

**A STUDY TO IDENTIFY THE MENSTRUAL PROBLEMS AND RELATED PRACTICES
AMONG ADOLESCENT GIRLS IN RURAL SUB HIMALYAN REGION*****Pryanka Gupta**

India.

***Corresponding Author: Pryanka Gupta**

India.

Article Received on 21/01/2023

Article Revised on 11/02/2023

Article Accepted on 01/03/2023

ABSTRACT

Background: Menarche and menstruation are very important aspects of a female's life. Although menstruation is a normal physiological process, adolescent girls have difficulty to handle their menstruation. The main objective of our study was to identify the menstrual problems and their late practices among adolescent girls. **Methodology:** A descriptive survey approach was done. The sample consisted of a total of 350 adolescent girls selected who attended non OBG -OPD in civil hospital Bhawarna and **** which are present in rural subhimalyan region. A questionnaire was then used to collect data regarding background information, menstrual characteristics/problems and related practices. Biophysical measures like height, weight, and body mass index (BMI) were also taken along with the data. **Results:** Most of the adolescent girls in our study had irregular menstruation (25%), 13% had poly menorrhea, 6% had scanty menstruation and only 4% adolescent girls complained of menorrhagia. The majority (79%) among them were experiencing dysmenorrhea during menstruation. The menstrual symptoms which were experienced were abdominal pain (74%), backache (42.9%) and even fainting (8.9%). **Conclusion:** Menstrual problems form a crucial domain of adolescent health. As these problems are unreported, it is highly necessary that adequate attention and care is provided. The consequences of neglect of the menstrual problems result in impaired reproductive as well as sexual health in older women.

KEYWORDS: The main objective of our study was to identify the menstrual problems and their late practices among adolescent girls.

INTRODUCTION

Adolescence is the transitional phase of mental and physical development between childhood and adulthood. It is characterized by extreme hormonal changes. The adolescence has been defined by the World Health Organization as the period between 10–19 years of age, in their second decade of life.^[1] Adolescent girlhood is an important time of identity formation and a period of transition from childhood into womanhood.^[2] It is a period of great challenge to the parents and the child. It is characterized by mental, physical, psychological, and social changes which are critical to wellbeing.^[3] The most striking change in the adolescent girls is the onset of the menstruation. Menstruation is due to normal cyclical hormonal changes in the female, under the control of hypothalamic–pituitary–ovarian axis.^[4] The onset of menstruation in adolescence is an important developmental milestone. Menstruation is evidence of fully developed reproductive ability. The age of onset of menarche is generally between 11 years and 15 years.

After menarche common menstrual abnormalities that the adolescent female may encounter include premenstrual syndrome, prolonged menstrual bleeding, dysmenorrhea and emotional disturbances. 75%

of the girls experience at least some problems associated with menstruation.^[5] A number of studies in India and other parts of the world, show invariably that a large proportion of the adolescent girls experience menstruation related problems. It leads to an increased prevalence of the school absenteeism. This provides evidence for giving proper importance to menstrual problems as a public health problem.^[6] In Mumbai by the Ministry of Health and Family Welfare area district-level house hold and facility survey (2007–2008) was conducted which reported that more than 20% of the women in India had at least one menstruation related problems. Among those women who were included in study have reported menstrual problems in India like 63% reported painful periods, 25% reported irregular periods where as 14% reported scanty bleeding. Among these, 20% of women who have reported various menstrual problems, 22.3% were the adolescent age women. Adolescent women reported menstruation related problems like painful periods in (79.5%), irregular periods in (18.7%) and scanty bleeding in (9.6%) and prolonged bleeding in (7.2%). Some menstruation related problems are much more prevalent among adolescent girls.^[7]

There are various studies conducted regarding menstrual problems. These revealed that the prevalence of menstrual

problems leading to school absenteeism is increasing in India. A study conducted by John et al in Kerala 2010 showed that 70.1% of the adolescent girls had a menstrual problem.^[8]

Menstrual disorders are very common in adolescence and can have significant consequences on their future reproductive health. Premenstrual syndrome, dysmenorrhea and menstrual hygiene are the leading contributors to the burden of disease borne by adolescent girls in India.^[9] This study sought to determine menstruation-related problems among adolescent school girls.

METHODOLOGY

A quantitative approach with the descriptive design was used to identify the menstrual problems, menstrual characteristics, menstruation-related practices among the adolescent girls. The research setting of our study was the adolescent girls attending non OBG-OPD in the civil hospital****. The sample size was 350 students. They were studying in the 9th, 10th, 11th and 12th standards. Proportionate stratified random sampling was used to select adolescent girls.

Data Collection Instruments

The tool used was a questionnaire to identify the menstrual problems, menstrual characteristics, and related practices among the adolescent girls which was developed by the investigators which consisted of three

sections. Section A consisted of socio demo graphic data, Section B consisted of menstrual characteristics and menstrual problems and finally Section C which was about menstruation related practices.

RESULTS

The demo graphic data collected were summarized in Table1. The majority (50.5%) of girls were in the age group of 15 to 16 years of age. Again all of the participants (100%) were from rural area. Most of the adolescent girls (78.6%) were from middle-class family and total of 89.4% were from nuclear family.

Menstrual Problems and Menstruation-related Practices

Results of menstruation related practices identified and menstrual problems were summarized in Table 2 and the Graphs 1 to 4. Most of the adolescent girls had history of irregular menstruation (24%), 12.6% had poly menorrhea, 6.3% suffered from scanty menstruation and only 4% of the adolescent girls had menorrhagia (Graph2). Among the 350 adolescent girls, majority of the girls i.e. 276 (79%) were experiencing dysmenorrhea during their menstruation, Among the 276 adolescent girls who were experiencing dysmenorrhea about 30% had mild, 34.9% had moderate and about 14% had severe degree of dysmenorrhea. Among the 350 girls 259(74%) experienced abdominal pain. Also 150 (42.9%) experienced back ache and only 31(8.9%) of them experienced.

Table 1: Distribution adolescent girls based on demo graphic characteristicsn=350

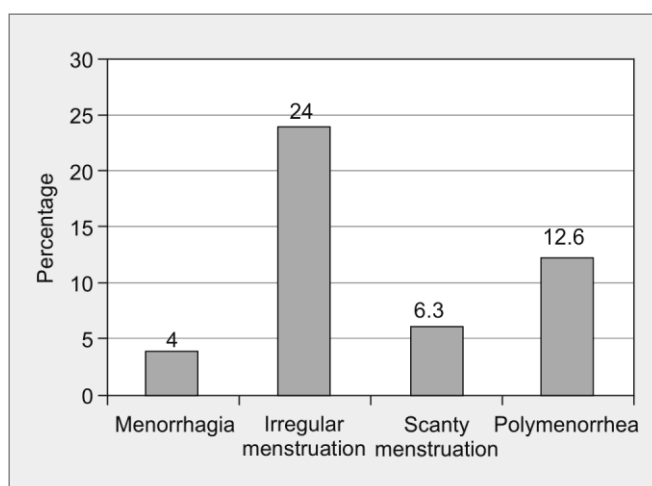
<i>Variables</i>	<i>Frequency (f)</i>	<i>Percentage (%)</i>
<i>Age</i>		
13–14years	150	42.9
15–16years	177	50.5
17years	23	6.6
<i>Religion</i>		
Hindu	307	87.7
Christian	7	2
Muslim	36	10.3
<i>Placeofresidence</i>		
Rural	266	76
Urban	54	24
<i>Socioeconomic status</i>		
Lower	71	20.3
Middle	275	78.6
High	4	1.1
<i>Typeoffamily</i>		
Nuclear	313	89.4
Joint	37	10.6

Table 2: Distribution of adolescent girls according to their hygiene practices during menstruationn=350

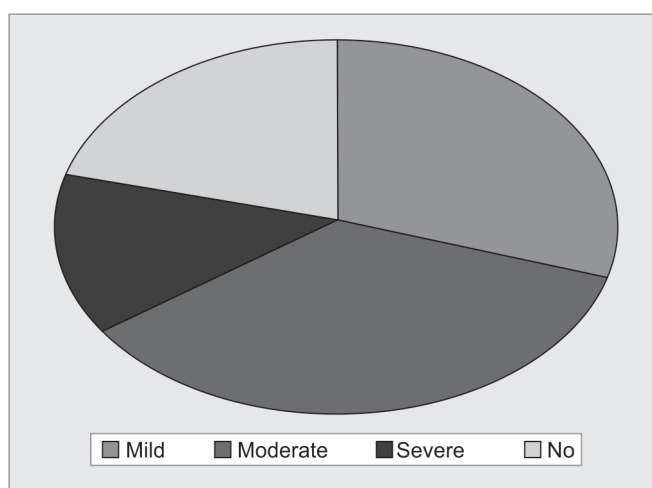
<i>Hygienepractices Bathing</i>	<i>Frequency (f)</i>	<i>Percentage (%)</i>
Onceaday	100	100.0
Twiceaday	243	69.5
Donotbath	0	0.0
<i>Washinggenitalia</i>		
Withsoapandwater	232	66.3

With warm water	114	32.6
With disinfectant solution	4	1.1
<i>Types of absorbent</i>		
	3	0.9
Sanitary pads 217	62	24
	130	37.1
<i>Frequency of changing absorbent</i>	71	20.3
2 times a day	210	60
Thrice a day	113	32.3
4 times a day	23	6.6
More than 4 times	4	1.1

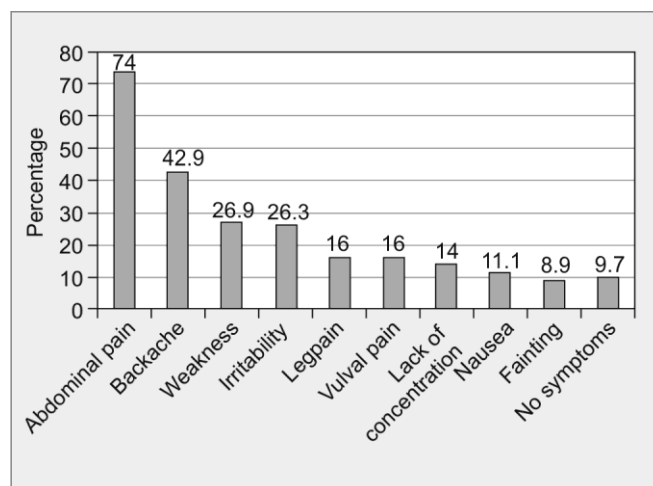
A Study to Identify the Menstrual Problems and Related Practices among Adolescent Girls



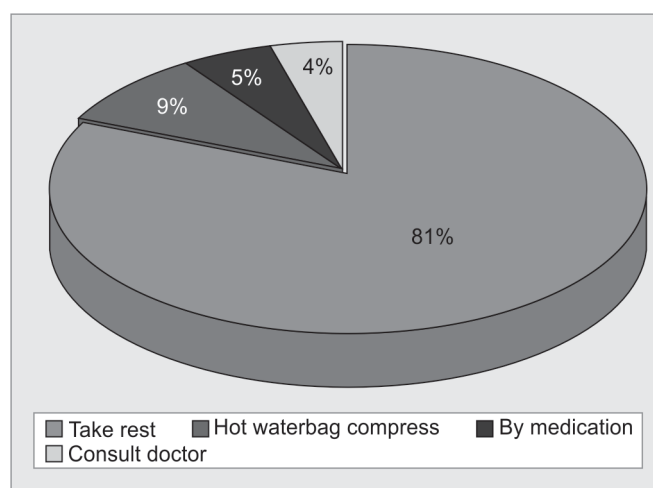
Graph 1: Distribution of subjects—menstrual disorders.



Graph 2: Distribution of subjects—dysmenorrhea.



Graph 3: Distribution of girls—menstrual symptoms.



Graph 4: Distribution of adolescent girls—management of menstrual symptoms.

fainting as menstrual symptoms. Whereas 34 (9.7%) of them had not experienced any of the menstrual Majority adolescent girls 284 (81.1%) managed the menstrual problems by taking rest, 32 (9.1%) took hot water bag compression, 19 (5.4%) took medicines from the medical store and only 15 (4.3%) were consulted the doctor for management of the menstrual problems. Out of 350 adolescent girls, 350(100%) were taking bath once a day, 232 (66.3%) was hed their genitalia with water and soap. Regarding the type of absorbent used among the 350 girls, 217(62%) used sanitary pads and only 3 (0.9%) used cloths. And major-ity.i.e. 210 (60%) changed the absorbent two times daily and 4(1.1%) changed more than four times daily.

DISCUSSION

The study findings revealed that most of the girls had at least one or more than one menstrual problems. Menstrual problems founded in our study were irregular menstruation(24%), poly menorrhea(12.6%), scanty menstruation(6.3%) and menorrhagia(4%) whereas Dysmenorrhea was experienced by 78.9% of adolescent girls and 84% of the girls had one or more premenstrual symptoms. Across-sectional study conducted by John et al at Pathanamthitta Kerala on menstrual problems among

the adolescent girls, showed that 70.1% of adolescent had problems related to their menstruation, of which dysmenorrhea was the most common problem(88.8%) and premenstrual syndromes were present in about 45.8%. The commonest premenstrual syndromes which were noted were head ache (42.5%) and irritability (40%). Other menstrual problems were hypo menorrhea, menorrhagia, oligomenorrhea poly menorrhea, and even menometrorrhagia (11.2%).^[8] In this study, a total of 23% of adolescent girls were having school absent eesmdue to menstrual problems and thad missed school days for one or more days.

Menstruation relate dpracticesasre ported by adolescent girls showed that out of 350 girls 62% girls were using sanitary pads, 37.1% were using both cloths and pads and only 3 (0.9%) girls were using cloths during theme nstruation. Regarding the hygiene practice, 100% adolescent girls took bath once a day. 60% of the adolescent girls changed sanitary pad two times daily. Mass media was found to be the main source of information about menstrual hygiene, followed by their mothers, butalarge majority of girls said they needed much more information.^[10] But in the present study parents as well as girls, were the key sources of

information regarding menstruation. On comparison of the result of the present study in terms of the menstrual hygiene practices with the related literature, it was found that the result of present study are more consistent with the result of the previous study.

CONCLUSION

This study findings throw an insight that every adolescent girl in school have to be screened for menstrual problems. They should be provided health education regarding the menstrual problems and its management. It helps prevent various gynecological and obstetrical complaints that occur in their future life.

REFERENCES

1. World Health Organization(WHO). Adolescent pregnancy—Unmet needs and undone deeds. A review of the literature and programs. Issues in Adolescent Health and Development, WHO, Geneva, 2007.
2. KirkJ, Sommer M. Menstruation and body awareness: critical issues for girls' education. EQUALS, Beyond Access: Gender, Education and Development, 2005 Nov; 15: 4-5.
3. Szilagyi PG. Care of Children with special health care needs. Future Child, 2003; 13(1): 137-151.
4. Guyton A, Hall J. Female physiology before pregnancy and female hormones, and the female hormones. In: Guyton A, HallJ, editors. Textbook of Medical Physiology. Philadelphia, Saunders, 1996; 1017.
5. Lee LK, Chen PCY, Lee KK, Kaur J. Menstruation among adolescent girls in Malaysia: across-sectional school survey. Singapore Med J., 2006 Oct; 47(10): 869-874.
6. StangJ, StoryM. Adolescent growth and development. Guide-lines for Adolescent Nutrition Services, 2005; 1(6).
7. Ministry of health and family welfare, Government of India. District level Household and facility survey, 2007-2008.
8. JohnC. A study of menstrual problem in adolescent girls. IMA Kerala Medical Journal, 2010; 1: 7-10.
9. SharmaM, GuptaS. Menstrual pattern and abnormalities in the high school girls of Dharan: across sectional study in two boarding schools. Nepal Medical College Journal: NMCJ, 2003 Jun; 5(1): 34-36.
10. El-Gilany AH, Badawi K, El-Fedawy S. Menstrual hygiene among adolescent school girls in Mansoura, Egypt. Reproduc-tive Health Matters, 2005 Jan 1; 13(26): 147-152.