# DIET FOR PREMENSTRUAL SYNDROME

## What is the PMS diet?

It is a nutritionally balanced diet that restricts sugar, caffeine and sodium. For women with mild to moderate PMS, improved diet, regular exercise and vitamin supplements may be sufficient to control the syndrome.

## General Guidelines

1. Avoid All Concentrated Sweets. This includes sugar, honey, condensed milk, candy, cake, pie, cookies, sweetened beverages, regular soda, sweetened cereals, ice cream, sherbet, jelly, jam, syrup, frosting and chewing gum. Read labels for clues on sugar content; if the names glucose, sucrose, maltose, lactose, fructose, corn sweeteners or corn syrup appear first or second in the list of ingredients, then there is a large amount of sugar in the product.

   Concentrated sweets are digested and absorbed quickly into the blood stream. If you must eat something sweet, consume it with a meal or eat fruit.

2. Substitute Complex Carbohydrates and High Fiber Foods for Refined Sugars. Foods such as whole wheat bread, rye and raisin bread, pasta, rice, whole wheat or bran cereals, beans, peas, nuts, fresh fruits and vegetables are good substitutes for sugar in your diet.

3. Reduce the Amount of Caffeine in the Diet. Caffeine is found in coffee, tea, most colas, Dr. Pepper, Mr. Pibb, Mountain Dew (diet and regular) and chocolate. Many medications such as cold tablets, headache compounds and "mentrual pills" also contain caffeine. Large amounts of caffeine may increase the body's need for B-vitamins and may increase breast symptoms such as swelling and tenderness.

4. Avoid Too Much Sodium. Most Americans consume excessive amounts of salt by adding it to foods, eating processed foods and eating many meals away from home. Table salt and salty foods tend to increase fluid retention in your body. This may cause swelling and temporary weight gain.

5. Avoid Alcoholic Beverages. Limit alcohol to no more than 2 ounces of hard liquor, 4 ounces of wine or 12 ounces of beer daily. Avoid alcohol completely during the premenstral symptomatic phase.

6. Maintain Your Ideal Body Weight. If you are overweight, reduce to desirable body weight. Your dietitian or physician/nurse practitioner can help you decide what is a good weight for you and how to achieve it. Try to get involved in a regular exercise program.

7. Drink Plenty of Water.

8. Eat 5-6 Smaller Meals/Snacks. This will deliver a moderate consistent flow of nutrients and sugar to your bloodstream. This may help control overeating caused by increase appetite and guard against low blood sugar.

9. Vitamins/Minerals. There is much controversy surrounding the use of certain vitamins/minerals as therapy for women with Premenstrual Syndrome. In some cases a daily multivitamin and mineral supplement may be recommended. Any other recommendation should be discussed with your dietitian or physician/nurse practitioner.

## VITAMIN/MINERAL SUPPLEMENTS

Vitamin A is a fat soluble vitamin. The Recommended Daily Allowance (RDA) for the adult female is 800 retinol equivalents (4000 International Units). The theory is that progesterone synthesis may be limited by a deficiency of vitamin A. Excessive vitamin A is toxic to both children and adults and should be avoided.

Dietary Sources: Fish liver oils, liver, carrots, sweet potato, dark green leafy vegetables, yellow vegetables and fruits, butter, margarine, milk, egg yolks, cheese.

Vitamin B6 (Pyridoxine) is a water soluble vitamin. The RDA for the adult female is 2 mgs. The theory is that because vitamin B6 is involved in the synthesis of certain brain chemicals, supplements may help to alleviate the psychological changes such as mood swings and depression. If recommended by your physician, start by taking 50 mgs. vitamin B6 per day with 25 mgs B-complex. Then build the vitamin B6 up gradually to no more than ~~300~~ 200 mgs. daily. Keep in mind that large doses of vitamin B6 may be harmful.

Dietary Sources: Wheat germ, meat, liver, kidney, whole grain, cereals, soybeans, peanuts, corn.

Vitamin E is a fat soluble vitamin. The RDA for the adult female is 8 mgs. $\alpha$tocopherol (12 International Units). In some PMS patients it has been demonstrated that taking up to 300 mgs $\alpha$tocopherol (462 International Units) may result in a decrease in symptoms of breast discomfort, headaches, mood changes and fluid retention.

Dietary Sources: Vegetables oils, wheat germ, oils, nuts, legumes.

Magnesium is a mineral. The RDA for the adult female is 300 mgs. per day. The magnesium content of the average American diet has been estimated at about 120 mg/1000 kcal. Magnesium aids calcium absorption and deposition in the bone. Calcium interferes with absorption, thus calcium increases the demand for magnesium. Try to include foods in your diet that have at least twice as much magnesium as calcium. If your diet is high in milk and dairy products, (milk and dairy products contain ten times more calcium than magnesium) it may be necessary to take a supplement. The magnesium supplement should be no more than 250 mgs. daily.

Dietary Sources: Whole grains, nuts, beans, green leafy vegetables.

Potassium is an electrolyte. If you take a diuretic for water retention you may require potassium supplements.

Dietary Sources: Oranges, grapefruits, potatoes, tomato juice, apricots, bananas, sweet potato, salt substitutes (Nu-Salt, No-Salt, Morton's Lite).

Zinc is a trace element. The RDA for the adult female is 15 mgs. per day. If you take a diuretic for water retention you may require zinc supplements.

Dietary Sources: Wheat germ and bran, whole grains, dried beans and peas, nuts, lean meats, fish and poultry.