



## A STUDY TO ASSESS THE PREVALENCE OF MENOPAUSAL SYMPTOMS AMONG PERIMENOPAUSAL WOMEN IN URBAN COMMUNITY COIMBATORE, TAMILNADU.

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### ABSTRACT

Menopause is a natural process during which estrogen levels decline. This can lead to hot flushes, mood swings, and joint and muscle pain. During menopause, a woman's lifestyle may change significantly, which will have implications for her quality of life. There is a lack of standard data related to perimenopausal women in India. Especially in menopausal symptoms, where lack of services has been a huge issue and where most of the women in this group are expected to reside, **Objectives:** To assess the prevalence of menopausal symptoms among perimenopausal women. **Methodology:** A descriptive study was conducted, and a house-to-house survey was done. A total of 100 perimenopausal women were selected by the purposive sampling technique. The prevalence of menopausal symptoms among perimenopausal women using menopausal rating scales. **Result:** The age of 100 perimenopausal women ranged from 40 to 55 years. They complained of having menopausal symptoms, i.e., hot flushes (85%), mental and physical exhaustion (80%), sleep disturbance (45%), and joint and muscle pain (70%). **Conclusion:** Women in this group need a multi-disciplinary approach that can address not only physical problems but also psychological problems, which are more prevalent in these women.

**KEYWORDS :** Perimenopausal Women, Menopausal Symptoms, Urban Community.

### INTRODUCTION

Menopause is an important transitional phase of life for all women. It is a normal physiological process characterized by the cessation of menses in women as a result of reduced ovarian hormone secretion between 45 and 55 years of age. When varying physical and mental changes impair the lives of women. It is a condition that every woman faces in later life and can have many associated effects that might disrupt the quality of life.

There is variation in age and symptoms of menopause among women all over the world. There is a difference in the prevalence of symptoms in Asian and Western women. Variations have been found in Indian women in different regions. During this period, women can experience many symptoms, including somatic symptoms (hot flushes, insomnia, muscle and joint pain), urogenital symptoms (vaginal dryness, bladder problems), and psychological symptoms (mood swing, sleep disturbance, insomnia, anxiety, mental and physical exhaustion, and sadness). About 52% of Indian women felt that menopausal symptoms affected their quality of life. Menopausal symptoms can be managed with the help of simple home management. Before the management of menopausal symptoms, it is important to assess the prevalence of menopausal symptoms and their severity in perimenopausal women; hence, the need was felt to undertake the study. Since most of the population in India is rural, similar studies from different regions of India can be used for comparison, as the information may be utilized for providing optimal health care to urban perimenopausal women.

According to the literature, at least 60% of ladies suffer from mild symptoms, 20% suffer from severe symptoms, and 20% suffer from very severe symptoms. This study aims to investigate the prevalence of menopausal symptoms among women from 40 to 55 year's old living in the community and measure the severity of the symptoms. The results show that the majority of women reported one or more symptoms. Menopause symptoms affect the quality of life for women.

### OBJECTIVES

To assess the prevalence of menopausal symptoms among perimenopausal women

### METHODOLOGY

The research approach adopted in this study quantitative approach with descriptive research design. The study was conducted in Chinniyampalyam, Coimbatore. Non - probability Purposive sampling technique was used to select the 100 sample. The inclusion criteria for this study was ,women who belong to the age group of 40–55 years, Women who are willing to participate in the study; , women who are available at the time of data collection. The exclusion criteria include not being cooperative during data collection. The prevalence of menopausal symptoms was assessed by the checklist, and the severity of menopausal symptoms was assessed by the menopausal rating scale. Each participant was interviewed for 20–25 minutes to complete the checklist and menopausal rating scale, and their cooperation was imperative. Descriptive statistics such as frequency and percentage distribution were used to analyse the data collection, the tool used for data collection was

**Section A:** Demographic Variables

**Section B:** Check list to assess menopausal symptoms.

**Section C:** Menopausal Rating Scale to assess the severity of menopausal symptoms.

### RESULT AND DISCUSSION

**Section A: Description Of Frequency And Percentage Of Distribution Based On Demographic Variables Of Perimenopausal Women**

N=100

S.No	Variables	Frequency	Percentage (%)
1.	Age in Years		
	a) 40-45 years	18	18%
	b) 46-50 years	62	62%
	c) 51-55 years	20	20%
2.	Religion		
	a) Hindu	65	65%
	b) Christian	15	15%
	c) Muslim	20	20%
3.	Education		
	a) Illiterate	25	25%
	b) Primary education	10	10%
	c) Secondary education	12	12%
	d) Higher Education	30	30%
	C) Graduate	23	23%

4.	Occupation a) Home maker b) Working	55 45	55% 45%
5.	Monthly Income a) > 5000 b) 5000- 10000 c) 10001-15000 d) < 15000	14 31 35 20	14% 31% 35% 20%
6.	Marital status a) Married B) widow	88 12	88% 12%
7.	Types of Family a) Nuclear family b) Joint family	68 32	68% 32%
8.	Age at Menarche a)10 years b)11-15 years C)16 years	10 82 12	10% 82% 12%
9.	No of Children a) 1 c) 2 3 & above	20 66 14	20% 66% 14%
10.	Dietary Pattern a) Vegetarian b) Non vegetarian	12 88	12% 88%
11.	Practice of Exercise a) Walking b) Any other c)None	35 - 65	35% - 65%

The above table shows the frequency and percentage of the demographic variable of the perimenopausal women. The majority [62%] of women between the ages of 46 and 50 belong to the Hindu religion, 30% have higher secondary education, 55% are homemakers, 88% are non-vegetarian, 68% are living in nuclear families, 80% are married, and 65% are not doing any exercise.

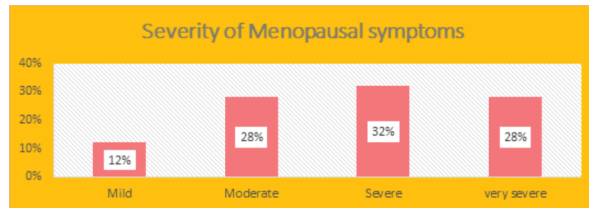
**Section B: Prevalence Of Menopausal Symptoms In Perimenopausal Women** N = 100

Menopausal Symptoms	No (%)
Psycho Somatic Symptoms	
Hot flushes	85 (85%)
Insomnia	60 (60%)
Joint & Muscle pain	70 (70%)
Palpitation	42 (42%)
Back ache	33 (33%)
Head ache	20 (20%)
Urogenital Symptoms	
Vaginal Dryness	42 (42%)
Bladder Problem	76 (76%)
Psychological Symptoms	
Mood swing	30 (30%)
Sleep Disturbance	45 (45%)
Sadness	65 (65%)
Irritability	72 (72%)
Anxiety	70 (70%)
Mental & Physical exhaustion	80 (80%)

The above table shows the prevalence of menopausal symptoms among perimenopausal women. Most of the women experienced somatic symptoms, with 85% having hot flushes and 60% having insomnia. Joint and muscle pain (70%) Palpitation (42%) Back care (33%) Head ache (20%). Urogenital symptoms were experienced by women. Vaginal dryness (42%) Bladder Problem (76%). Psychological symptoms such as mood swing (10%), sleep disturbance (45%), and sadness (65%) Irritability (72%) Anxiety (70%) Mental and physical exhaustion (80%)

**Section C: Menopausal Rating Scale And Menopausal Symptoms** N = 100

Level of Menopausal Symptoms	Frequency	Percentage
Mild	12	12%
Moderate	28	28%
Severe	32	32%
Very Severe	28	28%



The above table and figures shows the severity of menopausal symptoms on the Menopausal Rating Scale. It has four categories: mild, moderate, severe, and very severe. Out of 100 perimenopausal women, 28% have moderate symptoms, 32% have severe symptoms, and 28% have very severe menopausal problems.

**DISCUSSION**

In the current study, at the age of menopause (40–55 years), 85% of women had hot flashes. 76% had a bladder problem, and 80% of women have physical and mental exhaustion. This is comparable to the study conducted by Arwinder and Sushma. The mean age of menopause was 46–55 in the suburban community.

Similar to our study of the rural area of Tamil Nadu by G.Ganitha, PB Premalatha, and Iyannar Kannan, the mean age of attaining menopause was 45.75 ± 3.83 years. 87% of women were symptomatic with at least one symptom. The majority of women (78.2%) had psychosomatic symptoms, followed by vasomotor symptoms (55.8%). 68.4% of women welcomed menopause with a positive attitude. 19.4% of women were different, and 12.2% of women had a negative attitude toward menopause. About 24% of women felt that the symptoms of menopause were distressing. 23.2% of women availed of some form for their symptoms.

We compared the frequency of menopausal symptoms in the present study with other studies in urban women, suburban areas, and rural areas of India.

In the present study, the majority of women had psychosomatic symptoms similar to our study by Sushree and Nivedita on joint and muscular discomfort, which found 55.1% of women with somatosensory symptoms. Bladder problem: the highest proportion of somatovegetative symptoms was seen in the women who were illiterate (83.7% compared to women who were literate). A greater proportion of homemakers (82.2%) reported somato-vegetative symptoms. Compared to working women, in the present study, homemakers (72% and 38%) have more menopausal symptoms.

Similar to our study on Indian women by Avin Alva and Chetan, Kriplani and Bannerji did not find any correlation between the age of menopause and education, occupation, socioeconomic status, marital status, or parity.

To sum up, we found that the frequency of menopausal symptoms was variable in different studies in different settings. Menopause is a normal physiological process. The symptoms of menopause may be multifactorial. Nutrition, lifestyle, genetic factors, and cultural factors influence the type and frequency and severity of symptoms.

**CONCLUSION**

The present study concluded that the prevalence of

menopause symptoms is definitely high among perimenopausal women, and hot flushes and joint and muscle pain, physical and mental exhaustion are the most prevalent. A health care worker can play an important role in identifying and managing menopause symptoms. Women can be motivated to adopt lifestyle modifications to prevent this symptom. Hence Information education and communication activities to increase awareness about menopause symptoms among the general public, family members, and middle-aged women should be undertaken.

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