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RESEARCH ARTICLE

PERCEIVED HEALTH PROBLEMS OF MENOPAUSE

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ABSTRACT

Background: Menopause is the most striking event during the middle age in women and represents the end of reproductive life. Although menopause is a universal phenomenon, there is a considerable variation among women regarding the age of attaining menopause and the manifestations of the menopausal signs and symptoms. This study aimed to assess the perceived health problems of menopause among the post-menopausal women.

Methodology: Cross sectional descriptive survey design was used. All post-menopausal women accompanying patients at WCH OPD, JIPMER were considered as the population of the study. Convenience sampling was used and 250 participants participated. Menopause rating scale (MRS) was used for data collection through interview.

Results: The findings of the study revealed that the 98.4% of women had perceived health problems of menopause among which 48% had moderate health problems, 19% had severe health problems and 31% had mild health problems and the severity of perceived symptoms had shown significant association with family income, parity and age at menopause at p<0.05 level.

Conclusion: The above findings reveal the importance of the need for implementation of health promotion measures for women during the period of peri-menopause.

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INTRODUCTION

Menopause is the unique stage of female reproductive life cycle. In present era with increased life expectancy, women are likely to face long periods of menopause accounting to approximately third of her life. Menopause is perhaps the most striking event occurring during the middle age in women and represents the end of reproductive life. About 467 million postmenopausal women are present worldwide and are expected to rise to 1200 million by 2030 (WHO, 1996). Menopause is a stage when the menstrual cycle stops for longer than 12 months and there is a drop in the levels of estrogen and progesterone hormone in the female (Dasgupta, 2009) (World Health Organisation, 1996). The average age of menopause in the western countries is 51 years while in India is 47.5 years according to Indian Menopause Society (IMS) and normal range for the occurrence is between the ages of 45 -55 years old. The atresia of the oocytes in the ovaries causes an elevation in circulating FSH and LH levels as there are decreased number oocytes responding to these hormones to produce estrogen leads to the peri-menopausal symptoms in vasomotor, vaginal, psychomotor, psychological, urinary and other systems (Susan, 1998). The study conducted to evaluate the post-menopausal symptoms using modified Menopause

rating scale (MRS) among the middle aged women in Kuching, Sarawak reported that the most prevalent symptoms were joint and muscular comfort (80%), physical and mental exhaustion(67%), and sleeping problems (55.2%) followed by symptoms of hot flushes, sweating, irritability, dryness of vagina, anxiety, and depressive mood. Other complaints noted were sexual problems, bladder problems and heart discomfort (Rahman, 2010). More than 50% women experiences mood swings as they approach menopause. According to Harvard study of mood cycle, the women who entered peri-menopause were two times likely to develop depressive symptoms than women of same age who were not in the peri-menopausal period (Cohen, 2016). Menopause had been found as an important factor influencing the level of Health related Quality of life in the study conducted in rural China (Liu Kuo, 2014). So it is imperative for the health professionals to identify the magnitude of post-menopausal health problems to help the women to understand and manage the menopause associated health problems to lead a physically, psychologically productive life. Hence this study is proposed to assess the perceived health problems of menopause among the postmenopausal women and explore the factors associated with menopausal health problems.

MATERIALS AND METHODS

Description of Research tools: The tools used in the study

- Socio-demographic proforma.
- Menopause Rating Scale (MRS) developed byBerlin Center for Epidemiology and Health Research, 1990.

Socio-demographic proforma consisted of domicile, education, occupation, family income, marital status, parity, age at menarche, age at marriage, age at last child birth, age at menopause, history use of oral contraceptives, duration of symptoms and associated chronic illness

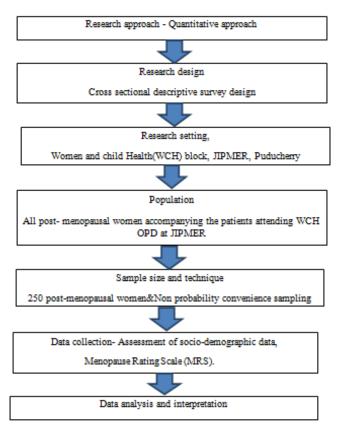


Figure 1. Schematic representation of research design

Menopause Rating Scale (MRS): It is a 11 item questionnaire in Rating scale format which was originally developed by in berlin center for epidemiology and health research Germany. The MRS is a 11 item scale to assess health problems related to menopause based on the symptoms perceived by the women during perimenopause. The scaled score for each health problem ranges from score of 0 to 4 based on intensity. Higher scores indicate higher perceived health problems.

Data Analysis

Data collected from the subjects were transformed into excel master sheet and analyzed using statistical package for social sciences (SPSS) version-20. Descriptive (frequency and percentage) and inferential statistics (chi-square test) were used in the study. All statistical analysis was carried out at a 5% level of significance.

Ethical Clearance

Permission was obtained from the Institute (JIPMER) Ethical Committee, Human studies. Informed consent was obtained from every participant after a brief explanation regarding the study by the researchers. Confidentiality was maintained during the data collection.

RESULTS AND DISCUSSION

The study results showed that the majority 70.4% of women was from rural area, 62%were uneducated, 50% unemployed, 74.4% were married, 94.4% were multi para, 99% not used oral contraceptives in lifetimes. The participants mean age at menopause was 47.7 years, mean age 55.27, and mean age at menarche 18, mean age at last child birth 27.6 and mean duration since menopause 7.4.

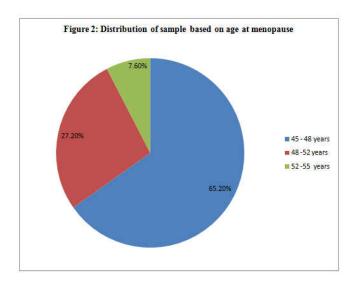


Table 1. Distribution of Samples based on Severity of perceived health problems of menopause N=250

Degree of severity	Frequency	Percentage
None	4	2%
Mild	77	31%
Moderate	121	48%
Severe	48	19%
Very severe	0	0

Table 2. Prevalence of Health problems of Menopause

Health problems	Prevalence
Hot flushes, sweating	40%
Heart Discomfort	18.2%
Sleep problems	50.4%
Depressive mood	29.6%
Irritability	37%
Anxiety	29.7%
Physical and Mental exhaustion	65.9%
Sexual problems	27.6%
Bladder problems	12.8%
Dryness of vagina	35.9%
Joint and Muscular discomfort	78.1%

Over all 33% of menopausal related health problems were perceived by majority of the women indicates that most of the participants had MRS score of 15 and experienced moderate level of menopausal related health problems is consistent with the prospective study conducted to find the major health problem of mid – life women and to assess the prevalence of menopausal symptoms among 500 women at Nepal medical college teaching hospital, Katmandu which stated that the 20% respondent had MRS score more than 16. Comparison of perceived health problems of menopause with socio demographic variables had shown significant association with family income, parity and age at menopause at p<0.05. The findings of the study states that 98% of women were having perceived health problems of menopause and mean age at

menopause was 47.7 years with SD 2.6 which is consistent with the observation study carried out to assess the menopausal symptoms in peri-menopause and post menopause women in rural areas of Maharashtra, India which revealed that Mean age at Menopause as 48.9+_3.2. Further the associations of perceived health problems of menopause with socio demographic variables were found significant with family income, parity and age at menopause at p<0.05 which indicates that the age at menopause is an important determinant of health status of women during the post-menopausal period.

Conclusion

Menopause affects every woman differently since the age at menopause and during the transition period of peri-menopause. Some women do not have symptoms during and after menopause whereas more than 90% of women experienced symptoms of menopause with varying degree of intensity. Study on prevalence of symptoms and determinants of menopause will help the health professionals to prepare the women to phase the transition to menopause and to manage the symptoms to a great extent there by the quality of life can be enhanced.

Conflict of Interest: I declare that there is no conflict of interest present in the study.

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