ORIGINAL RESEARCH PAPER
Volume - 10 | Issue - 06 | June - 2021 | PRINT ISSN No. 2277 - 8179 | DOI : 10.36106/ijsr
INTERNATIONAL JOURNAL OF SCIENTIFIC RESEARCH

ANALYSIS OF HEALTH PROBLEMS AMONG POST- MENOPAUSAL WOMEN ATTENDING OUTPATIENT DEPARTMENT OF GYNAECOLOGY IN A TERTIARY CARE CENTRE

Gynaecology

Dr. Shanti Snehlata* Assistant Professor, Deptt. of Obs & Gynae, Nalanda Medical College & Hospital, Patna. *Corresponding Author

Dr. (Prof.) Alka Sinha Professor, Deptt. of Obs & Gynae, Nalanda Medical College & Hospital, Patna.

ABSTRACT

Introduction- Menopause is a natural step in ageing process. It is defined as the time of cessation of ovarian function resulting in permanent amenorrhoea. It takes twelve months of amenorrhoea to confirm menopause (Shaw"s textbook of Gynaecology 16th edition). Gynecological disorder in older women differs from those who are younger.

Aims & Objective- To study health problems specially the Gynecological disorders in post- menopausal women coming to GOPD in a tertiary care centre, Nalanda Medical College and Hospital, Patna. The objective of present study is to assess the magnitude of postmenopausal health issues specially Gynaecological problems. The ultimate goal is to improve overall health of postmenopausal females.

Material &Method- A prospective observational study was conducted on Post- menopausal women coming to GOPD in Nalanda Medical College & Hospital Patna from October 2019 to March 2021. Total 200 post- menopausal women were included in the study. Women with surgical menopause or menopause after Radiotherapy and Chemotherapy were excluded from the study. Help of physician was taken for associated medical problems among post menopausal women.

Observation & Result- Among all 24 percent had pelvic organ prolapse, 20 percent women had post-menopausal bleeding. Most common cause of PMB was malignancy that is Cervical Cancer . Recurrent UTI was noted in 14% cases. Stress incontinence was noted in 26% cases. Few women presented with hot flushes, less sleep, irritability, backache, weakness etc.

Conclusion- Menopausal health has been one of the neglected areas in our country and needs timely vital attention as they are at risk of developing various genital malignancies as well as medical disorders like hypertension, diabetes etc. This emphasizes the need for a screening programme for Indian women in our country.

KEYWORDS

Gynae OPD (GOPD), Post-menopausal bleeding (PMB).

INTRODUCTION –

In the present era with increasing life expectancy women spend one third of their life time in Postmenopausal phase of life. It is defined as the time of cessation of ovarian function resulting in permanent amenorrhoea. Gynaecological disorder in older women differs from those who are younger. Disorders peculiar to ageing are pelvic organ prolapse, urinary incontinence, genital infections and malignancies. There is increased incidence of medical problems like hypertention, diabetes,heart disease etc.

AIMS & OBJECTIVE-

To study the pattern of Gynaecological disorders in post- menopausal women coming to GOPD in a tertiary care centre, Nalanda Medical College and Hospital, Patna. The objective of present study is to assess the magnitude of postmenopausal health issues specially Gynaecological problems. The ultimate goal is to improve overall health of postmenopausal females.

MATERIAL &METHOD-

A prospective observational study was conducted on Post-menopausal women coming to GOPD in Nalanda Medical College & Hospital Patna from October 2019 to March 2021. Total 200 post-menopausal women were included in the study. Women with surgical menopause or menopause after Radiotherapy and Chemotherapy were excluded from the study.

OBSERVATION & RESULT-

The average age of menopause was 49.6 years in my study.

Table-1 Showing Urogenital Problems In Post-menopausal Women-

Urogenital Problems	Number	Percentage
Genital Prolapse	48	24
Post-menopausal bleeding	40	20
Recurrent UTI	28	14
Atrophic vaginitis	24	12
Stress incontinence	52	26
Miscellaneous	08	04

Among all 24 percent had pelvic organ prolapse, 20 percent women had post-menopausal bleeding. Most common malignancy was Cervical Cancer . Recurrent UTI was noted in 14% cases. Vaginitis was found in 12% cases(mostly atrophic vaginitis). Stress incontinence was noted in 26% cases. Few women presented with miscellaneous problems like hot flushes, less sleep, irritability, backache, weakness, etc.

Table-2 Showing Co-morbidities In Post Menopausal Women

Co-morbidities	Number	percentage
Hypertention	24	12
Diabetes	18	09
Anaemia	28	14
Respiratory problem	04	02
Thyroid disorder	04	02
Heart problem	02	01

Associated co-morbidities like Hypertension, Diabetes, Anaemia, respiratory problems, Thyroid disorders, heart problems etc were seen. Most common co-morbidity was Hypertension and Diabetes.

Pelvic organ Prolapse, PMB and urogenital infections were most common Gynaecological problems. Urogenital problems in post-menopausal women were different from younger women due to Estrogen and Progesterone deficiency. So their management is more challenging. Post menopausal bleeding is associated with genital malignancies in majority of cases most commonly Cervical cancer. Genital malignancies are more common in post-menopausal women so screening for Cervical cancer is a must. Due to hormonal deficiency Genital prolapse is also common. Surgery is also risky due to associated co-morbidities.

So, Screening of health issues in post- menopausal women, healthy life style and good future planning with health insurance is a must.

CONCLUSION-

Menopausal health has been one of the neglected areas in our country and needs attention as these women are at risk of developing various genital malignancies and also medical disorders like diabetes, hypertension etc. This emphasizes the need for a screening programme for genital malignancy and also screening programme for diabetes, hypertension and other medical disorder in post menopausal women in our country. Genital malignancies are more common in post-menopausal women, so screening for Cervical cancer, healthy life style and good future planning with health insurance is a must.

REFERENCES-

1. Gredmark T, Kvint S, Hovel G, Mattson IA. Histological finding in women with postmenopausal bleeding. Br J Obstet Gynaecol 2001;102:133-6.
2. Singh A, Arora S. The Red Alert post menopausal bleeding. Br J Obstet Gynecol. 2005;10:592-6.
3. Opmeer BC, Van Doom HC, Heintz AP, Burger CW. Improving the diagnostic strategy by accounting for characteristics of women in the diagnostic work up for postmenopausal bleeding. BJOG. 2007;114:51-8.
4. Bharani B, Phatak SR. Feasibility and yield of endometrial biopsy using suction curette device for evaluation of abnormal pre and postmenopausal bleeding. J Obstet Gynaecol India. 2008;58(4):322-6.
5. Okeke TC. An audit of utero-vaginal prolapse in Enugu, Suthest Nigeria. Am J Clini Med Res. 2013;1(1):23-5.
6. Rahim R, Faiz NR. Gynaecological problems in the postmenopausal women. JPMI. 1993;7 (2):28-31.
7. Debnath S, Gita R, Arora R, Rajaram P. A study of gynaecological problems in post menopausal women. J Obstet Gyn Ind. 2004;44:286-9.
8. Carlos RC, Robert L, Br asee Abrishamse PH. Cost effectiveness of saline assisted hysterosonography and office hysteroscopy in evaluation of post menopausal bleeding. Acad Radiole. 2001;8:835-44.
9. Takkar N, Goel P, Dua D, Mohan H. Spectrum of Gynecological disorder in older Indian Women. Asian J Gerontol. 2010;5:69-73.
10. Lee WH, Tan KH, Lee YW. The aetiology of post menopausal bleeding. A study of 163 consecutive cases in Singapore. Singapore Med J. 1995;36(2):164-8.
11. Clinical pathway for the evaluation of postmenopausal bleeding with an emphasis on endometrial cancer detection. Obst Gynae Tosay. 2005;10(10):592-3.