PMDD in one page

What it is

What is PMDD?

PMDD, premenstrual dysphoric disorder, is a severe mood condition tied to the menstrual cycle. Rage, despair or anxiety build after ovulation and settle once your period starts. It is much stronger than PMS, and a GP can diagnose it.

The signs

What are the symptoms of PMDD?

PMDD symptoms are led by mood: sudden rage or irritability, despair, tension and dread, tearfulness, and feeling out of control or unlike yourself. Alongside them come poor concentration, exhaustion, disturbed sleep, food cravings, bloating and sore breasts. They arrive after ovulation, peak in the days before bleeding, and lift once your period starts.

How a diagnosis happens

How is PMDD diagnosed?

PMDD is diagnosed by watching for a pattern, not by a single test. You keep a daily diary of your mood and physical symptoms through your cycle, your GP or psychiatrist rules out other causes, and a diagnosis is only made once that before-your-period pattern is clearly there in writing, cycle after cycle.

Treatment

Does therapy help PMDD?

Yes, talking therapy, especially cognitive behavioural therapy (CBT), can ease PMDD anxiety, low mood and daily disruption. The evidence is small, older and rated low quality by the researchers themselves, but the benefit looks similar in size to what medication produces, which is useful to know before choosing between them.

Medication

What is the first-line treatment for PMDD?

SSRIs, a type of antidepressant, are the treatment doctors usually try first for PMDD. They can be taken every day or only in the two weeks before your period, and unlike in depression, they often start working within days. If they don't help enough, doctors typically move to a contraceptive pill or add other treatments.

- SSRIs are usually tried before other options
- They can work within days, not weeks
- Taken daily or only before your period

Who diagnoses and who prescribes

Does a GP, gynaecologist or psychiatrist diagnose PMDD?

Usually a GP. In the only Australian study of this, 73.0% of people saw a GP first and 59.8% were first diagnosed by a GP, compared with 11.5% by a gynaecologist or obstetrician and 11.1% by a psychiatrist. Any of the three can diagnose PMDD, but the clinician you see first is not always the one most familiar with it.

- Most people see a GP first
- Most people are diagnosed by a GP

What it costs

What does a PMDD assessment cost?

There's no fixed price for a PMDD assessment in Australia, because there's no standard pathway. You'll usually start with a GP, then possibly a gynaecologist or psychiatrist, and each sets their own fee. Medicare rebates only part of what specialists charge, and diagnosis often takes months of symptom tracking across cycles, spread over several appointments.

- No standard price for a PMDD assessment
- No guideline tells clinicians how to diagnose it

In danger? Call 000. Lifeline 13 11 14, text 0477 13 11 14, or chat online.

Suicide Call Back Service 1300 659 467. Free counselling by phone or video, any hour.

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