoughts are all steps toward recovery. It might feel impossible right now, but there is hope. There are people who understand and who can help. You deserve to live a life free from the torment of PMDD, and with the right support, you can achieve that.

The Damage to Your Spirit

These intrusive thoughts are not just distressing; they are damaging to your spirit. They erode your sense of self-worth and hope. Living with PMDD means grappling with a persistent internal dialogue that questions your value and your place in the world. This mental torture can feel like an endless assault on your sense of self, making it hard to believe in your own worthiness.

Suicidal thoughts are contrary to the very act of existence itself. They undermine the fundamental drive to live, to thrive, and to find joy. When these thoughts become a regular part of your life, they can strip away your motivation, your dreams, and your ability to engage with the world. They can make it hard to see beyond the immediate pain and imagine a future where you can be happy and fulfilled.

The Impact on Basic Living Needs

These thoughts can also severely impact your basic living needs. The constant mental struggle can sap your energy, making it difficult to take care of yourself. You might find it hard to get out of bed, to eat, to maintain personal hygiene, or to go to work or school. The simple acts of daily life can feel overwhelming and insurmountable.

For a young adult, this can mean falling behind in school, struggling to keep a job, or withdrawing from social activities. The isolation that often accompanies these struggles can exacerbate the feelings of despair and hopelessness. It can become a vicious cycle, where the symptoms of PMDD feed into the suicidal thoughts, which in turn worsen the symptoms.

Finding Lucidity and Acting on Your Behalf

Despite the overwhelming nature of these thoughts, it is possible to find moments of lucidity. These are the moments when you can see through the fog of despair and recognize the need for help. It is crucial to seize these moments and act. This might mean reaching out to a trusted friend or family member, calling a crisis hotline, or making an appointment with a therapist.

Managing intrusive thoughts requires consistent effort and support. Building a strong support system, practicing self-care, and seeking professional help are all essential steps. It is important to remember that you are not alone, and that help is available. By taking proactive steps to manage your mental health, you can break the cycle of despair and move toward a healthier, more fulfilling life.

Living Like an Olympian: Preparing for PMDD Episodes

Living with PMDD can be incredibly challenging, especially during those intense days when it feels like the world is closing in. It's easy to feel overwhelmed by the sheer amount of work involved in managing this condition. However, planning and maintaining supportive routines can make a significant difference in minimizing the impact on your life. Think of it as living like an Olympian: preparing for the tough times so that you can navigate them with strength and resilience. Find and lean on discipline in your routines.

Athletes train consistently and live with discipline to ensure they are in peak condition when it matters most. You can adopt a similar mindset. Your body and mind deserve the same level of care and attention.

Prioritize self-care. Make self-care non-negotiable. This includes regular exercise, a balanced diet, and adequate sleep. These fundamental aspects of health can help stabilize your mood and energy levels.

Mindfulness and meditation. Incorporate mindfulness and meditation into your daily routine. These practices can help you stay grounded and reduce the intensity of intrusive thoughts. Even a few minutes a day can make a big difference.

Healthy boundaries. Learn to say no to things that drain your energy. Protect your mental and emotional health by setting boundaries with people and activities that do not support your well-being.

Stay connected. Regularly check in with your support system, even when you're feeling good. Building strong relationships when you're not in crisis ensures you have a network to lean on during tougher times.

Professional support. Continue to see your therapist or counselor regularly. Having consistent professional support means you're not just managing the symptoms but also addressing the underlying issues.

Plan for the Storm

PMDD episodes can feel like a storm that hits you out of nowhere, but you can prepare for it. Just as athletes train for the most difficult parts of their sport, you can train yourself to handle the worst days of your cycle. This preparation isn't about perfection; it's about having a toolkit ready for when you need it most.

Create a "Crisis Plan". Before the storm hits, have a plan in place. Write down the steps you'll take when you start to feel overwhelmed. Include emergency contacts, hotlines, and coping strategies that work for you. This plan will be your anchor during the turbulent days. Creating these plans of your episodic response will be your safety plan.

Build a support system. Let your friends, family, and trusted colleagues know about your condition. Having a support system means you don't have to go through this alone. They can help remind you of your strengths and offer a listening ear when you need it most.

Establish routines. Maintaining a daily routine can provide structure and stability. Include activities that bring you joy, relaxation, and a sense of accomplishment. When you're not in the middle of an episode, establish these habits so they become second nature.

Encouragement for the Journey

Remember, you are stronger than you think. PMDD is a part of your life, but it does not define you. With preparation and a supportive routine, you can reduce its impact and reclaim your life. Think of this preparation as an investment in your well-being. Just as Olympians see the results of their training in their performance, you will see the benefits of your efforts in your ability to navigate PMDD episodes with greater ease.

You are not alone in this journey. Many people live with PMDD and manage to thrive. By planning and living with intention, you can find relief and maintain a sense of control over your life. Embrace the process and be gentle with yourself. You are doing the best you can, and that is more than enough.

Practical Tips for Advance Preparation

Monthly Planner. Use a planner to track your cycle and plan your activities around your PMDD days. Knowing when to expect your symptoms can help you prepare and schedule fewer demanding tasks during those times.

Emergency Kit. Create an emergency self-care kit with items that bring you comfort—perhaps a favorite book, soothing music, essential oils, or a cozy blanket. Having this kit ready can provide immediate relief during difficult moments. A modestly priced subscription box that arrives at your home during your peak episode of supportive items is out there, your “PMDD Cope Chest.”

Practice Self-Compassion. Remind yourself that it's okay to have tough days. Be kind to yourself and acknowledge your efforts. Celebrate small victories and give yourself credit for the progress you make.

Seek community support. Join PMDD support groups, either online or in-person. Connecting with others who understand your experience can provide validation and additional coping strategies.

By living with intention and preparing for challenging times, you can create a supportive environment that helps you manage PMDD more effectively. Your strength and resilience will shine through, allowing you to lead a fulfilling and empowered life despite the condition.

Surviving the relentless cycle of PMDD each month has profoundly impacted my ability to be successful in any workplace. As a young adult, I struggled to maintain consistency and dependability in my professional life. Every month, the intense days leading up to my cycle would steal my drive, motivation, and will to live. The symptoms mounted, creating a barrier that made it difficult to thrive in a work environment.

Next, we will explore the challenges of managing PMDD in the workplace, the toll it takes on career aspirations, and the strategies I've developed to navigate these obstacles. Living with PMDD is a

constant battle, but understanding its impact and finding ways to cope has been essential in striving for success despite the condition.

I still struggle. In fact, it is this very reason that led me to share my journey, my stories, and my battle techniques.



PMDD and the Workplace - Navigating Through Turbulence

Living with Premenstrual Dysphoric Disorder (PMDD) has profoundly impacted my professional life, leading me to navigate through an astonishing 26 jobs to date. The workplace, with its structured schedules and demands for consistent performance, often does not accommodate the unpredictable nature of PMDD. Leaving the workday due to rifts in meetings, misunderstandings, or insensitive comments—like being asked for the fifth time to "speak English" while debriefing a room on an injury—exemplifies the daily hurdles. Fight or flight isn't just a response; it's a near-constant condition underpinned by PMDD.

Mornings are particularly challenging. The concentration of hormones builds throughout the night, not diluted by movement or water intake, making the early hours fraught with heightened physical symptoms. Waking up to face another day often feels like an insurmountable task, loaded with potential pitfalls. On many days, the simplest solution is to call off "sick," avoiding the potential triggers and misunderstandings that await at the workplace.

PMDD's Impact in the Workplace

PMDD can severely disrupt workplace dynamics. The cyclical nature of the symptoms means that there can be a significant variation in performance, which may lead to misunderstandings and misinterpretations of one's professional capabilities and commitment. Unfortunately, comprehensive labor statistics specifically concerning PMDD are limited, but studies suggest that menstrual-related symptoms can lead to nearly nine days of lost productivity per woman each year.

The challenges faced by individuals with PMDD in the workplace often mirror those encountered by people with other recognized disabilities. However, awareness and accommodation for PMDD lag significantly behind. In some regions and under certain conditions, PMDD may qualify as a disability, urging employers to provide reasonable accommodations under laws like the Americans with Disabilities Act (ADA) in the United States. These accommodations could include flexible working hours, the ability to work from home, and more frequent breaks.

Navigating Employment with PMDD

Before my diagnosis, I navigated these challenges by gravitating towards non-traditional, gig-worker type jobs. These roles often offer the flexibility necessary to manage PMDD effectively. For instance, insurance surveyors perform evaluations for insurance companies, a role that can typically be managed as one's own business. This job involves visiting various properties to assess conditions and risks, reporting findings back to the insurer. The flexibility to schedule surveys during one's peak functioning times and the ability to work more from home on difficult days can make such roles ideal for someone managing PMDD.

Other opportunities conducive to flexible scheduling include freelance writing, virtual assistance, and consultancy work in various fields. These positions allow for a significant degree of autonomy, enabling individuals to work around their PMDD symptoms. The ability to control one's schedule and workload is invaluable, providing the necessary grace on days when symptoms are at their worst.

Navigating PMDD in the workplace requires a keen understanding of one's own patterns and symptoms, as well as an environment that allows for flexibility and understanding. While the journey is fraught with challenges, finding the right fit in terms of employment can lead to a more sustainable and fulfilling career path. It's about creating a professional life that accommodates the ebbs and flows of PMDD, ensuring that each individual can not only work effectively but thrive despite the disorder.

Navigating PMDD in the workplace has become a significant part of my journey, teaching me the importance of proactive self-management and open communication. Over time, I've developed a comprehensive strategy that allows me to maintain my professionalism and manage my symptoms effectively, even on the toughest days.

Educating Myself and My Employer

I began by educating myself thoroughly about PMDD, understanding the nuances of my symptoms and their impact on my work life. Armed with this knowledge, I approached my employer, providing detailed information about PMDD and its potential effects on my performance. This initial conversation was pivotal; it opened the door to discussions about reasonable accommodations that could support my productivity without sacrificing my health.

Developing a Symptom Management Plan

I meticulously tracked my symptoms, noting patterns and triggers. This enabled me to anticipate challenging days and prepare accordingly. On days when I expected severe symptoms, I would adjust my schedule, prioritizing lighter tasks or arranging to work from home. This level of planning ensured that I could maintain my responsibilities without overwhelming myself.

Requesting Reasonable Accommodations

After discussions with HR, we implemented several accommodations that proved invaluable. Flexible work hours allowed me to start my day later when symptoms made mornings particularly difficult. We also agreed on remote work options, which I could utilize on peak symptom days. Additionally, the freedom to take short, frequent breaks helped me manage fatigue and stress more effectively.

Implementing Stress-Reduction Techniques

To further aid my symptom management, I integrated regular mindfulness exercises and meditation into my daily routine, both at home and in a quiet corner of the office. Regular physical activity, tailored to my energy levels, became a non-negotiable part of my week. I also focused on maintaining a balanced diet, which helped stabilize my energy throughout the workday.

Using a Support System

I cultivated a support network within the workplace, consisting of colleagues who understood my condition and could provide support when needed. Outside of work, I sought professional counseling, which equipped me with additional coping strategies to handle stress and emotional upheaval effectively.

Keeping Emergency Coping Tools at Hand

I kept a personal care kit in my desk drawer—stocked with pain relievers, herbal teas, a stress ball, and affirmations—that I could turn to during sudden flare-ups. This kit became my emergency lifeline, providing quick relief and a sense of security.

Maintaining Open Communication

Regular communication with my manager and HR was crucial. I made it a point to provide updates about my condition and discuss any necessary adjustments to my workload or deadlines. This ongoing dialogue ensured that my needs were met without compromising my team's performance.

Legal Awareness

I also familiarized myself with the legal protections available under disability laws in my region, which reassured me that I could advocate for myself without fear of repercussions.

I hope to inspire others dealing with PMDD to advocate for themselves and implement similar strategies in their workplaces. It is possible to balance professional success with health challenges, provided there is understanding, flexibility, and the courage to speak up about one's needs.



Course Correction

As I stood on the precipice of my 40s, the weight of loss and regret felt almost unbearable. Yet, with experience etched into my very being, I knew I had to course-correct my life. The absence of my late husband left a gaping void, and in my mind, the only way to fill it was by seeking companionship once more. I felt the clock ticking loudly, an urgent reminder that time was my enemy. The dream of a family, once vibrant and full of promise, now felt like a distant echo, washed ashore by waves of missed opportunities and sorrow.

In my search for a new partner, I grappled with my desires and concerns, each one intertwined with the complexities of PMDD. I craved stability, someone who would understand the emotional rollercoaster that came with my monthly cycles. I knew that the right person would need to be patient, capable of navigating the turbulence that often came with my mood swings. The fear of repeating past mistakes loomed large; would I fall into the same traps of emotional manipulation and volatility that had marked my earlier relationships?

I wanted someone who would not only accept me but also challenge me to grow. A partner who could see beyond the surface, who would engage with the depths of my spirit, even on the darkest days. However, I also felt the instinctual pull to appease—to find someone who would fit neatly into

the mold of what I thought would bring me peace. Was I choosing comfort over compatibility? That nagging question haunted me.

As I envisioned this next chapter, I found myself balancing a longing for love with the haunting specter of PMDD. I was acutely aware that my cycles could color my perceptions and decisions. One moment, I might feel euphoric, ready to leap into love, and the next, I'd be plunged into despair, questioning everything about my choice. Would my new partner understand that my highs and lows were not reflections of my feelings for them, but rather the cyclical nature of my condition?

The prospect of motherhood was a haunting specter in my thoughts. The desire for children felt like a ghost of what could have been, shadowing my choices and amplifying my fears. Would my potential partner even want children? Would they understand my past struggles and the deep-seated desire to nurture, despite the loss? Every consideration became a weighted decision, each one tinged with the fear of loss and disappointment.

Ultimately, I found myself seeking reassurance, yearning for a connection that felt both safe and expansive. I craved a partner who would support me in my battles with PMDD while encouraging my personal growth and healing. I knew that I couldn't afford to settle; this was about building a future, one that would finally acknowledge my worth beyond the cyclical chaos. The stakes felt impossibly high, but armed with lessons from my past, I was determined to forge a new path forward, no matter how daunting the journey might seem.

Navigating the Perimenopausal Challenge with PMDD

Entering the perimenopausal phase can feel like stepping into an unpredictable storm, especially for those already grappling with PMDD. This transitional period, often beginning in the mid to late 40s, brings about significant hormonal fluctuations that can exacerbate existing symptoms. As estrogen and progesterone levels start to decline and fluctuate unpredictably, the intensity of PMDD symptoms can increase, leading to a tumultuous emotional landscape.

Understanding Hormonal Changes

During perimenopause, the hypothalamus—a crucial part of the brain responsible for regulating hormones—responds to these fluctuations with confusion. It struggles to maintain a stable hormonal environment, which can lead to erratic cycles and heightened PMDD symptoms. The hypothalamus's inability to adapt to varying hormone levels results in an amplified response to stress and emotional upheaval, often sending the body into a state of heightened anxiety or depression.

This phase is marked by the brain's challenge to balance neurotransmitters, which are heavily influenced by hormonal changes. As estrogen levels fluctuate, they can affect serotonin and other mood-regulating chemicals, leading to increased irritability, sadness, and even rage. Women may find themselves in cycles of intense emotional distress that feel more severe than those experienced in earlier years.

For many, entering perimenopause may mean that PMDD symptoms become more pronounced. The usual symptoms—such as severe mood swings, irritability, depression, and anxiety—can escalate, transforming from manageable to overwhelming. The combination of hormonal shifts and

PMDD creates a perfect storm, complicating daily life and often leading to feelings of helplessness and despair.

Additionally, the cyclical nature of PMDD can become increasingly difficult to predict. Symptoms may extend beyond the typical luteal phase, blurring the lines between normal emotional fluctuations and PMDD episodes. This unpredictability can make it hard to establish routines, maintain relationships, and fulfill daily responsibilities.

The Danger of Living Undiagnosed

Navigating this phase without a proper diagnosis or understanding of PMDD can be particularly perilous. Many women enter perimenopause without being aware of how their PMDD might evolve during this transition. Without a diagnosis, the changes in mood and emotional state may be misattributed to stress or aging rather than the complex interplay of hormonal shifts and PMDD.

Living through perimenopause undiagnosed can lead to increased risks for mental health issues. The isolation and shame associated with PMDD can become more pronounced, often resulting in a withdrawal from social support systems and a downward spiral of mental health deterioration.

Understanding the challenges of entering perimenopause with PMDD is crucial for developing effective coping strategies. Awareness of the expected increases in severity and the biological processes at play can empower individuals to seek appropriate help and advocate for their needs. It's essential to prioritize mental health during this transitional phase and to reach out for support, whether through therapy, medical intervention, or community resources. Acknowledging the realities of this journey is the first step towards reclaiming stability in the face of hormonal chaos.

Navigating the Storm of Marriage Amidst PMDD

My current marriage began with a sense of optimism and promise, as if I had finally righted the ship after years of tumultuous relationships and personal struggles. Our wedding day was a beacon of hope, a moment of joy where the future seemed bright and full of possibilities. Little did I know that this day would also mark the beginning of one of the most challenging periods of my life.

Our wedding day was a beautiful, joyful occasion, and it was the last time my mother walked. Shortly after we returned from our honeymoon, we found her hospitalized with a severe infection. This was the beginning of an eight-year journey filled with urgencies, emergencies, death scares, ICU visits, rehabilitation centers, and the emotional rollercoaster of mourning her death multiple times as she miraculously recovered time and again.

Facing the mortality of my mother brought PMDD to the forefront of my life. The emotional and physical demands of her health crises, combined with the hormonal upheaval of PMDD, created a perfect storm. My work became increasingly difficult as I struggled to balance the demands of my career again with the constant stress and emotional drain of the pain my mom was experiencing. Each PMDD episode brought with it a wave of desperation and hopelessness, further complicating my ability to function effectively.

Financial Instability and Rising Desperation

At age 45, marriage is often expected to be a partnership grounded in mutual respect, emotional support, and shared responsibilities. Financial stability is a key aspect, with both partners ideally contributing to a secure and comfortable lifestyle. This may involve managing joint finances, planning for retirement, and ensuring that any debts are manageable. Emotional support is crucial, as both partners should feel valued and understood, particularly during life's inevitable challenges. Effective communication, trust, and a deep sense of companionship are fundamental. Additionally, a marriage at this stage should include a balance of personal growth and shared interests, where both partners encourage each other's pursuits and maintain a healthy, intimate connection. Overall, a marriage at 45 is about building a strong, supportive foundation that allows both partners to thrive individually and together.

The expectations of a secure financial future with my husband began to crumble under the weight of reality. The reality of being an "SOB" or "Son of the Boss" was more than disappointing at this phase of my life. My perception was not reality.

There was little financial stability if any it was only a precarious balance that was constantly threatened by unforeseen expenses. This financial instability fueled my PMDD episodes, turning them into desperate, volatile outbursts. I found myself lashing out at my husband, a man who had no experience in dealing with the chaos of PMDD. The venom I spewed during these episodes was a culmination of decades of unmet expectations and unfulfilled dreams.

The Cycle of Blame and Desperation

How could this be happening again? The stakes were extremely high, and the cycle of PMDD exacerbated my fears and frustrations. Each episode left me feeling more isolated and hopeless, trapped in a cycle of blame and desperation. My husband, bewildered and hurt by my outbursts, struggled to understand and cope with the emotional turmoil that PMDD brought into our lives.

The emotional impact of this period was profound. The constant stress and emotional upheaval took a toll on my mental and physical health. The unpredictability of PMDD episodes made it difficult to maintain any semblance of normalcy, and the strain on my marriage was palpable. The love and hope that had brought us together on our wedding day seemed distant and out of reach.

Three years into our marriage, Andrew and I decided to take a trip with his mother to Hilton Head Island. The anticipation of a beach vacation was tinged with apprehension, as I was amidst what I now recognize as a severe PMDD phase. The 15-hour drive from Detroit to Hilton Head was nothing short of grueling. Crammed in the backseat next to his narcissistic, controlling mother, I felt trapped. Her frugality meant that the car was packed with her special dietary needs and reusable items, leaving no room for comfort or personal space.

The drive was a relentless test of my patience and composure. His mother's constant chatter and need for control grated on my already frayed nerves. Each mile felt like a marathon, my discomfort growing with every passing hour. The promise of the beach and the allure of the ocean waves were the only thoughts keeping me sane, but my PMDD symptoms were brewing beneath the surface, threatening to erupt at any moment.

As we finally arrived at Hilton Head, the initial relief of reaching our destination was quickly overshadowed by the realities of our vacation dynamics. His mother's domineering nature did not abate; if anything, it intensified. Her constant need to manage every detail, from meal planning to daily activities, left little room for relaxation or spontaneity. I found myself biting my tongue, struggling to maintain a facade of calm while internally battling the storm of PMDD.

Until I didn't.

The beach, which I had hoped would be a sanctuary, became a battleground. The physical and emotional discomfort of PMDD turned the serene setting into a source of further agitation. Small disagreements over trivial matters escalated into full-blown arguments, fueled by my heightened sensitivity and irritability. Andrew tried to mediate, but his efforts often felt insufficient against the overwhelming tide of emotions I was experiencing.

Over the next several days, my condition spiraled. The combination of physical confinement, emotional stress, and the oppressive presence of his mother created a perfect storm. Simple pleasures like walks on the beach or dinners out became sources of tension and conflict. My PMDD episodes reached their peak, with mood swings that left me feeling disconnected and volatile. The idyllic vacation I had envisioned turned into a series of emotional minefields, each step fraught with the potential for an explosive reaction.

The culmination of tension released the night before we were to head home.

As the days went by in Hilton Head, an internal conflict began to brew within me, watching his mother's constant snipping and sniping at Andrew. She tended to her every need with an air of entitlement that grated on my nerves. One evening, feeling the tension building up inside me, I asked Andrew to be a congenial host and offer his mother a drink. Her response was a sharp laugh, followed by a dismissive remark, "He's no host, and he certainly isn't the boss. But I'm sure he wishes he was." This felt like a direct insult to our marriage, striking a nerve already raw from the stress of the trip and my undiagnosed PMDD cycle.

Unable to let it go, I found her later on the lanai, casually reading a book. The simmering anger boiled over, and I confronted her. "If you want to know why Andrew is so wound up all the time, you need only look at your relationship with him," I said, trying to keep my voice steady but failing to mask the frustration. I didn't stop there. "You take advantage of him, you abuse his kindness, and in a way, you're trying to replace your deceased husband with him."

My words hung in the air, heavy and charged with years of pent-up resentment and the immediate strain of my hormonal turmoil. Andrew was silent, his face a mix of shock and discomfort. His mother's expression hardened, her eyes narrowing as she processed my outburst. The rest of the evening was painfully uncomfortable, an unspoken tension thickening the air. We all moved through the motions of the night, but the confrontation had left a mark, deepening the rift that had formed during this ill-fated trip.

The conflict with his mother highlighted the broader strains in our relationship, amplified by the emotional volatility of my PMDD. This incident, like so many others, underscored the challenging dynamics we navigated, where familial ties, personal boundaries, and my unpredictable condition clashed in ways that were difficult to manage. The remainder of the vacation was overshadowed by

the uncomfortable silence and the unresolved tension, a stark reminder of the emotional and relational hurdles that lay ahead.

Andrew left me alone with his mom as he collected items for dinner. She, no doubted tense from being approached in a manner she was not accustomed to. She was not accustomed to being questioned at all. She had been drinking. She was prepping her food and she crudely put her hands in her pants and was scratching her business just before she came over to the counter and hip bumped me out of the way. She proceeded to toss my cut-up chicken with her bare hands. I snapped. I left the condo and just started walking. I walked down the beach with the intention of walking around the island to get as far away as I could from her. My husband chased me, caught up to me and begged me to return.

I came back but I refused to come in. I sat on the beach in a rage driven insomnia all night until the sun started to rise.

Morning came with a new omnipresence. The PMDD Demon. I texted Andrew over and over until he finally woke. It was predawn and no one was awake in the community. I was so angry. Anger that I couldn't control, and I only wanted to serve punishment for that. She ruined my dinner. So, I opened all her prepared food for the trip and I violated it. I crushed her chips into crumbs. I added shrimp to her salad. I dumped an entire 1.75 liter of Rum down the drain. I turned the air conditioning down to the lowest setting to chill the condo for the morning.

Next, I asked Andrew to unlock the car. Once he did I took the front passenger seat. There was no way I was going to sit cramped in that backseat to her 15 hours home.

There was no way that anyone could imagine what would unfold next.

As we finally prepared to leave Hilton Head Island, a sense of relief washed over me. Settling into the front seat of the car, I felt a glimmer of hope for normalcy, a return to the familiar and the routine. The journey home symbolized an escape from the tension and an opportunity to leave behind the conflict that had marred our vacation. However, my brief solace was shattered within an hour. From the back seat, Andrew's mother began her relentless barrage of jabs and insults, her words sharp and cutting. She called me a bitch, and the insult cut through me like a blade, igniting a deep, simmering rage.

The tension in the car was palpable, Andrew's grip on the steering wheel tightening as he navigated the highway. Just a few miles down the road, he decided to stop at a rest area, likely in an attempt to defuse the escalating situation. As he stepped away, no more than 200 feet from the car, the passenger door suddenly flew open. Startled, I turned to see his mother, her face contorted with anger, trying to yank me out of the car.

The shock of her aggression stunned me for a moment, but then my own fury surged. The boundaries of civility had been breached, and I was thrown into a primal state of self-defense. The car, once a perceived sanctuary from the conflict, had become a battleground. My heart pounded in my chest as I grappled with the immediate physical and emotional assault. The idyllic vision of a calm journey home had evaporated, replaced by the chaotic and hostile reality of the moment.

The rest area was bustling with weary travelers stretching their legs and grabbing snacks. Their eyes turned toward us, drawn by the commotion as I screamed for Andrew. He rushed back and pulled his mother to the sidewalk, giving me the opportunity to jump across the seats to the driver's side. My shouts filled the air, echoing around the parking lot as I warned everyone that she was off her memory medicine and running amuck.

Her face turned beet red, a mix of mortification and silence. Andrew somehow managed to stay calm, his composed demeanor a stark contrast to the chaos. His unflinching resolve, even when I called his mother a "stodgy cunt," convinced everyone to get back into the car. I insisted on driving, taking control of the wheel while his mother, determined to assert her presence, sat next to me. Andrew, a towering 6'3", squeezed into the back seat amidst the clutter of her rags, glassware, cooking spices, and an assortment of recycled frugal items she had dragged along.

As I navigated the car back onto the highway, the tension was thick, but the vehicle moved forward, a fragile truce hanging in the air. The journey home was far from the peaceful escape I had envisioned, but at least I was in the driver's seat, determined to steer us back to normalcy.

The ride home was a blur of high-speed tension, my foot pressing firmly on the accelerator as we pushed the speed limit. I was inflamed, yelling and complaining to both of them, my voice rising above the din of the radio, which I had turned up to the most annoying channels I could find. The music blared, a cacophony of static and noise that matched the chaos inside me. There would be no more rest stops; I wouldn't risk being tossed to the curb hundreds of miles from home. My knuckles whitened on the steering wheel as I ranted about how they could do this to me, each word dripping with the frustration and anger that had built up over the past days. The car was a pressure cooker, the air thick with unspoken words and simmering resentment. My mind was a whirlwind, and all I wanted was to get home, back to some semblance of normalcy.

The emotional uncontrollable rage inside me reached its peak, compelling me to pull over onto the shoulder in the middle of nowhere, with nothing else around. I stopped the car, took the keys, and in a moment of raw, unfiltered anger, I dropped my trousers behind the car, locking eyes with her through the rearview mirror. It was a primal act of defiance, a silent scream of frustration that left everyone stunned.

The rest of the ride continued in tense silence. We dropped her off safely at home. I attempted to bridge the gap, apologizing and suggesting we could start fresh. "I love you," I said, hoping for some sign of reconciliation. But she never spoke to me again, and I haven't seen her since. It's been five years.

From a professional's perspective, analyzing this situation involves understanding the dynamics of interpersonal relationships, the influence of mental health conditions like PMDD, and the broader context of family dynamics and stress.

The conflict with Andrew's mother began with a perceived insult towards the marriage. In PMDD, heightened sensitivity to perceived slights and an increased tendency to react strongly to stressors are common. This period of high emotional volatility can lead to confrontations that might not have occurred otherwise.

The confrontation on the lanai illustrates the impulsivity and emotional intensity that often accompany PMDD episodes. The accusations toward Andrew's mother were harsh and direct, reflecting a lack of emotional regulation that is characteristic of PMDD. The silence from Andrew highlights a common issue in family dynamics where partners may feel caught between their spouse and their parent, leading to non-confrontation and avoidance of conflict.

The incident in the car, where she was called a derogatory term, sparked a significant emotional reaction. This escalation led to a dramatic outburst at the rest area, indicative of the rage that can accompany PMDD episodes. The reaction to the insult and subsequent behavior (attempting to drive off, locking eyes while urinating) points to a state of emotional overwhelm. This is compounded by the stress of the long drive, close quarters, and ongoing tension with Andrew's mother.

The decision to not stop at any rest stops and erratic driving behavior are examples of the inability to control impulses and emotions during a PMDD episode. This behavior is often driven by a mix of anger, frustration, and a desperate need to regain control in a situation that feels overwhelmingly out of control.

The attempt to apologize and start fresh after the trip indicates an awareness of the negative impact of her actions, yet the apology is met with silence and continued estrangement from Andrew's mother. This lack of resolution can be particularly painful for someone with PMDD, who may already struggle with feelings of guilt and self-blame.

PMDD exacerbated the entire situation by intensifying emotional reactions, reducing the ability to regulate anger, and impairing judgment. The heightened emotional sensitivity during PMDD episodes can turn minor conflicts into significant confrontations. The behavior reflects a classic pattern seen in PMDD: heightened reactivity, impulsivity, and a subsequent period of remorse.

From a clinical standpoint, this scenario highlights the importance of recognizing and managing PMDD. Effective management might include therapy, lifestyle changes, and medication to help mitigate the intense emotional swings. For family members, understanding the condition can foster empathy and patience, potentially preventing such conflicts. In this case, ongoing family therapy could help rebuild relationships damaged by these PMDD-fueled interactions, providing a space for understanding and healing.

“By the end of the trip, I was mentally and physically exhausted. The drive back home felt even longer than the journey there, my body and mind battered by the relentless cycle of PMDD. The experience was a harsh reminder of how unpredictable and all-consuming my condition could be. It was also a wake-up call to the impact it had on my relationships and daily life. The trip to Hilton Head Island, meant to be a relaxing escape, became a crucible that tested my marriage and my own resilience in ways I had never anticipated.”

At this point, I still did not have a diagnosis.

Seeking Stability and Understanding

Amid this chaos, it became clear that understanding and managing PMDD was crucial for our survival as a couple. Seeking medical help, therapy, and support groups became a priority. It was

essential to recognize that PMDD was not just a personal struggle but a shared challenge that required empathy, patience, and proactive measures to navigate successfully.

Navigating the storm of marriage amidst PMDD has been one of the most challenging and transformative experiences of my life. The journey has been marked by moments of despair and hopelessness, but also by resilience and a deepening understanding of the complexities of mental health. As we continue to face the challenges together, there is hope that with awareness, support, and mutual understanding, we can find stability and rebuild our lives on a foundation of empathy and strength.

Each month, the recurring thought patterns of my life formed a dangerous cycle, a mental cocktail of despair and hopelessness. The suicidal ideation was relentless, and then, as if to amplify my torment, the pandemic hit the United States. We were locked in together, and my mind spiraled uncontrollably. I reflected on my entire life, filled with deep regret over how my disorder had affected my marriage. The once promising future seemed like a distant memory, replaced by a never-ending loop of anxiety and self-doubt.

During my PMDD episodes, I became uncontrollable and inconsolable. My fight-or-flight response was always triggered, swinging wildly between the extremes. There were no in-betweens, only intense reactions that left me feeling exhausted and defeated. Each argument, every misunderstanding, and the constant strain wore on our relationship. I was grateful for his perseverance and patience, but my doubts gnawed at me, and I couldn't help but cry over his family's rejection of me. The emotional turmoil was relentless, a storm that refused to subside.

The pandemic intensified my feelings of isolation and hopelessness. Locked inside, with nowhere to escape, my thoughts became darker. I couldn't see a way out, and the weight of my disorder pressed down on me like never before. My anxiety skyrocketed, and self-doubt became my constant companion. I questioned everything—my worth, my sanity, and my ability to maintain any semblance of a normal life. It was a struggle just to get through each day, and the future seemed bleak and unmanageable.

For three years, I battled these feelings, unable to find peace or resolution. The emotional scars deepened, and the rift between me and his family widened. My heart ached with the desire to make amends, to heal the wounds that had been inflicted. Finally, I reached a breaking point and realized I needed to let go of the past if I was ever to move forward. I mustered the courage to reach out, hoping to bridge the gap that had formed between us.

I offered to sit down over dinner on our anniversary and make amends, extending an olive branch in a desperate bid for reconciliation. I wanted to apologize, to explain, and to find a way to move forward. But she refused. Her rejection felt like a final blow, confirmation of my deepest fears and insecurities. Despite my efforts, the past remained an insurmountable barrier, and I was left to grapple with the aftermath of a relationship damaged by years of misunderstanding and emotional turmoil.

Don't forget, my own mother was in and out of the hospital, teetering on the brink of death nearly nine times during this period. I began to relive this cycle repeatedly because there was no resolve.

Each month, my mind rotted with torment, ruminating on the choices that led me here—my disappointment, my situation. It seemed inescapable.

Every month, my emotions would flare, and a new target would come into focus. I ran through another three jobs during this time. Jobs I enjoyed but inevitably found disappointing after a certain period, a period I came to refer to as their "shelf life." While running my business in the background, working allowed me to apply my specific expertise to something I was passionate about, but the cycle of dissatisfaction was relentless.

Amidst all this, I managed to sell my house and move from the home where my former husband had passed away. Another monthly topic that would surge. I relocated to the central state, where I found the home of my mid-century dreams. This move symbolized a fresh start, a chance to build something new amidst the chaos that my life had become.

In the throes of a PMDD episode, the world feels like a prison of my own making. Every decision, every relationship, every job—everything that once held promise now seems like a string of failures. The weight of regret and self-doubt is crushing, leaving me questioning the very essence of who I am.

I look at my life and see a series of missed opportunities and shattered dreams. I think of my mother, her constant health crises, and how powerless I felt each time she hovered near death. It's like I'm trapped in a loop, reliving those moments of helplessness over and over. There's no escape from the haunting thoughts that plague my mind. They whisper that I'm to blame, that my choices have led me here, to this place of perpetual torment.

Every month, as my hormones surge and crash, the despair deepens. The anger bubbles up, targeting those I love, pushing them away. I lash out, consumed by a rage I can't control, and then I'm left to pick up the pieces of my own destruction. The cycle is merciless, and no matter how hard I try, I can't seem to break free.

Work is no refuge. Jobs that once filled me with a sense of purpose now become sources of disappointment. I watch as my enthusiasm wanes, and the inevitable sense of failure sets in. It's as if everything has a shelf life, a point at which my passion dies and I'm left with nothing but disillusionment.

Moving to a new home was supposed to be a fresh start, but even here, in the house of my dreams, I can't escape the shadows of my past. I wanted this place to be a sanctuary, a symbol of new beginnings, but instead, it feels like just another place where I'm failing to find peace. My marriage, once a beacon of hope, is now riddled with issues, exacerbated by my PMDD. Andrew, patient as he is, endures my outbursts and emotional volatility, but I can see the strain it places on us.

The constant upheaval leaves me exhausted. The unpredictability of my emotions makes every day a battle. I fear the future, knowing that the hormonal changes of perimenopause will only intensify these feelings. Living undiagnosed and uncontrolled for so long has taken its toll, and the prospect of navigating these years without a clear path forward is terrifying.

In these dark moments, the thoughts are almost unbearable. I question my worth, my purpose, and whether I'll ever find a way out of this relentless cycle. It's a suffocating spiral, where hope feels distant, and the possibility of peace seems like a cruel illusion.

In the new home, the cycle continued its relentless torment. The anger and outbursts were as fierce as ever, shaking the foundation of my fragile stability. There were moments when I felt trapped in a never-ending storm, unable to escape the tempest that raged within me. Fleeing and fighting became a twisted dance, a macabre routine that defined my life. At least twice, in the heat of an argument, I found myself hurling my husband's belongings onto the walkway, each item a symbol of my frustration and despair. Monthly, the threats to end our marriage resurfaced, fueled by the erratic and unpredictable swings of my cycle. It affected everything including my employment again.

The stress of maintaining a professional facade amidst this chaos was overwhelming. The workplace, once a refuge of sorts, now felt like a battleground. The politics, the subtle pushbacks from colleagues I once liked and enjoyed working with, all became sources of immense stress. Each month, as PMDD took its toll, I would miss time—scattered days here and there, and sometimes longer stretches. The excuses I made were a desperate attempt to hide the severity of my condition. I reached back to a familiar pattern from my youth, where my mother would call in sick for me, even when I was a 25-year-old woman, because I couldn't summon the strength to get out of bed.

The pattern of missed days and faltering reliability became a glaring issue. It was a cruel reminder of my ongoing struggle, a struggle that seemed insurmountable. Each time I failed to show up, I felt a piece of my credibility and self-worth erode. I watched as opportunities slipped through my fingers, unable to grasp them in the haze of my PMDD episodes. The guilt and shame were immense, compounding the depression that already plagued me.

During this, I longed for understanding and compassion, but often found myself isolated by the very nature of my condition. The unpredictability of my emotions made it difficult for others to truly grasp the depth of my suffering. My husband, patient as he tried to be, was caught in the crossfire of my internal battles. His endurance was a blessing, but it also highlighted the strain our marriage was under. The frequent threats to leave, the dramatic gestures of throwing his belongings outside, were cries for help masked as anger. They were expressions of my fear, my frustration, and my overwhelming sense of being trapped in a body and mind that betrayed me monthly.

The hope that moving to a new home might offer a fresh start was dimmed by the relentless reality of my condition. The house, with all its promise, became just another stage for the same painful drama to play out. And so, the cycle continued, each month a new chapter in a story that felt impossible to rewrite.

Piecing together my pattern of symptoms was like assembling a jigsaw puzzle without the picture on the box. For years, I had sought help from my family doctor, who treated the most life-impacting symptom: depression. A single medication, Prozac, worked specifically on the hypothalamus, ironically enough, controlling my symptoms throughout my history. This small reprieve allowed me to function, but only until the very sharp hormonal changes and heightened sensitivity became alarming.

With the new house and a new job that gave me a sense of purpose, I finally decided to seek a more comprehensive evaluation. During my annual visit to the gynecologist, I was in the midst of my luteal phase, and my symptoms were in full swing. The emotional tearfulness, the increased heart rate, and the anxiety were all too apparent. My gynecologist recognized the signs immediately. She said it was PMDD.

I was unfamiliar with PMDD, but as she explained it, everything started to make perfect sense. It was difficult to pinpoint a diagnosis since my symptom onset was at such an early age. For so long, the labels that were thrown around didn't quite fit. Bipolar disorder never made sense to me; I didn't fit the DSM description. My cycles were more rapid. Cyclothymic Personality Disorder was a possibility, and being told I had an Artist's Temperament seemed to align with my personality. I had accepted those explanations and hoped that Prozac would stabilize my temperament. It did, for a while. Until it didn't.

The new house and job offered a glimmer of hope, a chance to start fresh. However, the reality of PMDD was never far behind. Each month, I braced myself for the storm, trying to manage my symptoms with the tools and knowledge I had gained. My journey towards stability was fraught with challenges, but understanding my condition was the first step towards reclaiming my life.

Three years down the road without Prozac, I faced a world of challenges that seemed insurmountable. The medication, specifically effective for PMDD, had been a critical crutch. Without it, I was left grappling with the raw intensity of my condition, compounded by life's disappointments and my relentless internal drive for excellence. The pressure was overwhelming. Failure, at this stage, was not an option. I felt I was out of time.

Recognizing the urgent need for help, my first step was seeking assistance from my OB/GYN. When she diagnosed me with PMDD, it was the validation I needed to take control of my story. Armed with this knowledge, I embarked on a mission to understand and manage my symptoms. I began meticulously tracking my daily experiences, noting every fluctuation in my mood, physical state, and emotional well-being. This wasn't just for the current cycle but extended back to my very first menstrual cycle, as far as I could remember.

The impactful moments, like those highlighted here, stood out glaringly, screaming in coincidence.

By documenting these patterns, I became highly attuned to the slightest changes in my body. This newfound awareness allowed me to anticipate almost to the minute when I would "go dark," as I coined the phrase. This term captured the onset of the severe depressive episodes that PMDD triggered, those periods of profound despair and emotional turmoil.

Since tracking my symptoms provided a roadmap of my emotional landscape, it was both empowering and daunting. I could now see the cycle's impact on my life with a clarity I had never had before. This insight was crucial in helping me prepare for the inevitable dark phases, giving me a semblance of control over a condition that had long dominated my existence. However, it also highlighted the relentless nature of PMDD, underscoring the urgency of finding effective treatment and support.



As I navigate ` this journey, the weight of my aspirations and the pressure to achieve something significant in my life felt even heavier. Each setback and disappointment was magnified by the looming shadow of PMDD. Yet, armed with my symptom tracker and a deeper understanding of my condition, I was determined to push forward. Failure was not an option, and I was resolute in my quest to find a way to live with, and not be defeated by, PMDD.

Moving forward with all this knowledge and understanding of my cycle, I have taken significant steps toward regaining control over my life. Though I am not there yet, each day brings me closer to a more stable existence. A crucial part of this journey is the creation of this book and my Cope Chest. Filled with tools that work for me, and might work for you, whether they are mindfulness exercises, dietary adjustments, or support group information. Educate yourself about PMDD and stay informed about the latest research and treatments.

Most importantly, be gentle with yourself. Understand that PMDD is a physiological condition, not a personal failing.

This book serves as a testament to my experiences, a roadmap for others, and a tool for self-reflection and healing. Through it, I aim not only to help myself but to extend a hand to all those suffering from PMDD.

My mission in this book is to shed light on the struggles we face and to provide practical tools for self-help. The Cope Chest is one such tool, a collection of resources and strategies designed to help manage the symptoms of PMDD. From daily symptom tracking to mindfulness practices, from medical consultations to community support, these tools empower us to navigate the turbulent waters of our condition.

It is heartening to know that professionals are learning more about PMDD every day. Medical advances offer hope for better support and more effective treatments in the future. We are not alone in this fight, and there is a growing community of researchers, clinicians, and fellow sufferers working toward a common goal.

To anyone suffering through what I did, my advice is simple: take proactive steps to understand and manage your condition. Start by tracking your symptoms daily. This will help you identify patterns and anticipate challenging phases. Seek medical advice and don't hesitate to consult multiple professionals until you find someone who understands PMDD and can offer effective treatment.

Build a network of understanding friends, family, and support groups. Include me in your network. Find me on LinkedIn.

Develop a set of coping strategies that work for you and use them consistently.

Stay informed about PMDD and advocate for yourself within the medical community

By taking these steps, you can gain control over your cycle and live a more balanced, fulfilling life. Remember, you are not alone, and there is hope for a better future. This book, my journey, and the collective experiences of others are here to support you every step of the way. Together, we can navigate the challenges of PMDD and find strength in our shared resilience.



PMDD Escape Envelopes

In the volatile landscape of PMDD we must have a safety plan. My entire life has been devoted in one way or another to safety. This book, these exercises are no different. This guide becomes your equation for safety during those perilous times.

These envelopes serve as a lifeline, allowing you to bridge the gap between your baseline self and the heightened emotions of your episodic self, fostering a dialogue where the past meets the future.

Living with Premenstrual Dysphoric Disorder (PMDD) can be an overwhelming experience, marked by intense emotional and physical symptoms that disrupt daily life. The PMDD Escape Envelopes are designed as a practical, immediate resource to help manage these challenging moments. Each envelope offers specific tools and techniques tailored to relieve key symptoms, providing a sense of control and relief when you need it most.

The PMDD Cope Chest incorporates these ideas as a touchstone for us all but the true value of these letters to the self comes from your work, your deep thoughts and your motivations.

The purpose of these envelopes is to provide targeted, actionable support during the most difficult times of your PMDD cycle. Each envelope contains items and instructions aimed at addressing specific symptoms such as anxiety, anger, depression, isolation, and physical exhaustion. By using these envelopes, you can find immediate comfort and a way to navigate through the intense periods of PMDD.

It is important to remember that during a severe PMDD episode, the hypothalamus responds to fluctuating hormone levels during the luteal phase by altering its regulation of mood, sleep, and appetite. This dysregulation, coupled with an autoimmune response, can exacerbate emotional and physical symptoms.

Learning to identify this clear pattern through my cycle planning since my diagnosis has been transformative. In my tracking, I have learned to grade my symptoms and apply a severity scale to them, creating what I call red and green days. On those red days, my life is impacted severely, and I am most vulnerable to my episodes.

It was natural to apply a safety severity scale to my symptoms, just as I would assess hazards in a location or process. I've learned to look forward to the green days, those moments of respite and normalcy. Conversely, the waning of the red days offers a glimmer of hope, knowing relief is on the horizon.

On red days, my behavior and physical responses become extreme. For instance, a relentless road rage incident ensued after I threw a water bottle at a car that was tailgating me, leading to miles of being chased. Another time, I pushed all my items across the counter at a gas station attendant, ran out, and left the gas pump on the ground, peeling out in my car because she told me I could be fined \$600 for coming inside while my car was filling. I even confronted a TSA agent who asked me to remove my jacket, which was covering a maxi skirt pulled up as a dress. When she escalated, I complied by pulling my skirt down and standing before her in Denver International Airport in just a bra and skirt. These outbursts are both embarrassing and harmful.

The energy consumed during this time is exhausting. Finding the strength for self-care or innovating for self during these episodes is challenging, but understanding and anticipating these cycles has provided me with some tools to navigate through the storm.

It is essential that on those green days I plan and anticipate those red days. I want to minimize the red day impact as best as possible, write your envelopes on the green days.

How to Use

These envelopes are your tool and lifeline when the red days come. When I am overwhelmed and upset the last thing I want to be told is to “settle down” by someone on the outside. I am the only person I trust during that time. Set yourself up for your own success.

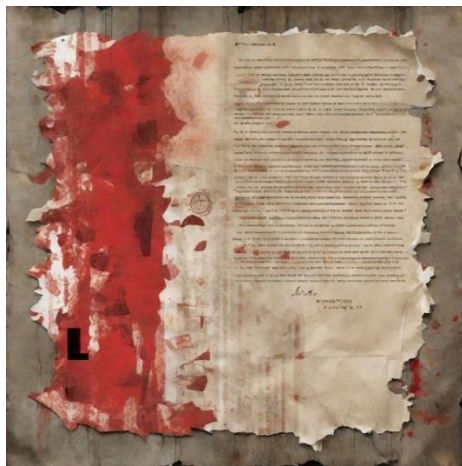
Recognize the symptoms. Pay attention to your body and mind. When you notice specific symptoms emerging, refer to the envelope that addresses those feelings.

Create a calm environment. Find a quiet, comfortable space where you can focus on the contents of the envelope without interruptions.

Engage fully. Open the envelope and follow the instructions carefully. Use the items provided and allow yourself to fully immerse in the suggested activities. Truly the key.

Reflect and track. After using the envelope, take a moment to reflect on how you feel. Use a symptom tracker to monitor patterns and anticipate future needs, making the envelopes an integral part of your PMDD management strategy.

These PMDD Escape Envelopes are a step towards self-care and empowerment. By providing immediate relief and coping strategies, they help you navigate the turbulent waters of PMDD with greater ease and confidence. Incorporate them into your routine and allow them to guide you towards a more balanced and manageable experience.



PMDD Escape Envelopes

Envelope 1: **“Open me when you're feeling overwhelmed and anxious.”**

Inside: A card with a simple breathing exercise: Take a deep breath in for 4 counts, hold for 4 counts, and exhale for 4 counts. Repeat 5 times. A calming tea bag (e.g., chamomile or lavender). A note: "It's okay to take a break. Find a quiet space, make yourself a cup of tea, and focus on your breathing. Remember, this moment will pass."

Envelope 2: **"Open me when you're feeling irritable and angry."**

Inside: A stress ball or a small, soft object to squeeze. A card with a grounding exercise: "Find 5 things you can see, 4 things you can touch, 3 things you can hear, 2 things you can smell, and 1 thing you can taste." A note: "Channel your anger into this stress ball. Once you're calmer, write down what's bothering you and consider how you can address it constructively."

Envelope 3: "Open me when you're feeling depressed and hopeless."

Inside: A list of affirmations: "You are strong. You are valuable. This feeling is temporary." A small journal and pen. A note: "Write down three things you're grateful for and three things you like about yourself. Even in darkness, there are moments of light."

Envelope 4: "Open me when you're feeling isolated and alone."

Inside: A small token or memento from a loved one (e.g., a photo, a letter, or a small trinket). A card with a prompt: "Reach out to a friend or family member, even if it's just a text." A note: "You are not alone. People care about you. Connect with someone who makes you feel supported and loved."

Envelope 5: "Open me when you're feeling physically exhausted and drained."

Inside: A sachet of Epsom salts for a relaxing bath. A card with a simple stretching routine. A note: "Listen to your body. Take a warm bath, do some gentle stretches, and rest. Your body needs this time to recharge."

Planning with Purpose

Each envelope is a lifeline designed to help you cope with specific symptoms of PMDD. The goal is to provide immediate relief and a sense of control over your emotions and physical state. Here's how to integrate them into your life as your equation for safety:

Follow the instructions. Carefully read the note and perform the suggested activities. Take your time and allow yourself to fully engage with the process.

Reflect and adjust. After using the envelope, reflect on how you feel. Adjust your actions if needed and consider incorporating these strategies into your daily routine.

Track your cycle. Use a symptom tracker to monitor when you tend to experience each symptom. This can help you anticipate your needs and prepare to use the envelopes proactively.

By using these envelopes, you create a tangible, actionable plan to manage the challenging symptoms of PMDD, providing yourself with essential tools for relief and empowerment.

What will your envelopes say?



Living for the “Green Days”

Living with PMDD has been a journey marked by immense strain, relentless challenges, and moments of deep despair. The emotional rollercoaster, the physical discomfort, and the psychological toll can often feel insurmountable. It is a condition that demands not just endurance but a profound resilience and unwavering determination to push through each episode. The unpredictability and severity of the symptoms can disrupt every aspect of life, making it difficult to maintain relationships, pursue ambitions, and even carry out daily tasks.

However, amidst this storm, there is a beacon of hope. By gaining foresight into the patterns of PMDD, identifying specific symptoms, and practicing diligent self-care, it is possible to manage and persist. Understanding the triggers and phases of PMDD allows for better preparation and the development of effective coping strategies. Keeping a detailed symptom tracker and creating a "cope chest" with personalized tools can provide much-needed relief during the darkest days.

With self-awareness, medical support, and a strong support system, those living with PMDD can navigate its challenges and reclaim control over their lives. The journey may be arduous, but it is not one without hope. By embracing self-care, seeking help, and fostering a compassionate understanding of the condition, it is possible to live a fulfilling life despite PMDD.

Remember, PMDD is not a reflection of one's worth or capabilities. It is a physiological disorder that requires attention and care. To anyone struggling, know that you are not alone, and there is hope for better days ahead. With perseverance and the right resources, it is possible to find stability and peace. Keep moving forward, and never lose sight of the strength within you. You have the power to endure, to thrive, and to build a life of resilience and hope.

Living with PMDD can be challenging, and during severe episodes, it's essential to have a safety plan in place. This plan will help you manage the worst moments by providing structured steps to take, ensuring you have the support and resources needed to navigate through the toughest times. Completing this plan on your own will empower you to take control, but sharing it with a trusted confidant will provide additional support and ensure you are not alone during these difficult periods. Take absolute control on your green days and plan for those dark, red days.

Crafting a Lifeline - My PMDD Crisis/Safety Plan

Navigating life with PMDD has taught me the importance of preparedness. Developing a detailed Crisis/Safety Plan has become my cornerstone for managing severe episodes. This chapter will guide you through creating your own PMDD Crisis/Safety Plan, an essential tool that offers a structured approach to handling the unpredictable waves of this condition.

The Genesis of the Plan

Understanding that my journey through PMDD required more than just medication and support, I recognized the need for a tangible, actionable plan. The PMDD Crisis/Safety Plan is designed not

just as a document but as a lifeline, to be accessed when the seas of my emotional and physical well-being are stormy.

Building the Framework

The plan starts with identifying the early warning signs. For me, these are not just the precursors to a storm but the whispering winds that tell me trouble is brewing. I meticulously noted down each sign—increased irritability, overwhelming sadness, physical exhaustion—all markers that herald the onset of a severe episode.

Next, I outlined immediate coping strategies. I included detailed descriptions of breathing exercises and grounding techniques that had proven effective in past crises. I also designated a 'safe space'—a physical sanctuary where I could weather the storm in peace.

Enlisting Support

Acknowledging that PMDD is a battle not meant to be fought alone, I created a section in my plan for my Support System. This includes trusted contacts—friends, family, and healthcare providers—whose understanding and support are crucial during my most vulnerable times. I listed their contact information along with a clear indication of how and when to reach them.

Managing Medication and Treatment

Medication management is crucial. My plan includes a comprehensive list of medications, their dosages, and the specific times they should be taken. For emergencies, I detailed the use of any 'rescue' medications, ensuring they are easily accessible when symptoms escalate beyond my usual coping mechanisms.

Avoidance and Preparedness

I also recognized the importance of avoidance strategies—identifying and steering clear of triggers that exacerbate my symptoms. Stress management techniques are spelled out, providing a blueprint for avoiding potential pitfalls during sensitive periods.

Emergency Protocols

Perhaps the most critical part of my plan is the Emergency Action Plan. It includes detailed instructions for getting to a hospital, contact information for immediate assistance, and a pre-arranged transportation plan. This section is about ensuring safety when self-management isn't enough.

Living Document

This plan is not static; it's a living document, meant to be reviewed and updated regularly. Changes in treatment, shifts in symptoms, or even new insights into what works and what doesn't—all necessitate adjustments to the plan.

A Beacon of Hope

Creating and maintaining this Crisis/Safety Plan has empowered me to take control of my PMDD. It reassures me that I have a structured approach to managing the worst times, providing a sense of security that is invaluable. By sharing the details of this plan in this chapter, I hope to inspire others to craft their own, to find their beacon of hope and prepare for the challenges of PMDD with confidence and clarity.

This plan is more than just a set of instructions; it's a declaration that while PMDD is a part of my life, it does not define it. With this plan, I reaffirm my commitment to living fully, supported by tools and strategies that help me navigate the toughest days.

Recognizing Early Warning Signs

List of Symptoms: Identify and list the specific symptoms that indicate the onset of a severe PMDD episode (e.g., heightened irritability, intense sadness, physical pain).

Triggers: Note any known triggers that exacerbate your PMDD symptoms (e.g., stress, lack of sleep, certain foods).

Immediate Coping Strategies

Breathing Exercises: Write down simple breathing exercises to help calm your mind and body.

Grounding Techniques: List techniques such as counting objects in the room, touching different textures, or focusing on the present moment to reduce anxiety.

Safe Space: Identify a physical space where you feel safe and can retreat to during an episode.

Support System

Trusted Contacts: List names and contact information of trusted friends, family members, or professionals you can call during a crisis.

Code Word: Establish a code word or phrase to use with your trusted contacts to indicate you need help immediately.

Professional Help: Include contact information for your healthcare provider, therapist, and emergency mental health services.

Self-Care Activities

Calming Activities: List activities that help soothe you (e.g., taking a warm bath, listening to calming music, reading a favorite book).

Physical Activity: Write down simple physical activities that help reduce stress (e.g., taking a walk, gentle stretching, yoga).

Medication and Treatment

Medication List: Include a list of your prescribed medications, dosage instructions, and times to take them.

Emergency Medication: Note any medications that should be taken during a severe episode and ensure they are easily accessible.

Avoidance Strategies

Avoid Alcohol and Drugs: Remind yourself to avoid substances that can worsen symptoms.

Limit Stressors: Identify and limit exposure to known stressors during this time (e.g., social media, certain people, high-stress activities).

Emergency Action Plan

Hospital Contact: Provide the contact information for the nearest hospital or emergency room.

Transport Plan: Arrange for transportation to the hospital if needed, whether it's calling a friend, a family member, or a taxi service.

Important Documents: Keep a folder with important medical documents, including your health insurance information, a list of medications, and contact information for your healthcare providers.

By simply creating and relying on this crisis/safety plan, you are taking safety into your own hands (a huge proactive step towards managing PMDD) by ensuring your well-being during severe episodes.

Share your plan with a trusted confidant who can provide additional support and assist you when needed. Remember, you are not alone, and having a plan in place can make a significant difference in navigating through the most challenging times. You have an equation for your own personal safety and it begins with you.

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HOPE FOR
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