

Guangyi Dawson Huang – Abstract

Premenstrual syndrome (PMS) is recurrent moderate psychological and physical symptoms that occur during the luteal phase of menses and resolve with menstruation. It affects 20 to 32 per cent of premenopausal women. Women with the premenstrual dysphoric disorder experience affective or somatic symptoms that cause severe social or occupational dysfunction.

From the western medicine point of view, there is limited evidence to support the use of supplements such as calcium or vitamins, and insufficient evidence to support cognitive behaviour therapy. Serotonergic antidepressants are first-line pharmacologic therapy, which also causes various side effects.

No serious adverse events have been reported for acupuncture and herbal medical interventions, proving the safety of the interventions. In contrast, most interventions provided over 50% relief of symptoms associated with PMS.

This presentation will focus on PMS diagnosis and integrative management from the Chinese Medicine perspective.

- The approach to diagnosis is based on a combination of both zang-fu organs and twelve regular meridians; the key symptoms of each organs include both physical and psychological (shen) symptoms. All the key organs are divided into three parts (san jiao): upper, middle and lower jiao based on the location of associated symptoms.

- Common patterns for PMS and the connection with menstruation physiology in Chinese Medicine

- Integrative management including acupuncture, herbal medicine and cupping

 - o Acupuncture are five shu points based

 - o Importance of Ban Xia Xie Xin Tang and Shao Fu Zhu Yu Tang in PMS management

 - o Cupping on the back shu points