

The Association is dedicated to safe, state-of-the-art, innovative surgeries and healthy lifestyles for women of all ages. In a nurturing environment, the physicians and staff strive to promote a partnership in your healthcare and make every effort to bridge the sterile science of diseases with your emotional, physical, and spiritual needs. Everyone is confronted with difficult healthcare decisions at one time or another. You'll want your physician and staff to have the knowledge, experience, and sensitivity to guide you safely through the decision-making process.

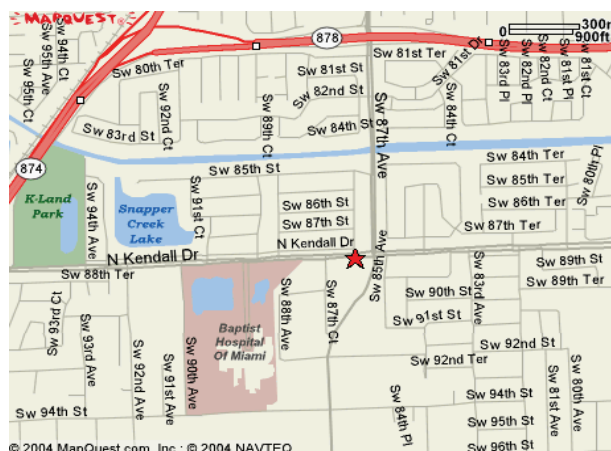
The Association of Minimally Invasive Gynecologic Surgeons provides comprehensive gynecologic office and surgical healthcare. The physicians are certified in laparoscopy and hysteroscopy and are experts in advanced gynecologic surgery. Doctors Whitted and Pietro are national speakers, trainers, and researchers in advanced surgical techniques. In addition, Doctors Pietro and Whitted are Certified Menopause Clinicians who educate, train, and research the science of menopause. Finally, they are certified in advanced colposcopy.

Doctors Whitted and Pietro offer expert education and care in the following areas:

- |                                  |                         |
|----------------------------------|-------------------------|
| <b>Abnormal Paps (HPV)</b>       | <b>Loss of Urine</b>    |
| <b>Abnormal Menstrual Cycles</b> | <b>Menopause</b>        |
| <b>Bladder Prolapse</b>          | <b>Ovarian cysts</b>    |
| <b>Chronic Pelvic Pain</b>       | <b>Osteoporosis</b>     |
| <b>Endometriosis</b>             | <b>Rectocele</b>        |
| <b>Ectopic Pregnancy</b>         | <b>Uterine Prolapse</b> |
| <b>Family Planning</b>           | <b>Vaginal Prolapse</b> |
| <b>Fibroids (Leiomyoma)</b>      | <b>Well-Woman visit</b> |

**\*\*\*Evaluation and Diagnosis of Gynecologic Cancers**

If you need surgery, The Doctors in the Association perform most gynecologic surgeries with minimally invasive techniques to reduce hospitalization, recovery, scarring, discomfort and absence from work in most cases.



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## The Association of Minimally Invasive Gynecologic Surgeons

*...dedicated to healthy lifestyles and safe, state-of-the-art surgery for women of all ages.*

### Premenstrual Syndrome: The Truth

Many women are only too familiar with the discomfort that accompanies their menstrual cycle before bleeding begins. Indicators of premenstrual syndrome (PMS) range from uncomfortable bloating, water retention, breast tenderness, moodiness, to severe cramping and debilitating migraine headaches.

If you're affected by premenstrual syndrome, accepting these effects as normal part of your monthly cycle may help to reduce the anxiety you feel about PMS. The next step is to go about taking care of your body in a way that decreases discomfort, if possible.

Long misunderstood, PMS is now formally defined by the U.S. National Library of Medicine as "a symptom or collection of symptoms that occurs regularly in relation to the menstrual cycle, with the onset of symptoms five to eleven days before the onset of menses and resolution of symptoms with menses or shortly thereafter?"

### Do all Women get Premenstrual Syndrome?

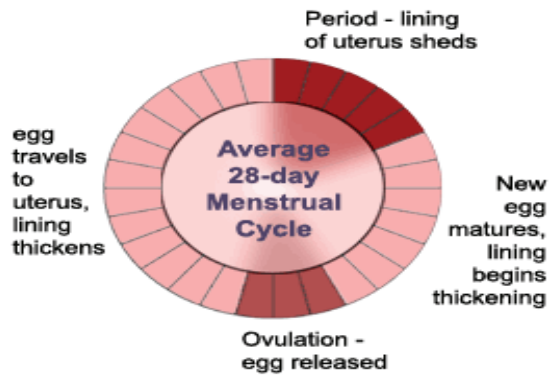
Seventy to ninety percent of women of childbearing age are affected by PMS. For about half of these women, the condition is severe enough to interfere with daily tasks, and for about ten percent of women, it's severe enough to be disabling. Women at most risk for PMS are between the ages of 20 and 50, those with at least one child, and/or a family history or personal history of depression or affective mood disorder.

PMS shouldn't be confused with premenstrual dysphoric disorder (PMDD) which is a major premenstrual mood disorder that can affect 5% of women.



## Understanding Menstruation and the Menstrual cycle

A woman's body usually prepares for pregnancy about every 28 days. Each woman's body is unique but, in general, the menstrual cycle is considered to begin on the first day of bleeding and continue to the first day of the next period. For some women, a menstrual cycle is as short as 23 days or as long as 35 days—and for some women, each month may be different from the last. What one woman might consider an irregular menstrual cycle another woman might consider normal.



About mid-cycle, a woman's body releases an egg from the ovaries down the fallopian tubes and towards the uterus. The lining of the uterus prepares for pregnancy by thickening. If the egg remains unfertilized (if no sperm reaches it), the extra blood and tissue that formed in the uterus is shed—this is what women call their “period.” Then a new menstrual cycle begins.

## Keeping a Menstrual Calendar

Maintaining a menstrual cycle journal or menstruation calendar will help. Knowing when to expect your period can help you prepare: eat right, exercise regularly and keep sanitary supplies handy. This is also an excellent way to monitor the onset of symptoms. Remember PMS occurs always after ovulation and tends to improve significantly at the onset of the menses or shortly thereafter. Symptoms that occur beyond this are not part of PMS.

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## Preventing PMS through Diet and Exercise

Everything a woman takes into her body—from sugar and salt to alcohol and drugs—potentially affects how intensely she suffers from PMS symptoms. A preventative lifestyle begins with small, important lifestyle changes. At the top of the list are stopping smoking and reducing alcohol intake.

Eat right—despite your cravings! Eating more fresh fruits and increasing your intake of certain minerals and vitamins can sometimes mitigate unhealthy cravings for sugar or salt.

Exercise! Regular exercise can help reduce the bloating and fluid retention of PMS by improving blood circulation. It also reduces stress and tension and increases natural production of beta-endorphins, which can help prevent or combat mild depression. Aerobics, walking, jogging, bicycling, swimming and yoga are a few good ways to exercise.

Here are some helpful hints for preventing or reducing PMS:

- Eat a low fat diet
- Reduce your intake of sugar and salt
- Reduce or eliminate caffeine and alcohol
- Exercise regularly: at least three 20-minute sessions a week
- Drink 8-10 glasses of water daily
- Increase your intake of calcium and vitamin E.

## PMS and the Migraine Diet

The PMS diet, which is a good one for all Americans to follow, is also the recommended migraine diet because it helps balance blood sugar and avoid energy highs and lows. Women who suffer from premenstrual migraine headaches and want to follow a migraine diet may find that they feel better by eating five or six small meals at regular three-hour intervals.

**Adequate Sleep:** A woman's body may have different sleep requirements at different times during her menstrual cycle, so obtain adequate rest.

**Avoid Alcohol:** Studies have shown that alcohol can imbalance hormone production and create irregularities in the menstrual cycle. Since alcohol is a depressant, it exacerbates PMS symptoms. It also lowers blood sugar level, which can increase irritability. A 1996 report in the British Journal of Obstetrics and Gynecology said that regular alcohol consumption increased the duration and severity of cramps in women who suffered from cramping.

**Water and fluid Retention:** Nutritionists and many medical doctors recommend that women who have PMS drink at least six glasses of water a day and reduce their intake of fat, sugar and salt. In a healthy adult, drinking more water does not increase fluid retention—it actually helps flush fluids from the body as water is a natural diuretic.

## PMS Treatment: Vitamins to Hormone Therapy

Diets and vitamins rich in B-complex are thought to improve symptoms. One controlled study reported relief from symptoms in women who took 1000mg of calcium daily. At least six different studies have shown some PMS relief in women who used a daily vitamin that was high in magnesium (at least 300 mg daily) and minerals. Two controlled studies validated the benefits of taking at least 300 IU of Vitamin E daily.

**Hormone Treatments:** Although most have not been studied, Birth Control Pills may treat ovarian hormonal “imbalances”. Danazol, a male-type hormone, has shown ability to reduce PMS symptoms. It is taken during the symptom period (dose = 200mg/day). Progesterone cream is used by many to improve progesterone levels and some see improvement in symptoms.

**Antidepressants:** Prozac and Zoloft have shown, in studies, improvement in symptoms.

**Complementary Therapies:** Soy, black cohosh, red clover, evening of primrose oil have shown promise in reducing PMS symptoms. Acupuncture may have clinical benefit.