

Microdosing for PMDD Interview 13 Oct 2023

1. How long have you been affected by PMDD symptoms?

About 9 years

2. Have you spoken to your Doctor/Health Professional about PMDD?

Several – many mental health professionals

3. Have you ruled out premenstrual exacerbation (PME) of an underlying condition?

Yes, for mental health – receives immediate relief when a period starts.

Has an autoimmune condition that flairs up during the luteal phase that contributes to physical symptoms.

4. What other treatments have you tried and how did you find them?

Finasteride: Attributes a significant reduction in depression and suicidal ideation to finasteride. Had negative reactions to SSRIs when younger, hasn't taken them in years.

KETO autoimmune protocol diet -working with a functional medicine professional for immune dysfunction. Had no emotional PMDD symptoms while on this diet but found it very hard to maintain because of the dietary restriction.

Currently struggling with continuity of care for finasteride. The initial doctor's office shut down and had to find a new doc to prescribe the finasteride at original dosage. Was originally prescribed a much higher dose and it was difficult to convince the new doctor to prescribe that high of a dose. Provided the new doctor with finasteride research and eventually got him to prescribe the higher dose but doesn't have the level of support or information the previous doctor provided.

5. Are you still utilizing other treatments? If not, why did you stop them?

Still taking finasteride and incorporating diet and exercise.

6. How did you find out about microdosing and roughly when did you start?

Works as a plant medicine facilitator and guide and became aware of microdosing specifically for PMDD; read testimonials online from other women.

7. Do you also incorporate higher doses? If so, about how often and roughly when did you start?

Yes – has been working with ayahuasca and psilocybin (in combination) for about 12 years, no standalone higher dose psilocybin sessions. Has journeyed during the luteal phase in the past but “probably not often enough or with the intention of improving PMDD”.

Is cautious about journeying during the luteal phase and feels as if it may be difficult for her to regulate her nervous system during this time.

8. How does microdosing make you feel after you take the microdose relative to before the microdose?
- Deeper breaths “Within 45 minutes I feel like I can breathe again”
 - Intentional – MD Essence /structure /routine – intention, communication with the mushroom, journal documentation of how the day went, closing the space for the day
 - Ability to exit the loop of negative thoughts
 - Gentleness in internal processing
 - Bringing awareness to self-love

9. Does microdosing affect any of your mental PMDD symptoms? If so, which ones and what is the result?

Yes – major difference with anger, rage, misery, hopelessness, and suicidal ideation.

Suicidal ideation thought loops transform into “I want to go home” or “I’m done with this thing” rather than “I want to die”.

MD helps with the energy for exercise and intense exercise regimens (2-3 hours a day) helps her relieve PMDD symptoms. Ritualistic combination of MD with food and intentional eating helps with mood as well.

10. Does microdosing affect any of your physical symptoms of PMDD? If so, which ones and what is the result?

- Autoimmune condition flairs up during the luteal phase, it’s difficult to determine which symptoms are PMDD and which symptoms are the autoimmune condition.

11. Thinking back to your PMDD before you started microdosing are there any things you can do now that you couldn’t before? (Quality of life / Functional Activities / Relationships)

- It’s made a huge impact– I can almost have a life in those two weeks
- Able to work
- Can be in a social setting if required
- Can be with small group of friends rather than total self-isolation

12. How many cycles have you been microdosing for?
- Since January of 2022 (28 day cycle average)
13. What substance are you microdosing? How often? How much do you take at a time? (Regimen / Protocol)
- Started at 200 milligrams psilocybin
 - Adjusted dose down to 50 milligrams Psilocybin
 - Increases MD dose up to 200 milligrams when symptoms are severe.
 - Starts MD regimen 7 days after ovulation and then doses every day until period starts
 - Adds doses as needed during and after ovulation – but tries to focus on just that week
14. Do you microdose all the time or just when you have PMDD symptoms?
- See above
15. When you are not microdosing:
- How would you rate your mood in the follicular phase (out of 10 where 10 is good)
 - o 8 or 9
 - How would you rate your mood in the luteal phase (out of 10 where 10 is good)
 - o 0 pre finasteride
 - o 3-6 with finasteride
16. When you are microdosing:
- How would you rate your mood in the follicular phase (out of 10 where 10 is good)
 - o 8 or 9
 - How would you rate your mood in the luteal phase (out of 10 where 10 is good)
 - o MD + finasteride + diet and exercise routine 7-8
 - o Notes that 1-2 days may be a 3 or a 4, but it is more manageable because it doesn't last for as many days.
17. Do you intend to keep microdosing?
- Absolutely
18. Thinking back to when you first decided to microdose, did you feel comfortable with the information and resources available to you? Are there any resources that would have been helpful to you? (~~dysphoric~~ project specific question)
- Testimonials have been helpful
 - Understanding of dosing – would have been helpful to know she didn't need as much as other people need due to sensitivity, contributes sensitivity to PMDD and working with higher doses
 - Combining it with food and movement

- d. Closing the day / journaling
- e. Structure / Ritual
- f. Notes improvements based on the structure / routine that comes with MD

19. Recommendation for others:

“Just do it. Rather than wasting the time, do it over not doing it. If there are changes or adjustments that need to be made, they can be made later. There’s so little risk with a microdose and there’s so much benefit that can come from it – we’re really doing a disservice to ourselves [by living with PMDD].”