Prevalence of Menopausal Symptoms Among Women in Selected Areas of Malappuram District

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ABSTRACT

This research paper presents the methodology employed to investigate the prevalence of menopausal symptoms among women in selected areas of Malappuram District. Utilizing a quantitative evaluative approach, the study adopts a one group pre-test and post-test pre-experimental research design to systematically assess various menopausal symptoms experienced by participants. Demographic variables such as age, marital status, occupation, pregnancies, height, weight, presence of uterine diseases, menopausal status, and age of menopause are considered. A sample size of 86 homemakers is selected using convenient sampling technique, with a majority falling within the age range of 40-50. The findings reveal the prevalence and severity of menopausal symptoms including hot flushes, mood swings, sleeplessness, cervical dryness, urinary problems, menstrual changes, weight gain, lack of concentration, and pain on extremities among women in the study area.The findings reveal the prevalence and severity of menopausal symptoms among women in the study area. Specifically, 23.84% of participants reported experiencing menopausal symptoms, with 45.45% reporting the presence of hot flushes, 38.64% reporting mood swings, 34.09% reporting sleeplessness, 23.86% reporting cervical dryness, and 30.68% reporting menstrual changes. Weight gain was reported by 30.68% of participants, lack of concentration by 27.27%, and pain on extremities by 52.27%.

Keywords: Menopausal symptoms, prevalence,Women

INTRODUCTION

Menopause is a significant physiological event in a woman's life, marking the cessation of reproductive capacity. The transition into menopause can be accompanied by a variety of symptoms and health-related issues that can affect a woman's overall well-being. The prevalence of menopausal symptoms varies across different geographic regions and populations, influenced by a range of factors including genetics, lifestyle, and socio demographic characteristics. Understanding the prevalence and specific nature of menopausal symptoms in a particular geographic area is crucial for effective healthcare planning and interventions.

Background of the study

For most women, menopause is marked by the end of monthly menstruation (also known as a menstrual

period or 'period') due to loss of ovarian follicular function. This means that the ovaries stop releasing eggs for fertilisation. The regularity and length of the menstrual cycle varies across a woman's reproductive life span, but the age at which natural menopause occurs is generally between 45 and 55 years for women worldwide. Natural menopause is deemed to have occurred after 12 consecutive months without menstruation for which there is no other obvious physiological or pathological cause and in the absence of clinical intervention.

Some women experience menopause earlier (before 40 years of age). This 'premature menopause' may be because of certain chromosomal abnormalities, autoimmune disorders, or other unknown causes. Several studies have explored the menopausal experience in different regions, shedding light on how symptoms such as hot flashes, night sweats, mood disturbances, and musculoskeletal complaints can significantly impact a woman's quality of life. However, such studies are often conducted in broader geographical contexts and may not account for the potential variations in menopausal symptoms based on location, culture, and healthcare access.

Need and significance of the study

Women may not know that symptoms they experience are related to menopause, or that there are counselling and treatment options that can help alleviate discomfort. Those experiencing menopausal symptoms may feel embarrassed or ashamed to draw attention to their experiences and ask for support.

The data by national health institute ,the most common symptoms were hot flashes (87.4%), night sweats (66.6%), insomnia/difficulty sleeping (60.1%), forgetfulness (49.5%), mood changes (48.3%), and decreased interest in sex (44.7%), all of which were reported by more than 40% of women who were experiencing symptoms.

Menopausal symptoms experienced by women are known to affect their quality-of-life. The symptoms experienced at menopause are quite variable and their etiology is found to be multifactorial. This study was hence done to assess the pattern and severity of menopausal symptoms and to find out the factors associated with these symptoms

REVIEW OF LITERATURE

A study was conducted to evaluate the occurrence and intensity of menopausal symptoms, taking into account the length of one's relationship, its nature and one's assessment of it. The study included 200 women between the ages of 45 and 68 years. Women were divided into three groups depending on the experience related to menopause: premenopause (46 respondents), perimenopause (75 respondents), and postmenopause (79 respondents). The study used a survey of self-design, the "Women's Health" Questionnaire (WHQ) .Most menopausal symptoms including those of the greatest severity are experienced by women in perimenopausal and postmenopausal phases, but one's own relationship's assessment is the lowest in postmenopausal women. In this group of women, relevant and significant relations between the dimensions of the quality of the relationship and the menopausal symptoms are the most numerous. The most essential assessment was the one relating to intimacy its poor evaluation is accompanied by higher intensity of experienced depression symptoms, somatic symptoms, and disorders of memory and concentration, sex and sleep, and also the sum of menopausal symptoms is higher. In all three groups, no significant differences in the severity of menopausal symptoms were observed between women in marital and cohabiting relationships.

An observational, cross sectional study was carried out in rural women (n=117) from the Varanasi area with natural menopause to evaluate menopausal symptoms in women above the age of 40, as well as to evaluate the correlation of age on these symptoms. Materials and Methods: A crossectional assessment by interviewing regarding the menopausal complaints in the following 40-44(n=27), 45- 50(n=30) and above 50 (n =60) years age groups. Menstrual rating scale (MRS) was administered to all the women forming the sample. Results: Mean age at menopause was 47.35 years. Mean number of menopausal symptoms in three age groups were as (mean±SD)10.53±7.33, 7.70± 6.76 and14.50±10.77 respectively, which varied significantly (F=4.86, df=2, 87, P=0.009). The study reveal, varying nature of symptoms with age and MDSM (Mean Duration since Menopause), with vasomotor symptoms being more prevalent with lesser MDSM and psychological and rheumatic complaints more prevalent with increasing age and MDSM in this region. Conclusion: Such regional studies will help to corroborate data so that health care providers can plan strategies for the middle aged women suffering from these menopausal symptoms.

METHODOLOGY

Research approach: In this present study, by viewing the nature of the problem and objectives, the researcher adopted a quantitative evaluative approach.

Research design: Descriptive survey design is used in this study.

Variables: Research variables and demographic variables are implied in this study.

Research variable: Menopausal symptoms are research variables under this study.

Demographic variables: Age, marital status, number of pregnancies, height in cm, weight in kg, uterine diseases, status of menopause, age of menopause are comes under demographic variable.

Setting of the study: The research study setting will be selected wards of mankada grama panchayath

Population: The population selected in this study are women aged between 40 and above

Sample and sampling technique: Convenient sampling technique will used by the researcher

Sample size" Sample size of the present study will be 86 homemakers

Criteria for sample selection
Inclusion criteria:
- women in the age group of 40years and above
- Those who are willing to participate in this study
- Those who comprehend Malayalam language

Exclusion criteria:
- Those who are not willing to participate
- Women who are on medical or surgical treatment for menopausal symptoms

Tool/instrument

Tool 1:

- Part A: Demographic Proforma
- Part B: Structured questionnaire regarding menopausal symptoms

**Technique: Self reporting**

Plan for data Collection.

Permission will be obtained from institutional head concerned authority. Demographic proforma and Structured questionnaire regarding menopausal symptoms
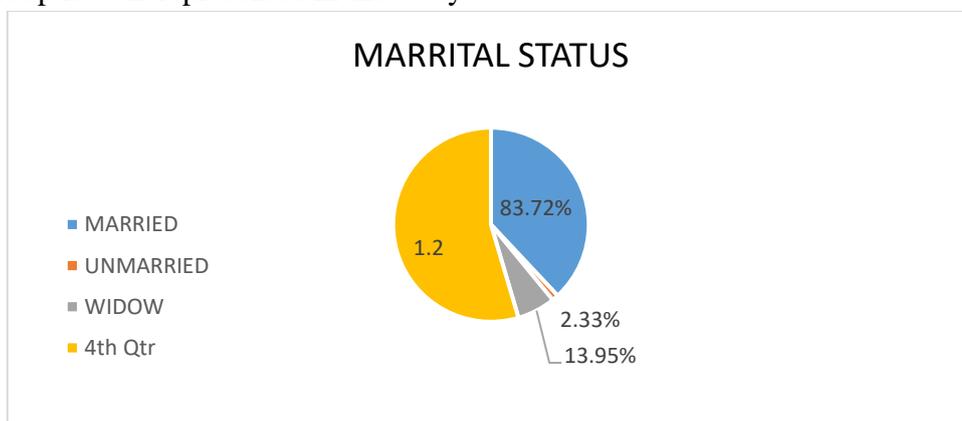
Plan for data analysis

The data obtained were plan to be analysed on the basis of the objectives of the study by using descriptive and inferential statistics.
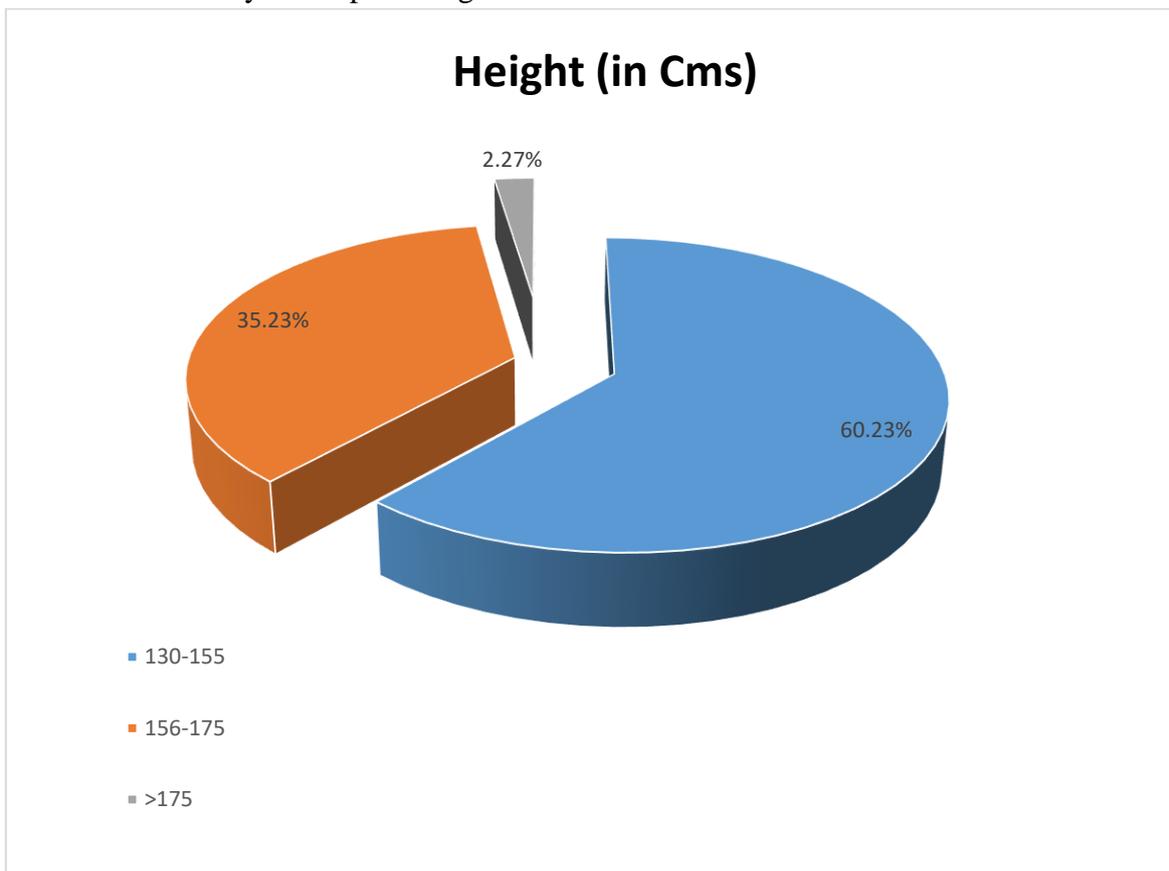
DATA ANALYSIS

DEMOGRAPHIC DATA
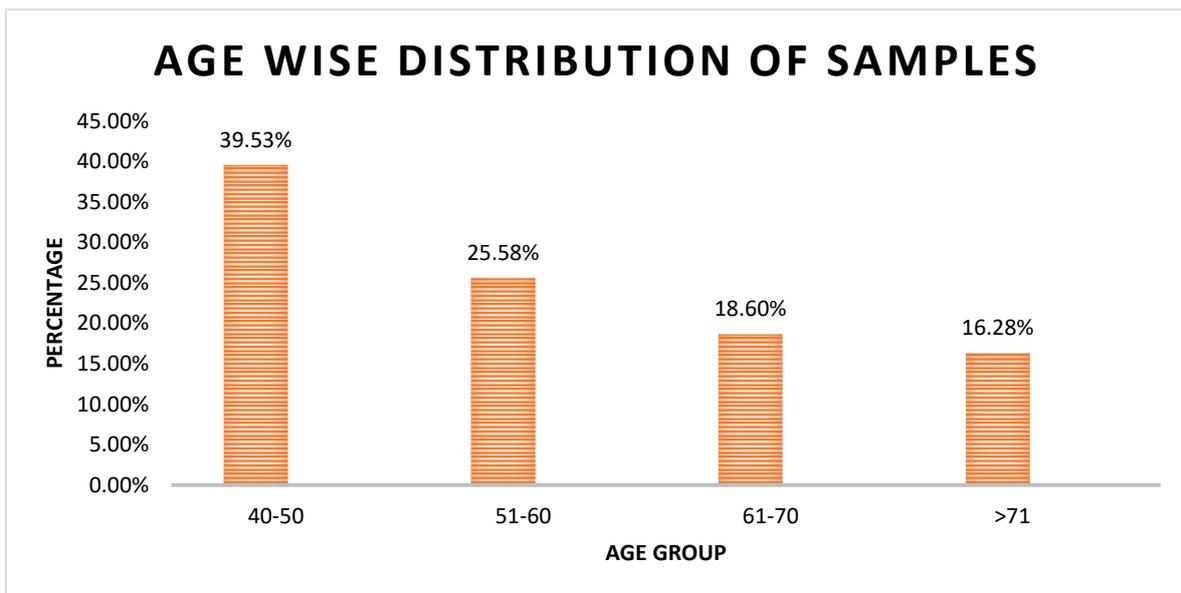
Inference: The majority (39.53%)of the sampled women fall within the age range of 40-50, indicating that this age group is well-represented in the study.

Inference: Most of the sampled women are married (83.72%) suggesting that marital status could be a significant factor in the study of menopausal symptoms.

Distribution of Samples Based on Gravida
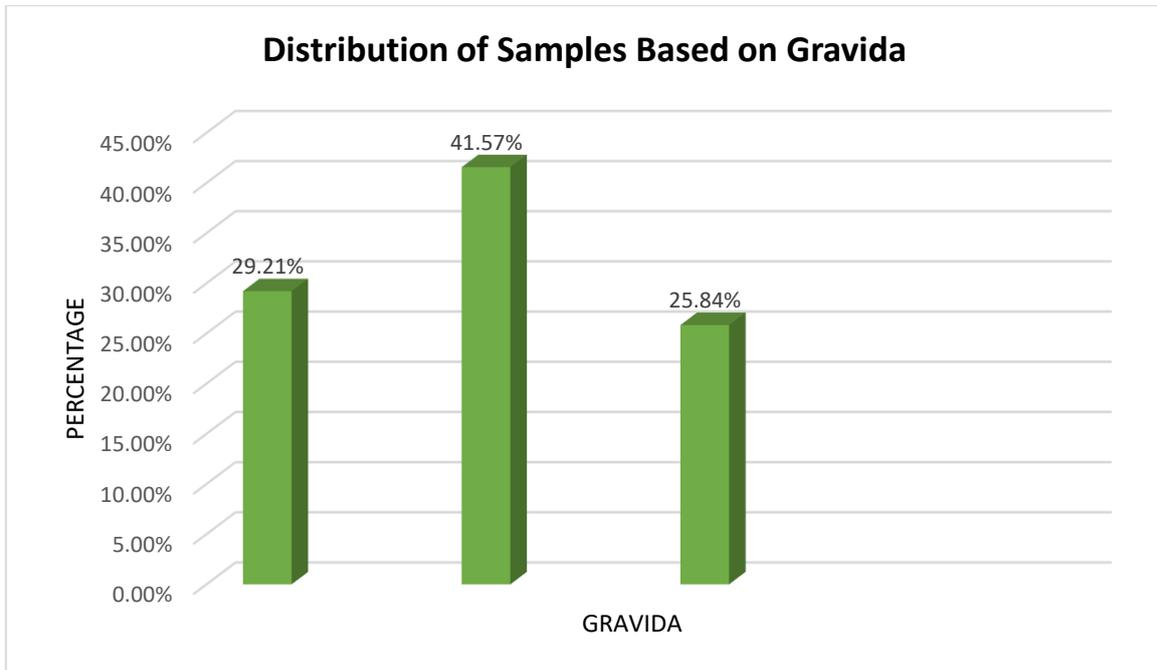
Inferences: The majority of (41.57%)samples fall into the category of Gravida 3-5. Gravida 0-2 and Gravida >5 have relatively lower percentages.

Height (in Cms)

Inference: Most(60.23%) samples have a height in the range of 130-155 cm. Only a small (2,27%percentage of samples have a height greater than 175 cm.

Distribution of Samples Based on Body Weight (in Kilograms)

Body Weight Range	Frequency	Percentage
40-50	13	14.77%
51-60	31	35.23%
61-70	29	32.95%
71-80	13	14.77%

Inferences:The majority(35.23%) of samples fall within the body weight range of 51-70 kg. The percentage distribution is relatively balanced across the different weight ranges.

Presence of Gynaecological Diseases

Presence of Gynaecological Diseases	Frequency	Percentage
Yes	2	2.27%
No	84	97.73%

Inferences: The vast majority of samples (97.73%) do not have gynaecological diseases.

Attainment of Menopause

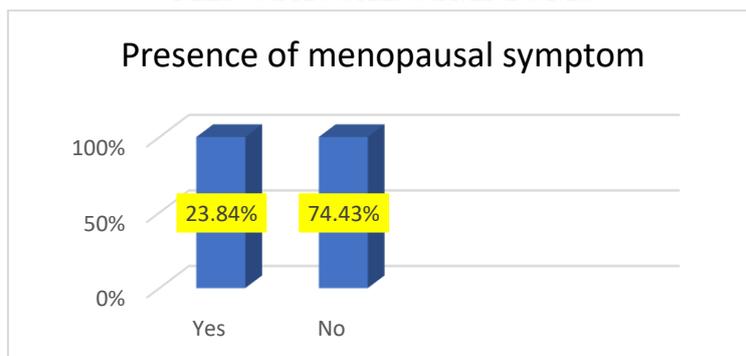| Attainment of Menopause	Frequency	Percentage
Yes	66	76.74%
No	20	23.26%

Inferences: A significant percentage of samples have attained menopause (76.74%).

Age of Attainment of Menopause

Age of Attainment of Menopause	Frequency	Percentage
40-50	57	66.28%
51-60	7	8.14%
No	22	25.58%

Inferences: The majority of women attained menopause between the ages of 40-50 (66.28%).

MENOPAUSAL SYMPTOMS

Inferences:A relatively lower percentage of samples report the presence of menopausal symptoms (23.84%

Table 10: Presence of Hot Flush

Presence of Hot Flush	Frequency	Percentage
Not Present	40	45.45%
Mild	23	26.14%
Moderate	23	26.14%
Severe	0	0%

Inferences:Hot flushes are predominantly not present 40 (45.45%) in samples.

Presence of Mood Swings

Presence of Mood Swings	Frequency	Percentage
No	30	34.09%
Mild	34	38.64%
Moderate	17	19.32%
Severe	1	1.14%

Inferences:A significant percentage of samples report the presence of mood swings, with a higher proportion being mild (38.64)

Presence of Sleeplessness
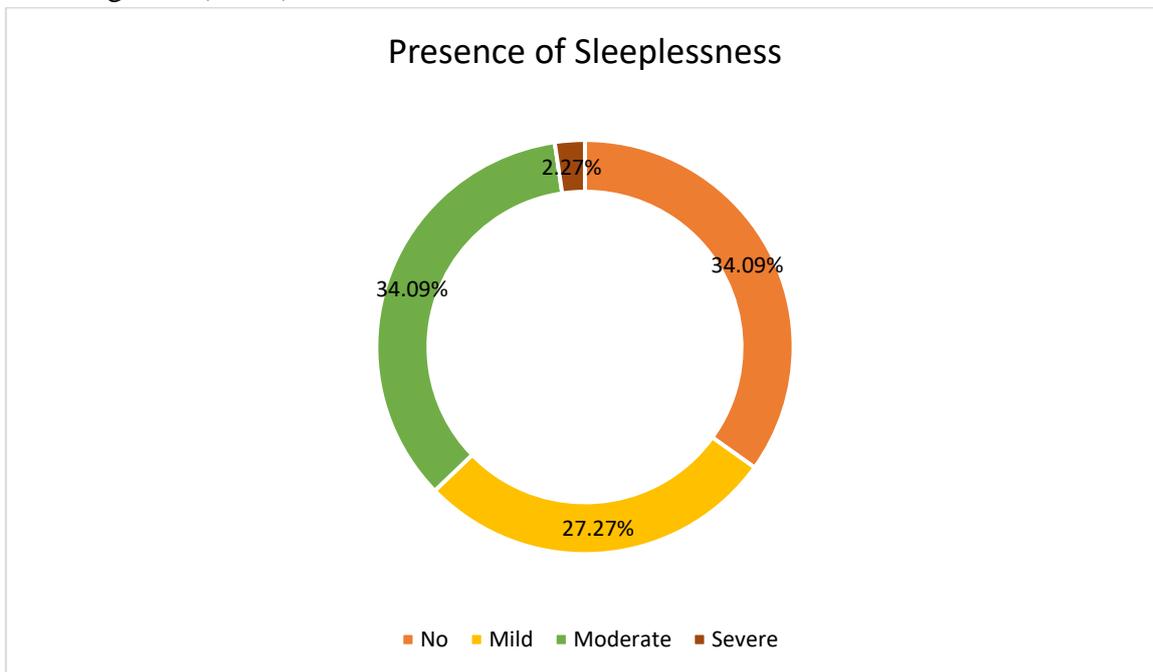
Inferences:Sleeplessness is reported by a considerable percentage of samples, with a notable proportion being moderate (34.09%).

Presence of Cervical Dryness

Cervical Dryness	Frequency	Percentage
Mild	21	23.86%
Moderate	15	17.05%
Severe	10	11.36%

Cervical Dryness	Frequency	Percentage
No	40	45.45%

Inferences:A significant number of samples report the presence of cervical dryness, with a variety of severity levels and which is absent in 40 (45.45%) samples.

Presence of Urinary Problems

Presence of Urinary Problems	Frequency	Percentage
No	38	43.18%
Mild	25	28.41%
Moderate	23	26.14%
Severe	0	0%

Inferences: The majority of samples do not report severe urinary problems (43.18%).

Presence of Menstrual Changes

Presence of Menstrual Changes	Frequency	Percentage
No	31	35.23%
Mild	27	30.68%
Moderate	24	27.27%
Severe	4	4.55%

Inferences: Menstrual changes are reported by a considerable percentage of samples, with a noticeable proportion being mild (30.68%).

WEIGHT GAIN
- No 40.91%
- Mild 30.68%
- Moderate 23.86%
- Severe 2.27%
- (26.13%)
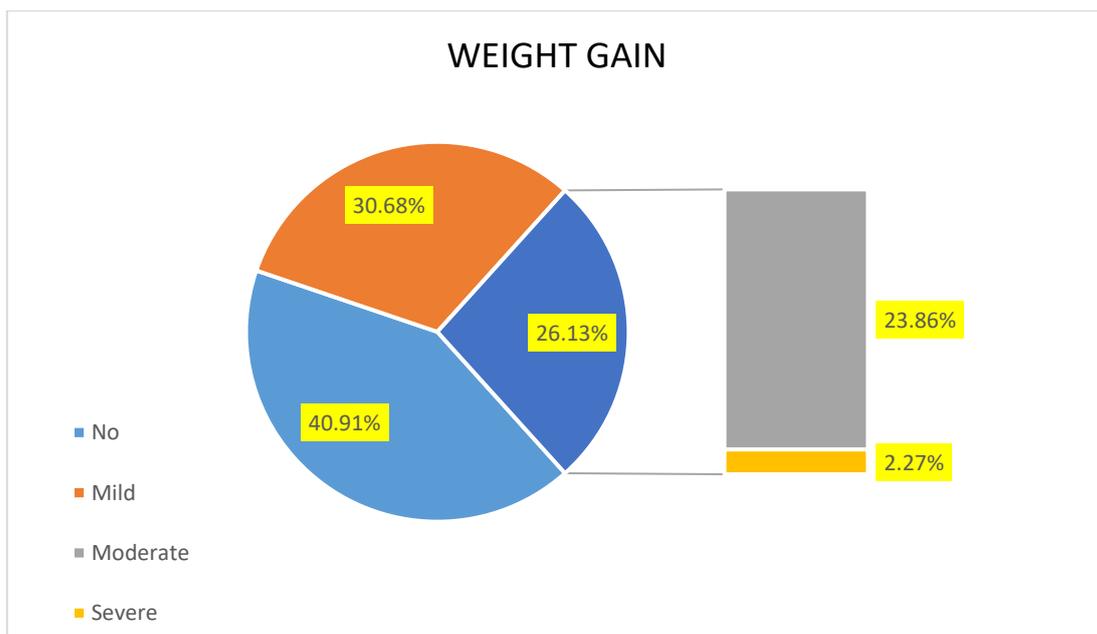
Inferences: Weight gain is reported by a significant percentage of samples, with a higher proportion being mild (30.68%).

Presence of Lack of Concentration

Lack of Concentration	Frequency	Percentage
No	43	48.86%
Mild	24	27.27%
Moderate	17	19.32%
Severe	2	2.27%

Inferences:A considerable percentage of samples report the lack of concentration, with the majority being in the no (48.86%) or mild category (27.27%).

Pain on Extremities

Pain on Extremities	Frequency	Percentage
No	0	0%
Mild	33	37.50%
Moderate	46	52.27%
Severe	7	7.95%

Inferences:Pain on extremities is mostly reported as moderate (52.27%).

Any Other Complaints

Any Other Complaints	Frequency	Percentage
Yes	8	9.09%
No	78	88.64%

Inferences:A small percentage of samples report having other complaints (88.64).

RESULTS

PART A - DEMOGRAPHIC CHARACTERISTICS

- The majority (39.53%)of the sampled women fall within the age range of 40-50, indicating that this age group is well-represented in the study
- Most of the sampled women are married (83.72%) suggesting that marital status could be a significant factor in the study of menopausal symptoms.
- The majority of (41.57%)samples fall into the category of Gravida 3-5. Gravida 0-2 and Gravida >5 have relatively lower percentages.
- Most(60.23%) samples have a height in the range of 130-155 cm. Only a small (2,27%percentage of samples have a height greater than 175 cm.
- The majority(35.23%) of samples fall within the body weight range of 51-70 kg. The percentage distribution is relatively balanced across the different weight ranges.
- The vast majority of samples (97.73%) do not have gynaecological diseases.
- A significant percentage of samples have attained menopause (76.74%).
- The majority of women attained menopause between the ages of 40-50 (66.28%).

PART B –MENOPAUSAL SYMPTOMS

- A relatively lower percentage of samples report the presence of menopausal symptoms (23.84%
- Hot flushes are predominantly not present 40 (45.45%) in samples.
- A significant percentage of samples report the presence of mood swings, with a higher proportion being mild (38.64)
- A relatively lower percentage of samples report the presence of menopausal symptoms (23.84%
- A significant number of samples report the presence of cervical dryness, with a variety of severity levels and which is absent in 40 (45.45%) samples.
- The majority of samples do not report severe urinary problems (43.18%).
- Menstrual changes are reported by a considerable percentage of samples, with a noticeable proportion being mild (30.68%).
- Weight gain is reported by a significant percentage of samples, with a higher proportion being mild (30.68%).
- A considerable percentage of samples report the lack of concentration, with the majority being in the no (48.86%) or mild category (27.27%).
- Pain on extremities is mostly reported as moderate (52.27%).
- A small percentage of samples report having other complaints (88.64).

DISCUSSION

Discussion on demographic charcteristics

The study revealed that the following demographic data ,such as ,39.53% of the samples of women fall within the age group of 40-50 years. Among the samples 83.72% of the women are married. 41.57% of the samples fall into the category of Gravida 3-5. Gravida 0-2 and Gravida >5 have relatively lower percentages.60.23% samples have a height in the range of 130-155 cm.35.23% of samples fall within the body weight range of 51-70 kg. The vast majority of samples 97.73% do not have gynaecological diseases.A significant percentage of samples have attained menopause (76.74%).The majority of women attained menopause between the ages of 40-50 (66.28%).

The present study was in tune with the study to assess the prevalence of menopausal symptoms in rural areas of North India. The results that mean age of the participants was 48.5 ± 5.4 years. The prevalence of menopausal symptoms was found to be 81.5%. The most common symptom was joint and muscular discomfort (72.5%), followed by physical and mental exhaustion (70.5%), and hot flushes and sweating (65.5%). Psychological symptoms were reported by 45.2% of the women. The prevalence of severe symptoms was higher in women aged ≥50 years. Menopausal status was significantly associated with the severity of symptoms ($P < 0.05$).

Discussion on menopausal symptoms

The study reveal that relatively lower percentage of samples report the presence of menopausal symptoms (23.84%)Hot flushes are predominantly not present 40 (45.45%) samples. A significant percentage of samples report the presence of mood swings, with a higher proportion being mild (38.64)A relatively lower percentage of samples report the presence of menopausal symptoms (23.84%A significant number of samples report the presence of cervical dryness, with a variety of severity levels and which is absent in 40 (45.45%) samples.The majority of samples do not report severe urinary problems (43.18%).Menstrual changes are reported by a considerable percentage of samples, with a noticeable proportion being mild

(30.68%).Weight gain is reported by a significant percentage of samples, with a higher proportion being mild (30.68%).A considerable percentage of samples report the lack of concentration, with the majority being in the no (48.86%) or mild category (27.27%).Pain on extremities is mostly reported as moderate (52.27%).A small percentage of samples report having other complaints (88.64).

The present study was in tune with the study to identify the prevalence, severity, and importance of symptoms experienced by healthy, middle-aged women and to determine the impact of menopausal status on these characteristics. Methods: The Menopause Symptom List, developed from an extensive literature review and modified based on focus groups with midlife women, was used to measure 42 symptoms. In this cross-sectional, community-based study, women from a midsize city in the Midwest were recruited through a random-digit-dial survey. Participants were 45 to 54 years old, in good general health, and not taking hormone therapy. Participants (n=499) completed telephone interviews that included demographics and the symptom measure. Data were analyzed using descriptive statistics, t tests, and analyses of variance. Results: Participants experienced an average of 17 symptoms, with fatigue, forgetfulness, and mood swings rated most severe. Symptom prevalence and severity differed by menopausal status and by age. For example, vasomotor and vaginal symptoms were most prevalent in late perimenopause (70% and 64%, respectively), whereas fatigue (69%) and forgetfulness (60%) were most prevalent in early perimenopause. Mood swings (4.2 on a 5-point scale) and aches and pains (4.0) were rated most severe overall, followed by fatigue (3.9) and sexual symptoms (3.8). Mood swings, forgetfulness, fatigue, and sexual symptoms were rated most important.

CONCLUSION

In summary, the exploration into the prevalence of menopausal symptoms among women has illuminated the diverse experiences and challenges faced during this natural phase of life. Through a thorough examination of existing research and empirical evidence, it has become apparent that menopausal symptoms manifest uniquely among women, impacting their physical, psychological, and social domains. The insights gleaned from this investigation underscore the importance of acknowledging menopause as a significant life transition, one that warrants tailored support and interventions to address the varied needs of women. By recognizing the prevalence and nature of menopausal symptoms, healthcare professionals can better equip themselves to provide effective care and support to women navigating this stage of life.Furthermore, this inquiry underscores the imperative for continued research and awareness efforts to deepen our understanding of menopause and its implications for women's health and well-being. By fostering open dialogue and comprehensive education, societies can work towards destigmatizing menopause and empowering women to manage their symptoms proactively.

In conclusion, by acknowledging and addressing the prevalence of menopausal symptoms, we can strive towards promoting holistic health and well-being for women as they navigate this natural and significant life transition.

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