



**PERCEPTION ABOUT MENOPAUSAL SYMPTOMS AND QUALITY OF LIFE OF
POSTMENOPAUSAL WOMEN**

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Article Received on 12/06/2024

Article Revised on 03/07/2024

Article Accepted on 23/07/2024

ABSTRACTS

Women may experience different menopausal and postmenopausal symptoms ranging from mild to severe. In the present study, a cross-sectional survey of 145 women in their postmenopausal years was conducted. A pretested questionnaire was given to a random population of postmenopausal women to record various postmenopausal symptoms and the coping strategies adopted by them. **Backgrounds:** Menopause occur in women lives as a part of normal aging the median age of menopause in India is between 46.2 years much less than their western counter part 51 years.^[1] And one third of each women life is naturally during her menopause^[2] menopause brings psychological and biological changes that effects women health. Menopausal health demand is a priority in Indian scenario due to growing population of Menopausal women. **Methods:** This cross sectional study was conducted on 145 women who attended gynaecology OPD for post menopausal Symptoms in October 2019 to October 2020 in Hindu Rao Medical College New Delhi in accordance with pretested Questionnaires consisting of socio-demographic data and Greene climacteric scale. **Results:** Most of the patients enrolled in the study group were between 56-65 years of age 51.8% (n=75). Prevalence of menopausal symptoms among ladies was hot flashes (97.23%), night sweats (80%), Irritability (89%) and loss of interest in sex (67%). **Conclusions:** For some women the climacteric Symptoms are bothersome and varying proportions of women seek medical advice due to symptoms related to the menopause. It is a challenging task for health care providers to improve the counselling and management of the menopausal women.

KEYWORDS: Greene climacteric scale, Menopause, menopausal symptoms, postmenopausal women.

INTRODUCTIONS

Menopause is defined as spontaneous cessation of menstruation for at least one year. Mean age of menopause 51 years. However very little information is available about the age at menopause in Indian women.^{[3],[4],[5]} During menopause 85% of women report experiencing symptoms of varying types and severity.^[6] The menopausal symptom complex including vasomotor dysfunction (hot flushes, night sweats) sleep disturbance, depression, vaginal dryness, diminished sexual function, chronic fatigue, fibromyalgia, irritability, palpitationscrying spell, a natural history of symptoms can be described including the presence, severity and time since menopause^{[6][7]} for example vasomotor symptoms generally begin 2 years before menopause peak one year after menopause and then diminish over next 10 years.^[8] post-menopausal women becomes more prone to certain diseases like osteoporosis^[9] cardio

vascular disease.^[10] Several cross-sectional and longitudinal cohort studies^{[11][12]} suggested that post menopause is associated with high level of somatic symptoms leading to decrease well being in women.

METHODOLOGY

This cross sectional study was conducted in the department of obstetrics and gynaecology Hindu Rao Medical College New Delhi. 145 women were enrolled in study after attending gynae OPD for postmenopausal complaints, who fulfilled the inclusion criterion i.e women who had attained menopause and were willing to participate in the study by giving there written informed consent. Women with induced menopause severely sick and heart diseases did not give consent for participation in the study was excluded. After inclusion in the study eligible participants were briefed about the purpose of study there after interview was conducted in accordance

with pretested semi- structural schedule. The instruments designed for this study consists of three parts

Part 1: Socio demographics, life style data, gynaecological history and past medical history.

Part 2: Questions related to menopausal experiences (including Greene climacteric scale), source of knowledge, health care seeking behaviour and self assessment of health.

Part 3: Attitude related questions including modified Attitude towards menopause scale (ATM)

RESULTS

Table 1: Distribution of Patients on the basis of age.

Age groups (in years)	Frequency	Percentage
<45*	10	6.8
45-55	55	37.9
56-65	75	51.8
≥65	5	3.5
Total	145	100

*Premature menopause

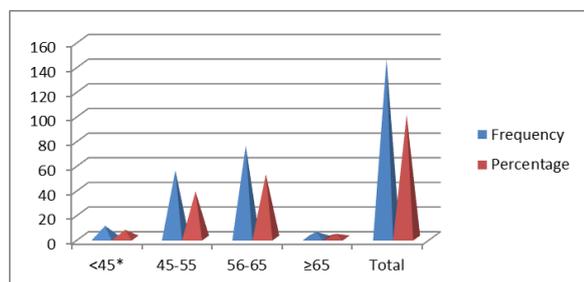


Figure 1: Distribution of Patients on the basis of age.

As evident from table 1 and figure 1 majority of the post menopausal women of study population were in the age group 56 to 65 years (51.8%). Followed by 45 to 55 age group (37.9%) and ten of study participant (6.8%) enter menopause pre-maturally.

Table 2: Distribution of respondents according to marital status.

Marital status	Frequency	Percentage
Married	104	71.7
Unmarried	2	1.3
Divorced/Separated	4	2.7
Widow	35	24.3
Total	145	100

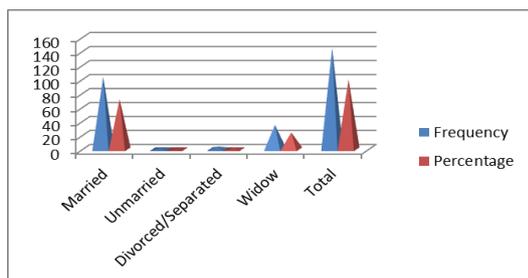


Figure 2: Distribution of respondents according to marital status.

As evident from table 2 and figure 2 out of 145 women 104 were married 35 widows, 4 divorced and 2 were unmarried.

Table 3: Distribution of respondents according to physical activity.

Physical activity	Frequency	Percentage
Sedentary	78	53.8
Moderate	43	29.7
Heavy	24	16.5
Total	145	100

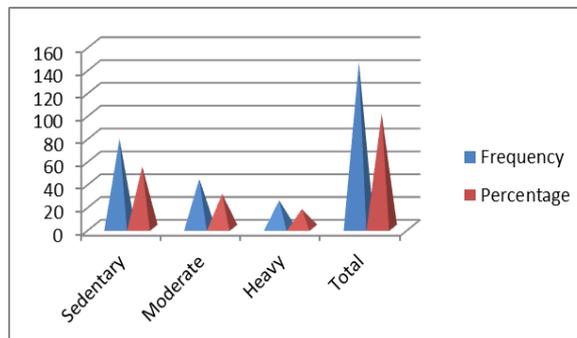


Figure 3: Distribution of respondents according to physical activity.

As evident from table 3 and figure 3 16.5 % (24) of the respondents were engaged in heavy physical activity, 29.7% (43) participants engaged in Moderate physical activity while 53.8% (78) of the participants had sedentary life style.

Table 4: Distribution of age at menarche of respondents.

Age at menarche	Frequency	Percentage
≤8	3	2.1
9-12	99	68.4
13-15	43	29.5
Total	145	100

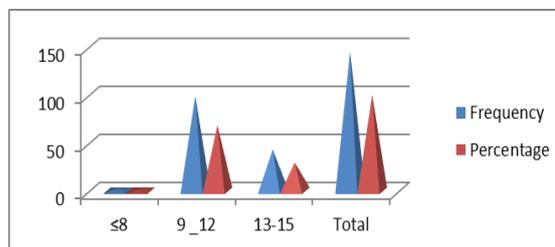


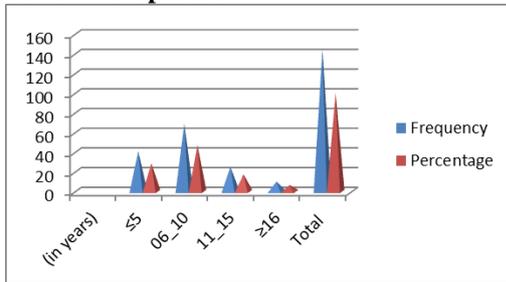
Figure 4: Distribution of age at menarche of respondents.

As depicted in Table 4 and figure 4, most of the study participants (≥ 69%) reported to attained menarche at the age of 9 to 12. Only 3 women reported to have menarche before age of 8 years while 43(29.5%) attained it after 15 years of age.

Table 5: Distribution of respondents as per the duration of menopause.

Duration since last LMP (in years)	Frequency	Percentage
≤5	41	28.7
6-10	69	47.3
11-15	25	17.5
≥16	10	6.5
Total	145	100

Table 5: Distribution of respondents as per the duration of menopause.



As evident from table 5 and figure 5 28.7% (41) of participants had attained menopause with LMP ≤ 5 years

Table 7: Distribution of study respondents according to Greene climacteric scale scores and percentages per symptom.

	SYMPTOMS REPORTED	FREQUENCY			
		Nil	Mild	Moderate	Severe
		N (%)*	N (%)*	N (%)*	N (%)*
1.	Heart beating quickly or strongly	55(37.93)	31(21.37)	26(17.93)	33(22.75)
2.	Feeling tense or nervous	46(31.72)	42(28.86)	26(17.93)	31(21.37)
3.	Difficulty in sleeping	9(6.20)	13(8.86)	63(43.44)	60(41.37)
4.	Excitable	72(49.65)	44(30.34)	19(13.10)	10(6.89)
5.	Attacks of anxiety, panic	45(31.03)	33(22.75)	29(20.00)	38(26.20)
6.	Difficulty in concentrating	38(26.26)	44(30.34)	42(28.96)	21(14.48)
7.	Feeling tired or lacking in energy	10(6.89)	31(21.37)	54(37.24)	50(34.48)
8.	Feeling unhappy or depressed	13(8.96)	25(17.24)	43(29.65)	64(44.13)
9.	Crying spells	16(11.03)	37(25.51)	50(34.48)	42(28.96)
10.	Irritability	15(10.35)	46(31.72)	35(24.13)	49(33.79)
11.	Feeling dizzy or faint	5(3.45)	47(32.41)	45(31.03)	48(33.10)
12.	Headaches	17(11.72)	22(15.17)	43(29.65)	63(43.44)
13.	Muscle and joint pains	3(2.06)	20(13.79)	60(41.37)	62(42.75)
14.	Loss of feeling in hands or feet	19(13.10)	51(35.17)	32(22.06)	43(29.65)
15.	Hot flushes	4(2.75)	39(26.89)	49(33.79)	53(36.55)
16.	Sweating at night	29(20.00)	38(26.20)	43(29.65)	35(24.13)
17.	Loss of interest in sex	49(33.79)	24(16.55)	41(28.27)	31(21.37)
18.	loss of interest in most things	38(26.26)	29(20.00)	46(31.72)	32(22.06)

Table 8: Distribution of study participants according to health check-ups for menopausal symptoms.

Health checkup	Frequency	Percentage
Yes	61	42.05
No	84	57.93

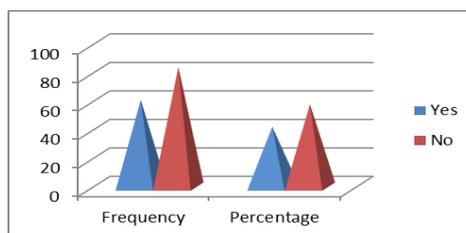


Figure 8: Distribution of study participants according to health check-ups for menopausal symptoms.

and 6.5%^[10] participants had attained menopause with LMP ≥ 16 years.

Table 6: Distribution of respondents as per various symptoms.

Symptom Reported By Respondants	RESPONSE	
	Yes (%)	No (%)
Pain during intercourse (n=104)*	30(28.8)	74(71.2)
Vaginal dryness (n=145)	22(15.1)	123(84.9)
Backache (n=145)	129(88.9)	16(11.1)
Urinary problems(n=145)	19 (18.8)	126(81.2)
Memory problems(n=145)	132(91.1)	13(8.9)

*only those who were married, staying with husbands and reported themselves to be sexually active were asked for this symptom.

The above table 6 shows the symptoms after menopause. The response of the patient shows that 132 women witnessed memory problem, 129 have Backache issue 30 women feel pain during intercourse, 22 experiences vaginal dryness and 19 faces Urinary Problems.

The above table 8 and figure 8 revealed that among all patients 42.05% (61) women expressed their menopausal symptoms and allied issues frankly. Whereas 57.93% (84) women hesitate and feeling shyness while expressing their problems.

MATERIALS AND METHODS

A cross-sectional study was conducted in Hindu Rao Medical College New Delhi among 145 postmenopausal women from October 2019 to October 2020a pretested, self-designed, semi structural, interview based, oral questionnaire was used. The Statistical Package for Social Sciences software Version 21.0 (SPSS) was used for analysis.

RESULTS

Most of the women experiences menopause at age group 56-65 years 51.8% (n=75).women attained menarche at 9-12 years of age 68.4% (n=99). A total of 145 postmenopausal women experienced at least one or more menopausal symptoms like hot flushes, night sweats, Backache, Memory problems, Urinary problems, Pain during intercourse and vaginal dryness. Menopause poses big challenge to the healthy aging of women. Majority of the women suffer from vasomotor problems like hot flushes 97.23%(n=141), night sweats, 79.98% (n=116), Loss of interest in sex 66.19% (n=96), sleep disturbances 93.67% (n=136), muscle or joint pain 97.91% (n=142), Feeling dizzy or faint 96.54% (n=140), depression 91.02% (n=132) and anxiety.

DISCUSSION

The present study results showed that the participants may experiences one or more menopausal symptoms like hot flashes (97.23%), feeling dizzy or faint (96.54%) and muscle & joint pain (97.91%). The other common problems were Feeling tired or lacking in energy (93%), Difficulty in sleeping (94%), Feeling unhappy or depressed (91%), night sweats (80%), headaches (88%), loss of interest in most things (74%), loss of interest in sex (67%), loss of feeling in hands or feet (87%), Irritability (89%), Feeling tense or nervous (68%), Attacks of anxiety or panic (69%), Difficulty in concentrating (74%), Crying spells (89%), Excitable (50%) and Heart beating quickly or strongly (62%) similar study was conducted by peeyananjarasri et al among middle aged women to evaluate menopausal symptoms and quality of life. It was a cross sectional study among 270 women aged 45 to 65 years who attended gynaecology OPD for menopausal symptoms. The most prevalent symptoms were hot flushes, night sweats and vaginal dryness (36.81, 20.8 and 55.3%) respectively. Another study was conducted by Madhukumar et al (2012, bengaluru), Dutta et al. (2012, Tamil Nadu), in which the prevalence of hot flushes were found to be 55.9%, 60.9% respectively. The major implication of this study is that health workers need to appreciate and become knowledgeable and be aware about menopausal problems and its health hazards. Health workers can impart health education in

community settings regarding menopausal changes and its management. Menopausal clinics are less addressed in our states so these clinics can be setup in different hospitals and trained health workers can do a systematic assessment of menopausal women. Thus menopausal problems can be identified and remedial measures advised. In the present study the long terms effects of menopause like osteoporosis, heart diseases, breast cancer etc could not be assessed.

CONCLUSION

With the increase in life expectancy and hence the population of postmenopausal women, there is a substantial number of health problems of postmenopausal women. In the current scenario, postmenopausal health should be given due importance. Efforts are needed to educate these women to make them aware about various menopausal symptoms. And clear there doubts and fears. This will enable them to recognise these symptoms early seek timely medical intervention for the same and improve quality of life. Mass media should be used to create awareness regarding physical, nutritional, psychosocial and emotional needs of postmenopausal women.

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