



Women, Hormones, and ADHD

Estrogen is the hormone responsible for the sexual and reproductive development of girls and women. It also manages important neurotransmitters, including dopamine, which is central to executive functioning; serotonin, which regulates mood; and acetylcholine, which aids memory. Fluctuations in estrogen affect all women but are often felt more acutely in women with ADHD, who are more likely to experience debilitating premenstrual syndrome (PMS) and premenstrual dysphoric disorder (PMDD).

ADOLESCENCE

How ADHD is impacted: When puberty begins around age 9 to 11, estrogen and progesterone levels increase. This can cause mood swings, lead to risky behaviors and rebelliousness, and decrease the efficacy of some ADHD medications.

What can help:

- If medications stop working well, talk to your child's doctor about adjusting the dosage, or the medication.
- Healthy nutrition, exercise, and sleep are essential. Teens should get 9 to 10 hours of sleep nightly.
- Ask your child to chart the days when ADHD symptoms spike, and plan around that.
- Be patient, especially during tough spots in her cycle. De-escalate conflict and keep lines of communication open by remaining non-judgmental in your conversations.

PREGNANCY & CHILDBIRTH

How ADHD is impacted: Shifting hormone levels in the first months of pregnancy may cause fatigue, mood swings, and anxiety. As estrogen steadily increases, ADHD symptoms may improve during pregnancy. Following childbirth, the sudden drop in hormone levels can lead to mood swings or postpartum depression.

What can help:

- Stimulant use is complicated during pregnancy and nursing; most doctors advise against it. Some SSRIs may be safe. Talk to your doctor about your medication plan.
- Get help during pregnancy and after childbirth from a therapist, a babysitter, and/or a parent group to help ease stress and anxiety.
- If lack of sleep is worsening symptoms, ask your partner to take over nighttime feedings.
- Intense anger, difficulty bonding with the baby, feelings of inadequacy, and insomnia are all signs of postpartum depression. Reach out to your doctor if you experience any of these.

PMS & PMDD

How ADHD is impacted: Estrogen levels rise for the first two weeks of your menstrual cycle, then drop for the last two weeks as progesterone increases. When estrogen is lowest, in the days before your period, symptoms of PMS or PMDD may present and make ADHD symptoms worse.

What can help:

- Keep a log of your ADHD symptoms for three months, to identify a pattern. If you know when problems may occur, you can develop strategies to anticipate and minimize them.
- Talk to your doctor about increasing your ADHD medication slightly a few days before your period to help manage ADHD symptoms. A low-dose antidepressant or anti-anxiety medication may help regulate emotional highs and lows.
- Oral contraceptives may improve ADHD symptoms by minimizing hormonal shifts. Three weeks of estrogen followed by one week of progesterone is often ideal.

MENOPAUSE

How ADHD is impacted: In the 10 years prior to menopause (called perimenopause), estrogen and progesterone drop 65%, eventually causing menstruation to stop. Particularly in women with ADHD, this drop in hormones can lead to moodiness, sadness, irritability, fatigue, fuzzy thinking, and memory lapses, in addition to physical symptoms like hot flashes.

What can help:

- Ask your doctor about estrogen replacement; it may be helpful, especially in the first few years, to lessen symptoms.
- If anxiety, depression, and/or mood regulation become a problem, talk to your doctor about SSRIs or SAMs. If memory issues are the primary challenge, ask about AChEIs.
- DBT can help you manage unruly emotions and CBT can improve executive functions impacted by menopause.
- If you aren't using stimulants, you might consider trying them. Studies show that they can help with cognitive menopausal symptoms even in women without ADHD.

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