

PREVALENCE AND COPING STRATEGIES: MENOPAUSAL SYMPTOMS AMONG WOMEN

Arundeeep Kaur

Lecturer, Chief Khalsa Diwan international Nursing College, Amritsar, Punjab, India.

DOI: <http://doi.org/10.47211/idcij.2014.v01i03.003>

ABSTRACT

Menopause is a natural physiological event. It is a time of cessation of ovarian function resulting in permanent amenorrhea. Every women faces menopause and some of them face uncomfortable physical side effects and loss of their youth. The mean age of menopause in India is 47.5 years old. The main aim of this study is to assess the prevalence of menopausal symptoms and coping strategies among women in selected areas of Amritsar with view to develop guidelines to enhance the knowledge of postmenopausal women regarding menopausal symptoms and coping strategies. Develop guidelines to enhance the knowledge of postmenopausal women regarding menopausal symptoms and coping strategies. There is a weak positive correlation between prevalence and coping strategies of menopausal symptoms. It is concluded that the prevalence of menopausal symptoms is high in postmenopausal women. Improved health care programs and high level coping strategies about the menopausal symptoms might help give women a better quality of life.

Key Words: Menopausal symptoms, Prevalence, Coping Strategies, Women.

ABOUT AUTHOR:



The Author Ms Arundeeep kaur is lecturer in Chief Khalsa Diwan International Nursing College, Amritsar, Punjab, India. She has presented papers in various national and International conferences.

INTRODUCTION:

One-fifth of women in India experience menopause by age 41. Times reported that the onset of menopause usually begins between ages 45 and 55, with a worldwide average of 51. Premature menopause is the end of menstruation before age 40 and affects about 1% of women worldwide. Menopause involves hormonal changes in women's body that may cause physical and psychological symptoms. The prevalence of menopausal symptoms among postmenopausal women was 74.2%; somato-vegetative was the most common menopausal symptom and in somato-vegetative symptoms joint and muscular discomfort was more prevalent than the other symptoms. Most of the postmenopausal women used medium level of coping strategies in the menopausal symptoms. Medical personnel who take care of menopausal women should pay more attention to these symptoms and establish strategies for prevention and treatment of these symptoms. Greater efforts to identify menopausal symptoms and correct them might improve postmenopausal women's quality of life.

Conceptual Framework:

In the present study, conceptual framework is developed on the basis of concepts from Sister Roy' Adaptation model (1984). Through this conceptual framework, the researcher intends to test and explain the theoretical relationship among concept such as prevalence of menopausal symptoms and coping strategies among women. The conceptual framework addresses the relationship between prevalence and coping strategies how the subjects will behave (cope) in relation to their prevalence of menopausal symptoms and how they will respond (adapt) to the coping strategies.

Assumption:

There is occurrence of menopausal symptoms among postmenopausal women and they may be using some coping strategies.

METHODS AND MATERIALS:**Research Approach/Design:**

For the present study, Non-experimental approach and descriptive research design was considered appropriate as it aimed to assess the prevalence of menopausal symptoms and coping strategies among postmenopausal women.

Research Setting:

The study was conducted in Mahna Singh road and Narayan Garh, (Chheharta), areas of Amritsar (Punjab). The population of present study was postmenopausal women. The total sample size was 190 postmenopausal women. Purposive sampling technique was used to select the sample. Prevalence and Coping strategies of menopausal symptoms, Age, Dietary Pattern, Type of Family, Education, Employment status, Source of Information. A Standardized Tool Menopausal Rating Scale and a Self structured Tool Coping Strategies Checklist was used. Part 1- includes Socio-Demographic Profile, Part 2 consisted Menopausal Rating Scale to Assess the Prevalence of Menopausal Symptoms with 11 items, Part 3 include A checklist to assess the level coping strategies in menopausal symptoms with 28 items.

Criterion Measure:**Menopausal Rating scale (five point scale):**

Max. menopausal symptoms score = 44, Min. menopausal symptoms score = 0

Somato-vegetative symptoms (>25%), Psychological symptoms (>25%) and Urogenital symptoms (>25%)

Coping strategies checklist:

Max. Coping strategies score = 28, Min. coping strategies score = 0

Low level coping strategies (<25%), Medium level coping strategies (25-50%), High level coping strategies (>50%).

Data Collection Procedure:

Prior to data collection procedure the formal permission was obtained from the Medical Officer and Councilor of areas of Amritsar. Prior to interview with the respondents, the investigator gave self introduction to the women and explained the purpose of gathering information: a good rapport was established with the subjects. They were assured that their responses will be kept confidential and the information will be used only for research purpose. Verbal consent was taken from postmenopausal women. The time given to each respondent for interview was average 20-30 minutes. At the end, guidelines were provided to the postmenopausal women and queries of the subjects were clarified.

RESULTS:**Table 1****Frequency and Percentage Distribution of Sample Characteristics****N=190**

Demographic Variables	Frequency (n)	Percentage (%)
Age (In years)		
45-48	34	17.9
48-51	49	25.8
51-54.1	51	26.8
54-57	56	29.5
Dietary Pattern		
Vegetarian	121	63.6
Non vegetarian	69	36.3
Type of Family		
Nuclear	78	41
Joint family	112	58.9
Education		
Illiterate	121	63.7
Primary	42	22.1
Secondary	22	11.6
Graduation or above	5	2.6
Employment Status		
Homemaker	149	78.5
Private job	17	8.9
Government job	1	0.5
Self-employment	23	12
Source of Information		
Relatives	90	47.3
Friends	62	32.7
Health personnels	37	19.5
Books/Magazines/Newspapers	1	0.5

Table 1 reveals the frequency and percentage distribution of sample characteristics.

Table 2**Frequency and Percentage Distribution of Prevalence of Menopausal Symptoms among Postmenopausal Women****N=190**

Prevalence of Menopausal Symptoms	n	%	Mean	SD
Overall Prevalence	141	74.2	13.8	5.1
Somato-vegetative Symptoms	125	88.6	9.12	2.73
Psychological Symptoms	83	58.8	7.08	2.21
Urogenital Symptoms	39	27.6	5.15	1.56

Maximum menopausal symptoms score= 44

Minimum menopausal symptoms score= 0

Table 2 shows the frequency and percentage distribution of prevalence of menopausal symptoms among postmenopausal women. Out of 190 postmenopausal women, 141 (74.2%) were having prevalence of menopausal symptoms. Majority (88.6%) of postmenopausal women was having somatic-vegetative symptoms and it was followed by psychological symptoms (58.8%) and urogenital symptoms (27.6%).

Table 3

Frequency and Percentage Distribution of Coping Strategies of Menopausal Symptoms among Postmenopausal Symptoms

				N=141
Levels of Coping Strategies	n	%	Mean	SD
Low Level	22	15.6	5.36	1.43
Medium Level	77	54.6	11.66	1.83
High Level	42	29.7	17.38	2.46

Maximum coping strategies score= 28

Minimum coping strategies score= 0

Table 3 show the frequency and percentage distribution of coping strategies of menopausal symptoms among postmenopausal women. Most (54.6%) of the postmenopausal women used medium level of coping strategies in menopausal symptoms, 29.7% women used high level of coping strategies and only 15.6% women used low level of coping strategies.

Table 4

Correlation between Prevalence and Coping Strategies of Menopausal Symptoms

N=141

Variables	Mean	SD	Coefficient of correlation
Prevalence	16.09	3.96	r = 0.25**
Coping Strategies	12.33	4.31	

**Significant at $p < 0.01$

Prevalence Score

Maximum score= 44

Minimum score= 0

Coping Strategies Score

Maximum score= 28

Minimum score=

Table 4 depicts the correlation between the prevalence and coping strategies of menopausal symptoms. It shows that there is weak positive correlation between prevalence and coping strategies of menopausal symptoms. It was statistically significant at $p < 0.01$.

Relationship of prevalence of menopausal symptoms and coping strategies among postmenopausal women with selected socio-demographic variables.

According to relationship of prevalence and coping strategies of menopausal symptoms among postmenopausal women with selected demographic variables such as age (in years), dietary pattern, type of family, education, employment status and source of information found statistically non-significant at $p < 0.05$.

DISCUSSION:

Regarding prevalence of menopausal symptoms among postmenopausal women revealed that overall prevalence rate of menopausal symptoms was 74.2%, prevalence rate of somato vegetative symptoms was 88.6% and prevalence of joint and muscular discomfort was 79.4%. **Funmilola M Olaolorun & Taiwo O Lawoyin 2009** supported this finding, they reported that prevalence rate of menopausal symptoms was 84.5%. Coping strategies of menopausal symptoms among postmenopausal women showed that 54.6% postmenopausal women used medium level of coping strategies. The similar study by **Unal Ayranci et. al 2009** found that **65.2% midlife women used moderate level of coping strategies**. Correlation between the prevalence of menopausal symptoms and coping strategies among postmenopausal women found that there was weak positive correlation between prevalence and coping strategies of menopausal symptoms. It was statistically significant at $p < 0.01$ level. This finding conformity with the finding of **Price L Sheri et. al 2007** showed that menopause having significant impact on coping strategies in menopausal women.

CONCLUSION

It is concluded that the prevalence of menopausal symptoms is high in postmenopausal women. Improved health care programs and high level coping strategies about the menopausal symptoms might help give women a better quality of life.

REFERENCES:

1. University of Maryland Medical Center. Menopause. UMMC. 2011. <<http://www.umm.edu/altmed/articles/menopause000107.htm#ixzz1n76f4U00>>.
2. Melissa Conrad stoppler. Menopause. Medicine Net. 2010, <<http://www.medicinenet.com>>...>menopause az list>menopause index>.
3. Institute for Social and Economic Change, London's Times. One-fifth of women in India experience menopause by age 41. 2007. <<http://www.news-medical.net/news/2007/01/28/21541.aspx>>.
4. Mayo Clinic staff 2011. Causes of menopause. Mayo clinic. 2011. <<http://www.mayoclinic.com/health/menopause/ds00119/dsection=causes>>.
5. Oram David , Chakravarti Sudip. The pathology of the menopause and climacteric. Current Medical Research and Opinion. 1975; 3 (3): 11-19. Available from<<http://informahealthcare.com/doi/abs/>>
6. Menopausal symptoms organization. 34-Menopause symptoms. 2004. < <http://www.34-menopause-symptoms.com>>.