



ORIGINAL RESEARCH PAPER

Nursing

A STUDY TO ASSESS THE KNOWLEDGE REGARDING PREMENOPAUSAL SYMPTOMS AND THEIR MANAGEMENT AMONG WOMEN (45-50 YEARS)

KEY WORDS: Knowledge, premenopausal symptoms & management, premenopausal women.

Mrs. Muthulakshmi. C* Associate professor, Department of Obstetrical and Gynaecological Nursing, Saveetha college of nursing, SIMATS, Chennai, India. *Corresponding Author

Ms. Sandhiya. E B.sc(N) IVYear, Saveetha college of Nursing, SIMATS, Chennai, India.

ABSTRACT

Premenopause is a biological stage in a woman's life when she is no longer fertile and is marked by the cessation of menstruation. A woman is defined as postmenopausal from 1 year after her last period. The study aimed to assess the knowledge regarding premenopausal symptoms and their management among women. Descriptive research design was used with 100 samples who matched the inclusion criteria were selected by convenience sampling technique. Demographic variables were collected by self-structural questionnaires. Out of 100 samples, 25(25%) women having adequate knowledge, 15(15%) women having moderate knowledge, 60(60%) women having adequate knowledge on premenopausal symptoms and their management among women. Before assessing the knowledge majority of the women have a negative outlook towards premenopausal symptoms and their management. After providing information regarding premenopausal symptoms and management women have a positive outlook.

INTRODUCTION:

Per menopause or menopause. Premenopausal and per menopause are similar terms that are sometimes used in place of each other. The term "pre" means "before" and the term "peri" means "surroundings" or near. Technically, a woman is in premenopausal any time before enters menopause. Many women suffer from various degree of anxiety, dry skin, fatigue, bloating, headache, irregular or heavy periods, heart palpitation, hot flashes, insomnia, decreased libido, poor memory and concentration, mood swings, night sweats, loss of bladder control, vaginal dryness, and weight gain during this time. Many women may have fear during this period because of the anticipated losses. Thus women may be hesitant and ignore the unusual and hormonally related symptoms that may go undetected resulting in delay in diagnosis and treatment. This transition will be smooth only if women are aware of the natural changes occurring during premenopause and therefore will help them to adapt self-help behaviour and to improve their physical and mental health. There are more than 11 million women over the age of 45 in the UK according to the Office of National Statistics 2011 census. This number has been steadily increasing and is forecast to continue to rise. The associated increase in the number of women going through the menopause is expected to result in more GP consultations and more new referrals to secondary care of women needing short-term symptom control and those who have associated long-term health issues. Premenopause is a biological stage in a woman's life when she is no longer fertile and is marked by the cessation of menstruation. A woman is defined as postmenopausal from 1 year after her last period. The changes associated with menopause and the perimenopause (the years leading up to the menopause) occur when ovarian function diminishes and ceases. This includes the cessation of both egg (oocyte) maturation and sex hormone (principally estrogen and progesterone) secretion. Men continue to produce sperm into old age, but women have a finite number of oocytes at birth and the quantity declines with each menstrual cycle. The menopause is characterized by the eventual depletion of the oocyte store and cessation of menstruation. Menstrual cycle irregularity often occurs before periods stop completely. Most tissues contain estrogen receptors through which the hormone exerts its effects. The most immediate changes resulting from reduced estrogen levels are evident in the regulation of the menstrual cycle. However, estrogen depletion associated with the menopause has many other effects on the body – for example causing vasomotor, musculoskeletal, urogenital and psychological symptoms. It has also been shown to have an impact on the function of other systems in later life, including bones and the

cardiovascular system. Estrogen depletion explains some of the differences in the incidence of osteoporosis between men and women. Perimenopause – also called the menopausal transition or climacteric – is the interval in which a woman has irregular cycles of ovulation and menstruation before the menopause. Within the UK population, the mean age of the natural menopause is 51 years, although this can vary between groups of different family origin. Premature ovarian insufficiency (also known as premature ovarian failure or premature menopause) is usually defined as menopause occurring before the age of 40. It can occur naturally or iatrogenically (that is, as a result of treatment). Premature ovarian insufficiency (POI) and early perimenopause (menopause between the ages of 40 and 45) are associated with an increased risk of mortality, and with serious morbidity including cardiovascular disease (CVD), neurological disease, psychiatric disorders and osteoporosis. Lower socioeconomic status has been associated with POI. Many women experience a range of symptoms during the menopause and perimenopause and these symptoms are often short lived and lessen or disappear over time. The most common include vasomotor symptoms (for example hot flushes and sweats), effects on mood (for example low mood) and urogenital symptoms (for example vaginal dryness). Of women responding to a postal survey carried out in Scotland about symptoms experienced in the previous month, 47% reported hot flushes, 46% reported night sweats and 26% reported vaginal dryness. The USA Study of Women's Health Across the Nation reported in 2009 that, on average, African-American women had more hot flushes than white women, and Asian women (Japanese or Chinese) had the fewest hot flushes of all family groups surveyed. The same study reported that early menopause (between 40 and 45 years) affected 3.7% of African-American women, 2.9% of white women, 2.2% of Chinese women and 0.8% of Japanese. Postmenopausal women are at increased risk of a number of long-term conditions, such as osteoporosis, CVD and changes in the vagina and bladder. These occur because of natural aging as well as estrogen depletion.

MATERIAL AND METHODS:

A descriptive study was chosen to study to assess the knowledge regarding premenopausal symptoms and their management among women. A setting of the study is Neman village by using convenience sampling technique. The data were collected from the 100 samples of women (45-50 years). The sample who meet the inclusion criteria were selected for the study.

DATA COLLECTION PROCEDURE:

The data collection was collected by using questionnaires on the demographic variables which consist of age, educational status, type of family source of information, income of the family, occupation, self- structural questionnaires to assess the knowledge regarding premenopausal symptoms and their management. The collected data were analysed by using descriptive and inferential statistics.

RESULT:

TABLE I

Shows that the age out of 100 sample, samples were under the age group of 40-41 less than 0 % samples were under the age group of 45-47 65% samples were under the age of 47-50 .. Regarding the type of family, 80% samples were of nuclear family, 20% samples were of joint family. Regarding occupation out of 100 samples house wife 60%, labor 10%, employee 22%, business 8%. Regarding income of the family out of 100 samples 3000=5000 per month 36 %, 5000=10000 60% above 10000 4%/. Regarding primary source of information out of 100 samples mass media 25 %, family members 18% no information 57%.

TABLE-II

shows the frequency and percentage distribution of level of knowledge on safety measures The data revealed that, (60%) had inadequate knowledge, (15%) had moderately, (25%) adequate knowledge and none of the women had adequate knowledge on premenopausal women.

TABLE- III

Shows Mean and standard deviation on selected tea factory workers. In frequency, the overall knowledge aspects safety measures on tea factory workers, the mean value of 5.1 with a standard deviatio

1:Frequency and percentage distribution of level of knowledge on premenopausal symptoms and their management women. (n=100)

LEVEL OF KNOWLEDGE	N	%
Inadequate knowledge	60	60%
Moderate knowledge	15	15%
Adequate knowledge	25	25%

Table 4: Association between knowledge on premenopausal symptoms and their management among premenopausal women. and demographic variables among premenopausal women. (n=100)

S.NO	Demographic variables	Inadequate Knowledge		Moderate knowledge		Adequate knowledge		Chi square test and P value
		N	%	N	%	N	%	
1.	AGE							X ² =31.136 Df=2 S= p<0.05
	a. 40-41	0	0%	0	0%	0	0%	
	b. 45-47	50	50%	10	10%	5	5%	
2.	Income of the family							X ² =4.142 Df=4 S=P<0.05
	a.3000-5000/month	15	15%	12	12%	9	9%	
	b. 5000-10000/month	15	15%	30	30%	15	15%	
3	Type of family							X ² =0.110 Df=2 S= P<0.05
	a.nuclear	30	30%	10	10%	40	40%	
	b.joint	8	8%	2	2%	10	10%	

REFERENCES:

1. Woods, Mitchell. Clinical Obstetrical and Gynecology, 1 st ed. 2007; 41:894-7.
2. Lanus D. Perimenopause; the transition into menopause. Health care for Woman International, 2009; 17:293-306.
3. Fraser M, Diane, Cooper, Margaret. Myles Text book for midwives", 14th edition, Elsevier science limited, 2003, 253.
4. Gopala Sarala, Jain Vinita. Muda liar & Menon's clinical obstetrics, 10th edition, Orient Longman private limited, 2006, 90.
5. Gotha Saul. Viva in Obstetrics & gynecology, 2nd edition, Jape publications, 2006, 94-96.
6. KEITH D. Text book of Obstetrics & Gynecology, 6th edition, para's publications, 2002; 515-517.
7. Asha Outmatching. Text book of obstetrics & gynecology, 1 st edition, Jape publishers. 2002, 294-296
8. varna Pathak et. al (2017), Assess the knowledge, attitude, practice regarding menopause among menopausal women. journal of AnsonFar med. 2011 oct -dec 22-30

DISCUSSION:

TABLE I frequency and percentage distribution of demographic variables among premeno pausal women (N=100)

S.NO	DEMOGRAPHIC VARIABLE	PREMENO PAUSAL	WOMEN
		N	%
1	Age (in years)		
	a.40-41	0	0%
	b.45-47	65	65%
2	Educational status		
	a. non- literate	25	25%
	b. primary education	58	58%
3	Occupation		
	a. house wife	60	60%
	b. labor	10	10%
4	Income of the family		
	a. Rs.3001-5000	36	36%
	b. Rs5000-10000	60	60%
5	Type of family		
	a. nuclear	80	80%
	b. joint	20	20%
6	Primary source of information		
	a. mass media	25	25%
	b. family members	18	18%
	c. no information	57	57%

Table 3: Mean and standard deviation on premenopausal symptoms and their management among premenopausal women (n=100)

Knowledge on Premenopausal symptoms and management	Frequency
Mean knowledge	5.6
Standard deviation	4.3

9. Nanette sartor (2016), Premenopause-research to practice to conduct a several long term longitudinal cohort studies that have examined many aspects of women is biology and psychology through this time of life. journal of women health (larch), 2016 april, 332-339
10. Nanettesantoro et. al (2015), Menopausal symptoms and their management the menopause transition is experienced by 1.5 troublesome symptoms, journal of endocrinalmetalclng north Am. 2015 sep, 497-515.
11. aيدر aldughaiter et.al (2014), Menopausal symptoms and quality of life among Saudi women. A cross sectional study was conducted, journal of menopausal med: June 2015, 645-653.
12. eun keyingkwacha et. al (2014): Menopause knowledge attitude symptoms and management. journal of menopausal med. 2014 Dec :118-125
13. parbati Nepal pudgily et.al (2014), Knowledge premenopausal symptoms among women., journal of j Pak med assoc. 2018 ariil (2014) april, 164-200