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Inger Sundström Poromaa, MD, PhD, is Professor of Obstetrics and Gynecology at Uppsala University, Sweden. She received her medical degree from the University of Umeå, Sweden, and followed this up with a post-doc at Downstate Medical Center, State University of New York.

Professor Sundström Poromaa is a Fellow of the Swedish Society of Medicine and the Swedish Society of Obstetrics and Gynecology (SFOG). She is currently a member of the Board for Research-level Education and the Board of the Center for Reproductive Research at Uppsala University. She has been Chairman of the Reference Group for Gynecologic Endocrinology in Sweden, and member of the Board of Directors of SFOG. Professor Sundström Poromaa has supervised 14 PhD students, authored or co-authored more than 120 peer-reviewed articles and reviews and has contributed to numerous books on topics such as menstrual cycle-related disorders, antenatal and postpartum depression, and ovarian steroid effects on the central nervous system. Dr Sundström Poromaa's research interests include adverse mood effects of hormonal contraception, premenstrual dysphoric disorder, antenatal and postpartum depression and brain imaging.

#### Selected recent publications

1. Kask K, Gulinello M, Bäckström T, Geyer M, Sundström-Poromaa I. Patients with premenstrual dysphoric disorder have increased startle response across both cycle phases and lower levels of prepulse inhibition during the late luteal phase of the menstrual cycle. *Neuropsychopharmacology*. 2008; 33: 2283-90.
2. Kask K, Bäckström T, Nilsson L-G, Sundström-Poromaa I. Allopregnanolone impairs episodic memory in healthy women. *Psychopharmacology (Berl)*. 2008; 199: 161-8.
3. Volgsten H, Skoog-Svanberg A, Ekselius L, Lundkvist Ö, Sundström-Poromaa I. Prevalence of psychiatric disorders in infertile women and men undergoing in vitro fertilization treatment. *Hum Reprod*. 2008; 23(9):2056-63.
4. Segebladh B, Borgström A, Odland V, Bixo M, Sundström-Poromaa I. Prevalence of psychiatric disorders and premenstrual dysphoric symptoms in patients with experience of adverse mood during treatment with combined oral contraceptives. *Contraception*, 2009;79:50-5
5. Segebladh B, Borgström A, Nyberg S, Bixo M, Sundström-Poromaa I. Evaluation of different add-back estradiol and progesterone treatments to gonadotropin-releasing hormone agonist treatment in patients with premenstrual dysphoric disorder. *Am J Obstet Gynecol*, 2009;201:139.e1-8
6. Bannbers E, Kask K, Wikström J, Sundström Poromaa I. Lower levels of prepulse inhibition in luteal phase cycling women in comparison with postmenopausal women. *Psychoneuroendocrinology*, 2010;35:422-9.
7. Bannbers E, Kask K, Wikström J, Risbrough V, Sundström Poromaa I. Patients with premenstrual dysphoric disorder have increased startle modulation during anticipation in the late luteal phase period in comparison to control subjects. *Psychoneuroendocrinology*, 2011; 36: 1184-92.
8. Bannbers E, Gingnell M, Engman J, Morell A, Comasco E, Kask K, Garavan H, Wikström J, Sundström Poromaa I. The effect of premenstrual dysphoric disorder and menstrual cycle phase on brain activity during response inhibition. *J Affect Disord*, 2012 15;142(1-3):347-50.
9. Gingnell M, Morell A, Bannbers E, Wikström J, Sundström Poromaa I. Menstrual cycle effects on amygdala reactivity to emotional stimulation in premenstrual dysphoric disorder. *Horm Behav*. 2012;62(4):400-6.
10. Gingnell M, Engman J, Frick A, Moby L, Wikström J, Fredrikson M, Sundström-Poromaa I. Oral contraceptive use changes brain activity and mood in women with previous negative affect on the pill - a double-blinded, placebo-controlled randomized trial of a levonorgestrel-containing combined oral contraceptive. *Psychoneuroendocrinology*. 2013;38(7):1133-44.