How hormones impact mental health

What’s the connection between hormones and mental health? How do our hormonal changes affect our emotional wellbeing? And what are some ways we can nurture positive mental health?

To answer all these questions and more, as part of Women’s Health Week, Jo Roberts of Jean Hailes recently spoke to Professor of Psychiatry and Director of the Monash Alfred Psychiatry Research Centre, Jayashri Kulkarni AM.

What’s the connection?

Prof Kulkarni says the roles that the female hormones oestrogen and progesterone play in a woman’s reproductive health are well known, but it’s less commonly known that they also impact mental health.

“The point to make, is that even though we tend to think of these hormones as ‘the reproductive hormones’, they also have a really, really big impact in the brain”, she says.

She explains that mental and physical health are closely connected, and this applies to our hormonal health too.

“For a long time, we put all things mental health in one box, and all things physical health in another box … so, for a long time, people like me have been working to say ‘look, these hormones – oestrogen, progesterone and testosterone – are potent brain chemicals’,” Prof Kulkarni says in the recent Women’s Health Week video.

The highs and lows of hormonal health

Female hormones are complex, and their levels constantly change throughout the menstrual cycle and at different life stages.

To more simply understand how these hormones impact mental and emotional health, Prof Kulkarni says to think of oestrogen as being a ‘good’ hormone for the brain, and progesterone as a ‘bad’ hormone for the brain.

“There are times in the menstrual cycle when oestrogen levels are high, and [at these times] women tend to feel better in their mood,” she says. “They also tend to be better with such things as what we call ‘verbal memory’ or talking skills.

“This is around ovulation and around the first part of the cycle.

“And this is why if a person is prone to getting premenstrual changes in mood, that is what's happening; it's happening at a time when oestrogen is low, just before a period happens.”
Progesterone levels also start to climb in the second part of the cycle, after ovulation. This can, in some women, increase the likelihood of lowered mood, depression and other issues.

Prof Kulkarni says it’s important to keep in mind that all women respond differently to their own hormonal patterns. Some women are particularly sensitive to their changing levels, while others may not feel any effect.

**PMS and PMDD explained**

Premenstrual syndrome (PMS) is a very common condition linked to these changing hormones. It's a collection of symptoms, including physical symptoms such as bloating, breast tenderness or headaches, or manageable emotional symptoms, such as irritability.

However, for a small percentage of menstruating women – 3-8% – the sensitivity to the hormonal fluxes of their monthly cycle is so great that the effects on their emotional and mental health is severe.

Prof Kulkarni explains that this is a separate condition to PMS, called PMDD – premenstrual dysphoric disorder.

“PMDD is a severe depression that occurs premenstrually,” she says. “It comes on suddenly … it’s really challenging for women to get out of bed, get on and do things.

“Or worse, is the brain fog. Many women have described ‘I can't think, I can’t do what I have to do', which is really awful.”

To effectively manage these hormonal conditions, Prof Kulkarni says it’s very important to understand the differences between PMS and PMDD, and treat each one accordingly.

PMS is “perhaps easier to start working on with healthy lifestyle changes”, she says, such as exercise, a healthy diet and if required, trying some over-the-counter medications available at health food stores or pharmacies.

However, she says it is “critical” that PMDD is treated without delay “because women can have suicidal thinking, and actually act on that.”

“It can be life destroying,” says Prof Kulkarni. “This is a significant condition, but it's often ignored.

“You can’t lose one week or 10 days out of every month and just ignore that. That’s a significant loss of productivity and wellbeing.”

Prof Kulkarni says hormone treatments are usually used to manage PMDD. “Usually we use the oral contraceptive pill (the Pill), but you’ve got to be careful because there are so many different pills and some of them are quite depressive,” she says.
Prof Kulkarni urges all women with PMDD or suspected PMDD to reach out and talk to their doctor, as management and support are available.

**Tips for good mental health**

Having good mental health depends on many different parts of life, so it's important to take a holistic approach, says Prof Kulkarni.

“We need for the body to be healthy, and that includes hormone balance … it includes being careful with anything that's going to impair brain health, such as drugs or alcohol,” she says.

“And keep your body active and healthy in terms of exercise and good-quality food because your brain needs good fuel.

“All of these things will help physical health, which is well and truly integrated with mental health.”

The people in our lives – our friends, family, community and colleagues – also play a major part in our mental health, says Prof Kulkarni.

“Being connected and connectedness in our lives is really important to give us meaning,” she says.

Having meaningful love in your life provides a strong foundation for good mental health, says Prof Kulkarni.

“Meaningful love is not necessary a romantic love. It can be love of a child, love of animal – it’s love in some form,” she says.

And meaningful work – whether it’s paid or unpaid – together with meaningful love “really do make for good mental health,” she concludes.

Read more about mental and emotional health or watch the Women's Health Week video in full.

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