



Evaluation of Menopause Women Awareness about Postmenopausal Changes: A Cross-Sectional Study

Aqdas Dawood Salman^{*1} , Wisam Mashaan Muttaleb² 

*¹Assistant Professor, ²Instructor PhD, Department of Maternal and Neonate Nursing, College of Nursing, University of Baghdad, Iraq.

Abstract

Background and objectives: Menopause is one of the most critical stages of life among women. This research aim was to assess the level of awareness among menopausal women regarding postmenopausal changes, with a focus on understanding their knowledge of symptoms, health implications, and problems.

Materials and Methods: A cross-sectional study was conducted, involving 100 women menopausal women aged 50–65 years from diverse sociodemographic backgrounds. Participants were recruited from Baghdad hospitals using face to face technique to collect data. A menopause rating scale was utilized to collect data on participants' awareness of postmenopausal changes.

Results: Preliminary analysis of the data indicates more than half of participants were aware of postmenopausal changes, with Hot flushes, Sweating, Heart discomfort (Heart skipping, heart racing, tightness), Sleeping problems, Joint and muscular discomfort pain in the joints, rheumatoid complaints being the most commonly recognized. However, there were variations in awareness levels across different aspects of postmenopausal health.

Conclusion: The study highlights the importance awareness targeting postmenopausal changes of women. While a substantial proportion of participants exhibited awareness of postmenopausal changes. The findings underscore the need for personalized and comprehensive education programs to empower menopausal women in managing their health effectively.

Key Words: Menopause, postmenopausal changes, awareness, symptoms, health implications

Article Summary: Submitted: 03-March-2024 Revised: 22-April-2024 Accepted: 27-May-2024 Published: 30-June-2024

Quick Response Code:



Web Site
<http://ijmsnr.com/>

DOI
10.55349/ijmsnr.202442610

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-Non-Commercial-ShareAlike 4.0 International License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

Corresponding Author: Ms. Wisam Mashaan Muttaleb, Instructor PhD, Department of Maternal and Neonate Nursing, College of Nursing, University of Baghdad, Iraq.
Email ID: wesamm@conursing.uobaghdad.edu.iq

Introduction

Menopause is one of the most critical stages of life among women. Defining the age for menopause is somewhat challenging, and according to estimations from cross-sectional studies, it has been reported to average 50–52 years old. [1] Menopause is permanent cessation of menstruation at the end of reproductive life due to loss of ovarian follicular activity and hormone deficiency which causes various symptoms and negative effects on life. [2] It is divided into natural menopause that occurs spontaneously and induced menopause, which occurs as a consequence of ovarian failure due to medical causes such as chemotherapy and radiation or removal of both ovaries. During menopausal transition, as a result of hormonal changes, women start to experience menopausal symptoms such as urogenital symptoms, sleep problems, mood disturbances, and vasomotor symptoms, particularly hot flushes. Hot flushes and vaginal dryness were considered the most commonly encountered symptoms among Jordanian women. Moreover, estrogen decline and central obesity during menopause increase the risk of developing chronic diseases such as type 2 diabetes, dyslipidemia, osteoporosis, and cardiovascular disease. [3]

Every woman's experience of the menopausal is unique: she may experience all of the symptoms or none of them. Some women find the transition barely noticeable while others find it life altering. [4] Menopausal women who experience no symptoms at all may be less inclined to consider hormone use if they believe hormone replacement therapy (HRT) is only for the relief of symptoms and are not aware of its preventive health care benefits. [5] This study aimed to investigate the awareness of menopause in women from 40 to 65 years of age.

How to cite this article: Salman AD, Muttaleb WM. Evaluation of Menopause Women Awareness about Postmenopausal Changes: A Cross-Sectional Study. Int J Med Sci and Nurs Res 2024;4(2):6–10.

Materials and Methods

Study Design, Study Setting and Sample Size: We conducted a cross-sectional study was conducted on 100 women during menopause period that their menstrual cycle was stop for one years at least at Baghdad hospitals by using a postpartum awareness scale.

Data Collection Procedure: All participants were informed about study procedures and they gave their agreement to participate in the study. The data was collected by face-to-face interview for approximately 15 minutes, Answers were completely filled by the researcher throughout the interview.

Study Tool: The study questionnaire consisted of two sections, first section. The first one comprised of 5 questions to identify certain sociodemographic characteristics of the participants and the second section was the Menopause Rating Scale.

Data Management: Collected data was entered and compiled by using Microsoft Excel 2010, and data was analysed by using SPSS 23.0 version.

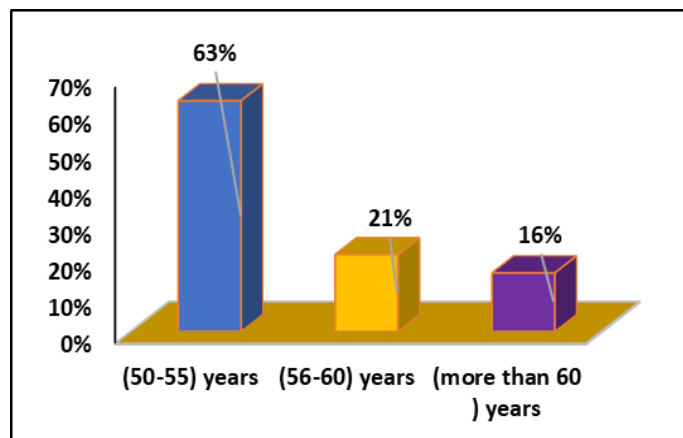
Statistical Analysis: Categorical data was expressed as frequency and proportions. Continuous data was expressed as mean and standard deviation.

Ethical Clearance and Statement: We obtained properly scientific research committee and ethical clearance approval before conducted this study from Ministry of Health (MOH), Department of Planning and Health Research Section), Ministry of Planning, Central Statistical Organization and Information Technology, and the from the concern authorities of Al-Elwia Maternity Teaching Hospital, Iraq.

Results

In the present cross-sectional study, we have recruited and incorporated 100 women menopausal women aged 50 – 65 years from diverse sociodemographic backgrounds. Data were collected from Baghdad

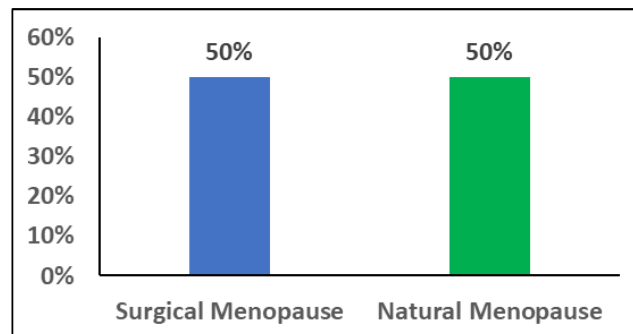
Figure–1 Distribution of the age-group among menopausal women (N = 100)



hospitals using face to face interview technique. A Menopause Rating Scale was utilized to collect data on participants' awareness of postmenopausal changes, including somatic changes, psychological changes, and Urogenital changes.

Among 100 menopausal women, majority of 63% were 50–55 years, 21% were in 56–60 years and more than 60 years were 16% as shown in **Figure – 1**.

Figure–2 Percentage distribution of study sample regarding causes of menopause (N = 100)



Out of 100 menopause women, 50 (50%) were surgical menopause, and 50 (50%) were in natural menopause as shown in **Figure – 2**.

According to women's awareness related to postmenopausal changes was divided into 3 categories. They are somatic changes, psychological changes, and urogenital changes. Under the somatic changes, 82% of women were aware about hot flushes, sweating, heart discomfort, sleeping problems and joint and muscular discomfort. In psychological changes, majority of postmenopausal women 82% were anxiety, physical and mental exhaustion and half of them 50% were depressive mood, and irritability. In urogenital changes, half of them were sexual problems and dryness of vagina and none of them were bladder problems as shown in **Table – 1**.

Discussion

Menopause is an important normal event in women's life. As life expectancy increases, most women will spend more time of life through menopause. This increases females' need to have adequate knowledge about menopause and its health consequences. Aloufi and Hassanien have reported that the majority of menopause women between the age-group of 45 and 65 years old, this finding is consistent with study carried out in Saudi Arabia and founded that the mean age of menopause women was 53.6 ± 5.8 years old. [6] Whereas, AlDughaiter et al. [7] has reported that the mean age at menopause in Saudi women was 48.3 ± 3 years.

Chronic diseases were risk in women with progress her age related to decline of reproductive hormone production. [8 – 9] So, the study finding all women in study sample had chronic disease that because their age was more than fifty years which indicate to increase the incidence of presence of chronic disease and because of hormonal changes that made women high risk to chronic

Table – 1 Distribution of study sample according to women's awareness related to postmenopausal changes

Sl. No.	Items	None		Mild		Moderate		Severe		Very severe		MS
		f	%	f	%	f	%	f	%	f	%	
Somatic changes												
1.	Hot flushes, sweating	0	0	0	0	0	0	18	18%	82	82%	4.8
2.	Heart discomfort (Heart skipping, heart racing, tightness)	0	0	0	0	18	18%	0	0	82	82%	4.6
3.	Sleeping problems (Difficulty in falling asleep, difficulty in sleeping through the night, waking up early)	0	0	0	0	0	0	18	18%	82	82%	4.8
4.	Joint and muscular discomfort (pain in the joints, rheumatoid complaints)	0	0	0	0	18	18%	0	0	82	82%	4.6
Psychological changes												
5.	Depressive mood (feeling down, sad, on the verge of tears, lack of drive, mood swings)	0	0	0	0	0	0	50	50%	50	50%	4.5
6.	Irritability (feeling nervous, inner tension, feeling aggressive)	0	0	0	0	18	18%	32	50%	50	50%	4.3
7.	Anxiety (inner restlessness, feeling panicky)	0	0	0	0	0	0	18	18%	82	82%	4.8
8.	Physical and mental exhaustion n (general decrease in performance, impaired memory, decrease in concentration, forgetfulness)	0	0	0	0	18	18%	0	0	82	82%	4.6
Urogenital												
9.	Sexual problems (change in sexual desire, in sexual activity and satisfaction)	0	0	0	0	0	0	50	50%	50	50%	4.5
10.	Bladder problems (difficulty in urinating, increased need to urinate, bladder incontinence)	0	0	11	0	18	18%	71	71%	0	0	4.3
11.	Dryness of vagina (sensation of dryness or burning in the vagina, difficulty with sexual intercourse)	0	0	0	0	0	0	49	49%	51	51%	4.5

F: Frequency; %: Percentage; MS: Mean of Score

disease. In a study by Fu Y et al [10] reported that the age, education level, type of work, status of smoking habit, body mass index and those who had chronic health problems increase in elderly women.

Regarding causes of menopause the results revealed that half of study sample the cause of menopause was hysterectomy, the awareness of women regarding postmenopausal changes in general was high but Regarding to the somatic changes, more than fifty of participants with a high proportion of agreement that the symptom of Hot flushes, sweating, Heart discomfort (Heart skipping, heart racing, tightness), Sleeping problems, Joint and muscular discomfort pain in the joints, rheumatoid complaints (MS; 4.8, 4.6, 4.8 and 4.6 respectively) are the most changes during menopause these results had agree with Alshogran et al [11], which was conducted among Jordanians women within age ranging between 20 and 40 years who had high level of knowledge about somatic symptom of menopause. The psychological state of women was half of them have some depressive mood changes and anxiety while in Srinagar city 2017, Mushtaf [12] has reported that the women were satisfy and not suffer from any psychological problems also in Turkish women have high percentage of severe psychological symptoms 46.7% including irritability and nervousness 82.2%. Out present study reported that the women are moderate aware (MS=4.3) about the bladder changes during menopause period. Similar type of finding was found in a study done by Armo and Sainik which found that all participants had well knowledge about the urogenital problems that lead to bladder infection and vulvitis and become atrophic during menopause period. [13] In a study by Temkin et al has revealed that the multiple morbidities on the health of women and special needs of women with chronic diseases was critical to address in their life. [14] Most of the menopausal women preferred coping strategy visited a medical professionals or healthcare center. [15] In a review article, many studies showed many factors to affect the age of menopause. During this period, hormonal and biochemical changes give rise to various symptoms in the woman's body. In this period, physical, psychological, social and sexual changes have a negative effect on QOL in women. [16]

Conclusion

This study highlights the importance awareness targeting postmenopausal changes of women. While a substantial proportion of participants exhibited awareness of postmenopausal changes. The findings underscore the need for personalized and comprehensive education programs to empower menopausal women in managing their health effectively.

Source of funding: Self-funding

Conflict of Interest: Nothing to declared by the authors

Authors' Contributions:

ADS, WMM: Authors contributed to the conceptualization; **ADS, WMM:** write the article and checking all the concepts of the manuscript; All authors are approved the final manuscript.

Here, **ADS:** Aqdas Dawood Salman, and **WMM:** Wissam Mashaan Muttalab

References

1. Forouhari S, Khajehei M, Moattari M, Mohit M, Rad MS, Ghaem H. The Effect of Education and Awareness on the Quality-of-Life in Postmenopausal Women. *Indian journal of community medicine: official publication of Indian Association of Preventive & Social Medicine* 2010;35(1):109–114. DOI: <https://doi.org/10.4103/0970-0218.62563>
2. Mangal Maya Prajapati. Awareness regarding menopausal symptoms and effect on daily life of postmenopausal women. *Journal of Patan Academy of Health Sciences* 2020;7(1):130–136. DOI: <https://doi.org/10.3126/jpahs.v7i1.28890>
3. Alshogran OY, Mahmoud FM, & Alkhatatbeh MJ. Knowledge and awareness toward menopause and hormone therapy among premenopausal women in Jordan. *Climacteric: the journal of the International Menopause Society* 2021;24(2):171–178. DOI: <https://doi.org/10.1080/13697137.2020.1813099>
4. Ergin A, Akçay G. The Investigation of the Awareness of Osteoporosis in Postmenopausal Women. *Glob J Obes Diabetes Metab Syndr* 2017;4(3):068-071. DOI: <https://doi.org/10.17352/2455-8583.000028>
5. İkişik H, Turan G, Kutay F, Karamanlı DC, Güven E, Özdemir E, et al., Awareness of Menopause and Strategies to Cope with Menopausal Symptoms of The Women Aged Between 40 and 65 Who Consulted to a Tertiary Care Hospital. *ESTUDAM Public Health Journal* 2020;5(1):10–21 DOI: <https://doi.org/10.35232/estudamhds.632194>
6. Aloufi B and Hassanien. The Association of Menopausal Symptoms and Social Support Among Saudi Women at Primary Health Care Centers in Taif, Saudi Arabia. *Cureus* 2022;14(6):e26122. DOI: <https://doi.org/10.7759/cureus.26122> [PMID] PMID: PMC9298676
7. AlDughaiter A, AlMutairy H, and AlAteeq M. Menopausal symptoms and quality of life among Saudi women visiting primary care clinics in Riyadh, Saudi Arabia. *Int J Womens Health* 2015;7:645-653. DOI: <https://doi.org/10.2147/IJWH.S84709> [PMID] PMID: PMC4493969
8. Kase NG, Gretz Friedman E, Brodman M, Kang C, Gallagher EJ, LeRoith D. The midlife transition and the risk of cardiovascular disease and cancer Part I: magnitude and mechanisms. *Am J Obstet Gynecol* 2020;223(6):820–833. DOI: <https://doi.org/10.1016/j.ajog.2020.05.051> [PubMed] [Google Scholar]
9. El Khoudary SR, Greendale G, Crawford SL, Avis NE, Brooks MM, Thurston RC, et al. The menopause transition and women's health at midlife: a progress report from the

- Study of Women's Health Across the Nation (SWAN). *Menopause* 2019;26(10):1213–1227. [PMC free article] [PubMed] [Google Scholar]
10. Fu Y, Yu Y, Wang S, Kanu JS, You Y, Liu Y, et. al., Menopausal Age and Chronic Diseases in Elderly Women: A Cross-Sectional Study in Northeast China. *Int J Environ Res Public Health* 2016;13(10):936. DOI: <https://doi.org/10.3390/ijerph13100936> [PMID]; PMCID: PMC5086675.
 11. Alshogran OY, Mahmoud FMz, Alkhatatbeh MJ. Knowledge and awareness toward menopause and hormone therapy among premenopausal women in Jordan. *Climacteric* 2021;24(2):171–178. DOI: <https://doi.org/10.1080/13697137.2020.1813099> [PMID]
 12. Armo M, Sainik S. Assessment of Menopausal Symptom Using Modified Menopause Rating scale among Rural Women of Rajnandgaon in Chhattisgarh, a Central India Region. *Journal of South Asian Federation of Obstetrics and Gynaecology* 2020;12(4):209–214. Available from: <https://www.jsafog.com/doi/JSAFOG/pdf/10.5005/jp-journals-10006-1797> [Last Accessed on: 10th February 2024]
 13. Mushtaq S. Post-menopausal Women: A Study of Their Psychophysical Changes with an Impact on Family. *The Anthropologist* 2011;13(2):131–135. DOI: <https://doi.org/10.1080/09720073.2011.11891188>
 14. Temkin SM, Barr E, Moore H, Caviston JP, Regensteiner JG, & Clayton JA. Chronic conditions in women: the development of a National Institutes of health framework. *BMC women's health* 2023;23(1):162. DOI: <https://doi.org/10.1186/s12905-023-02319-x> [PMID]
 15. Ikiisik H, Tauran G, Kutay F, Karamanh DC, Guven E, Ozdemir E, et al. Awareness Of Menopause And Strategies To Cope With Menopausal Symptoms Of The Women Aged Between 40 And 65 Who Consulted To A Tertiary Care Hospital. *ESTUDAM Public Health Journal* 2020;5(1):10–21. Available from: <https://dergipark.org.tr/en/download/article-file/935962> DOI: <https://doi.org/10.35232/estudamhsd.632194>
 16. Ceylan B, Özerdoğan N. Factors affecting age of onset of menopause and determination of quality of life in menopause. *Turk J Obstet Gynecol* 2015;12(1):43–49. DOI: <https://doi.org/10.4274/tjod.79836> [PMID] PMCID: PMC558404