



TO DETERMINE ORAL CONDITIONS AND EMOTIONAL WELL BEING OF POST MENOPAUSAL WOMEN

Dentistry

Kusum Vinti C*

Assistant Professor, MDS, Oral Medicine and Radiology Narayan Medical College and Hospital, Sasaram, Bihar. *Corresponding Author

ABSTRACT

Background: Menopause is a physiologic process that occurs in every woman. While the ovaries cessation of endocrinological activity causes a drop in estrogenic hormone concentration, a number of systemic processes occur in the women's body, resulting in the undesired symptoms observed by women during this period. In addition to the natural aging process of the oral tissues, the changes seen in the oral cavity are caused by post-menopausal women's hormone fluctuations. **Objectives:** To ascertain the oral symptoms in post-menopausal women by clinical examination, to determine their emotional well-being status by using a questionnaire, and to determine their common age range of occurrence of manifestations.

Methods: One hundred and twenty patients who attained menopause were included in this study and categorized into group 1 (n = 30 attained menopause in the past 1 to 5 years), group 2 (n = 30 attained menopause in the past 6 to 10 years). **Results:** Emotional well-being status alterations are greater in group 2 than group 1, and group 2 had more oral condition in group 1 manifestations. **Conclusion:** Women who have experienced menopause for longer than 5 years were more likely to experience oral manifestations and emotional disturbances. This study was an attempt to improve the health of post-menopausal women by improving inter-speciality understanding and collaboration.

KEYWORDS

INTRODUCTION

Women go through a physiological process called menopause.^[1] The World Health Organization describes the term "Menopause" as "the absence of ovarian follicular activity leading to the permanent cessation of menstruation."

The primary reason of oral manifestations is a decrease in estrogen, which immediately results in a vasomotor disturbance, which raises the risk of neurosis, and the various oral symptoms are the consequence of this shift in psychological status.

SAMPLE SIZE CALCULATION

The sample size of 100 was determined

They Have Been Categorized into Two Groups:

Group 1: Menopause history for the past 1–5 years

Group 2: Menopause history for the past 6–10 year Thorough case history and clinical examination of the patient were carried out to find the oral manifestations. The WHQ (Women's Health Questionnaire) was given to each participant and was taken from the Myra et al.^[4] study, 1992. WHQ is a 16-item questionnaire designed to evaluate a woman's short-term well-being.

1. I have lost interest in things - Yes/No
2. I still enjoy the things I used to - Yes/No
3. I have a good appetite - Yes/No
4. I feel like life is not worth living - Yes/No
5. I am more irritable than usual - Yes/No
6. I feel more tired than usual - Yes/No
7. I have headaches - Yes/No
8. I suffer from backaches/pain in my limbs - Yes/No
9. I need to pass urine more frequently than usual - Yes/No
10. I have hot flushes - Yes/No
11. I suffer from night sweats - Yes/No
12. My stomach feels bloated - Yes/No
13. I have difficulty getting off to sleep - Yes/No
14. I am more clumsy than usual - Yes/No
15. My memory is poor - Yes/No
16. I have difficulty concentrating - Yes/No

RESULTS

Based on these results, there was a statistically significant difference seen between the four different time interval periods (p 0.000). In this, group 2 showed higher anxiety scores compared to group 1.

DISCUSSION

Menopause is one of the many stages in a woman's life when hormonal changes make her more susceptible to oral disorders.^[5] Menopause is characterized by a decrease in menstrual flow that happens in the fourth decade of life and is followed by skipped menstruation.^[5] The WHQ has been widely utilized to evaluate the impact on quality-of-life scores of both non-medical interventions (like exercise) and medical interventions (like hormone replacement therapy). However, quality

of life related to oral health is extensively researched in both post-menopausal women and the general population

CONCLUSION

In conclusion, we were able to arrive at different levels of manifestations suffered by post-menopausal women in different age groups, which was attributed to emotional well-being, psycho-social, and psycho-somatic manifestations in relation to the general well-being and with regard to oral manifestation.

REFERENCES

1. Santosh P, Nidhi S, Sumita K, Farzan R, Bharati D, Ashok KP. Oral findings in postmenopausal women attending dental hospital in Western part of India. J Clin Exp Dent 2013;5:e8-12. doi: 10.4317/jced.50928
2. Shigli K, Giri PA. Oral manifestations of menopause. J Basic Clin Reprod Sci 2015;4:4-8
3. Sen S, Sen S, Dutta A, Abhinandan A, Kumar V, Singh AK. Oral manifestation and its management in postmenopausal women: An integrated review. Prz Menopauzalny 2020;19:101-3.
4. Hunter M. The Women's Health Questionnaire: A measure of mid-aged women's perceptions of their emotional and physical health. Psychology and Health 1992;7:45-54.
5. Yakar N, Turedi A, Emingil G, Sahin C, Kose T, Silbereisen A, et al. Oral health and emotional well-being in premenopausal and postmenopausal women: A cross-sectional cohort study. BMC Women's Health 2021;21:1-9. doi: 10.1186/s12905-021-01480-5.