

**A study to assess the prevalence of menopausal symptoms among the post menopausal women and coping mechanisms adopted by them in selected rural areas of Kamrup District, Assam**

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**Abstract**

**Background:** The term “Menopause” is derived from the Greek word which means ‘Cessation of periods’.

The age of menopause varies from 45 to 55 years.

The post-menopausal women experience many physical and psychological symptoms which include irregular menstruation, changes in sexual desire, hot flashes, vaginal dryness and urinary problems, changes in appearance, mood changes, sleep disturbances, palpitations and backache etc. Thus it is necessary for all the women to understand menopause which will make them to cope up with menopausal symptoms and will also improve quality of life for menopausal women.<sup>2</sup>

**Materials and methods:** A Quantitative research approach with a descriptive survey research design was used in the study to assess the prevalence of menopausal symptoms among post-menopausal women and coping mechanisms adopted by them. The study population consists of 200 post-menopausal women age group of 40-60 years. Modified Menopause Rating Scale was used to assess the prevalence of menopausal symptoms and a structured questionnaire designed to

assess the coping mechanisms adopted by post-menopausal women.

**Results:** Majority of the sample (95.5%) were having sexual problems (Change in sexual desire, in sexual activity and satisfaction).The next most prevalent symptom was dryness of vagina 83.5%. The study clearly suggests that most of the post-menopausal women had one or more menopausal symptoms and they were adopting different coping mechanisms to get relief from the symptoms. The prevalence of menopausal symptoms are associated with other selected demographic variable like age, type of family, education, occupation etc.

**Keywords:** Postmenopausal women, menopausal symptoms, coping mechanisms.

**Introduction**

Menopause is a universal phenomenon. There is a considerable variation among women regarding the age of attaining menopause and the manifestations of menopausal signs and symptoms. Worldwide, the estimates for the mean age of menopause range from 45 to 55 years. During the transition to menopause, women may experience vasomotor, urogenital,

psychosomatic and psychological symptoms, as well as sexual dysfunction. Under current demographic trends, menopausal and postmenopausal health has emerged as an important public health concern in India owing to improved economic conditions, rapid lifestyle changes, and increased longevity.<sup>4</sup>

Post menopause refers to a woman's time of life after menopause has occurred, when women approach physiological changes that lead to mood swings, forgetfulness, hot flushes and all the other symptoms associated with menopause. This period is very important since it influences psychological, social, and emotional aspects due to physiological changes. Psychological problems affect physical well-being, resulting in chronic fatigue, sleep problems, and changes in appetite. It affects mood, with feelings of sadness, emptiness, hopelessness and dysphoria. It affects the way of thinking, interfering with concentration and decision making. And, it affects behavior, with increased irritability and loss of temper, social withdrawal, and a reduction in the desire to engage in pleasurable activities. Postmenopausal woman is mainly affected by the hormonal factors.<sup>5</sup>

### Materials and method

**Study Design:** A Quantitative research approach was used for the present study.

A descriptive survey research design was used to assess the prevalence of menopausal symptoms among post-menopausal women and coping mechanisms adopted by them.

**Variables:** The present study consists of research variables and demographic variable.

- **Research variables** - Menopausal symptoms and coping mechanisms.

- **Demographic variable** - Age, type of family, education, religion, occupation, marital status and parity.

**Setting of the study:** The study was carried out at Azara FRU & Rani CHC.

**Sample and sample size:** The post-menopausal women who belong to the age group of 40-60 years, who fulfilled the study criteria were recruited for the study. The sample size is 200 post-menopausal women who fulfilled the study criteria were selected according to the Thumb Rule.

**Sampling technique:** Purposive sampling technique method was adopted for the study.

### Criteria for sample selection

#### Inclusion criteria

- Women who have attained menopause naturally.
- Women who are in menopause for more than one year.
- Women in the age group of 40-60 years.

#### Exclusion criteria

- Women with major psychiatric illness like Schizophrenia, Mania etc.
- Women with co morbid chronic physical illness like Carcinoma, Diabetes Mellitus.
- Women with major gynecological problems like uterine fibroid, carcinoma cervix.
- Women who had surgically undergone menopause.
- Woman who are using hormone replacement therapy.

### Development of the tool

Modified Menopause Rating Scale developed by Rahman, Zaindin and Munwas used to assess the prevalence of menopausal symptoms and structured

questionnaire to assess the coping mechanisms adopted by post-menopausal women after an extensive review of literature, discussion with experts and professional experience.

#### **Content validity**

Content validity of structured questionnaire to assess coping mechanisms was done by 5 experts from the field of Obstetrics and Gynaecology. They were requested to give their opinion about the relevance, clarity and appropriateness of items. As per the suggestions of the experts the items of the tool were modified.

#### **Reliability**

After seeking formal permission from Joint Director of Health Services, Amingaon and then the Deputy Superintendent of Rani CHC, Kamrup (R), Assam, the tool was administered to 10 samples.

The reliability was established by using Spearman Brown Prohecy formula with split half method for Modified Menopausal Rating Scale and structured questionnaire related to coping mechanisms. The reliability of the tool for Modified Menopause Rating Scale was 0.88 and structured questionnaire related to coping mechanisms was 0.82 respectively.

#### **Pilot study**

The setting for pilot study was Ganapati village, Rani Block, Kamrup (R), Assam. For the pilot study, data was collected from 4/12/2017 to 12/12/2017. Written permission was taken from the Deputy Superintendent of Rani CHC on 1/12/2017. The study subjects who met the inclusion criteria were selected by doing home visit. The participants were explained about the purpose and significance of the study and the investigator obtained written consent from the

participants. Using interview schedule the data were collected.

#### **Data collection procedure**

The period of data collection was from 23 January to 18 February 2018. The villages were selected as per convenience of the research under Rani CHC and Azara FRU of Kamrup (R) Assam. Total 200 participants were selected using purposive sampling technique. Data had been collected by door to door visit. Initially a written permission had been taken dated 19<sup>th</sup> July, 2017 from Joint Director of Health Services Amingaon. After that written permission was taken from Deputy Superintendent of Rani CHC (1/12/17) and SDMNHO of Azara FRU (30/1/2018). From 23 January to 6 February 2018 the data was collected in 4 villages under Rani CHC during home visit. The subjects had been selected on the basis of pretest inclusion and exclusion criteria. 90 Subjects were interviewed under Rani CHC. Everyday 12-15 households would be surveyed out of which 7-8 women on an average were post-menopausal women and their data was collected. The participants were explained about the purpose and significance of the study. Participants were also explained that confidentiality, anonymity and privacy would be maintained. Written consent was taken on the informed consent from the participant. Once the consent was received from the participant, data was collected by using interview schedule. A comfortable environment was maintained and privacy was provided while collecting the information of the participant. Approximately 15-20 minutes were taken for each participant for collecting the information. In the same way from 7/2/18 to 18/2/18, the data was collected in 3 villages under Azara FRU during home visit. 110

subjects were interviewed. Everyday 15-20 households would be surveyed, out of which 10-12 women on an average were postmenopausal women and their data was collected.

### **Ethical consideration**

The ethical clearances were obtained from the Institutional Ethical committee to conduct the study. Formal permissions were taken from Joint Director, Amingaon, then the Deputy Superintendent of Rani CHC and SDMNHO of Azara FRU. Informed consents were obtained from the participants.

### **Hypothesis (null)**

The hypothesis was tested at 0.05 level of significance.

**H<sub>0</sub>:** There is no association between prevalence of menopausal symptoms with selected demographic variables among post-menopausal women.

### **Results:**

The findings of the present study have been discussed in relation with the objective under following headings.

- **Socio demographic data of postmenopausal women:** Frequency and percentage distribution were computed for socio demographic characteristics of the subjects.
- ✓ The majority of post-menopausal women i.e. 56 (28%) were in the age group of 56-60 years. 54 (27%) were in the age group of 51-55 years, 51 (26%) were in the age group of 46-50 years, 39(19%) were in the age group of 40-45 years .
- ✓ The majority of post-menopausal women i.e.111 (55.5%) belonged to nuclear family, while 89(44.5%) of them belonged to a joint family structure.
- ✓ The majority of post-menopausal women 120(60%) were illiterate, 20(10%) were studied upto primary school, 23 (11%) were studied upto

middle school ,31(16%) were studied upto high school, 6(3%) were studied upto higher secondary, no one studied up to graduate and above.

- ✓ The majority of post-menopausal women 152(76%) were Hindu , 47 ( 23.5%) were Muslim, 1 (.5%) were Christian . No women belonged to any other religion.
- ✓ The majority of post-menopausal women 164(82%) were house wife, 36 (18%) were working woman.
- ✓ The majority of post-menopausal women 121 (60.5%) were married, 3 (1.5%) were unmarried, 76 (38%) were widow .
- ✓ The majority of the post-menopausal women 145(72%) had parity 3 or more, 38(19%) had parity 2, 14( 7%) had parity 1 while rest 3(2%) were nulliparous.

### **The first objective was “To assess the prevalence of menopausal symptoms”**

The study findings were the majority (95.5%) of post-menopausal women had sexual problems, (83.5%) had dryness of vagina, (79.5%) were suffered from physical and mental exhaustion, (75.5%) had joint and muscular discomfort, (73.5%) had depressive mood, (71.5%) had heart discomfort, (65%) were suffered from sleep problems, (50.5%) had hot flushes, sweating, (39%) had irritability, (22.5%) anxiety and only (10.5%) had bladder problems.

In order of women having multiple symptoms, a maximum of 26% of post-menopausal women had seven menopausal symptoms, 23.50 % had eight menopausal symptoms, 14.50% had six menopausal symptoms, 10.50% had four menopausal symptoms, 6% had three menopausal symptoms, 5% had five menopausal symptoms. 2% of post-menopausal women

had two menopausal symptoms, while 1.50% of postmenopausal women had as many as ten menopausal symptoms together. There was no woman having a single symptom alone or all the eleven symptoms together as menopausal symptoms.

**The second objective was “To find out the coping mechanisms adopted by the post-menopausal women”**

In this present study majority (77%) menopausal women adopted coping mechanisms against physical and mental exhaustion. (76%) had adopted coping mechanisms against joint and muscular discomfort, (69%) had adopted against depressive mood, (58%) had adopted against sexual problems and dryness of vagina, (51%) had adopted against hot flushes and sweating, (39%) had adopted against sleep problems, (32%) had adopted against irritability and anxiety, (20%) had adopted coping mechanisms against bladder problems.

Amongst the women having sexual problems and vaginal dryness, irritability and anxiety, bladder problems, and joint and muscular discomfort, at least one coping mechanism was adopted for each of them by 100%, 97%, 80% and 42% of them respectively. A total of 48% and 47% of postmenopausal women having heart discomfort and depressive mood, adopted two coping mechanisms against each, respectively. Similarly, 37.50% and 34% of postmenopausal women having hot flushes and sweating, physical and mental exhaustion adopted three coping mechanisms against each, respectively. Only 33% of post-menopausal women having sleep problems adopted four coping mechanisms against it.

**The third objective “To determine the association between prevalence of menopausal symptoms with selected demographic variables.”**

The present study findings revealed that there is association between the prevalence of some of the menopausal symptoms with selected demographic variables like hot flushes and sweating, dryness of vagina, joint and muscular discomfort with age, hot flushes, sweating, sleep problems with type of family, hot flushes, sweating, heart discomfort, sleep problems, depressive mood, irritability, physical and mental exhaustion and dryness of vagina with education, hot flushes and sweating, depressive mood, irritability, anxiety, physical and mental exhaustion with religion, physical and mental exhaustion, sexual problems and dryness of vagina with occupation, heart discomfort, physical and mental exhaustion, dryness of vagina with marital status and dryness of vagina with Parity.

**Conclusion**

The investigator had conducted “A study to assess the prevalence of Menopausal symptoms among postmenopausal women and coping mechanisms adopted by the post-menopausal women in the selected rural areas of Kamrup District, Assam.” After conducting the study, the following conclusions can be drawn from study findings. Firstly majority of the sample that is 95.5% were having sexual problems (Change in sexual desire, in sexual activity and satisfaction). The next most prevalent symptom was dryness of vagina 83.5%. The study clearly suggest that most of the post-menopausal women had one or more menopausal symptoms and they were adopting different coping mechanisms to get relief from the symptoms. The prevalence of menopausal symptoms

are associated with other selected demographic variable like age, type of family, education, occupation etc.

The findings are consistent with the literature and have strong support from some of studies of the world and India. Based on the method of sample collection of the conclusive nature of the findings and support from some of the studies conducted throughout the world, the findings of this study seem to be reliable.

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