Knowledge on Menopause among Pre Menopausal Women at Selected Area of Puducherry, India

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Abstract
A cross sectional descriptive study conducted to assess knowledge on menopause among pre menopausal women at selected area of Puducherry. 300 samples were selected by simple random sampling technique. The result shows that subjects were in poor knowledge (43%) of ovulation, menopausal problem, medication, nutrition and coping strategies but moderately adequate (58%) in meaning of menopause and adequate knowledge (75%) in the aspect of psychological problem. Hence the subjects were in need of health awareness program to cope with menopausal problems among the pre menopausal women.

Keywords: Menopause, knowledge.

Introduction
Menopause is affecting the life event of millions of menopausal women at global statistics. The main responsibility it goes to nurses for providing comprehensive health care to them and they must bring newer strategies to promote the women support in India to develop health and well-being1,2. If there is no menstrual period continuously for 12 months it can be declared as menopause. It occurs usually at the age of 49 to 51 years. But it can occur naturally at anytime during 40 to 60 years. If it occurs before 40 years it is known as premature menopause3. Menopause can occur due to hysterectomy, chemicals and by inducing artificial radiation etc.

When there is a decline in ovarian functions until after the end of its activities is known as climacteric period4.

“Pre menopause” or “early menopause” is otherwise known as peri-menopause. When there is change in hormonal patterns and changes in its levels prior to the last menstrual period, we consider it as pre menopause period. It usually begins from the age of 35 years and it lasts five to ten years. During this period, the level of progesterone begins to decline and become erratic. The first sign of premenstrual symptoms is increased menstrual bleeding very often. peri-menopause also normal part of aging process of women like menopause5.

Menopause is the cessation of menstrual period at least for twelve consecutive months. When a woman enters into menopause, the ovulation and production of eggs will be stopped by ovaries, there will be decline in its production of oestrogen and progesterone; hence it often affect the feeling of youth and also vibrancy6.

Ms Syamala and Sivagami conducted a study based on National family health survey and result shown in her study that the onset of menopause is different in various states of India. Naturally the Menopause takes place usually at young age of women in Andhra Pradesh, Karnataka, and also in Bihar, but it occur relatively at old age of women in west bengal and Kerala. Her study shows that In Andhra Pradesh, pre mature menopause also quiet high and Indian women are experiencing menopause at the age of 40 years itself, so they have longer expose of menopausal time and its associated problems6.

Statement of problem was a cross sectional descriptive study to assess the knowledge on menopause among pre menopausal women at selected area of Puducherry with objectives i. to assess the existing knowledge of women regarding menopause among pre menopausal women at selected area of Puducherry and ii. to associate the knowledge with demographic data of samples.

Methodology
Research Approach and Design: Quantitative research approach and cross sectional descriptive design.
Variables: Independent variable: menopause. Dependent variable: Knowledge
Settings: Selected area of Puducherry, Union territory of India.
Population: Pre Menopausal women in selected area of Puducherry.
Sample: Pre Menopausal women who met the inclusion criteria.
Sample size: 300 pre menopausal women.
Sampling technique: Simple random sampling technique.
Tool: Structured questionnaire.

The study was done for one month. Time schedule for the study was programmed. After identifying the pre menopausal woman the selected respondents were contacted at the residence, The investigator explained the study purpose to the subjects and has taken the oral consent from all the study subjects. They were
assured of confidentiality. The interview schedule was conducted for the selected 300 samples of pre menopausal women and the researcher has done self introduction to the pre menopausal woman and explained about the study. The researcher met and assessed ten to fifteen samples per day by using structured questionnaire, it took about 30 minutes per respondent, each and every question was posed to interviewees and their responses were recorded simultaneously for making the data more reliable.

Results and Discussion

The result shows that subjects were in poor knowledge (43%) of ovulation, menopausal problem, medication, nutrition and coping strategies but moderately adequate (58%) in meaning of menopause and adequate knowledge (75%) in the aspect of psychological problem. The first objective was to assess the existing knowledge of pre menopausal women about menopause: mean score was 11.64, and S.D was 2.66, hence H1 There will be significant knowledge in relation to menopause in pre test was rejected since the menopausal women have poor knowledge on menopause except psychological problems due to menopause.

The second objective was association between knowledge and demographic variables by using chi-square test. Demographic variables were taken as age, religion, education, marital status, and type of family, occupation, spouse occupation, and income. The finding from Chi-Square test at 5% level revealed that there was no significant between knowledge and demographic variable except age of the subjects Thus the Hypothesis H2 rejects significant relationship between knowledge and demographic variables of the samples.

![Figure-1](image)

**Figure-1**

Distribution of demographic variables in the study group of menopausal women

**Table-1**

Distribution of mean and standard deviation on various aspects of menopause

<table>
<thead>
<tr>
<th>Existing knowledge</th>
<th>Area</th>
<th>Max Score</th>
<th>Mean</th>
<th>S.D</th>
<th>Mean% (X %)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gen.Problem related to menopause</td>
<td>5</td>
<td>2.15</td>
<td>0.98</td>
<td>43%</td>
<td></td>
</tr>
<tr>
<td>Psychological problem</td>
<td>6</td>
<td>4.47</td>
<td>0.86</td>
<td>75%</td>
<td></td>
</tr>
<tr>
<td>Coping strategies; Medication</td>
<td>9</td>
<td>0.16</td>
<td>0.37</td>
<td>2%</td>
<td></td>
</tr>
<tr>
<td>Nutrition therapy</td>
<td>9</td>
<td>1.75</td>
<td>0.93</td>
<td>19%</td>
<td></td>
</tr>
<tr>
<td>Physical therapy</td>
<td>7</td>
<td>2.39</td>
<td>0.95</td>
<td>34%</td>
<td></td>
</tr>
<tr>
<td>Psychological support</td>
<td>4</td>
<td>0.52</td>
<td>0.5</td>
<td>13%</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>23.09</td>
<td>2.52</td>
<td>38%</td>
<td></td>
</tr>
</tbody>
</table>
Table-2
Association between demographic variables with menopause women

<table>
<thead>
<tr>
<th>Demographic variable</th>
<th>Chi-square value</th>
<th>Level of significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>5.15</td>
<td>Significant</td>
</tr>
<tr>
<td>Religion</td>
<td>0.01</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Education</td>
<td>2.04</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Marital status</td>
<td>0.13</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Types of family</td>
<td>0.45</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Occupation</td>
<td>0.08</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Husband occupation</td>
<td>0.61</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Income</td>
<td>0.05</td>
<td>Not Significant</td>
</tr>
</tbody>
</table>

(df=1, table value=3.84 at 5% level, (p<0.05, significant and p>0.05, not significant)

From above table the association between demographic variables with menopausal women. For the purpose of chi-square test demographic variables was taken as age, religion, education, marital status, type of family, occupation, spouse occupation, and income. The finding from chi-square test reveals that there is significant (5.15) between age and menopause. Whereas in religion (0.01), education (2.04), marital status (0.13), type of family (0.45), occupation (0.08), spouse occupation (0.61), and income (0.05) reveals that there is no significant with menopausal women.

Conclusion

The result shows that the subjects were in poor knowledge (43%) of ovulation, menopausal problem, medication, nutrition and coping strategies but moderately adequate (58%) in meaning of menopause and adequate knowledge (75%) in the aspect of psychological problem. Hence the subjects were in need of health awareness program to cope with menopausal problems among the premenopausal women.9 Researcher distributed booklet on coping strategies.10

References

1. Kesson PhD and Alicja Wolk, DrMedSci, Early natural menopause (years or younger) associated with a markedly increased risk of heart failure, 22(8), (2015)