

“A Descriptive Study to Assess the Knowledge Regarding Premenopausal Symptoms and Its Management among Middle Aged Women in Bhucho Mandi, Bathinda, Punjab.”

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Abstract Background: Women experience various turning points in their life cycle, which may be developmental or transitional. Midlife is one such transitional period which brings about important changes in women. One of those important changes that occur in this stage of life is menopause. Menopause is an unavoidable change in reproductive life cycle, that every women experience in her middle age and beyond. Menopause normally occurs between 45-50 years The middle aged women should be trained for observing and deviations from normal health to maintain effective surveillance and providing health education for developing desirable health habits.

Objectives: To assess the knowledge regarding premenopausal symptoms and its management among middle aged women. To find an association between the knowledge regarding premenopausal symptoms and its management among middle aged women with their selected demographic variables.

Material and Methods:

A descriptive research design including demographic variables and structured knowledge questionnaire was used. Non – probability convenience sampling technique was used to select 200 married women. The researcher approached the eligible middle aged women and those who were willing to participate in the study were required to sign a consent form, fill the questionnaire and return to the researcher immediately.

Results: It was found that the majority 104 (52.0%) of respondents had poor knowledge regarding premenopausal symptoms and its management.

Conclusion:

It was found that the majority of respondents had poor knowledge regarding premenopausal symptoms and its management.

Key Words: Assess, knowledge, premenopausal symptoms and its management, middle aged women

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I. Introduction

“Menopause is a stage of life not a disease.” - Dr. Rita

Women experience various turning points in their life cycle, which may be developmental or transitional.¹ Menopause is a unique stage of female reproductive life cycle. The average ages of onset of menopause in the western world is 51 years while according to Indian menopause society research, the average age of menopause in Indian women is 47.5 years². Menopause is defined as the permanent cessation of menses resulting from reduced ovarian hormone secretion that occurs naturally or is induced by surgery, chemotherapy, or radiation. Menopause is a natural transition encompassing not only the biological changes but also the social and cultural changes associated with the aging process³. A variety of symptoms such as hot flushes, mucosal dryness, excessive sweating, emotional fluctuations, psychoses, decreased strength and calcification of bones throughout the body are experienced by women in menopause⁵. The duration, severity and impact of these symptoms vary extremely from person to person. Psychological symptoms frequently associated with menopause include fatigue, irritability and anxiety. Some symptoms associated with changing hormone levels are directly linked with estrogen depletion⁶. These symptoms can be unpleasant and tedious to manage. Around the time of menopause, women often lose bone density and their blood cholesterol levels may worsen, increasing their risk of heart disease⁷. The experience of each woman is unique and influenced by age, cultural background, health, type of menopause (spontaneous or surgical) child bearing desires and relationship. Women may view menopause as a major change in their lives either positive such as freedom from troublesome dysmenorrhea or the need for contraception or negative such as feeling "old" or loss of child bearing

possibilities⁸. A wide range of different strategies have been advocated for helping women through their menopause transition: from prescription drugs (e.g. anti-depressants, anti-hypertensives, Hormone Replacement Therapy), to complementary alternative medicines (e.g. phytoestrogens, acupuncture, evening primrose oil, vitamins, reflexology), to behavioral interventions (e.g. exercise, relaxation, avoiding caffeine, sleeping in a cool room, wearing cotton clothes)⁹. Hormone replacement therapy (HRT) was commonly prescribed in North America and Europe for the relief of menopausal symptoms.¹⁰ Estrogen replacement therapy in conjunction with a progestin regimen not only controls hot flushes, osteoporosis, dyspareunia, and other estrogen-deficiency symptoms, but also prevents the potential risk of estrogen treatment such as endometrial and cardiovascular disorders¹¹. Many women in the developing countries do not know that they can age gracefully unaware of the having menopause can cause to their lives. Most of them suffer in silence not bringing to notice their symptoms¹². So it is important to assess the knowledge about premenopausal symptoms and its management among middle aged women¹³.

Aims of the study

To assess the level of knowledge regarding premenopausal symptoms and its management.

Objectives :

To assess the knowledge regarding premenopausal symptoms and its management among middle aged women. To find an association between the knowledge regarding premenopausal symptoms and its management among middle aged women with their selected demographic variables.

II. Materials and Methods

Research Approach: Exploratory research approach was used.

Research Design: Descriptive Research design was used.

Setting of the study: The study was conducted at Bhucho Mandi, Bathinda, Punjab, India.

Target Population: The target population for this study consisted of Middle aged women with age group of 40-50years.

Sample: The sample for the present study comprises of 200 middle aged women who were residing in Bhucho Mandi, Bathinda, Punjab.

Sampling Technique: Non -Probability Convenience Sampling technique was used to select the sample for this study.

Development of tool for data collection

The tool contains two section:

Section A: Part -I: socio demographic variables of middle aged women like age (in years), religion, area of residence, type of family, monthly income of the family (in rupees), marital status, number of children, educational status, occupational status, nutritional status, history of Hysterectomy, oophorectomy and history of hormonal therapy.

Part -II: It consists of 40 Knowledge Questionnaire to assess the knowledge of middle aged women on premenopausal symptoms and its management. The participants have given (√) mark for right answer. Right answer was scored one (1) mark and wrong answer was scored as zero (0).

Procedure for data collection

Data collection was conducted in the month of March 2018; the researcher introduced themselves and explained the purpose of the study to the medical officer of the respective Bhucho Mandi, Bathinda and permission was obtained from medical officer of Bhucho Mandi, Bathinda. After taking informed consent from middle aged women, the data was collected by using structured knowledge questionnaire to assess the level of knowledge regarding Premenopausal symptoms and its management among the middle aged women to obtain information. The duration of the session was 40 minutes. Data collected was tabulated and analyzed with the help of descriptive and inferential statistics.

Analysis of data

Both descriptive and inferential statistics were used in the study. Frequency, percentage distribution, mean and standard deviation were used to describe the demographic data of middle aged women. Mean and standard deviation were used to assess the knowledge of middle aged women regarding premenopausal symptoms and its management. The chi- square analysis was used to determine the association between knowledge score and demographic variables.

III. Results

Organization and Presentation of the data :

The collected data were tabulated, analyzed, interpreted and findings obtained and presented in the form of tables and diagrams represent under following section:

Section I:

Frequency and percentage distribution of socio demographic variables of middle aged women.

Section II:

Findings related to assessment of knowledge among middle aged women regarding Premenopausal symptoms and its management.

Mean and standard deviation of knowledge score among middle aged women regarding Premenopausal symptoms and its management .

Section III:

Association between knowledge scores with selected socio- demographic variables

Table no: 1 Distribution of Knowledge scores according to Demographic variables.

Demographic Variables	N	Mean	Mean%	SD
Age in years	40-45 years	100	10.8	3.80
	45-50 years	100	10.9	3.64
Religion	Sikh	120	10.2	3.52
	Hindu	76	11.8	3.71
	Christian	3	8.7	2.08
	Muslim	1	21.0	1.0
	Other	0	0.0	0.0
Area of Residence	Urban Area	200	10.8	3.71
	Rural Area	0	0.0	0.0
Type of Family	Nuclear family	164	10.7	3.56
	Joint family	36	11.4	4.36
Monthly income of the family (in rupees)	<5,000	51	9.6	2.52
	5,001 to 10,000	104	10.2	3.33
	10,001 to 15,000	37	13.6	4.40
	> 15,001	8	13.6	4.03
Marital Status	Married	199	10.9	3.71
	Unmarried	1	6.0	0.1
	Divorced	0	0.0	0.0
	Widow	0	0.0	0.0
Number of children	One	85	10.9	3.63
	Two	33	11.8	4.80
	Three or Above	78	10.5	3.25
	Nil	4	8.5	2.65
Educational Status	No formal education	45	10.2	4.46
	Primary education	61	9.9	3.37
	Secondary education	60	11.5	3.51
	Graduate	30	12.3	3.08
	Postgraduate	4	11.8	2.36
Occupational Status	Laborer	38	9.6	3.48
	Agriculture	18	8.9	1.88
	Self employed	113	11.2	3.96
	Private Employee	23	11.8	2.92
	Government Employee	7	13.9	2.91
	Professional	1	15.0	1.1
Nutritional Status	Vegetarian	153	10.9	3.77
	Non – Vegetarian	16	12.9	3.75
	Mixed	31	9.5	2.87
Do you have any history of Hysterectomy,	Yes	57	11.2	2.87
	No	143	10.7	4.00

Oophorectomy?					
Are you undergone	Yes	37	11.5	28.9	3.04
Hormonal therapy?	No	163	10.7	26.7	3.84

Table no 2. Showing criteria measures of knowledge Score

criteria measure of knowledge score		
Level of Scores N= 200	Frequency (f)	Percentage
Excellent (31-40)	0	0.0
Good (21-30)	4	2.0
Average (11-20)	92	46.0
Poor (0-10)	104	52.0

Maximum knowledge score =40
Minimum knowledge score =0

The Table 2. Showing criteria measures of knowledge Score 2 percentage had Good Score46 percentage had Average and 52 percentages had Poor Score .

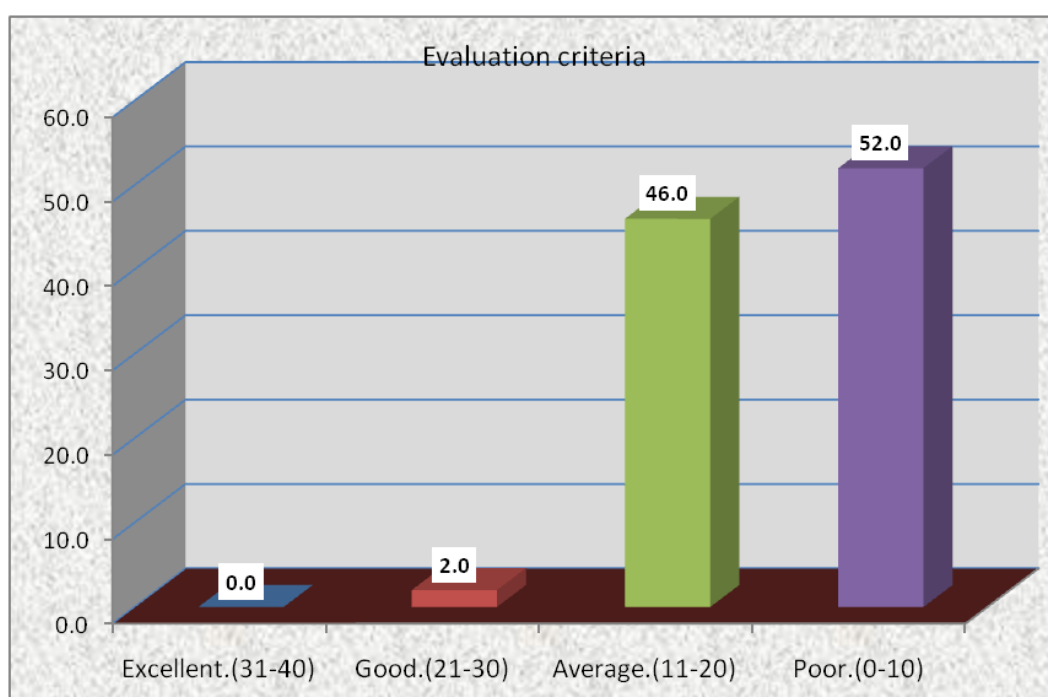


Figure No: 1 3- D clustered column Diagram showing Level of Scores

Table No 3: Distribution of Mean, median, standard deviation, Maximum score and minimum score obtained Range and Mean Percentage scores.

Descriptive Statistics	Mean	Median	S.D.	Maximum score	N= 200		
					Minimum score	Range	Mean %
KNOWLEDGE Score	10.84	10	3.71	21	5	16	27.10
Maximum knowledge score =40 Minimum knowledge score =0							

Table 3. shows the distribution of Mean, Median, S.D, Maximum and minimum scores obtained and mean percentage scores among respondents. It can be seen from the table that Mean knowledge score was 10.84 with a S.D of +/- 3.71, median 10. Maximum score obtained by the respondents was 21 out of total obtainable score of 40, minimum score obtained was 05, the range was 16 and Mean percentage score of 27.10. It indicates poor knowledge scores regarding premenopausal symptoms among women in the age group of 40 – 50 years.

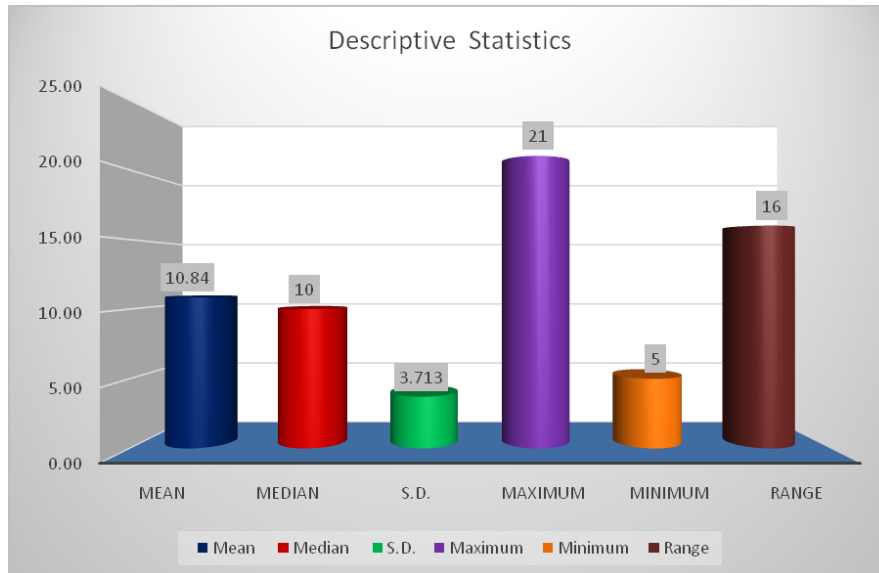


Figure No: 2. The clustered cylinder Diagram showing descriptive statistic

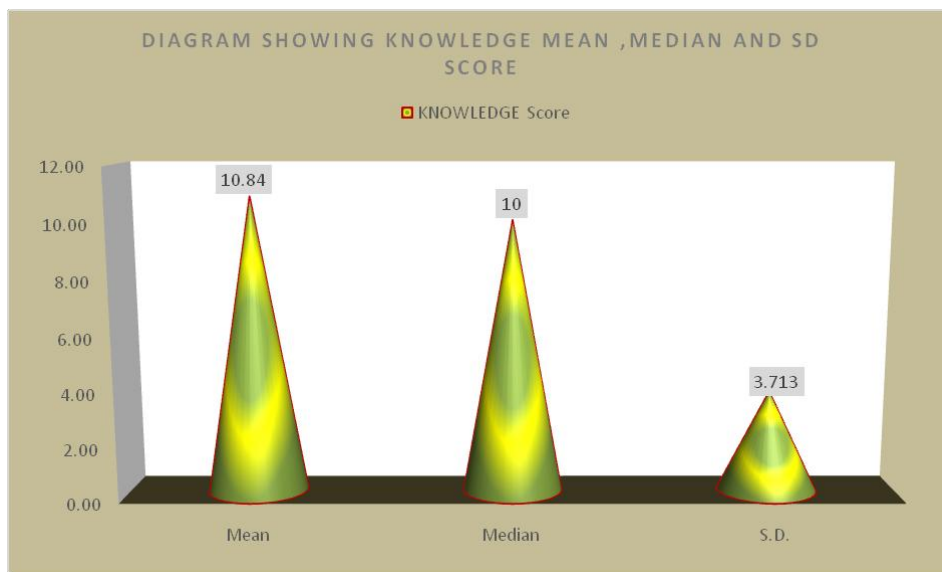


Figure No: 3. The clustered cone Diagram Showing Mean, Median and S.D Scores

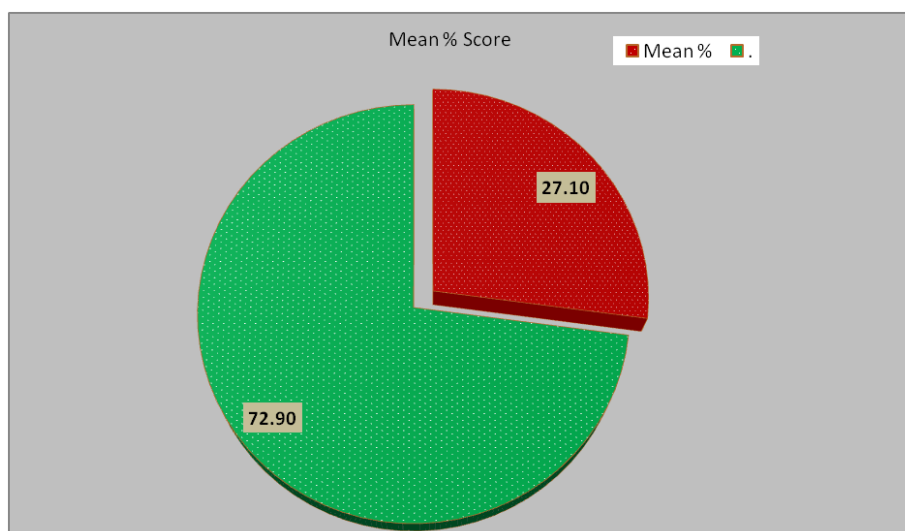


Figure no: 4. The Exploded pie Diagram Showing Mean Percentage Scores

To find an association between the knowledge regarding premenopausal symptoms and its management among middle aged women with their selected demographic variables

Table No:4. Table Showing Associations of Scores and Demographic Variables

DEMOGRAPHIC DATA		LEVELS (N=200)				ASSOCIATION WITH KNOWLEDGE SCORE		
		Below average	Average	Good	Excellent	Chi Test	df	P Value
Age in years	40-45 years	57	40	3		3.527	2	0.171 NS
	45-50 years	47	52	1				
Religion	Sikh	71	49	0		58.266	6	0.000 Significant
	Hindu	31	42	3				
	Christian	2	1	0				
	Muslim	0	0	1				
	Other	0	0	0				
Area of Residence	Urban Area	104	92	4		NA		
	Rural Area	0	0	0				
Type of Family	Nuclear family	86	75	3		0.181	2	0.914 NS
	Joint family	18	17	1				
Monthly income of the family (in rupees)	<5,000	31	20	0		24.744	6	0.000 Significant
	5,001 to 10,000	62	41	1				
	10,001 to 15,000	10	24	3				
	> 15,001	1	7	0				
Marital Status	Married	103	92	4		0.928	2	0.629 NS
	Unmarried	1	0	0				
	Divorced	0	0	0				
	Widow	0	0	0				
Number of children	One	45	37	3		7.199	6	0.303 NS
	Two	12	20	1				
	Three or Above	44	34	0				
	Nil	3	1	0				
Educational Status	No formal education	29	14	2		22.524	8	0.004 Significant
	Primary education	41	19	1				
	Secondary education	23	36	1				
	Graduate	9	21	0				
	Postgraduate	2	2	0				
Occupational Status	Laborer	28	10	0		23.731	10	0.008 Significant
	Agriculture	14	4	0				
	Self employed	53	56	4				
	Private Employee	8	15	0				
	Government Employee	1	6	0				
	Professional	0	1	0				
Nutritional Status	Vegetarian	77	73	3		8.603	4	0.072 NS
	Non – Vegetarian	5	10	1				
	Mixed	22	9	0				
Do you have any history of Hysterectomy, Oophorectomy?	Yes	21	36	0		10.219	2	0.006 Significant
	No	83	56	4				
Are you undergone Hormonal therapy?	Yes	11	26	0		11.051	2	0.004 Significant
	No	93	66	4				

Table No:5 Itemwise analysis (Table Showing Response in frequency percentage of Subjects according to each question)

Area>	Q no's	Correct (f)	Correct (f)%	Incorrect (f)	Incorrect (f)%
PART - B - KNOWLEDGE	Qno.1	80	40	120	60
	Qno.2	106	53	94	47
	Qno.3	62	31	138	69
	Qno.4	69	34.5	131	65.5
	Qno.5	59	29.5	141	70.5
	Qno.6	100	50	100	50
	Qno.7	47	23.5	153	76.5
	Qno.8	18	9	182	91
	Qno.9	90	45	110	55

Qno.10	44	22	156	78
Qno.11	68	34	132	66
Qno.12	29	14.5	171	85.5
Qno.13	51	25.5	149	74.5
Qno.14	20	10	180	90
Qno.15	23	11.5	177	88.5
Qno.16	29	14.5	171	85.5
Qno.17	70	35	130	65
Qno.18	66	33	134	67
Qno.19	80	40	120	60
Qno.20	65	32.5	135	67.5
Qno.21	50	25	150	75
Qno.22	19	9.5	181	90.5
Qno.23	25	12.5	175	87.5
Qno.24	54	27	146	73
Qno.25	52	26	148	74
Qno.26	58	29	142	71
Qno.27	99	49.5	101	50.5
Qno.28	50	25	150	75
Qno.29	20	10	180	90
Qno.30	46	23	154	77
Qno.31	23	11.5	177	88.5
Qno.32	90	45	110	55
Qno.33	65	32.5	135	67.5
Qno.34	20	10	180	90
Qno.35	88	44	112	56
Qno.36	84	42	116	58
Qno.37	27	13.5	173	86.5
Qno.38	23	11.5	177	88.5
Qno.39	52	26	148	74
Qno.40	47	23.5	153	76.5

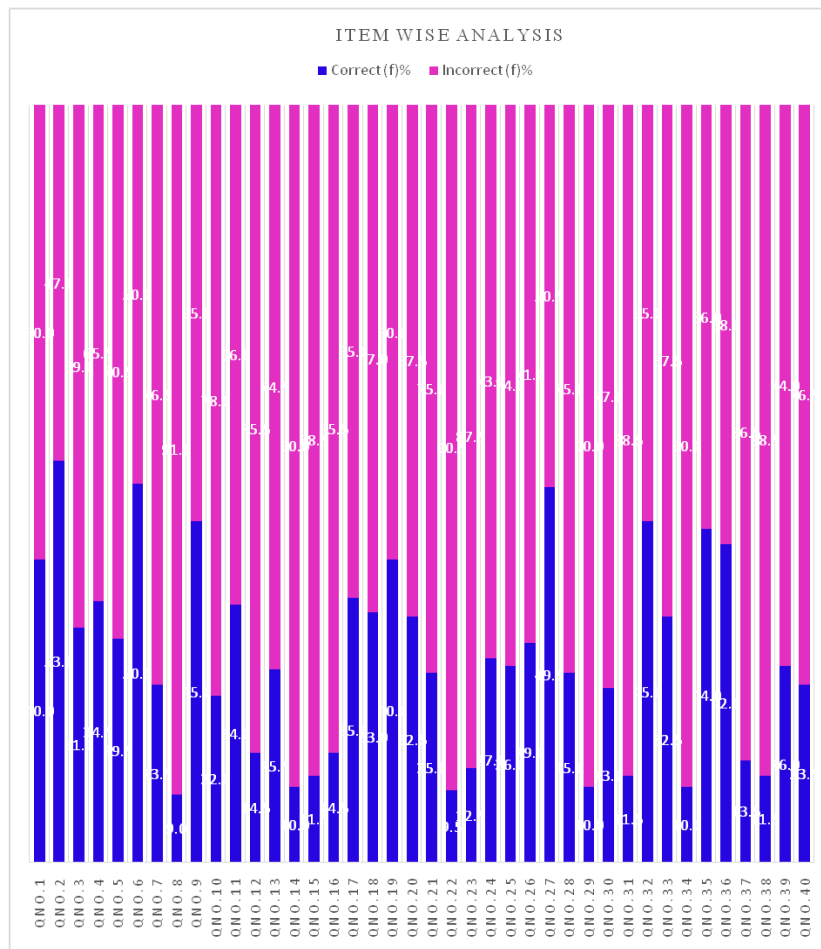


Figure No: 5 The stacked column showing Itemwise analysis

IV. Conclusion

The findings revealed that there was poor knowledge of middle aged women regarding premenopausal symptoms and its management. There was a statistically significant difference between knowledge score regarding premenopausal symptoms and its management significant at $p < 0.001$. Hence the research (H1.1) hypothesis was accepted.

Recommendations for further study:

On the basis of the findings of the study the following recommendations have been made:

1. Similar study can be undertaken with a small sample to generalize the findings.
2. A same study can be done as a quasi experimental study among middle aged women.

Limitations:

1. The sample size was large to 200 middle aged women.
2. The study was confined to a large sample selected by non-probability sampling technique.
3. The study setting was limited to middle aged women who were residing in Bhucho Mandi, Bathinda , Punjab.
4. The study was limited to the experience of the researcher.

References

- [1]. Dr. marahatta R (khanal). A study of menopausal symptoms among peri and postmenopausal women attending NMCTH , Kathmandu Nepal. NMCJ. 2012;14 (3) : Pp251-255
- [2]. Pal A, Dr. Hande D, Dr. Khatri S. Assessment of menopausal symptoms in perimenopause and post menopause women above 40 years in rural area. IJHBR. April 2013; Volume: 1, Issue: 3 : Pp 166-174
- [3]. Mrs. Natarajan J, Msc(N) , Dr. Seshan V PhD(N) & Mrs. Muliira R, Msc(N). Distress during the Menopausal Transition and Their Impact on the Quality Of Life of Women. IOSR-JNHS. Oct. 2013;Volume 2, Issue 4 , Pp 01-10
- [4]. Patel V, Koshy S , Ravindra H. effectiveness of structured teaching programme on knowledge regarding menopausal symptoms and its management among women. IOSR-JNHS. May-Jun 2014; volume 3 , Issue 3 ver,III : Pp 22-26
- [5]. Prof. Barathi SK, Dr. Kalavathi S. Assessment of Knowledge on Signs and Symptoms of Menopause among Premenopausal women. IOSR-JNHS. Mar-Apr. 2014; Volume 3, Issue 2 Ver. III: Pp 33-37
- [6]. Amisha S, Kumari V. Effectiveness of Structured Teaching Programme on Knowledge Regarding Menopausal Problems among Women at Rural Areas at Mangaluru. IJHSR. Sept. 2016; Vol.6; Issue 10: Pp 188-195.
- [7]. Pathak V, Ahirwar N, Ghate S. A Study to assess knowledge, attitude and practice regarding menopause among menopausal women attending outdoor in tertiary care centre. IJRCOG. 2017 May;6(5): Pp 1848-1853
- [8]. Mohamed H, Lamadah S. Improving women's practices for reducing the severity of menopausal symptoms. JNEP. December 8, 2015-2016; Vol.6 : Pp 72-83.
- [9]. Kate B. Is menopause on the horizon: assess from www.menopause.about.com. Oct 25, 2017.
- [10]. GEHAD M. MATTY A. Effect of Menopausal Symptoms on Women's Quality of Life in Benha City (Egypt) and Arar City (Kingdom of Saudi A Prevalence of menopausal symptoms, its effect on quality of life among Malaysian women and their treatment seeking behavior. Med. J. Cairo Univ. September, 2010; Vol. 78, No. 1: Pp 319-330.
- [11]. Ibraheem O.M, Oyewole O.E and Olaseha I.O: Experiences and Perceptions of Menopause among women in Ibadan South East Local Government area, Nigeria. Afr. J. Biomed. Res. May, 2015; Vol.18: Pp 81

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