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Menopausal Symptom Experience Among Middle Aged Women in Pokhara

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ABSTRACT

Introduction: Menopause is the point when a woman no longer has menstrual periods. At this stage, the ovaries have stopped releasing eggs and producing most of their estrogen. Menopause is diagnosed when a woman has gone without a period for 12 consecutive months. The aim of the study is to assess the menopausal symptoms experience among middle aged women.

Methods: A descriptive cross-sectional study was carried out among purposively selected 100 menopausal women in Fulbari-11, Pokhara using structured interview schedule. Data was analyzed using descriptive statistics (mean, median, standard deviation, frequency) and Inferential statistics (chi-square) in SPSS version 20. Data were presented in tabular form.

Results: The findings revealed that 83 percent had mild symptoms experience. The most menopausal women experienced physical, psychological and sexual symptoms. The physical problems included as joint and muscular symptoms (80%), dryness of vagina (72%), bladder problems (60%), hot flushes (47%) and heart discomfort (43%). Similarly, the common psychological problems included anxiety (79%) physical and mental exhaustion (72%), irritability (70%), depressive mood (67%), and sleeping problems (61%) and sexual problems (37%). Menopausal symptom experience is statistically significant to source of information and type of family.

Conclusions: The conclusion of this study is more than 60 percent menopausal women experienced menopausal symptoms. Joint and muscular problems, and psychological problems were the significant problems. Sexual problem is the least.

Keywords: *Menopause, symptoms experience, middle aged women*

INTRODUCTION

Menopause is a natural process of women's life in which the reproductive capacity ceases due to the age-related gradual decline of primordial ovarian follicles. It is the permanent cessation of menstruation and is defined as 12-month amenorrhea after the final menstruation. The age at which natural menopause occurs is between the ages of 45 and 55 for women worldwide. Women spend a significant part of their lives in the post-menopausal state.¹

The middle-aged women population is increasing rapidly. women in the transition from midlife to elder status faces various and complex health problems, and are drawing medical attention due to an increased risk of lowered quality of elderly life caused by inappropriate management.² Menopause is the permanent cessation of menstruation resulting from the loss of follicular activity of the ovaries. It 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, the two most important hormones in the female body.³

Although menopause is not an illness, mortality and morbidity rates are increased in menopausal women. The effects of this physiological phenomenon cause vaginal changes (drying up and thinning of the mucus, dyspareunia, and an increase the chance of vaginal infection), bones' thinning (decrease in length and density of the bones and osteoporosis, behavioral changes (perspiration, irritable, depression and low concentration), urinary changes (feeling pain or soreness during urination, urine leakage with cough, sneeze, and laugh), increase of body fat content around the waist (weight increase), and low desire for sexual activity.⁴

Parity, body mass index, age at menarche, socioeconomic factors, genetic factors and smoking affects menopause. Vasomotor symptoms are linked with sleep disturbances and decreased general well-being.⁵ A descriptive cross-sectional study among 2000 women aged over 40 years revealed that Joint pain 736 (36.8%), hot flushes 584 (29.2%), irregular bleeding 582 (29.1%) were the most common experienced symptoms of menopause.⁶

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METHODS

A descriptive cross sectional study design was used among to identify the menopausal symptoms experience among purposively selected 100 middle aged women of 40-60 years in the selected community of Pokhara-11, Fulbari, Kaski. The available middle aged women who gave written informed consent were included in the study. Data was collected through face to face interview by using valid tool adopted from ZEG Berlin Website ⁹ from 2019/05/24 to 2019/06/8 and analyzed by using SPSS version 20.

RESULTS

Socio-demographic information

This study showed three out of five (60%) respondents were 50-55 years of age, four out of five (79%) were currently married, 91 percent lived in joint family and majority (82%) were house wives. Half of the sample population had completed primary level education. Around one third (30%) respondents were had no source of information about menopause and had information from health care providers, and around one fourth (24%) from mass media and only 16 percent from health care provider (Table1).

Reproductive information

The mean age at menarche, marriage, menopause and number of live births are 14.62, 19.46, 49.18 and 2.95 respectively. The standard deviation of menarche, marriage, menopause and number of live births are 1.53, 2.21, 2.33 and 1.56 respectively. More than three fifth (77%) had use hormonal contraceptives after menopause and one fifth (20%) used hormonal replacement therapy before menopause. Majority (87%) was multigravida, two percent were no pregnancy and only 11 percent were grand multi. Around four out of five (78%) had 1-2 number of live births. Most of the respondents (95%) had natural type of menopause (Table 2).

Menopausal symptom experience

The symptoms experienced by the respondents was as joint and muscular symptoms (80%), anxiety (79%), dryness of vagina and physical and mental exhaustion (72%), irritability (70%), depressive mood (67%), sleeping problems (61%), bladder problems (60%), hot flushes (47%), heart discomfort (43%) and sexual problems (37%) (Table 3a).

The present study found that more than (83%) had mild symptoms experience regarding menopause and 17% had moderate symptoms experience regarding menopause. No respondents had experience severe and extremely severe symptoms (Table 3b).

Association of symptom experience and respondent's information

It was revealed that there was significant association of symptom experience with type of family (p=0.022) and source of information about menopause (p=0.043) (Table 4).

Table 1: Socio-demographic information of the respondents

Variables	Frequency	Percentage
Age (in years)		
40-49	53	53
50-60	47	47
Marital Status		
Currently Married	79	79
Widow	21	21
Type of family		
Joint	91	91
Nuclear	9	9
Occupation		
Not Employed	82	82
Self Employed	18	18
Educational Status		
Primary Education	50	50
Informal Education	24	24
No Education	18	18
Secondary Education	8	8
Source of information about menopause		
No source of Information	30	30
Relatives and Friends	30	30
Mass Media	24	24
Health care providers	16	16

Table 2: Reproductive information of respondents

Variables	Frequency	Percentage
Mean Age at menarche (14.62 ± 1.53)		
Mean Age at marriage (19.46 ± 2.21)		
Mean Age at menopause (49.18 ± 2.33)		
Use of hormonal contraceptives before menopause	23	23
Use of hormonal replacement therapy after menopause	20	20
Number of pregnancy		
No pregnancy	2	2
Multigravida	87	87
Grand multi	11	11
Number of live births		
More than 2	50	50
1-2	48	48
0	2	2
Type of menopause		
Natural	95	95
Surgical	5	5

Table 3a: Distribution of respondents according to menopausal symptoms experience

Menopausal symptoms	Frequency	Percentage
Joint and muscular	86	86
Anxiety	79	79
Physical and mental exhaustion	72	72
Dryness of vagina	72	72
Irritability	70	70
Depressive mood	67	67
Sleeping problems	61	61
Bladder problems	60	60
Hot flushes	47	47
Heart discomfort	43	43
Sexual problems	37	37

Table 3b: Distribution of respondents according to severity of symptoms experience

Experience severity	Frequency	Percentage
Mild (11-22)	83	83
Moderate (22-44)	17	17

Table 4: Association of Socio-demographic Characteristics with Severity of Symptoms Experience

Variables	Symptoms experience		χ^2	P-value
	Mild	Moderate		
	(%)	(%)		
Type of family				
Nuclear	5	4	5.279	0.022*
Joint	78	13		
Source of information about menopause				
No source of information	27	3	8.133	0.043*
Health Care Providers	39	7		
Mass Media	17	7		

^{*}p < 0.05 indicates significance

DISCUSSION

 but contrast with finding in Nepal (28.1%). 10,9,13,7 The dryness of vagina as menopausal symptom experience was 72 percent of this study. Other studies found inconsistent regarding this symptom as 32 %, 30.7%, 13% and 9.3% respectively. 6,16,15,12 Likewise, seven out of ten (70%) menopausal women expressed irritability as symptom experience. It was supported by findings in West Bangal (77.2%)² and Riyadh (71%)¹⁰ but not congruent with other studies which showed as 48%, 39.8%, and 24.9% respectively. 6,11,13,7 More than two third (67%) experienced depressive mood in this study which was about double of findings of Rahman et al. (37.3%) in Bangladesh¹³ and six times more than findings of Susman and et al (12%).¹⁵ In Ethiopia, Yiesma and et al found depressive mood (46.%). 11 Sixty one percent of the respondents experienced sleep problems in this study which was congruent with the findings in West Bangal (64.2%).² It was high in study of Riyadh (71%).¹⁰ Other studies showed the fewer findings than this which included (54.40%), 13 (52.2%), 9 night sweats: 30.7% 16, 17 %¹⁵, insomnia (16 %), ¹⁵ and difficulty falling asleep 49.6%.¹¹ The findings on bladder problems (60%) was likely consistent with the finding of Satpathy in Odisha which was 72 percent.⁶ Nearly half (47%) of the respondents experienced hot flushes as menopausal symptom. The other studies reported hot flushes as 34 to 75 percent: 34.2%, 40%, 56%, 65.9% and 75.3% respectively. 13, 15,6,11,16 The least symptom experience was as sexual problems (37%). Other studies also revealed the least response on this item - sexual problems (33%) and 31.8% respectively. 10, 12 This might be due to unwillingness of respondents on sexual matter.

The findings on significant association of symptoms experience source of information about menopause (p=0.043) of this study is consistent with the findings in Iran that showed association between menopausal symptoms experience and source of information (p=0.00).⁴

CONCLUSION

The conclusion of this study is that the menopausal women experienced physical, psychological and sexual problems. The physical problems included as joint and muscular symptoms (80%), dryness of vagina (72%), bladder problems (60%), hot flushes (47%) and heart discomfort (43%). Similarly, the common psychological problems included anxiety (79%) physical and mental exhaustion (72%), irritability (70%), depressive mood (67%), and sleeping problems (61%) and sexual problems (37%). The findings on significant association of symptoms experience source of information about menopause (p=0.043) of this study is consistent with the findings in Iran that showed association between menopausal symptoms experience and source of information (p=0.00).

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