

# Impact of Menopausal Symptoms on Quality of Life in Indian Women

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## Abstract

Menopause is a normal physiologic process, defined as the permanent cessation of menses for 12 months or more due to cessation of ovarian hormone production. The age at natural menopause is between 45 years and 50 years. Early menopause is defined as menopause occurring before the age of 45 years, while premature menopause occurs before the age of 40 years. Around 20% of the patients suffer from severe menopausal symptoms, 60% suffer from mild symptoms and 20% may have no symptoms at all. Health workers are searching for different ways to manage menopause to minimize discomfort and inconvenience during menopausal transition, so as to improve the quality of life of these women. The aim of the study was to study the impact of menopausal symptoms on quality of life using MRS scale, HFRDIS scale, WHO-BRFE scale. In Western India very few studies have been done on menopause and no published literature has been found among these females. Thus, the present study focuses on the various climacteric symptoms on quality of life using the Greene climacteric scale and Menopause Specific Quality Of Life Scale among females of Pune Maharashtra.

**Keywords:** MRSscale, HFRDISscale, WHO-BRFE scale, Menopause, Premenopausal, perimenopausal.

## Introduction

Etymologically, the origin of the word menopause lies in the Greek words, “meno” (menses, month) and “pause” (stop, cease)<sup>[1]</sup>

Menopause is a normal physiologic process, defined as the permanent cessation of menses for 12 months or more due to cessation of ovarian hormone production. According to the World Health Organization (WHO) classification, premenopausal women are those who have experienced regular menstrual bleeding within the last 12 months,

perimenopausal women are defined as those women who have experienced irregular menses within the last 12 months or the absence of menstrual bleeding for more than 3 months but less than 12 months, and postmenopausal women are those who have not experienced menstrual bleeding for 12 months or more. The age at natural menopause is between 45 years and 50 years. Early menopause is defined as menopause occurring before the age of 45 years, while premature menopause occurs before the age of 40 years<sup>[2]</sup>

Menopause is a critical period in a woman's life that not only marks the end of reproductive ability but is also associated with multiple physical, vasomotor, psychological, and sexual complaints<sup>[3]</sup>

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Around 20% of the patients suffer from severe menopausal symptoms, 60% suffer from mild symptoms and 20% may have no symptoms at all. Menopausal symptoms include mood changes, bloating, aches and pains, headaches, hot flushes, night sweats, tiredness, insomnia, weight gain, depression, irritability, forgetfulness, lack of concentration, urinary frequency, vaginal dryness and sexual problems. These symptoms vary in severity and character from person to person<sup>[4]</sup>

Health workers are searching for different ways to manage menopause to minimize discomfort and inconvenience during menopausal transition, so as to improve the quality of life of these women. Since estrogen deficiency is the cause of perimenopausal symptoms, estrogen replacement therapy (HRT) is the most effective treatment. However, HRT has been associated with an increased risk of breast cancer, uterine cancer, thromboembolic heart disease and stroke. Recent results from Women's Health Initiative (WHI) and Heart and estrogen/progestin replacement study (HERS), demonstrated increased risk of cardiovascular disease (CVD) and breast malignancy amongst women randomized to hormone therapy. More women are becoming aware of the serious side-effects; hence the use of HRT for menopausal symptoms has decreased.

Considering the limitation of HRT, the present need is to explore new options for the management of menopausal symptoms in the form of non-hormonal drug therapy and non-pharmacological measures. The current recommendations are: Change in lifestyle, Regular exercise, Diet, Yoga, therapeutic massage and other stress-reducing measures<sup>[5]</sup>

The aim of the study was to study the impact of menopausal symptoms on quality of life using MRS scale, HFRDIS scale, WHO-BRFE scale.

## Material and Methods

Menopausal Rating Scale [MRS], Hot Flashes Related Daily Interference Scale.[HFRDIS], WHO Quality Of Life-BREF SCALE these questionnaires were used to know to menopausal symptoms on quality of life.

**Inclusion criteria:** Women with age between 40 to 50 years.

### Exclusion criteria:

Women on medications such as anxiolytics, anti-depressants, to avoid treatment-related effects, diagnosed with serious disease or mental retardation And women not giving consent for the data collection due to own reasons.

## Result

For the study we have taken study sample of 100 women of all menopausal stages falling in age group of 40-55 years.

The Total mean age in the Perimenopausal women is 42.45 year, The mean age of Menopausal women is 48 years and The mean age of Postmenopausal women is 52.63 years.

The Perimenopausal women with Normal BMI are 55% with Overweight BMI are 27% with Obese BMI are 18%. The Menopausal women with Normal BMI are 37%, with Overweight BMI are 53% and with Obese BMI 10%. The Postmenopausal women with Normal BMI are 33%, with Overweight BMI are 50% and with Obese BMI are 17%.

The Perimenopausal women have total mean score of GCS =16.08 and Total mean score of MSQOL is 28. The menopausal women have Total mean score of GCS= 13.17 and Total mean score of MSQOL is 27.21. The postmenopausal women have Total mean score of GCS=14.13 and Total mean score of MSQOL is 29.37.

By GCS scale the Perimenopausal women with sedentary lifestyle have more symptoms (i.e.) 16.87 compared to the women practicing yoga (i.e.) 15.42. Also Menopausal women with sedentary lifestyle have more symptoms (i. e.) 14.45 compared to the women practicing yoga(i.e.) 11.05. In Postmenopausal women with practicing Yoga have less symptoms(i.e.) 13.41 compared to sedentary lifestyle women (i.e.)15.38.

By MSQOL scale, In the Perimenopausal women the quality of women is more affected I sedentary lifestyle women (i.e.) 30.87 than the women practicing Yoga (i.e.) 25.57. In Menopausal women the quality of life is more affected in women with sedentary lifestyle (i.e.) 31.36 than compared o the women practicing Yoga (i.e.) 21.94. In Postmenopausal women the quality of life is more affected in sedentary lifestyle women (i.e.) 32.41 than the women practicing Yoga (i.e.) 28.

### Discussion

For the above study we have screened a total of 150 subjects out of which 100 women of all menopausal stages falling in category of 40 to 55 years of age group included according to the inclusion criteria. Data was documented by using Greene Climacteric Scale and Menopause Specific Quality Of Life Scale and written consent form was taken from all the subjects. The 100 women were divided into 3 groups i.e. Perimenopausal, Menopausal and Postmenopausal women's. The women were again divided into exercising and sedentary life style women. The Perimenopausal women are 40, Menopausal women are 30 and Postmenopausal women are 30. The risk factor for severity of menopausal symptoms among demographic, health, lifestyle and BMI was also assessed. Results from current study show medium family size, lower age at menarche.

The Menopause-specific quality of life is self-administered and consists of a total of 29 items in a

Likert scale format. Each item assesses the impact of one of four domains of menopausal symptoms, as experienced over the last month (vasomotor, psychosocial, physical and sexual). Items pertaining to a specific symptom are rated as present or not present and if bothersome on a zero to six scale [7]. The Greene climacteric scale is a self-administered and consists of a total of 21 items. It provides a brief measure of menopausal symptoms. It is a for pointer scale which is divided as 0= Not at all, 1= A little, 2= Quite a bit, 3= Extremely. [11].

The mean age at menopause in present study was observed as 48 years, which is similar to the mean age at menopause reported by P.P. Venugopalan, and [7]. However it is higher in comparison to mean age at menopause of Indian women of 44 years by Singh and Arora [8] and 44.7 years by Shah [9]. Another study done by Peeyananjarassri (2006), conducted a survey among 270 women aged 45-65 years who attended the gynecological and menopause clinic in Songklanagarind Hospital shows average age at menopause 48.7 years which is similar to our study result [10]. The standard mean age of attaining menopause among Indian women is 47.5 [12].

According to the menopausal groups evaluated we found in our study that the Menopausal symptoms are more likely observed in Perimenopausal i.e. 16.08 women comparative to Menopausal women i.e. 13.17 and Postmenopausal women i.e. 14.13. This is very similar to the results reported in study of Noori and Nisar Sohoo [Severity of Menopausal symptoms and the quality of life at different status of Menopause: a community based survey from rural Sindh, Pakistan] [13]. One recent study performed on Jordanian women showed that a higher frequency of symptoms occurred in the perimenopausal women compared to menopausal women and postmenopausal women [14]. In contrast, the study by Chedraui in Ecuador found that there is a significant increasing trend in the rate of

menopausal symptoms from peri to post menopausal women; this also might reflect the influence of different racial/ethnic groups on menopausal symptoms<sup>[15]</sup>.

In the study done by Sagar Borker and Shruthi Bhat they found the quality of life is more compromised in postmenopausal women compared to perimenopausal and menopausal women<sup>[7]</sup> Our result showed that the postmenopausal women have 29.37 comparatively more than perimenopausal i.e.28 and postmenopausal women i.e. 27.21. The similar results were reported in study of Aida AlDughaiter and Mohammed AlAteeq [Menopausal symptoms and quality of life among Saudi women visiting primary care clinics in Riyadh, Saudi Arabia]<sup>[16]</sup>.

The effects of yoga participation n the quality of life of women in our study showed that the women practicing yoga daily have less compromised quality of life and menopausal symptoms in all menopausal stages. The similar results were reported by the Brandi Crowe and Francis McGuire [The effects of yoga participation on women's quality of life and symptom management during the menopausal transition]<sup>[17]</sup>

### **Conclusion**

The current study, attempted to assess the symptomatology of menopause in all stages of menopause. Perimenopausal symptoms widely vary in women populations, accurate recording and understanding of which is essential to plan effective investigations to improve the quality of life.

### **Limitation of Study:**

1. The diagnosis of menopause is often retrospective, it have to rely on accurate knowledge & unbiased reporting of age. The accuracy of information depends upon period of time since menopause, alertness, motivation & educational level of the women studied.

2. The prevalence of hot flushes & night

sweats, which are important symptoms. They are misinterpreted or misunderstood by women in the current study setting. This could be due to misinterpretation of symptoms & a shy attitude.

### **Further Scope of Study:**

The menopause related symptoms have been studied extensively in western countries, few data available in Asia especially in south Asia. There are many misunderstandings regarding menopausal symptoms among women's. Hence, awareness in disseminating health education for postmenopausal women is prime importance.

**Ethical Clearance:** Ethical approval was obtained from MGM Medical College Institutional Ethics Committee.

**Conflict of Interest:** Authors declared no conflicts of interest.

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