

# Nutrition: Complementary And Alternative Choices

## Dysmenorrhea and PMS

John W. Jones, MD, MPH  
 Nutritional Consultant, Nutrition Pure and Simple  
[www.jjconsulting.net](http://www.jjconsulting.net)

Note: to have optimal response, all recommendations begin with **Ultra Vites** and **Ultra Omega-Linic**.

*This information is intended for the use of health care professionals. It has not been evaluated by the FDA and is not intended to diagnose, treat, cure or prevent any disease. You should consult a qualified health care provider for advice before beginning any new health care program.*

Nutrient	Product	Q/Day
A good Multi vitamin mineral	Ultra Vites*	2
	Iron Plus if iron is needed	1 or 2
<b>Alternatives to NSAIDs</b>		
Anti Inflammatory pain relief	Yucca	2-6
High Essential Fatty Acids	Ultra Omega-Linic	4-12
Vitamin E mixed tocopherols	Vitamin E-400	1
Calcium and Magnesium 2:1 or 1:1 ratio	Calcium D Chelate	1-3
	Ultra-Mag chelate (250 mg)	1-3
Vitamin D3	Vitamin D3 5000	1
<b>Control of pathogenic organisms:</b>		
Monolaurin	Ultra-Monolaurin	3-4 scoops
<b>Consider:</b>		
Folic, B6, B12	Ultra-Folic B6 B12	1
Chaste Tree	Chaste Tree	3
Assistance from Adaptogen Herbs	Ultra Adrenal Complex	2
Licorice	Licorice	1-2
* use a multi without Iron unless iron is needed		

June 2015

**Primary dysmenorrhea** (difficult and painful menstruation), affects about 50% of the female population who are between menarche and menopause. It is caused by the release of prostaglandins from the endometrium just before and during menstruation. These prostaglandins are from the highly inflammatory arachidonic series (PG2). This prostaglandin release results in painful contraction of the uterine smooth muscle. Other symptoms associated with dysmenorrhea are nausea, diarrhea, headache, and emotional changes.

Secondary dysmenorrhea is much less common; by definition it has a definite medical cause and will not be discussed in this presentation.

**Premenstrual Syndrome (PMS)** is a combination of physical and emotion symptoms that are cyclic in nature, starting from two weeks to several days

before the onset of menstruation. More than 100 symptoms are now believed to vary with the menstrual cycle. The prevalence of PMS is thought to be between 25 and 100 percent. In some women the symptoms are mildly annoying; in others they are totally incapacitating.

**Alternatives to NSAIDs:**

While NSAIDs are the mainstay of the usual initial medical treatment, their use can be very problematic. I recommend Yucca capsules as a safe and effective alternative.

**Ultra Vites** contains high levels of B Vitamins, including Folic acid, which prevents neural tube defects in the event of pregnancy. This broad spectrum multiple vitamin and mineral formula is specially formulated and manufactured so that absorption and utilization will be optimal. The vitamin A is present in the maximum dose and form

for women who might become pregnant. The level of magnesium should be very helpful for women prone to PMS. Use **Iron-Plus** (Hematime) if iron is needed.

**Yucca** has anti inflammatory and pain relieving action similar to the NSAIDs. There have been **NO** reported serious adverse reactions. On the other hand, gastro intestinal distress, including bleeding, kidney and/or liver damage, increased incidence of heart attack and stroke, *hospitalizations and death* are problems that often come from NSAIDs use.

**Ultra Omega-Linic** is very helpful since many of the symptoms are caused by prostaglandin release. Ultra Omega-Linic reduces the amount of highly inflammatory prostaglandin 2 series, and increases the more symptom relieving of both prostaglandin 1 and 3 series. Other studies have shown that the supplementation of 100 to 400 IU of Vitamin E is also helpful; another reason to use Vitamin E-400 with Ultra Omega-Linic.

**Calcium D chelate** and **Ultra Magnesium chelate**, may be used for muscle cramps.

**Vitamin D3 5000** is a nutrient that is often implicated in chronic pain, and it is likely to be deficient during the winter months in the northern latitudes unless it is supplemented. Besides helping with bone mineralization, there have been several studies linking the increased intake of both Calcium and Vitamin D to a *decrease* in PMS symptoms.

#### **CONTROL PATHOGENIC ORGANISMS:**

Recent studies have shown **Ultra-Monolaurin** to be effective against micro-organisms which commonly plague women. Candida, herpes, and chlamydia are sensitive to monolaurin. The list of viruses and pathogenic bacteria (including MRSA), protozoa and fungus infections has been expanded in recent years. Reducing the body burden of these infections may minimize the symptoms of PMS and Dysmenorrhea.

#### **OTHER CONSIDERATIONS:**

Some dietary adjustments have been found to be useful. For example, decreased simple carbohydrate intake, increased complex carbohydrate intake, reduced saturated fat intake,

and reduced salt intake often will reduce PMS symptoms. Caffeine and alcohol should be avoided when symptoms are present.

#### **Ultra Adrenal Complex**

Because the herbs in Ultra Adrenal Complex act synergistically as adaptogens, this product is helpful in balancing glandular (therefore hormone) function.

#### **Chaste Tree**

Chaste Tree may be useful for the reduction of premenstrual and premenopausal symptoms. It may reduce breast tenderness and pressure, headaches, bloating and fatigue. It helps to balance progesterone and estrogen. **Caution:** avoid the use of Chaste tree during pregnancy.

#### **Licorice**

If Chaste Tree does not control the symptoms of PMS, consider Licorice. Licorice causes an elevation of aldosterone, which often helps to control PMS. **Caution:** avoid the use of Licorice during pregnancy.

#### **Vitamin A**

Megadoses of Vitamin A (from 100,000 to 300,000 IU) have been used successfully. **Caution:** One should be aware of the toxicity of Vitamin A. In addition to its potential toxicity, it is teratogenic in doses greater than 5,000 IU. No one should take megadoses of vitamin A except under the supervision of a qualified health care professional. Women of childbearing age who might become pregnant should not exceed a daily dose of 5000 IU Vitamin A. Beta carotene does not have the same effect as vitamin A in PMS, and its supplementation produces no known relief of PMS symptoms.

#### **Ultra-Folic B6 B12**

Ultra Vites contains high levels of the B vitamins - in particular 0.8 mg Folic, 25 mg B6 and 1000 mcg B12. Higher levels of these B vitamins is sometimes necessary. Ultra-Folic B6 B12 has 800 mg Folic, 50 mg B6 and 1000 mcg B12. In some instances these higher levels might be beneficial for PMS.



*These statements have not been evaluated by the FDA.  
Products are not intended to diagnose, treat, cure or mitigate any disease.*