

Developing Premenstrual Dysphoric Disorder in Autistic Adults

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DESCRIPTION

Few studies have concentrated on Autistic Spectrum Disorders (ASD) in women because ASD was originally thought to be a condition that mostly affected men. Additionally, there is a dearth of knowledge regarding autism in adults in general because the classification is only now reaching this age group. Major reproductive milestones, such as menstruation and menopause, can have a significant impact on a woman's life, but there are currently few studies that specifically examine how these milestones affect autistic women, despite some evidence to suggest that these women are affected by these hormonal changes differently. It is crucial to correct this imbalance in study in order to fill this information gap because this may point to a difference in need between women who are autistic and those who are not.

Premenstrual Dysphoric Disorder (PMDD), commonly known as the late luteal phase or the last week before menstruation, affects 5%-8% of women and is characterized by crippling emotional and physical symptoms as well as functional impairment. PMDD frequently co-occurs with mood and anxiety disorders, but connections with less common co-morbidities, such as schizophrenia, have also been noted. Additionally, there is proof that PMDD is more common in ASD. Compared to 3% of non-autistic women, studies found that nearly 21% of autistic women experienced PMDD. Researchers discovered that compared to 11% of non-autistic women with learning impairments, 92% of autistic women with learning disabilities experienced late luteal phase dysphoric disorder (an early term for PMDD), which is a significantly more concerning rate. Despite the fact that there

are just two studies with rather small sample sizes, the evidence suggests that autistic women are more likely to have PMDD. If higher hormonal swings are linked to increase PMDD in people with autism, one can anticipate that menopausal symptoms will also be more severe. Increased hormonal swings characterize the perimenopause stage of the menopausal transition, which lasts for 12 months before the postmenopausal stage begins. Women go through a lot of physiological changes during this transitional stage, which leads to a wide range of medical, psychological, sexual, and social issues. There is evidence to suggest that this is a particularly challenging life stage with significant unmet (health) requirements.

There are reports that autistic traits (such as sensory differences and difficulty with behavior regulation) are exacerbated during menstruation and menopause, in addition to divergent and/or more severe symptoms generally related with hormone changes. This intensification of autistic traits following menopause may lead to an increase in autistic diagnoses in women. Menopausal symptoms are also frequently linked to greater rates of psychiatric/psychological problems in non-autistic women. It's uncertain whether menopause affects psychiatric/psychological symptoms differently in people who are already more susceptible to developing them (i.e. women with ASD). As a result, we will investigate the connection between psychological disorders and menopausal symptoms. We'll concentrate on two prevalent psychiatric illnesses that affect people with autism (anxiety and depression). We also looked at links between menopausal symptoms and the symptomatology of Attention Deficit Hyperactivity Disorder (ADHD), a common neurodevelopmental comorbidity that has previously been noted as potentially being impacted by the menopausal transition.

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