



Premenstrual dysphoric disorder (PMDD)

Explains what PMDD is, including possible causes, symptoms and how to access treatment and support. Includes self-care tips for helping yourself, plus guidance for friends and family.

If you require this information in Word document format for compatibility with screen readers, please email: publications@mind.org.uk.

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What is PMDD?

Premenstrual dysphoric disorder (PMDD) is a very severe form of premenstrual syndrome (PMS). It causes a range of emotional and physical symptoms every month during the week or two before your menstrual cycle. It is sometimes referred to as 'severe PMS'.

PMDD occurs during the luteal phase of your menstrual cycle. This is the time between when you ovulate and when your period starts. The luteal phase lasts approximately two weeks for most people but can be longer or shorter.

During this time you may experience PMDD symptoms every day, or just for a few days within it. The [NHS website](#) has more information on the stages of the menstrual cycle and when they occur.

Many people who are able to have periods experience some mild symptoms of PMS. If you have PMDD these symptoms are much worse and can have a serious impact on your life. Experiencing PMDD can make it difficult to work, socialise and have healthy relationships. In some cases, it can also lead to suicidal thoughts.

"The best way to describe it is that, once a month, I pressed my own self-destruct button and literally let my (normally very happy and satisfying) life implode around me. Then when the dark thoughts lifted and cleared, I spent the next 2 weeks trying to pick up the pieces."

What are the symptoms of PMDD?

If you have PMDD, you might find that you experience some of symptoms listed below. But it's different for different people, so you might also experience other kinds of feelings which aren't listed here.

Emotional experiences

- mood swings
- feeling upset or tearful
- lack of energy
- less interest in activities you normally enjoy
- feeling hopeless
- [suicidal feelings](#)
- feeling [angry](#) or irritable
- feeling [anxious](#)
- feeling tense or on edge
- feeling overwhelmed or out of control
- difficulty concentrating.



Physical and behavioural experiences

- breast tenderness or swelling
- pain in your muscles and joints
- headaches
- feeling bloated
- changes in your appetite, such as overeating or having specific food cravings
- [sleep problems](#)
- increased [anger](#) or conflict with people around you
- becoming very upset if you feel that others are rejecting you.

As PMDD is linked to your menstrual cycle, you will likely not experience symptoms if you are pregnant. You may find that the symptoms return once you begin ovulating again though.

"In the depths of PMDD I tend to just retreat to my bed. I get very depressed and my anxiety goes sky high. I get hugely fatigued and can't keep my eyes open. I sleep for about 18 hours a day."

PMDD and suicidal feelings

Some people find that one of their monthly symptoms is thoughts about suicide. This can feel very distressing.

If you're experiencing suicidal feelings and are worried you may act on them, you can call 999, go straight to A&E or call the Samaritans for free on 116 123 to talk.

For more options see our information on:

- [ways to help yourself cope in a crisis](#)
- [how to cope with suicidal feelings](#)

What are the causes of PMDD?

The exact causes are still not fully understood but researchers believe that PMDD is caused by being very sensitive to changes in hormone levels. Recent research suggests that PMDD is associated with increased sensitivity to the normal hormonal changes that occur during your monthly menstrual cycle.

See the [International Association for Premenstrual Disorders \(IAPMD\)](#) website for further information on hormones and PMDD.

There is research to suggest other possible causes for PMDD, as well as things that may make your PMDD worse. Some of these possible factors are:

- Genetics. Some research suggests that increased sensitivity to changes in hormone levels may be caused by genetic variations.
- Smoking. Some research suggests that smoking can have an impact on your hormone sensitivity.



- Trauma and stress. Other research has shown that in some cases PMDD may be linked to stressful and traumatic past events, such as emotional or physical abuse. Stress may also make your PMDD symptoms worse.

Is PMDD a mental health problem?

PMDD is commonly defined as an endocrine disorder, meaning that it is a hormone-related disorder. But as well as physical symptoms, people with PMDD also experience a range of different mental health symptoms such as [depression](#), [suicidal feelings](#) and [anxiety](#).

For these reasons, it is listed as a mental health problem in the DSM-5, one of the main manuals that doctors use to categorise and diagnose mental health problems.

Ultimately, it's important to remember that how you understand your symptoms and experiences is up to you. The most important thing is that you get the support you need and deserve to help you manage the effects of PMDD on your life.

"Every month for 30 years I barely managed to come through each month intact. PMDD is not merely bad PMS. It is so much more serious than that, and is absolutely life changing."

How is PMDD diagnosed?

To get a diagnosis of PMDD the best place to start is visiting your doctor. To help them understand your symptoms your doctor may:

- Ask you to keep a detailed record of your symptoms for at least two months, to see if your symptoms have a pattern over time. This may be in your diary or they may give you some daily questionnaires to fill out.
- Ask you about your medical history, such as any history of mental health problems.
- Ask about your lifestyle, such as if you smoke, drink alcohol or are overweight.
- Give you a physical examination along with some blood tests, so that they can rule out other medical problems.

When you're asked to keep a record of your symptoms over several months, getting a diagnosis can feel like a very slow process. This can be frustrating if you're having to wait a long time to get treatment. Our section on self-care for PMDD has some ideas you can try in the meantime.

"I tracked my symptoms over three months, and saw that there was a direct correlation between my monthly cycle and my mental health."



What if I'm struggling to get a diagnosis?

Some people find getting a diagnosis of PMDD can be really difficult. This might be because it can take a long time to realise that your symptoms follow a cycle and that they are linked to your period. It can also be because PMDD is not very well known, even amongst health professionals. It can be really upsetting and frustrating if you feel like your doctor is overlooking something, or not taking you seriously. There are things you could try though:

- Keep your own detailed record of your symptoms over time. If you have a smartphone, you can download the app [Me v PMDD](#) to track your symptoms and cycle. You could also do this in a diary or you can download mood charts from the internet. The more information you collect over a long period of time, the better prepared you'll be to explain your symptoms to your doctor.
- Take the PMDD treatment guidelines with you to your GP appointment. The [National Institute for Health and Care Excellence \(NICE\)](#) and the [National Association for Premenstrual Syndrome \(NAPS\)](#) both provide detailed, step-by-step guidelines on the diagnosis and treatment of PMS. These include severe PMS, which is another term for PMDD. You can download these from their websites.
- Ask at your GP surgery if you could speak to a doctor who specialises in mental health, gynaecology or endocrinology. Gynaecology is the branch of medicine that deals specifically with the female reproductive system, and endocrinology deals with hormones.
- Consider finding an advocate. An advocate is someone who can come to appointments with you and help make sure people listen to you. See our resource on [advocacy](#) for more information.

"I would say to anyone suffering with mental health issues, please do consider your monthly cycle as the possible cause of them. Talk to your doctor (and if they don't listen, ask for a different doctor) and remember that there is help out there."

What if I'm trans or non-binary and think I might have PMDD?

If you are trans or non-binary you can still get PMDD. If you are trans or non-binary, PMDD may increase feelings of discomfort with the gender you were assigned at birth.

You may also find it difficult to talk to a GP, particularly if you have had a bad experience in the past. You have a right though to be listened to, respected and given the right support for you.

For information on how doctors should address your health needs if you're trans or non-binary, see the General Medical Council (GMC)'s [guidelines on trans healthcare](#). Remember that if you feel you've been treated unfairly by a healthcare professional, [you can complain](#).



If you think you might have PMDD and need support in finding trans or non-binary services to help you, see our resource on [LGBTIQ+ mental health support](#).

"When the suicidal feelings became unbearable, I realised I had to take action. I decided I had to explain it properly to the doctor as my life depended on it, so I brought my mum with me and told the whole story. I got referred to a gynaecologist and now that I'm under hormonal treatment my symptoms are much better."

Premenstrual exacerbation

Your doctor might consider whether you have premenstrual exacerbation (PME) rather than PMDD. This is when existing mental health problems are made worse during the [luteal phase](#) of your menstrual cycle. In PME, your symptoms will continue even after your period but at a lower intensity. This is why tracking your symptoms throughout your cycle is important so that you get the right diagnosis.

The [International Association for Premenstrual Disorders \(IAPMD\)](#) has more information on PME on their website.

Misdiagnosis with other mental health problems

Sometimes people with PMDD can be wrongly diagnosed with other mental health problems such as [depression](#) or [bipolar disorder](#). This is because they share some of the same symptoms. Also, if you have any other physical or mental health problems, experiencing PMDD at the same time can make the symptoms worse.

For these reasons, it is really important to keep a clear and detailed record of how you're feeling over time, because with PMDD your symptoms will follow a regular monthly pattern.

If you're worried that a diagnosis you've been given doesn't fit your experiences, it's important to discuss it with your doctor so you can make sure you're getting the right treatment to help you.

See our resource on [seeking help for a mental health problem](#) for more information on getting the most from your doctor and making your voice heard.

"I saw five different (male) GPs before they accepted my suggestion that my problems were connected to my cycle and I eventually came away with a factsheet about 'PMS' in my hand. It wasn't until recently that I sat in front of a doctor who didn't look at me as if I was mad when I said that my menstrual cycle was driving me insane."



How can I help myself?

There are various things you can try to reduce the impact of PMDD on your life.

Some people find these ideas useful, but remember that different things work for different people at different times. Don't put too much pressure on yourself. If something doesn't feel possible just now, try something else or come back to it another time. For example:

Talk to someone you trust

It may be that just having someone listen to you and show you they care can help in itself.

- Stay in touch. If you don't feel up to seeing people in person, or talking, send a text or email to keep in touch with friends and family.
- Keep talking. It might feel hard at first, but many people find that sharing their experiences can help them feel better.

Unfortunately, some people feel uncomfortable discussing anything to do with reproductive health, as it's often considered to be something quite private, or even taboo, despite being a normal part of many people's everyday life. You may feel this way yourself.

This can make it even more difficult for you to open up about physical and mental health problems related to your periods. But finding the words to tell others about what's going on is usually the first step you can take towards getting help and feeling better.

If you are trans or non-binary, you may find that talking to someone about periods can bring up difficult feelings about the gender you were assigned at birth. Or you may worry that it will lead people to misgender you (call you by a term that does not match your gender identity). You may find it difficult to talk about it with even close friends. How you feel about your period and how you cope with these feelings will be unique to you.

We have a list of [LGBTIQ+ organisations](#) you can reach out to if you want to speak to someone who understands your experience.

Contact a specialist organisation

You might find it useful to contact an organisation that specialises in support and advice for PMDD.

Whilst there is not a specific organisation for PMDD support in the UK, you may find it useful to visit the [International Association for Premenstrual Disorders \(IAPMD\)](#), which is an American organisation. The [National Association for Premenstrual Syndrome \(NAPS\)](#) may also be useful. These organisations may be able to direct you to more sources of support.

Try peer support



Peer support brings together people who have had similar experiences, which some people find very helpful.

- The [International Association for Premenstrual Disorders \(IAPMD\)](#) provides more information about online peer support available for people with PMDD around the world, including links to various online groups you could join if you choose to have a Facebook account.
- Mind's [Side by Side](#) community is a supportive online space which welcomes people with experience of all kinds of mental health problems.

See our resource on [peer support](#) for more information about what it involves, and how to find a peer support group to suit you. If you feel unsure about the idea of talking to people over the internet, you might find it useful to read our resource on [how to stay safe online](#).

"I have suffered with PMDD for 20 years but only been diagnosed for 18 months. It can be a very lonely experience and support via peer support groups has been invaluable for me. Not only just to know that I wasn't the only one going through it but to learn information about treatments."

Get to know your cycle

If your symptoms follow a pattern, you may be able to work out when you are most likely to start to experience these symptoms in the future.

For example, if you notice that over the past three months your symptoms have started seven days before your period, you could try and work out when this would be for the upcoming months. Being able to predict when your symptoms may start may help you to put things in place for that time.

For example you could:

- rearrange stressful events and tasks for another time
- plan relaxing activities that you know improve your mood
- put in place a support plan that sets out how you would like to be supported in a particular situation
- create a self-care box.

If you have a smartphone, you may find it useful to use period tracking apps if you have an unpredictable cycle. There are a range of apps available with a variety of functions, so you can research which one works best for you. The app [Me v PMDD](#) has also been created to specifically help people with PMDD track their symptoms.

"I know my PMDD cycle like the back of my hand now and plan my days/weeks/month accordingly. On the days I know I'll be bad I never plan anything important. I try and be positive about these days. I record TV programmes and watch them in bed. I save books and magazines to read and have



meditation apps. I make sure I have the right foods in the house and meals that need just popping in the microwave."

Create a self-care box

It can be really difficult to come up with ideas to help you feel better when you're feeling low. So you might find it useful to create a self-care box in advance, that you can use whenever you need to.

A self-care box is filled with things that normally cheer you up and help you relax. For example, you could include your favourite book or film, a notebook and pen to write down your thoughts, or some notes of encouragement to yourself.

Look after your emotional wellbeing

- Manage stress. It can help to think of ways to manage pressure and build your emotional resilience. See our resource on [how to manage stress](#) for more information.
- Try some relaxation techniques. Learning to relax can help you look after your wellbeing when you are feeling stressed, anxious or busy. See our resource on [relaxation](#) for tips you could try.
- Spend time in nature. Being outside in green space can help you feel more in touch with your surroundings. See our resource on [nature and mental health](#) for more information.
- Try mindfulness. Practising mindfulness could help you manage unwanted thoughts and reduce stress. See our resource on [mindfulness](#) for tips.

"I made a decision that I was going to accept I have PMDD and make positive lifestyle changes to try and live as happily and stress-free as I could. It took a few years and was not an easy process. Now I work part-time nannying, but on my terms. A complete turnaround from my previous jobs. If I focused on the negative of these choices I might say it's not the life I had planned for myself, but I try not to dwell on this."

Look after your physical health

- Try to get enough sleep. Sleep can give you the energy to cope with difficult feelings and experiences. See our resource on [coping with sleep problems](#) for more information.
- Think about your diet. Eating regularly and keeping your blood sugar stable can make a difference to your mood and energy levels. See our resource on [food and mood](#) for more information.
- Try and take some exercise. If you are experiencing physical symptoms you may find it difficult to exercise, but research has shown that exercise can help reduce



symptoms of depression. You may also find that it might help you to relax. See our resource on [physical activity and your mental health](#) for more information.

"My diet has changed loads. I gave up red meat and try to eat no sugar and drink hardly any alcohol. I exercise when I can and find meditation and yoga really helpful."

Reasonable adjustments

If your PMDD affects your ability to work, study or access services, consider asking for reasonable adjustments.

One of the criteria for a PMDD diagnosis is that it has a significant impact on your work, social, education or family life. Some people with PMDD find that it is difficult to work, interact with people, take part in education or complete essential tasks during times when their PMDD symptoms are at their worst.

If you feel your PMDD is impacting your ability to work, take part in education, or get services when you need them, you may be able to ask for reasonable adjustments.

You can see our resource on the [Equality Act 2010](#) and asking for [reasonable adjustments](#) for more information on what you may be able to ask for.

What are the treatments?

There are a number of different treatments for PMDD that have been found to work for some people. You and your doctor should decide your treatment together. The decision should be based on how bad your PMDD symptoms are, your personal preferences, and if you have any plans to become pregnant.

If you are trans or non-binary, your treatment options may differ if you are taking or considering taking hormone treatments. You can speak to your GP or specialist to explore what treatment would work best for you. You can see our resource on [specialist organisations supporting LGBTIQ+ mental health](#) if you are unsure of where to start.

"It took me two years to realise that my symptoms were cyclical. My best friend made the connection. It's then taken another three years to get to a treatment that works. Looking back it seems like such a long haul, and I'm glad I'm this end of it for now."

Making healthy lifestyle changes

When you first talk to your doctor, they may suggest some lifestyle changes which could improve your physical and mental health. This may reduce your PMDD symptoms to a manageable level without the need for further treatment. Or it may be something you try alongside another treatment.

Possible suggestions they might make are:



- getting more regular exercise
- changes in your diet
- getting regular sleep
- trying to reduce your stress levels
- reducing the amount of alcohol you drink
- if you smoke, trying to cut down or stop entirely
- reducing the amount of caffeine in your diet.

This will be different for everyone, as the changes you feel able to make will depend on your personal circumstances and experiences.

SSRIs

SSRIs (selective serotonin reuptake inhibitor) are a type of antidepressant. They are often the first recommended treatment for PMDD and are the only type of antidepressant which has been shown to work for PMDD.

Some studies have suggested that SSRIs may work differently for PMDD symptoms than they do for mental health problems such as depression. Your doctor may recommend you take SSRIs daily throughout the whole month or just during your [luteal phase](#). It is normally recommended that you do not start and stop taking SSRIs suddenly, but studies have shown that for some people with PMDD taking SSRIs during just the luteal phase can be effective and withdrawal symptoms are not as intense.

If your doctor prescribes you SSRIs, they should review them with you after two months to make sure they are working for you. If they aren't, your doctor may suggest a different treatment or an adjustment to the antidepressants. See our resource on [antidepressants](#) for more information on SSRIs.

Before deciding to take any drug, it's important to make sure you have all the facts you need to make an informed choice. See our resource on [things to consider before taking medication](#) and [your right to refuse medication](#) for more information.

"Whilst I will most likely always struggle before my period, it has got easier. The weeks before my period are now manageable."

Combined oral contraceptives

Oral contraceptives (often just called 'the pill') may reduce the symptoms of PMDD by controlling or stopping your periods, but the evidence for the pill as a treatment for PMDD is mixed. Some people do find it helps to reduce their symptoms, but others find it makes their symptoms worse. The pill can also cause side effects and is not appropriate if you are trying to get pregnant.

Oral contraceptives come in different types with different mixes of hormones. It may mean that certain hormone combinations won't work well for you. As PMDD occurs



during your ovulation, pills that prevent ovulation may be more successful in managing your PMDD symptoms.

If you and your doctor do think this medication might help, it is likely that you will be given a three-month trial to see if the treatment is right for you. You can find more information about combined oral contraceptives on the [NHS website](#).

Talking therapy and counselling

To help manage the psychological symptoms you experience you may want to consider seeing a therapist for talking treatment. [Cognitive behavioural therapy \(CBT\)](#) has shown to be effective for some people with PMDD in managing their symptoms.

Your doctor may refer you to Improving Access to Psychological Therapies (IAPT), an NHS programme which provides talking therapy for various mental health problems, such as [anxiety](#) and [depression](#). However, IAPT is not available in all areas and the waiting lists can be long. You can find out whether services are available near you through the [IAPT website](#). In some cases you might be able to self-refer to see a therapist.

See our resource on [talking therapy and counselling](#) for more information about different kinds of therapy, including [how to find a therapist](#).

Painkillers or anti-inflammatory drugs

Your doctor may suggest you take painkillers or anti-inflammatory drugs (for example ibuprofen) to help you manage the physical symptoms of PMDD such as headaches, joint and muscle pains.

Although you may be able to get these without a prescription from your doctor, it's a good idea to discuss it with your doctor or pharmacist first to make sure that they're suitable for you.

GnRH analogue injections

Gonadotropin releasing hormone (GnRH) analogues can be helpful for some people, as they reduce the symptoms of PMDD by bringing on a temporary menopause. They typically come as injections.

This treatment should only be considered if no other treatments have been effective though. They can cause side effects such as loss of bone density, which puts you at higher risk of developing osteoporosis (a condition in which your bones become weak and break more easily).

Because of this, treatment is often limited to six months, and should be combined with hormone replacement therapy (HRT), which relieves symptoms of the menopause and reduces bone density loss. If you're prescribed GnRH analogues as a long-term treatment your doctor should give you an annual check-up to measure your bone mineral density.



"My symptoms took almost three months to settle down [after starting hormonal treatment] but now I am able to go to work every day and only have 1-2 bad days a month, which is much more manageable."

Surgery

In very severe cases your doctor may talk to you about the possibility of a total hysterectomy (an operation to remove your uterus) with bilateral salpingo-oophorectomy (an operation to remove your ovaries and fallopian tubes). The aim of this surgery is to get rid of your PMDD symptoms by permanently stopping your monthly cycle.

Some people may be offered a bilateral oophorectomy alone (to remove just the ovaries and fallopian tubes). However, this may mean having to take progesterone (a hormone produced during the second half of the menstrual cycle) afterwards as part of your hormone replacement therapy (HRT), which may mean you continue to experience symptoms similar to PMS. More information on HRT can be found on the [You and Your Hormones website](#).

All surgery carries a risk of complications – and this surgery is non-reversible – so this would only be something you and your doctor would consider when you've already tried every other possible treatment and nothing has worked. The surgery would not be appropriate if you are wanting to get pregnant.

Vitamins and supplements

There is some limited evidence that certain supplements may reduce premenstrual symptoms. Some examples are:

- Calcium carbonate – some research indicates that this may help to reduce the physical and psychological symptoms.
- Vitamin B6 – this may help to relieve symptoms, but if you take too much it may lead to a condition called peripheral neuropathy which is a condition where you lose feeling in your arms and legs.
- Agnus castus (a herb known as chasteberry) – some research has shown that this may help reduce symptoms of irritability, anger, headaches and breast pain. It is not recommended for use if you are trying to get pregnant or are breastfeeding.

However, these are not officially recommended as treatments as there is not enough strong evidence that they can treat PMDD specifically. If you are considering taking a supplement it's important to speak to your doctor or local pharmacist first, as taking them alongside other medications or in the wrong dose could be dangerous.



How can other people help?

This information is for friends and family who want to support someone with PMDD.

If you are supporting a friend or relative who is experiencing PMDD it can sometimes be hard to know what you can do to help. This section lists some things you could try.

Take it seriously

Some people with PMDD find it hard to explain what they're going through, and it's particularly difficult when others dismiss their experiences as "just that time of the month" or "just something all women experience".

These misconceptions are not true, but it can make it very hard for anyone who experiences PMDD to open up about how they're feeling. It is important to understand that PMDD can have a large effect on someone's life. The symptoms are very real, and can be very difficult to cope with.

"I still can't bring myself to tell a lot of friends and colleagues what has gone on, due to the pervading attitude of 'women's problems / it's just your period!'"

Try to understand

- Find out as much as you can about PMDD. This will help you understand what they are going through. Reading about people's personal experiences in blogs can help too. See our useful contacts section for places you can go to find out more.
- Ask them about their personal experience of living with PMDD. You could ask them how PMDD affects their life and what things can make it better or worse. Listening to their experience might help you to understand how they feel.

"My relationships with friends and family have suffered too. I have a terrible relationship with my sister because she just refuses to understand or acknowledge my PMDD. I'm fortunate my parents are as understanding as they can be, but for a non-PMDD sufferer PMDD is really difficult to understand."

Ask them what helps

PMDD can affect people in different ways, so it's important to ask what things they would find most helpful. They may just want your emotional support or there may be specific practical things you could do that could help them cope. For example, they may find it helps if you offer to take some of the pressure off them by helping out with daily tasks such as household chores or food shopping.



Be patient

Even with support, someone with PMDD may be irritable at times and act differently than they normally do. It can be hard to support someone if they do not appear to appreciate the help you are trying to offer. It's not easy, but you may find that you need to be a bit more patient than usual. Remember that this won't last forever and their symptoms should get better within a few days.

When they experience their symptoms, they might say or do things that upset you. If this happens, it can be helpful to try to wait until after the symptoms have passed before bringing it up so that they may feel more able to cope with talking about it.

Reassure them

When they experience symptoms, you can try to reassure them that the symptoms will soon pass, that you are there to support them and that they are not on their own. Often just knowing that there is someone around who understands helps a lot.

Some people with PMDD experience [suicidal feelings](#). This can be difficult to cope with, for both of you. See our resource on [supporting someone who feels suicidal](#) for information about how you can help in this situation.

"My partner is very supportive and that helps so much and really does mean the world to me. He makes my world feel very safe when I feel very lost."

Plan around their monthly cycle

PMDD symptoms happen at [specific times in the menstrual cycle](#). If you can predict when the symptoms are likely to start, you may want to plan things in advance that might help. For example, you could schedule time to help out with daily chores, plan activities that may help them to [relax](#) or just make sure that people will be around to offer their support. It might also help to avoid planning any activities during that time that they might find difficult.

Support them to seek help

Supporting your friend or loved one to seek help can be really important. It can help to remind them that PMDD is a recognised condition like many others, and that they deserve treatment and support. You can read our information on [treatments for PMDD](#) and [self-care](#), and encourage them to seek help from their GP. See our resource on [supporting someone to seek help](#) for more information.



Not all healthcare professionals are aware of PMDD or fully understand it, so people can sometimes face barriers to getting the treatment and support they deserve. Knowing that you're in their corner to support them could help them keep trying if they do face barriers. You could even consider becoming their advocate. See our resource on [advocacy](#) for more information.

Look after yourself

It can sometimes be really challenging to support someone, and it's common to feel overwhelmed at times. It's important to remember to look after your own mental health too, so you have the energy, time and distance you need to be able to help your friend or family member.

For example:

- Set boundaries and don't take too much on. If you become unwell yourself you won't be able to offer as much support. It is also important to decide what your limits are and how much you are able to help them. See our resource on [how to manage stress](#) for more information.
- Share your caring role with others, if you can. It's often easier to support someone if you're not doing it alone.
- Talk to others about how you're feeling. You may want to be careful about how much information you share about the person you're supporting, but talking about your own feelings with someone you trust can help you feel supported too.

See our resource on [supporting yourself while caring for someone](#) for more suggestions on what you can do, and where you can go for support.

Useful contacts

Mind's services

- [Mind's helplines](#) provide information and support by phone and email.
- [Local Minds](#) offer face-to-face services across England and Wales. These services include talking therapies, peer support and advocacy.
- [Side by Side](#) is our supportive online community for anyone experiencing a mental health problem.



Other organisations

General Medical Council (GMC)

gmc-uk.org

Helps to protect patients and support doctors, and maintains a register of licensed doctors.

Improving Access to Psychological Therapies (IAPT)

nhs.uk/service-search/find-a-psychological-therapies-service

Information about local NHS therapy and counselling services, which you can often self-refer to (England only).

International Association for Premenstrual Disorders (IAPMD)

iapmd.org

American organisation that provides support and information for people affected by Premenstrual Dysphoric Disorder (PMDD).

Me v PMDD

mevpmdd.com

Symptom tracker for PMDD.

National Association for Premenstrual Syndrome (NAPS)

[0844 8157311](tel:08448157311)

pms.org.uk

Support and information for women with PMS. Includes treatment guidelines and information on getting the best from your doctor, which may be useful for people with other conditions including PMDD.

NHS UK

nhs.uk

Information about health problems and treatments, including details of local NHS services in England.

Samaritans

[116 123](tel:116123) (freephone)

jo@samaritans.org

Chris, Freepost RSRB-KKBY-CYJK

PO Box 90 90

Stirling FK8 2SA

samaritans.org

Samaritans are open 24/7 for anyone who needs to talk. You can [visit some Samaritans branches in person](#). Samaritans also have a Welsh Language Line on [0808 164 0123](tel:08081640123) (7pm–11pm every day).



You and Your Hormones

yourhormones.info

Information on hormone-related conditions and treatments.

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References are available on request.