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Original Research Article

A study of knowledge, attitude and perception of perimenopausal changes in women aged 40-45 years in Gurugram district of Haryana, India

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ABSTRACT

Background: Menopause, defined as cessation of menstruation for at least one year duration, due to exhaustion of the ovarian functions. 'Perimenopause' or 'climacteric' is the period of transition in which the woman's body makes the changes for menopause.

Methods: A cross-sectional study by recruiting 100 female participants between 40-45 years.

Results: 56% women have not heard about the term menopause or perimenopause. 50% thought that stoppage of menstrual cycle was a natural phenomenon and 70% had no idea about the risk factors of perimenopause or menopause. 68% females did not know about hormone replacement therapy.

Conclusions: More spread of awareness and health education is needed regarding the same so as to clarify the doubts and bust the many myths existing so as to help women have a smooth transition to menopause and have a healthy and productive post-menopausal life.

Keywords: Menopause, Perimenopausal, Climacteric, Vasomotor symptoms, Menopause scoring scale

INTRODUCTION

Menopause, defined as permanent cessation of menstruation due to exhaustion of ovarian functions, is a retrograde diagnosis when menses stop for at least one year or 12 months duration. This is a universal phenomenon experienced by middle-aged women which significantly affects their quality of life because it brings to with it a sea of physical, mental and psychosexual changes. 'Perimenopause' also called 'climacteric' refers to the arbitrary time during which the body prepares for the natural transition to actual menopause, marking the end of the reproductive life in a woman's life cycle. Due to hormonal changes and imbalance associated with this, the woman undergoing this phase experiences many psychological as well as physiological changes that affect her overall health status.^{1,2} There is lack of knowledge and

much awareness regarding Perimenopause and menopause and related health problems and their remedies among the general population, especially the middle-aged women. It is imperative to understand the importance of increasing the women folk's knowledge regarding the various Perimenopausal and menopausal changes which will help them to accept the same more readily and cope with them in a much better manner so as to have a good quality of life. Proper and correct knowledge, busting of the various existing myths and misconceptions and awareness about the preventive and remedial strategies is extremely important and necessary especially for the woman approaching her middle age.

Menopause symptoms consist of various vasomotor ones e.g., hot flushes, night sweats, sudden perspiration, physical and mental exhaustion, dizziness, vaginal

dryness, mood swings, depression, loss of libido, insomnia etc can lead to several physiological changes in a woman. Hot flushes are the most important symptom of Perimenopause approaching menopause and most women undergoing this phase experience this. Approximately 50-80% of women report hot flushes in the period before and after menopause.

Although menopause is not a disease, but a natural physiological phenomenon, but morbidity and mortality is enhanced markedly in postmenopausal women as compared to their younger counterparts.¹ The effects of perimenopausal and menopausal physiological changes include vaginal mucosal changes and dryness, loss of bone mineral density (BMD) and osteoporosis resulting in pathological fractures, behavioural changes, urinary changes, urinary urgency, frequency and bladder tenesmus resulting in 'urogenital syndrome', increased deposition of fat around the waist ('menopause tyre' or 'meno-paunch') and marked decreased libido.^{1,3}

Most women reach menopausal age without having adequate and proper knowledge about what to expect and ways to deal with the events experienced by her during this period. In western societies where women have a fair knowledge about menopause are better and they enjoy a far better quality of life in post- menopausal period.^{1,4}

Women's awareness about Perimenopause and menopause is dependent on various factors eg. age, parity, educational qualification, urban or rural background, occupation, socio-economic status, social, cultural and geographical factors. Most of Indian women attain menopause without having adequate and correct knowledge and information about what symptoms to expect and other complications or health hazards associated with menopause, therefore they do not cope with these very well. On the other hand, women in the western countries, having proper prior knowledge and information of symptoms and morbidity associated with menopause are able to cope better and take appropriate preventive and curative measures to improve their post-menopausal quality of life.

Since menopause is a natural physiological phenomenon, every woman will have to attain menopause, but being prepared with knowledge and awareness regarding the common problems & health issues associated with the menopausal transition will help in reducing the morbidity associated with it. If a woman doesn't understand and is not aware of what is happening to her body during these turbulent times of perimenopause and menopause, she will have a very stressful and unhappy period.

The more negative the attitude towards menopause, higher will be severity of the symptoms and morbidity.^{1,5}

Thus, this study is being undertaken to assess the knowledge, attitudes and perceptions and practices about perimenopause and menopause in women aged 40-45 years in the rural population of Gurugram district of

Haryana, so that we can impart proper and correct education regarding the menopausal symptoms and advise them on adopting life-style modifications, dietary and other preventing measures to avoid and reduce the health problems resulting from menopause in a better manner.

METHODS

Study type

This was an observational, cross- sectional study.

Study place

This study was conducted in the FMHS, SGT University, Gurugram, Haryana.

Study duration

The duration of the study was 6 months (January 2022- July end 2022).

Study population

The population of the study was 100 patients (40-45 years) attending Gynae-OPD for various reasons.

A face- validated questionnaire was used for assessing the knowledge, attitude, perception & practices regarding the perimenopause and menopause among those patients recruited in the study after taking proper, informed, written consent for the same. This was done with personal interviews or through Google forms.

All the data thus collected were tabulated and statistically analyzed, using descriptive analysis using Microsoft Office Excel Sheet, version 2019.

RESULTS

In our study, as depicted in Figure 1, only 44% women have heard about the terms perimenopause & menopause. The low percentage can be attributed to the women mostly belonging to poor rural background and mostly being either illiterate or just educated till primary school level.

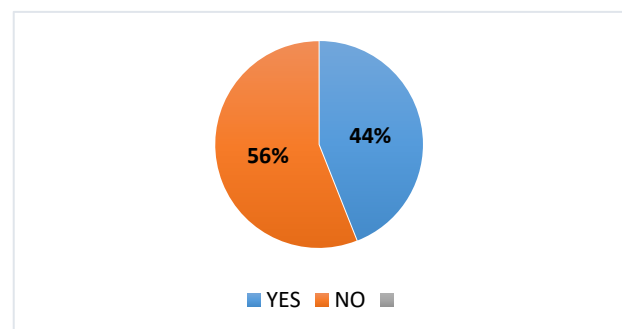


Figure 1: Do you know about perimenopause/ menopause?

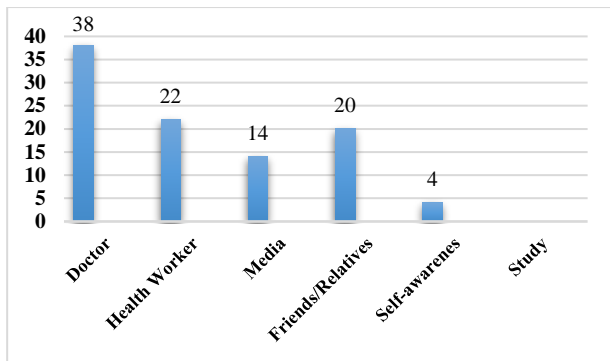


Figure 2: Source of information regarding premenopause/menopause.

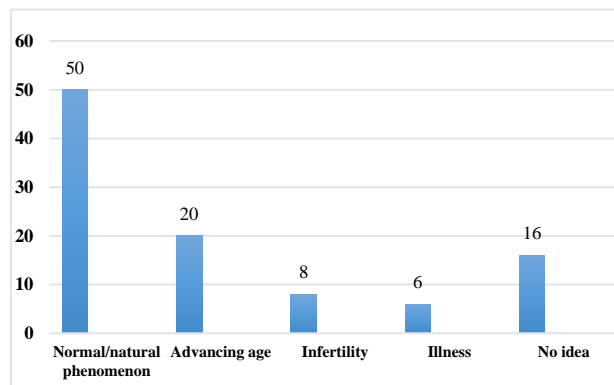


Figure 3: What causes stoppage of menstrual cycle?

According to Figure 2, the primary source of information about perimenopause and menopause for the participants was their family doctors and health workers. The second most common source of information was friends and relatives, followed by personal studies and self-awareness.

Figure 3, reveals that a significant majority of 50%, of the women surveyed, were cognizant of the fact that the cessation or stopping of a woman's menstrual cycle is a natural physiological process. Furthermore, the study found that 20% of the women surveyed held the belief that the cessation of menstrual cycles is primarily caused by the natural progression of age or advancing years.

The study aimed to assess women's awareness levels regarding various symptoms experienced during perimenopause and menopause, encompassing physical, emotional, hormonal deficiency-related, and bone and muscle-related symptoms as depicted in Table 1 which states that 80% women are mostly aware about the physical symptoms, followed by emotional/psychological symptoms 60%, hormonal deficiency related symptoms 48%, lastly only 40% women were aware about the bone and muscle related symptoms.

It is a well-established fact that, as women approach menopause, their ovaries gradually cease the production of oestrogen and other hormones that have been essential for the body's functioning over the years. Consequently, the

declining hormone levels trigger noticeable changes, both emotional and physical. These changes may manifest as physical symptoms, such as hot flashes, decreased energy levels, and disrupted sleep patterns, as well as mood-related symptoms, including anxiety, depression, and mood swings. However, as women advance in age, these menopausal symptoms tend to gradually subside over time.

Table 1: Perimenopausal/ menopausal complaints.

Perimenopausal/ menopausal complaints	Number	Percentage
Physical problems		
Hot flushes	80	80
Profuse sweating	50	50
Night sweats	35	35
Difficulty in sleep/insomnia	22	22
No idea	20	20
Emotional/psychological problems		
Headache	70	70
Dizziness	40	40
Easy forgetfulness	38	38
Poor concentration	26	26
Feeling of sadness & depression	25	25
Irritability	50	50
No idea	40	40
Muscle and bone related symptoms		
Joint pain	38	38
Osteoarthritis	35	35
Weight gain	32	32
No idea	60	60
Hormone-related problems		
Vaginal dryness	48	48
Skin-dryness and thinning	35	35
Pain during intercourse	30	30
Sleep disturbance	45	45
Mood swings & irritability	40	40
Anxiety & panic	36	36
No idea	52	52

A significant majority, of the women surveyed demonstrated an 80% unawareness of the various risk factors associated with the perimenopausal and menopausal transitions, as illustrated in Figure 4. However, only 30%, reported being aware of these potential risks. Among those who were informed, approximately half (48%) specifically recognized osteoarthritis as a potential risk factor related to these life stages.

In essence, while most women in the study exhibited no knowledge regarding the potential health implications of perimenopause and menopause, a considerable minority remained informed. Additionally, awareness of specific risk factors, such as osteoarthritis, varied within the informed group, highlighting the need for comprehensive

education and counselling during these critical periods in a woman's life.

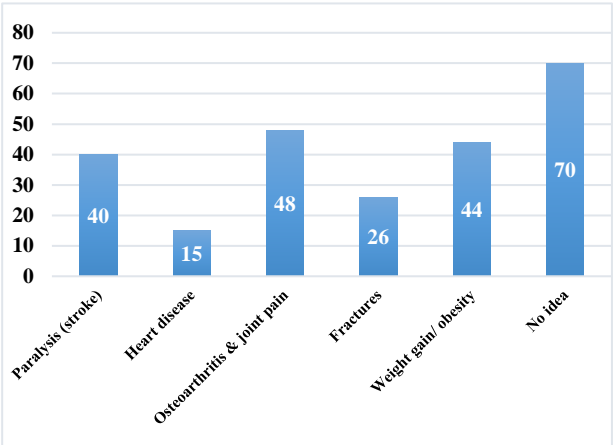


Figure 4: Do you know the risk factors associated with perimenopause/menopause?

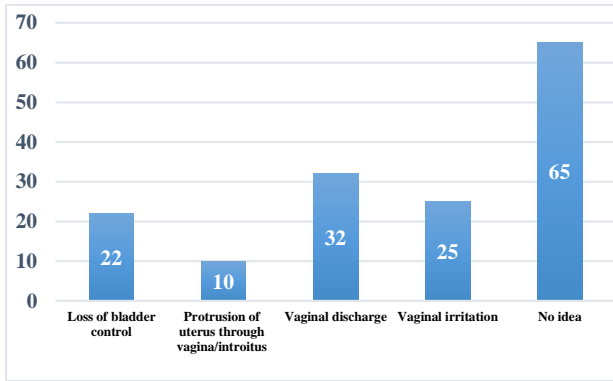


Figure 5: Do you know any health complications faced in perimenopause/ menopause?

Figure 5, of the study provides insights into women's awareness regarding the complications associated with menopause and perimenopause. Alarming, 65% of the women surveyed were completely unaware of the potential complications, while only 35% reported being aware of them. Notably, 32% of the women were primarily aware of vaginal discharge as a complication. After menopause, oestrogen levels decrease markedly. As a result, the amount of normal discharge usually decreases. However, because the lining of the vagina thins and becomes drier (atrophic vaginitis), due to which vagina is more likely to become irritated, often resulting in an abnormal discharge from the vagina.

The study examined unawareness about exercises that can help manage changes during perimenopause and menopause. According to Table 2, only 38% of the women were aware of physiotherapeutic exercises, while the other 62% lacked awareness about such exercises. However, the information highlights that even without hormonal therapy, women can enjoy a good quality of life after menopause. Osteoporosis, a significant health concern for

older women, can be controlled through regular exercise. Even moderate exercise routines not only aid in weight management but also reduce the risk of stress, anxiety, and depression, which are common experiences during and after menopause. Exercise is beneficial as it improves muscle mass, strength, balance, and coordination. Unlike medication-based treatments, exercise simultaneously addresses various aspects of overall health. However, the role of exercise in managing hot flashes remains inconclusive.

Table 2: Awareness of the study population.

Awareness of the study population	Yes	No
Awareness about exercises in perimenopausal/menopausal women	38	62
Awareness about hormonal replacement therapy to tackle perimenopausal/menopausal problems	32	68

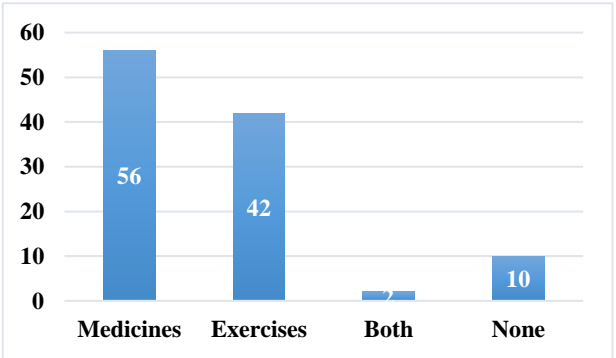


Figure 6: What steps will you take in future to cope up with perimenopause/ menopause changes?

Increasing awareness through initiatives such as conducting educational camps and leveraging social media platforms can encourage women to adopt a healthier lifestyle and adapt to the changes associated with menopause. Such efforts can empower women to make informed choices and embrace practices that promote well-being during this transitional phase.

As depicted in Table 2, only 32% of the women viewed awareness of Hormonal Replacement Therapy as positively and 68% of the population was unaware of it, because the attitude of women towards menopause are strongly influenced by social, cultural, and economic settings in which they live and may also reflect the differences in modes of treatment or perceptions of its symptoms.

The study depicted in Figure 6, reveals the awareness levels among women regarding various treatment strategies they might adopt in the future to manage menopausal and perimenopausal changes. A majority of the women, 56%, indicated a preference for medication,

while only 42% chose exercise as a treatment option. Interestingly, 2% of the women opted for a combination of both medicine and exercise. This data suggests that women may not be fully aware of the importance of exercise in alleviating menopausal and perimenopausal symptoms. It appears that women tend to gravitate towards the seemingly more convenient solution of medication, potentially unaware that exercise can offer long-term relief, whereas medication may provide only temporary respite.

DISCUSSION

The present study aimed to assess the knowledge, attitudes, and perceptions of women aged 40-45 years regarding the terms perimenopause and menopause. It sought to investigate their understanding of the associated signs, symptoms, and problems encountered across various domains, including physical, psychological, hormonal, and emotional aspects. Additionally, the study explored the participants' awareness of risk factors and complications related to menopause, as well as their knowledge of physiotherapeutic exercises and various treatment strategies, including hormonal replacement therapy (HRT).

The primary objective was to gain insights into the level of awareness and understanding among women in this age group concerning the multifaceted aspects of perimenopause and menopause. This comprehensive assessment aimed to identify potential knowledge gaps and inform the development of educational initiatives or interventions tailored to address the specific needs of this population.

This study revealed that 56% women didn't hear about the term perimenopause and menopause as women were mostly belonging to poor rural background and lower educational status. A study reported by Kishor V et al (Gujarat) stated that as educational level increases, awareness about menopause and perimenopause related problems are increased.^{1,6}

From our study we found that the most common source of information was family doctor and health workers (nurses, paramedical staffs) followed by family members / friends followed by media and self- awareness. Similar results were reported by Tsheday DS- though they reported primary source of information as family/ friends followed by medical/ health care providers.⁷

It is noteworthy that while the primary sources of information differed between the two studies mentioned, both highlighted the importance of social networks (friends and relatives) and healthcare professionals in disseminating knowledge about perimenopausal and menopausal transitions among women.

In our study, awareness regarding physical symptoms faced in perimenopausal/ menopausal (80%) was the most

whereas, study by Banole et al awareness about the bone and muscle related symptoms (92%) were the most among physical symptoms, emotional/psychological symptoms, hormonal deficiency related symptoms and bone and muscle related symptoms.¹

Limitations

As the study is conducted on the population of the Gurugram district of Haryana, with a small sample size, therefore the results and observations will reflect only those in this geographic area and not the whole country.

CONCLUSION

From this study we concluded that we need to intensify the efforts of increasing awareness regarding perimenopause and menopause the expected symptoms, complications, risk- factors and health related issues and to emphasise the importance of incorporating healthy life-style modifications, dietary supplements, exercises and a positive, optimistic attitude as the first line of management option to reduce and prevent the uncomfortable and distressing symptoms attributed to perimenopause and menopause so as to improve the quality of life of our women in future.

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Conflict of interest: None declared

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