

Association of Alexithymia and Pre-menstrual Syndrome (PMS)

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ABSTRACT

The present study is an effort to examine alexithymia in women with the Premenstrual syndrome. For this purpose, a sample of 100 unmarried young adults within the age range of 18-24 years was included in the study after obtaining their informed consent. They were assessed on Premenstrual Symptoms Screening Tool (Steiner, Macdougall & Brown, 2003), and on Toronto Alexithymia Scale (Bagby, Parker, & Taylor, 1994). By applying Karl Pearson's Coefficient of correlation, it was found out, that Alexithymia is associated with Premenstrual Syndrome. A detailed discussion of the results and their implications would be discussed in the paper.

Keywords: *Premenstrual syndrome, premenstrual dysphoric disorder, Alexithymia*

Alexithymia is a clinical syndrome with multiple affective, perceptual and cognitive elements. It is characterized by difficulties in differentiating between feelings, bodily sensations, and in manifesting and communicating feelings. The term "Alexithymia" was coined by Peter Sifenos in 1972 to Psychiatry. Alexithymia has Greek origin and it literally means having no words for emotions (a=lack, lexis=word, thymos=emotion). Many individuals with alexithymia have somatic complaints (Gucht & Heiser, 2003) All feelings whether normal or pathological are ultimately bodily feelings. Those with alexithymia lack a lived understanding of what they experience emotionally. A patient has no story to tell, they are unable to find words necessary to describe their feelings. It is also known to be associated with other physical illnesses like alcoholism, chest pain, and somatic disorders.

Pre-menstrual Syndrome (PMS) is a clinical phenomenon characterized by the cyclical occurrence of a variety of somatic, affective and behavioural symptoms that manifest themselves approximately 7-10 days prior to menstruation and remit within a few days after its onset. Symptoms may typically include among others abdominal bloating, breast tenderness, increased food cravings for carbohydrates, increased lethargy, irritability, anxiety, depression, etc. Approximately 90% of all fertile women experience some symptoms of PMS with 20-40% experiencing mild to moderate symptoms and 2-10% of them experiencing

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severe symptoms. PMS can be a misunderstood condition which is frequently misdiagnosed as a mental illness like bipolar disorder. It leaves thousands of women in dark place or suicidal for at least one quarter to half of every month.

Pre-menstrual dysphoria disorder (PMDD) the extreme form of PMS is a clinical condition which is not much heard of. According to the National Association of PMS, PMDD affects 5-8% of women (www.theguardian.com/Opinion/Health). PMDD is likely to be under-reported especially by women from ethnic minorities. It is hardly ever spoken of and for that reason, there is insufficient research literature to establish theoretical formulations on this aspect of womanhood.

Psychologically speaking, PMS has been associated with various somatic and psychological conditions. Alexithymia is one of the significant and disturbing conditions has been found to significantly co-occur with Premenstrual Syndrome

REVIEW OF LITERATURE

After reviewing literature, a few studies on the relationship between Alexithymia and PMS were taken into account. In a study by (Berardis et al., 2005) they found an established relationship between Alexithymia and severe PMDD. Another study on Turkish University students by (Alpaslan, Avcı, Soylu, & Taş, 2014) found an association between Alexithymia and PMS among a sample of 308 students. The alexithymic students showed higher scores on all premenstrual assessment form (PAF) sub-scale. The research evidence were identified and collected with the help of Google scholar and e-journals.

METHODOLOGY

A sample of 100 young unmarried girls with the age range between 18-24 years comprising of university students of departments like Geography, Business Management, Sociology, Library and Information Science was selected for the study. The sampling was done by using a random sampling technique. The tools used for the study were: Premenstrual Symptoms Screening Tool (Steiner, MacDougal & Brown, 2003) and Toronto Alexithymia Scale (Bagby, Parker & Taylor, 1994), better known as TAS -20. TAS- 20 has 3 subscales:

- Difficulty Describing Feelings subscale is used to measure difficulty describing emotions
- Difficulty Identifying Feeling subscale is used to measure difficulty describing emotions
- Externally Oriented Thinking subscale is used to measure the tendency of individuals to focus their attention externally

TAS-20 despite its criticism, is presently the most widely used instrument for assessing alexithymia. It is also the only scale that has been cross-validated in different languages.

The Premenstrual Symptoms Screening Tool was used because of its wide range benefits of being less time to consume, and practical. This is a fast and effective screening tool is the important starting point for further assessment. The Premenstrual Symptoms Screening Tool

will need to be further validated against the current ‘golden standard’ of prospective daily charting.

Clear instructions were delivered to the participants and essential precautions were taken care of. The questionnaires were administered before obtaining the informed consent of the participants. The participants were thanked for their cooperation. For statistical analysis, Karl Pearson’s coefficient of correlation will be applied.

RESULTS & DISCUSSION

The study was conducted with the aim of discovering the relationship of Alexithymia with the Premenstrual syndrome. For this purpose, a sample of 100 young, unmarried girls of 18 – 24 years age group was selected. The participants were assessed on Premenstrual Symptoms Screening Tool (Steiner, MacDougall & Brown, 2003) and Toronto Alexithymia Scale (Bagby, Parker & Taylor, 1994).

Upon administering the scales, the data was collected and classified, for statistical analysis, Karl Pearson’s coefficient correlation was applied and the results were obtained and tabulated. The correlation comes out to be 0.08 which implies that there exists a positive correlation between the variables under study and it is significant at 0.01 level of significance. Thus, by calculating and analyzing the results, we have found an established association between the variables.

Thus, to conclude it can be said that there is a well-established relationship of alexithymia with premenstrual syndrome. This study has a few limitations, like:

1. It was a narrow study; we could not delve deep into it
2. Due to less time, this study may not be as professional as per the required standards
3. Some additional variables may be responsible for the relationship between the variables

There is a need for further research in this area to spread light on this phenomenon. Especially in India, where women shy to express their physical and psychological journey during this time period. Further research can be done on exploring the role of other factors like self-esteem and body image in premenstrual syndrome and how do they interact with each other during premenstrual syndrome.

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Conflict of Interest

There is no conflict of interest.

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