

PREMENSTRUAL SYNDROME AND MENSTRUAL CRAMPS

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Premenstrual Syndrome. For thousands of women, the symptoms of premenstrual syndrome (PMS) are annoying and sometimes debilitating. Nutritional balancing programs based on hair tissue mineral analysis are excellent to reduce many symptoms of PMS.

All menstruating women experience monthly hormonal changes. The effects are just more noticeable in some than in others. Large numbers of women experience some degree of mood swings, anxiety, acne or irritability seven to ten days before the period begins. Other symptoms include headaches, depression, constipation, bloating and breast tenderness. Less common are very severe symptoms including crying spells, abdominal pain, nausea and vomiting, violent outbursts or more severe sleep difficulties.

Helping women understand their menstrual cycle and adjusting their nutritional supplement program can provide both symptom relief and a sense of control. Beyond this, eliminating the root causes of the problem takes more work and time, but

it certainly can be done by anyone who is patient and persistent.

BASIC PHYSIOLOGY

Before discussing how to modify the nutritional balancing program for the symptoms of PMS and other period-related symptoms, let us begin with a look at the basic hormonal cycle that occurs each month.

When bleeding starts at the beginning of the period, estrogen, progesterone and copper are at their lowest levels of the month. The levels of estrogen and progesterone remain relatively low while menstrual bleeding occurs. At the end of the bleeding phase, estrogen begins to rise. It continues to rise until ovulation, about half way through the cycle.

As the cycle continues, the estrogen level dips slightly and then resumes its rise. The level of progesterone also begins to rise in the second half of the cycle. The last week or so of the cycle, estrogen levels are at their highest. This is usually the time one feels symptoms of premenstrual tension. However, some women are more uncomfortable when the period arrives, and other variations are possible. They can also vary month to month in some women.

COPPER AND ESTROGEN

Most important from a nutritional standpoint, *the copper level parallels the level of estrogen, increasing as the cycle progresses.*

Seven to ten days before the period, copper is at a relatively high level, along with estrogen. High copper can give rise to many of the symptoms women think of as premenstrual syndrome.

This happens especially, though not exclusively, in women whose metabolism is sluggish and in those whose tissue copper level is already elevated. These women become copper toxic, in essence, each month before the period.

It is also possible that in some women copper becomes mainly biounavailable. This produces a slightly different set of symptoms in some women.

THE SODIUM/POTASSIUM RATIO AND THE MENSTRUAL CYCLE

As the menstrual cycle progresses, in most women the hair tissue sodium/potassium ratio also rises. It is highest just before the period. This is tied to the rise in copper and estrogen in most women. The high sodium/potassium ratio just before the

period and a much lower sodium/potassium ratio when the period arrives can also give rise to menstrual cycle symptoms.

The sodium/potassium ratio is a very crude indicator of the relationship between estrogen and progesterone in the body. Therefore, as the ratio rises, one may experience more symptoms of estrogen dominance or just high estrogen. Symptoms may include irritability, headaches, anger, water retention and breast tenderness.

Symptoms may be worse if the body cannot detoxify estrogen fast enough. This, in turn, may be due to or related to copper toxicity, which can affect the liver and is stored in the liver. Slow oxidation also will tend to slow all liver detoxification, as will deficiencies of zinc and selenium, among other nutrients.

A lower sodium/potassium ratio before the period. While the above situation is by far the most common, another is possible. If adrenal activity is very impaired, copper may become less biologically available before the menstrual period. This can give rise to a *decreased sodium/potassium ratio* at this time of the month. This will give rise to symptoms that emphasize exhaustion and depression, often with sweet cravings and perhaps bloating.

Indeed, Dr. Katherine Dalton, MD, identified both high and low estrogen types of PMS. Most women have high estrogen symptoms, associated with a high sodium/potassium ratio.

However, the other situation can occur. If the corrective program for a high sodium/potassium ratio does not work, one can try the program for a low sodium/potassium ratio.

THE OXIDATION RATE DURING THE MENSTRUAL CYCLE

The oxidation rate may slow down before the menstrual period, although not in all cases. Increased estrogen and higher copper affects the adrenal and thyroid glands and may slow the thyroid and raise the tissue calcium level. This can cause fatigue, depression, headaches, constipation and other symptoms.

ENDING PREMENSTRUAL SYNDROME AND OTHER MENSTRUAL DIFFICULTIES

The goal should always be to correct underlying biochemical imbalances that are causing all types of menstrual difficulties. This will diminish or eliminate most symptoms without the need for remedies of any kind.

Causes of menstrual problems include improper diet, copper and other toxic metals present in excess, a high stress lifestyle or other unhealthy lifestyle habits, emotional imbalances and liver toxicity.

Increase your cooked vegetables a lot. These are excellent served at least twice a day. Ten-twelve ounces of carrot and some green vegetable juice is excellent every day. More, however, upsets blood sugar and is best avoided. Fruit should be minimized and used only as an occasional dessert.

Also eliminate all wheat, most pasteurized dairy products and all pig products. Eat animal protein daily, especially if you are a slow oxidizer.

Toxic Chemicals that are hard on your liver and should be avoided include chlorinated and fluoridated water, and toxic household cleaners and solvents. Also avoid toxic paints, pesticides, hair dyes, most cosmetics and skin lotions, along with other toxic products in common use.

Inadequate rest will make PMS worse for most women.

Excessive exercise exhausts the adrenals, and may lead to complete cessation of the menstrual period. This is very unhealthy for young women.

Emotional imbalances in many women include hidden anger and resentments. While these can be understandable and explained, they are not helpful at all. They are a very important contributor to many cases of menstrual difficulties. The emotions can affect the liver and all glandular activity. They tend to affect the adrenals as well. The adrenal glands regulate copper metabolism and produce female hormones. Methods such as relaxation techniques, spiritual reading, prayer, and the Roy Masters meditation exercise can go a long way toward helping one to release hidden anger and resentment.

Anything that affects the adrenal glands negatively is likely to raise the copper level. Fatigue is probably the single most common factor in adrenal underactivity. Worry or other emotional imbalances is second most important in most cases.

Lack of self-acceptance as a woman. Some young women today are angry at themselves for having periods and even for being a woman. This lack of self-acceptance as a woman tends to worsen menstrual symptoms even more. It is important to understand that

all is in divine order concerning the body
and ones gender.