



## Research Report

## The premenstrual tension syndrome rating scales: An updated version

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## ABSTRACT

**Background:** The Premenstrual Tension Syndrome (PMTS) Rating Scales have been widely used as inclusion criteria and/or outcome measures in clinical trials of treatment of Premenstrual Syndromes (PMS). However, both the PMTS Observer Rating Scale (PMTS-O) and the PMTS Self Rating Scale (PMTS-SR) are outdated. We propose to bring them in line with the DSM-IV criteria for Premenstrual Dysphoric Disorder (PMDD) by updating the PMTS-O and replacing the PMTS-SR with a Multiple Visual Analogue Scale (PMTS-VAS).

**Methods:** A convenience sample of 23 Caucasian, English-speaking women in their reproductive years with regular menstrual cycles was recruited. Participants were administered the revised PMTS-O (PMTS-OR) by a trained clinician and then instructed to complete the PMTS-SR and the new PMTS-VAS, both of which were timed. The participants were also asked which of the instruments they preferred.

**Results:** The PMTS-OR and the new PMTS-VAS were sensitive to the variation in severity of premenstrual symptoms among the study participants. All 3 questionnaires showed very high inter-correlations. The PMTS-VAS took less time to complete, and most women preferred the PMTS-VAS to the original PMTS-SR, especially those with PMDD and severe PMS.

**Conclusions:** By making minor modifications to the PMTS-O we have ensured that all criteria for the DSM-IV definition of PMDD are now represented in the PMTS-OR. The new PMTS-VAS mirrors the PMTS-OR but now also captures the severity of self rated symptoms. These scales are simple to complete for both clinicians and clients, and are reliable, valid and sensitive to change.

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## 1. Introduction

Many women experience physical or mood symptoms associated with the menstrual cycle (Clayton, 2008). A diagnosis of Premenstrual Syndrome (PMS) can be made if one or more physical or mood symptoms are present during the premenstrual phase only (World Health Organization, 1996). To qualify for Premenstrual Dysphoric Disorder (PMDD), the most severe form of PMS, one must meet far more stringent DSM-IV criteria (American Psychiatric Association, 1994).

A review by Budeiri et al. (1994) reported that 65 different questionnaires and scales, incorporating 199 symptoms and signs, have been used as inclusion criteria or outcome measures in clinical trials of treatment of PMS. Given the number of scales, the authors suggest that there is little justification in devising a new PMS assessment form and that clinical trial researchers ought to develop a consensus statement about the best instrument to use. Preferably such an instrument should identify women whose symptoms are severe enough to benefit from treatment and be sensitive to changes associated with treatment response. We suggest that an updated version of the Premenstrual Tension Syndrome Observer Rating Scale used together with a Multiple Visual Analogue Scale, both in line with DSM-IV PMDD diagnostic criteria, might meet that need.

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## 2. The Premenstrual Tension Syndrome Ratings Scales

### 2.2. Background

The Premenstrual Tension Syndrome Observer Rating Scale (PMTS-O) and the corresponding Premenstrual Tension Syndrome Self Rating Scale (PMTS-SR) (Steiner et al., 1980) are

questionnaires which were constructed using rank-ordered items from existing rating scales in order to identify symptoms specific to the late luteal phase of the menstrual cycle. Items were derived from the Menstrual Distress Questionnaire (MDQ) (Moos, 1968), the Multiple Affect Adjective Checklist (MAACL) (Zuckerman and Lubin, 1965), the Hamilton and Carroll Depression Scales (HAM-D and CDS) (Feinberg et al.,

### PMTS-OR

Name: \_\_\_\_\_  
Date: \_\_\_\_\_

Rater: \_\_\_\_\_  
Cycle Day: \_\_\_\_\_

Circle the most appropriate score for each item:

#### 1. Depressed Mood (0-4)

(Depressed mood, negative affective state, dysphoria)

0. Not depressed.
1. Somewhat blue, sad. Elicited only on direct questioning.
2. Mild depressive and labile mood, spontaneously reported.
3. Marked depressed mood; occasional crying; feelings of loneliness.
4. Severe, obvious and persistent.

#### 2. Anxiety/Tension (0-4)

(Tense, anxious, restless, jittery, upset, high-strung, unable to relax)

0. Not tense.
1. Doubtful, trivial.
2. Mild. Reports occasional tension.
3. Moderate. Tense, jittery, unable to relax. Restless behaviour evident.
4. Severe. Constantly tense, anxious and upset.

#### 3. Affective Lability (0-4)

(Aware of feeling moody or emotional, marked spontaneous mood swings, occasional crying, feeling of loneliness, obvious persistent moodiness)

0. No disturbance.
1. Doubtful, trivial.
2. Mild. Occasional moodiness.
3. Moderate. Aware of feeling moody.
4. Severe, obvious and persistent.

#### 4. Irritability/Hostility (0-4)

(Irritable, hostile, negative attitude, critical, sarcastic, angry, short-fused, yelling and screaming at others)

0. Not irritable
1. Doubtful, trivial. Not reported without direct questioning.
2. Mild. Occasional outbursts of anger and hostile behaviour. Spontaneously reported.
3. Moderate. Irritable behaviour evident. Frequent outbursts.
4. Severe. Affects most interactions between patient and significant others.

#### 5. Decreased Interest in Usual Activities (0-4)

(Avoidance of social activities and interactions with family, at home, at work, at school, etc.)

0. No social impairment.
1. Doubtful, trivial.
2. Mild avoidance of social activity.
3. Moderate but obvious impairment of social activity, mainly noticeable at home and with family.
4. Severe. Marked impairment of most social interactions including at work or school. Withdrawal, isolation.

#### 6. Concentration Difficulties (0-4)

(Forgetful, poor concentration, distractible, confused, lowered judgement)

0. No disturbance.
1. Doubtful, trivial.

Fig. 1. Premenstrual Tension Syndrome Observer Rating Scale revised (PMTS-OR).

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