

AN EXPLORATORY STUDY TO EVALUATE THE PREVALENCE AND FACTORS AFFECTING POST-MENOPAUSAL SYMPTOMS AMONG WOMEN OF SELECTED VILLAGES, SALEM.

Mrs.Guna Priya. G M.Sc.(Nursing)

(Assistant Professor, Department of Medical-Surgical Nursing, Dharan Nursing College, Salem, Tamil Nadu.)

Mrs. Shenbagavalli. E M.Sc.(Nursing)

(Associate Professor, Department of Psychiatric Nursing, PGP college of Nursing and Research, Namakkal, Tamil Nadu.)

ABSTRACT:

Background: When the ovaries stop producing reproductive hormones for at least a year in a row, the menstrual periods permanently terminate, a condition known as menopause occurs. **Objectives:** to evaluate the current prevalence and factors affecting severity of post-menopausal symptoms among women. **Methods and materials:** A quantitative study with descriptive exploratory research design was utilized. 50 women between the age of 40-60yr were preferred by non-probability purposive sampling technique. The data collected by using the self-structured demographic variables and Standardized menopause rating scale for exploring the factors influencing the severity of symptoms. **Result:** The study resulted that almost all the women present with postmenopausal symptoms where as severe symptoms are seen among 17-18% of women. The factors which influence most for the severity of symptom are age, parity and economical status and substance abuse. **Conclusion:** hence it can be concluded that advance age of achieving menopause, multiparity and economic status and substance abuse makes the postmenopausal women suffer more with severity of menopausal symptoms.

KEYWORDS: Prevalence, Postmenopausal Symptoms, Exploratory Study, Menopause, Post-menopausal women.

INTRODUCTION:

Menopause, along with pregnancy and childbirth, is one of the most significant life transitions for women. In terms of not having to worry about monthly periods, the difficult reproductive process, feeling more liberated, or having children, many women view this as a positive development.

Some women view this as a very bad shift that negatively impacts their everyday activities, quality of life.

The word menopause has extracted from the Greek word 'Meno' means month and 'Pausis' means stoppage. Hence the word menopause means the permanent cessation of menstruation.² According to a study estimate around 1.2 billion women worldwide will enter in to the phase of menopause by the year 2030. Along with that 85% of

women experience menopause related symptoms. The common presentation of menopause are hot flushes (40 %), night sweats (17 %), insomnia (16 %), vaginal dryness (13 %), mood disorders (12 %), and weight gain (12 %).³ the statistics of level of menopausal symptoms shows that majority of women shows mild symptoms which can be managed with alternative therapies like yoga, teaching etc.

Every person needs enough sleep to live a life free from sickness. Unfortunately, many women experience issues like sleep disorders as a result of menopausal hormonal disturbances. A recent study published in 2022 found that between 16% to 47% of peri menopausal women experienced sleep disturbances. Hormone replacement treatment, regrettably, offers no assistance in this regard. As a result, the author has discussed the advantages of self-hypnosis, exercise, meditation, and good sleep hygiene.

In addition, physical issues include joint and muscular discomfort, excessive fatigue, and the emergence of co-morbidities including diabetes and memory loss.

Since the contributing factors may differ depending on an individual's ethnicity and geographic region, the researcher intends to investigate the elements in order to help generalize the findings across a wide population. This is the primary reason this subject was selected for further research.

OBJECTIVES

- 1) To identify the prevalence of the Prevalence and Factors affecting Post-Menopausal Symptoms among women.
- 2) To rule out association between post-menopausal symptoms with selected demographic variables

METHODS AND MATERIALS:

Study design:

This study has adopted quantitative descriptive exploratory research design. The study was conducted at selected villages, Salem.

Study period and study population:

The study was conducted for 4 weeks. The population were all the women in the age group of 40-60 years of selected villages, Salem.

Sampling method and sample size:

Non probability purposive sampling technique was used. A total of 50 post-menopausal women in age group of 40-60 years were selected.

Inclusion criteria:

- Post-menopausal women with age 40 to 60years
- Willing to participate in the study.
- Able to communicate and answer questions.

Exclusion criteria:

- Patients who had previous history of psychosis or mental disorders.

- Patients who are sick and receiving hormone replacement therapy.

TOOLS FOR DATA COLLECTION:

For the purpose of present study, the following instruments were developed by the researcher. The tools were prepared with help of literature review, published and unpublished articles, suggestions and recommendation from experts. The content validity was established by obtaining opinion from 5 experts (2 medical experts and 3 nursing experts)

The tool consists of: -

Tool I- Structured interview questionnaire:

It was developed based on recent literature review. It included the following parts: It has total 9 questions such as age, marital status, economical status, residence, type of family, number of pregnancy, taking any hormonal pills, history of any substance abuse, has any bad obstetrical history

Tool 2: standardized rating scale on Severity of post-menopausal symptoms. It has 12 items. They are hot flushes, sweating, heart discomfort, sleep problems, depressed mood, physical and mental exhaustion, sexual problems, bladder problems, change in body weight, change in breast, hair loss, dryness of vagina, joint and muscular discomfort. All the tools were based on interview to collect the data.

DATA COLLECTION PROCEDURE

The study was conducted in selected villages at Salem district Tamilnadu. Initially the researcher was got written permission from the concern village authority after explaining the procedure and purpose of the study. Then the researcher was selected the samples by using non probability purposive sampling techniques. The sample size was 50 were selected based on sampling criteria. The researcher was explained the purpose and nature of the study and informed consent was obtained from the samples. After that pre-test was conducted by using structured questionnaire for the selected samples. Responses for the questionnaire and the was obtained.

RESULTS

After data collection, all data was checked and verified to ensure its correctness and managed for consistency to minimize error.

I. FREQUENCY DISTRIBUTION OF DEMOGRAPHIC VARIABLES OF PATIENTS

It deals with evaluation of the distribution of demographic variables of patients.

The demographic variables were age, marital status, economical status, type of family, number of pregnancy, taking any hormonal pills, history of any substance abuse, has any bad obstetrical history.

N=50

Demographic Variables	Frequency	Percentage
Age		
40-45	10	20
46-50	17	34
51-55	15	30
55-60	8	16
Marital Status		
Single	7	14
Married	43	86
Economic Status		
>50,000 per annum	29	58
<50,000 per annum	21	42
Family Type		
Nuclear	22	44
Joint	28	56
No. of Pregnancy		
<2	34	68
>2	16	32
none		
Hormonal Pills intake		
yes	14	28
no	36	72
Substance Abuse		
Yes	26	52
no	24	48
Bad Obstetrical History		
Yes	19	38
No	31	62

- 10(20%) of samples aged 40 to 45 years, 17(34%) of samples were in 46 to 50 years, 15(30%) of samples were in 51-55 years, 8 (16%) of samples were in 55-60 years.
- 29(58%) samples income was > 50,000 per annum and 21(42%) samples income was < 50,000 per annum.
- 26 (52%) samples had substance abuse, 24 (48%) samples had no substance abuse.

II: Levels of Severity of Postmenopausal Symptoms

Section III: data on severity of menopausal symptom shows that almost all the symptoms of menopause were mild – moderate among the women except the problem of hair loss which is severely detected.

Table-3: Data on severity of menopausal symptom N=200

Symptoms	Score	Frequency	Percentage
Hot flushes, sweating	None	4	8
	Mild	23	46
	Moderate	12	24
	Severe	11	22
Heart discomfort	None	5	10
	Mild	23	46
	Moderate	18	36
	Severe	4	8
Sleep problems	None	6	12
	Mild	26	52
	Moderate	15	30
	Severe	3	6
Depressed Mood	None	2	4
	Mild	14	28
	Moderate	25	50
	Severe	9	18
Physical and mental exhaustion	None	4	8
	Mild	12	24
	Moderate	27	54
	Severe	7	14
Sexual Problems	None	3	6
	Mild	23	46
	Moderate	15	30
	Severe	9	18
Bladder problems	None	5	10
	Mild	19	38
	Moderate	13	26
	Severe	13	26
Change In Weight Body	None	2	4
	Mild	12	24
	Moderate	24	48
	Severe	12	24
Changes in breast	None	3	6
	Mild	15	30
	Moderate	26	52
	Severe	6	12
Hair loss	None	0	0
	Mild	5	10
	Moderate	19	38
	Severe	26	52

Dryness of vagina	None	2	4
	Mild	13	26
	Moderate	25	50
	Severe	10	20
Joint and muscular Discomfort	None	3	6
	Mild	15	30
	Moderate	22	44
	Severe	10	20

DISCUSSION:

Similar studies by authors such as Ganapathy T et al. (2018), who found that 97.14% of women reported experiencing five or more symptoms, corroborate some of the findings of the current study. The most common problem identified by the author is a physical issue linked to a lower quality of life.¹¹ Similarly, Senthivel S et al. (2018) discovered that among women in their 50s and 60s, the prevalence of the traditional menopausal symptoms—such as hot flashes, night sweats, and dry vagina—was 75.3%, 58%, and 30.7%, respectively. The results indicate that there is variation in the quality of life among women experiencing menopausal symptoms. Specifically, there was a statistically significant correlation between the Quality of Life scores and educational status, socio-economic status, and marital status ($P < 0.05$).

CONCLUSION:

Thus, it can be inferred from the description above that postmenopausal symptoms are rather common in women between the ages of 40 and 60, however they range in severity from mild to moderate. However, given the prevalence of >97%, it is obvious that patients require urgent medical attention because these symptoms have a direct detrimental impact on their social relationships, quality of life, and sleep patterns, among other things. Since menopause is one of the biggest transitions a woman experiences in her life, it is everyone's duty to respect and encourage women at this time. Family members, including spouses and kids, must be informed of the current circumstances in order to assist and understand women during this time of transition and to respect their physical and emotional needs.

ACKNOWLEDGEMENT

I want to convey my heartiest appreciation to my advisor for his cordial guidance and valuable suggestions. I also thank all the patients. I would like to thank Mr. C. Thangavel for his unwavering support throughout the study. I also thank my child Baby. T. Janani for her prayers and cooperation for me throughout this experience.

CONFLICT OF INTEREST:

None

REFERENCES

1. Minkin MJ. Menopause: Hormones, lifestyle, and optimizing aging. *Obstetrics and Gynecology Clinics*. 2019; 46(3): 501-14.

2. Khatoon A, Husain S, Husain S, Hussain S. An overview of menopausal symptoms using the menopause rating scale in a tertiary care center. *Journal of Mid-life Health*. 2018; 9(3):150.
3. Sussman M, Trocio J, Best C, Mirkin S, Bushmakina AG, Yood R, Friedman M, Menzin J, Louie M. Prevalence of menopausal symptoms among mid-life women: findings from electronic medical records. *BMC Women's Health*. 2015;15(1):1-5.
4. Indian women facing early menopause: Survey. *The Hindu*. 2016:13
5. Kalhan M, Singhanian K, Choudhary P, Verma S, Kaushal P, Singh T. Prevalence of menopausal symptoms and its effect on quality of life among rural middle aged women (40–60 Years) of Haryana, India. *International Journal of Applied and Basic Medical Research*. 2020; 10(3):183.
6. Pallikadavath S, Ogollah R, Singh A, Dean T, Dewey A, Stones W. Natural menopause among women below 50 years in India: A population-based study. *The Indian Journal of Medical Research*. 2016; 144(3): 366.
7. Whiteley J, DiBonaventura MD, Wagner JS, Alvir J, Shah S. The impact of menopausal symptoms on quality of life, productivity, and economic outcomes. *Journal of Women's Health*. 2013; 22(11):983-90.
8. Velasco-Téllez C, Cortés-Bonilla M, Ortiz-Luna G, Sánchez-Zelayeta L, Méndez-Serrano H, Salazar-Jiménez C, Zavala-García A, Sánchez-Cevallos A. Quality of life and menopause. In *Quality of Life-Biopsychosocial Perspectives 2020*. IntechOpen.
9. Monteleone P, Mascagni G, Giannini A, Genazzani AR, Simoncini T. Symptoms of menopause—global prevalence, physiology and implications. *Nature Reviews Endocrinology*. 2018; 14(4): 199-215.
10. Mohanty SS, Mohanty PK. Obesity as potential breast cancer risk factor for postmenopausal women. *Genes and Diseases*. 2021; 8(2):117-23.
11. Ganapathy T, Al Furaikh SS. Health-related quality of life among menopausal women. *Archives of Medicine and Health Sciences*. 2018; 6(1): 16.
12. Singh P, Vyas S, Vallabh V, Nautiyal R, Srivastava A, Semwal J. A Study to Assess the Prevalence and Factors Affecting Menopausal Symptoms among Middle-Aged Females in the Garhwal Region of Uttarakhand. *J Midlife Health*. 2023 Oct-Dec;14(4):237-245. doi: 10.4103/jmh.jmh_198_22. Epub 2024 Feb 23. PMID: 38504740; PMCID: PMC10946681.
13. Barati, M., Akbari-Heidari, H., Samadi-Yaghin, E., Jenabi, E., Jormand, H., & Kamyari, N. (2021). The factors associated with the quality of life among postmenopausal women. *BMC women's health*, 21(1), 208. <https://doi.org/10.1186/s12905-021-01361-x>