

Menopausal Issues And Complications Among Women In Budgam District Of Kashmir Region.

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Abstract:

Menopause not being an ill-health is simply the period in a woman's life when menstruation ends. It is a regular as well as innate biological process which involves the ageing of the reproductive system. Women experience numerous symptoms and complications throughout this phase like vascular instability, urogenital atrophy, joint pain, fornication and psychological and sexual discomforts and these are diverse for every woman. The main objective of this paper is to highlight the age at which menopause mostly occurs, and the symptoms and complications related to menopause. Furthermore, it aims at ascertaining the opinion and remedies adopted for menopausal problems. A study on common problems during menopause was carried out on 150 women respondents. The sample was collected from district Budgam of Jammu and Kashmir state. A comprehensive questionnaire was drafted to obtain information regarding personal details, sexual, physiological, psychological and general health problems. It was found that most commonly menopause occurs at the age of 50-55 years. For some, these changes initiate early whereas others reach menopause late. A biochemical investigation (hormone balance check) could not be conducted because of the non-availability of funds. This study was intended to help the various people involved in the healthcare system to be more informed and decisive, about the various decisions to be taken for improving the quality of health care. This would be attained by reducing the cost of health care, addressing the safety of patients and various medical errors in addition to widening access to health services.

Keywords: Menopause, Complications, Symptoms

Introduction:

Menopause comes from the Greek word "pauasis" meaning cessation and the "men" meaning month. Thus in literal terms, it would indicate the end of monthly cycles or periods occurring in a woman. This phase typically (but not always) occurs in women in midlife, during their late 40s or early 50s, thereby signalling the end of the fertile phase in their life (1). In a more appropriate sense, it would mean the permanent cessation of the primary functions of the ovaries, rather than the absence of menstrual flow (2). In addition to this, there is a complete pause in the ripening and release of ova and the release of hormones that cause the development and shedding of uterine lining. This transition in a woman's life primarily occurs because of the drop in the production of the female sex hormones by the ovaries. The transition usually not being sudden or abrupt tends to be because of the ageing process. The signs and effects that might at times accompany this process can significantly disrupt one's daily activities and the sense of being well. Among these, those who have had any sort of physiological or functional disorder of the reproductive system can go into menopause at a younger age, than their counterparts of the same age. These functional disorders are often said to hasten up the menopausal process and lead to more pronounced health problems (both physical and emotional) for the person being affected.

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Background:

Although the word "menopause" was originally and specifically coined for human females, it was also seen to exist in some animals, many of whom do not have monthly menstrual cycles (3). Menopause traditionally indicates the permanent stopping of the monthly menstrual cycles thereby indicating the period of infertility. The term natural menopause is said to include the permanent cessation of menstrual cycles because of the inactivity of ovarian follicles (4.) This can be confirmed to have occurred if a woman has had amenorrhea for twelve consecutive months, besides having found no related pathological or physiological cause. The term perimenopause includes the period immediately before menopause and the first year after menopause. The menopausal transition is reserved for that period before Final Menopausal Period, when variability in the menstrual cycle is usually increased (4). The term post menopause is defined as starting the Final Menstrual period (FMP) regardless of whether the menopause was induced or spontaneous.

Menopause is an event in life, not a disease. Menarche heralds the onset of reproductive function and the menopause signals its end. The "change of life" is a time of marked endocrinologic decline in hormone production by the ovaries, especially estradiol. The physiologic changes begin before menopause and vary considerably in degree and extend before the follicular phase when the follicles are depleted (5). Ovulation occurs first with the loss of progesterone and for many things brings relief from premenstrual symptoms and dysmenorrhea before actual menopause. The decline in estradiol production brings changes in the hormonal response of tissues and eventually, women become aware of them. (5) Menopausal women experience atrophic changes in the urogenital system, degenerative consequences associated with hormonal decline and pathological conditions associated with menopause. A multiplicity of symptoms has been attributed to menopause. The symptoms of menopause are vasomotor symptoms, urogenital symptoms, irregular menstruation in the perimenopause and psychological problems. (6)

The study aimed at assessing the age at which menopause mostly occurred in the sample group. It also included finding out the symptoms, complications and remedies adopted to control the menopausal complications.

Material and Method:

The current study was carried out in the Budgam district of Kashmir. The sample comprised 100 women respondents to know the problems and common symptoms associated with menopause. Data for the study was collected through the personal interview method by using a self-prepared, pre-tested questionnaire and data was compiled, tabulated, analyzed and interpreted to draw a valid conclusion. Both written and oral information about the reasons for the study were given in the local language to women who participated in the present study. The participants were informed that their inclusion in the study will be voluntary and were given a guarantee of anonymity.

Results and Discussion:

Table 1: Age-wise distribution and marital status of respondents.

Age in years	N	Percentage (%)
35-40	3	2
40-45	15	10
45-50	33	22
50-55	48	32
55-60	27	18
60-65	15	10
65-70	9	6
Total	150	100

Marital Status	N	Percentage (%)
Married	132	88
Unmarried	3	2
Divorced	3	2
Widow	12	8
Total	150	100

The above table reveals that the highest number of menopausal women i.e., 32% belonged to the age group of 50-55 years which is followed by 22% in the age group of 45-50 and 18% in the age group of 55-60 and 2% in the age group of 35-40 respectively. It further reveals that the majority of the women were married which comprised about 88% of the study sample followed by 8% widows and unmarried and divorced comprised 2% of the studied population. A study conducted by Bagga.A. (2004) on menopausal women reported that 41% of women reported menopause at the age of 40-44 years, 25% had it at 50 years and 17% reportedly experienced it at an earlier age i.e. before 39 years. (7)

Table 2: Symptoms and complications of menopause.

Symptoms and complications	N	Percentage (%)
Vascular Instability		
Hot Flashes	105	70
Migraine/ headache	30	20
Rapid Heartbeat	21	14
Urogenital Atrophy/ Vaginal Atrophy		
Itching	27	18
Dryness	15	10
Bleeding	6	4
Watery Discharge	18	12
Urinary Incontinence	3	2
Increased frequency of urinary tract Infection	48	32
Skeletal		
Back Pain	135	90
Joint/ Muscle Pain	141	94
Osteoporosis	45	30
Skin, Soft Tissues		
Breast tenderness	30	20
Skin Thinning and becoming drier	84	56
Formication(itching, burning, sensation of ants crawling on or under skin)	117	78
Psychological		
Depression/ anxiety	54	36
Fatigue	36	24
Irritability	138	92
Memory loss	150	100
Sleep disturbances	144	96
Sexual		
Dyspareunia/ Painful intercourse	60	40
Decreased Libido	99	66

It is evident from the above table that there are different symptoms and complications of menopause. Some are physical, some psychological and physiological as well. The hormonal imbalances caused by menopause generate vascular instability, which means our body struggles to normalize its own internal temperature. It was found that the most frequent symptom allied with vascular instability are hot flashes (70%) followed by migraine/headache (20%) and rapid heartbeat (14%) respectively. Urogenital atrophy is most commonly associated with vaginal dryness and may lead to bleeding, itchiness etc. It is revealed from the above table that 18% of the respondents experience itching and 32% of them experienced increased frequency of urinary tract infection.

It further reveals that most of the menopausal women (94%) suffer back or joint pains. It was found that 78% experience formication which is a symptom of menopause. The worst complication of menopause is depression found in 36%, memory loss in 100%, irritability in 90% and sleep disturbances among 96% of the study sample. In addition to above, menopause has caused loss of libido in 66% and Dyspareunia/ painful intercourse in 40% of menopausal women.

A study conducted by Waidyasekera et al.(2009) on Sri Lankan women, indicated that the most common menopausal symptoms include joint and muscle discomfort, physical and mental exhaustion and hot flashes(8). A similar study carried out by Gharaibeh et al. (2010) found that vasomotor signs were the most severe of all as evidenced by hot flushes and night sweating(9). In another study by Ashrafi et al.(2010) carried out on Irani women, it was seen that night sweats, joint and muscle pain and hot flashes are the most common symptoms associated with menopause in Iranian women(10). Rahman et al. (2010) concluded that the most common problems experienced by perimenopause and postmenopausal group of women, were sexual problems, bladder problems and vaginal dryness(11).

Table 3: Steps taken by respondents to combat the symptoms of menopause.

Steps Taken	N	Percentage (%)
Medication	57	38
Dietary intake	21	14
Exercise	6	4
Rest	27	18
All of the above	39	26
Total	150	100

The above table indicates that 38% of menopausal women use medication for combating menopausal symptoms, while 14% concentrate on their dietary intake. A small number of menopausal women believe that exercise (4%) and rest (18%) relieve them from the assortment of symptoms of menopause. The remaining 26% claimed of having tried all of these to relieve themselves from the symptoms/complication of menopause.

Table 4: Opinion of respondents regarding menopause.

Opinion	N	Percentage (%)
Passing stage	3	2
Decisive stage	39	26
Approaching old age	108	72
Total	150	100

Table 4 reveals the respondent's opinions regarding menopause. It is palpable that the majority of menopausal women i.e. 72% deem that menopause is approaching old age and 26% recognize it as a decisive stage while only 2% consider it a passing stage.

Conclusion:

Based on these findings it is therefore concluded that the majority of the menopausal women were in the age group of 50-55 years and some of the common symptoms or complications experienced by these women were hot flashes, rapid breathing, urinary tract infections, formication, memory loss, sleep disturbances and decreased libido. Mostly these women took medicines to get themselves relieved from the soreness they suffer from. In addition to this, other measures to combat the discomfort associated with menopause were also adopted.

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