

PREVALENCE OF MENOPAUSAL SYMPTOMS AND ACCEPTABILITY OF HRT AMONG URBAN WOMEN

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ABSTRACT

BACKGROUND

Menopause is the permanent cessation of menstruation from the loss of ovarian follicular activity. The word Menopause is derived from the Greek word Menos meaning monthly and Pause meaning cessation of menstruation. Although menopause is a transition which is experienced by all women, there is considerable variation concerning the age at menopause and symptoms. There is also a lack of awareness among menopausal women about the availability of treatment for menopausal symptoms. Women are sometimes apprehensive about the use of hormones replacement for relief of menopausal symptoms. This study aims to study the prevalence of menopausal symptoms and acceptability of hormone replacement for the relief of menopausal complaints

The Objectives of the study were - 1) To study prevalence of menopausal symptoms. 2) To understand the treatment seeking behaviour of postmenopausal women. 3) Acceptance of HRT.

MATERIALS AND METHODS

This is a descriptive study conducted at a secondary care centre between April 2017 to November 2018. 180 post-menopausal women with natural onset menopause attending out-patient department of Obstetrics and Gynaecology were included in the study. A semi structured interview followed by examination and relevant investigations were done. Patients with vasomotor and genital urinary complaints were counselled about treatment option of HRT. Data was analysed by mean, standard deviation, percentage and Pearson correlation test.

RESULTS

Out of the 180 women analysed in this study, 80%, (n=144) had menopausal symptoms. 21.1% women reported vasomotor complaints, 10% reported genitourinary complaints and sexual complaints by 3.3%. Musculoskeletal complaints were reported by 22.2% and psychological complaints by 66.1% women. For vasomotor complaints, 19 women received conjugated equine oestrogen 0.625 mg with medroxyprogesterone acetate tablets 5 mg, 5 received Tibolone 2.5 mg, 11 received is flavones and 3 got selective oestrogen receptor modulator (SERM), 11 were prescribed oestrogen vaginal cream 0.5 gram for genitourinary complaints.

CONCLUSION

The mean age of menopause in the study group is 48.2 years. The prevalence of menopausal complaints was 80%, with psychological complaint being the most common complaint. The single most disturbing symptom was hot flashes and the least reported complaint was genitourinary and sexual complaints.

34.02% women were prescribed HRT and non-HRT to relieve their vasomotor, genitourinary and sexual complaints. 24.3% of women were on HRT, 9.7% were apprehensive of HRT.

KEYWORDS

Menopause, Treatment Seeking Behaviour, Hormone Replacement Therapy.

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derived from the Greek word Menos meaning monthly and Pause meaning cessation of menstruation. Although menopause is a transition which is experienced by all women there is considerable variations concerning the age at menopause and symptoms. There is also a lack of awareness among menopausal women about the availability of treatment for menopausal symptoms. Women are sometimes apprehensive about the use of hormones replacement for relief of menopausal symptoms. This study aims to study the prevalence and acceptability of hormone replacement for the relief of menopausal complaints.

Aims and Objectives

- 1) To study prevalence of menopausal symptoms.
- 2) To understand the treatment seeking behaviour of postmenopausal women.
- 3) Acceptance of HRT

MATERIALS AND METHODS

One hundred and eighty postmenopausal women attending Out Patient department of a secondary level care centre from April 2017 to November 2018 were included in the study after taking informed consent from patient.

Inclusion Criteria

Women aged between 40 and 60 years with natural onset menopause.

Exclusion Criteria

Surgical menopause

Post-menopausal women with thyroid and parathyroid dysfunction, chronic renal disease, known case of genital malignancy.

Data Analysis

Was by mean, standard deviation, frequency, percentage and Pearson correlation test.

Data Collection Method

History and a semi structured interview were conducted regarding menopause symptoms. The most disturbing symptom was considered as predominant symptom. All symptoms were later classified as Genitourinary, Musculoskeletal, Psychological, Vasomotor and Sexual. Vasomotor symptoms include hot flushes and night sweats. Musculoskeletal symptoms include joint pain, backache. Genitourinary symptoms include dysuria, increased frequency of micturition, vaginal dryness, pruritis and urinary incontinence Women with urinary incontinence underwent vaginal examination and urine microscopy. Sexual symptoms include decrease in libido and dyspareunia. Psychological symptoms include fatigue, pins and needle sensation, poor memory, irritability and insomnia.

BMI was assessed. Clinical examination including breast examination was done. As per the current recommendation by the International menopause society Hormone replacement therapy was initiated only for women who were unable to tolerate their vasomotor symptoms and genitourinary complaints as per international consensus on HRT by international menopause society.¹

Fasting sugar, fasting lipid profile, LFT was done on all women considered for HRT. Patients on HRT received conjugated equine oestrogen 0.625 mg with medroxyprogesterone acetate 5 mg tablets or 2.5 mg tibolone orally. Local oestrogen application was advised to women with vaginal dryness and dyspareunia. Women unsuitable for HRT received non-hormonal treatment with isoflavone or SERM. Women with impaired liver function test, thromboembolic disorders, breast cancer, family or

personal history of genital cancer and postmenopausal bleed were excluded from hormonal and non-hormonal treatment. All women were explained about the possible side effects of the drug and advised follow up after a month and then after six months of initiating treatment. Women with musculoskeletal symptoms were prescribed oral calcium 500 mg and vitamin D3 supplementation after orthopaedic evaluation. Pelvic floor exercise-Kiegels were taught to women with stress urinary incontinence in the absence of UTI and cystocele.

RESULTS

1. Mean age of menopause in present study is 48.2 years.
2. Of the 180 women with natural onset menopause, 144 had post-menopausal symptoms. Prevalence of menopausal symptoms is 80%. Women who had menopausal complaints had more than one complaint and therefore only the two most disturbing complaints were taken into consideration in this study.

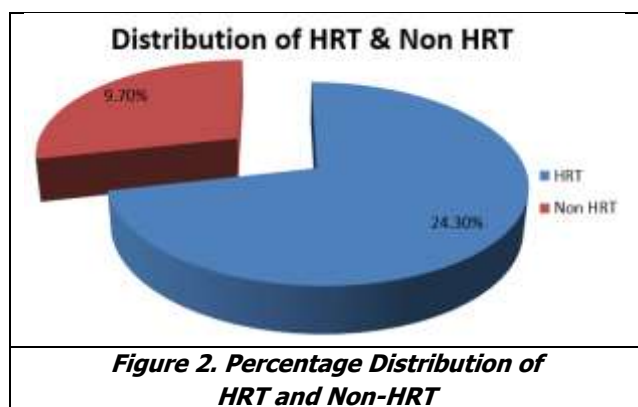
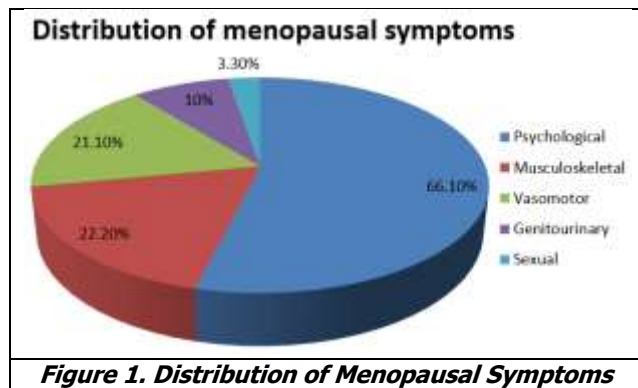
Menopausal Symptom	Number of Complaints (n=221)	Percentage
Vasomotor	38	21.1
Hot Flash	26	14.4
Night Sweats	12	6.6
Musculoskeletal	40	22.2
Backache	22	12.2
Joint Pain	18	10
Psychological	119	66.1
Anxiety	12	6.6
Insomnia	20	11.1
Palpitations	21	11.6
Irritability	14	7.7
Pins and Needle	18	10
Fatigue	21	11.6
Mood Swing	11	6.1
Poor Memory	2	1.1
Genitourinary	18	10
Vaginal Dryness	11	6.1
Urinary Incontinence	6	3.3
Dysuria	1	0.5
Sexual	6	3.3
Decreased Libido	3	1.6
Dyspareunia	3	1.6

Table 1. Menopausal Symptoms in the Study Group

221 symptoms were reported in 144 women who were symptomatic. There is a high prevalence of psychological symptoms 66.1% followed by musculoskeletal complaints 22.2%, vasomotor complaint 21.1%, genitourinary complaints 10% and 3.3% had Sexual complaint.

Treatment Sought	Number of Patients (N=49)
HRT	35
Tibolone	5
Conjugated Oestrogen and Progesterone	19
Oestrogen Cream	11
Non-HRT	14
SERM	3
Isoflavone	11

Table 2. Post-Menopausal Treatment



Study	Year	Mean Age of Menopause in Years
Kulkarni & Joshi ²	1979	43.46
Balgir ³	1985	43.71
Bagga A ⁴	2004	44.94
Alka and Kaberi ⁵	2005	46.7
Singh & Arora ⁶	2005	44.1
Tandon vR ⁷	2007	47.35
Bairy ⁸	2009	48.7
Bansal st al ⁹	2010	45.9
Kaulagekar ¹⁰	2011	48.3
Madhukumar ¹¹	2012	49.7
Sagar et al ¹²	2013	48.26
Randhawa ¹³	2014	49.96

Table 3. Comparison of Mean Age of Menopause Derived from Different Studies

Bagga ⁴	Loss of Interest (93%), Tightness in Head (83%)
Tandon ⁷	Fatigue (72.93%), Night Sweats (50%)
Kaulegar ¹⁰	Irritability (48%), hot Flash (38.2%)
Bairy ⁸	Aching in Muscle and Joint (67.7%)
Bansal ⁹	Headache (94.1%), Dizzy Spells (81.5%)
Sagar ¹²	Depression and Irritability (90.7%) Headache (72.9%)
Sarkar	Joint Pain (64%) Backache (58%)
Madhukumar et al ¹¹	Fatigue (72.93%) Headache (55.9%)
Monica ¹⁴	Hot Flash (77%) Sleep Problems (42%)

Table 4. Distribution of Menopausal Symptoms in Other Studies

DISCUSSION

The Sociodemographic characteristics of the study population are as follows. The study population comprised of 180 women with menopause with 11.5%, 61.5% and 27.5% being enrolled in the age group of 40-44 years, 45 - 49 years and >50 years respectively. Oldest women to attain menopause was 56 years. Women older than 60 years were excluded from the study as the age-related symptoms would overlap with menopausal symptoms. No significant correlation was noted between parity, BMI and age at menopause in this study. The mean age of menopause in our study was 48.2 years.

We notice that the mean age of menopause has increased in the last decade³⁻¹³ and the mean age derived from present study correlates with other Indian studies⁷⁻¹³

Of the 180 women with natural onset menopause, 144 experienced menopausal symptoms. Prevalence of menopausal complaints were 80%. A total of 221 complaints were reported in this study group. The prevalence of menopausal symptoms as reported by Bairy et al⁸ was 67.7%, Madukumar et al¹¹ was 79.93% and Monica Sathpathy¹⁴ was 77%. Prevalence of psychological symptoms were highest in this study group 66.1% women., followed by musculoskeletal complaints in 22.2%, vasomotor complaints 21.1%, genitourinary complaints 10% and least reported were sexual complaints 3.3%.

We observe that in the present study and in studies across India Psychological and musculoskeletal symptoms were predominant.^{4,7,8,9,10,11,12,15} Indian women has low prevalence of vasomotor complaints compared to studies done on Caucasian women. The least reported complaint was urinary and sexual complaints. This was noted in other Indian studies and prevalence overall is less than 20%. The low incidence of the genitourinary complaint may be due to the social taboo to discuss sexual problems in midlife.

An important observation is that, although psychological symptoms were the most prevalent complaint noticed in 66.1% women, it was well tolerated. The symptoms reported as unbearable was hot flashes.

34.02% of women (n=49) sought treatment with either hormonal or non-hormonal options for Vasomotor and genitourinary problems. 24.3% (n=35) women were started on HRT of which 19 women were on cyclical oestrogen and progesterone, 5 on Tibolone for vasomotor complaint. 11 women were prescribed on oestrogen cream for genitourinary and sexual complaint. 9.7% women (n=14) who were apprehensive of HRT were prescribed SERMS and isoflavone.

CONCLUSION

The mean age of menopause in the study group is 48.2 years. 80% was the prevalence of menopausal complaints, with psychological complaints being the most common. The single most unbearable symptom was hot flashes and the least reported complaint was genitourinary and sexual complaint. 34.02% of the women were prescribed HRT/Non-HRT to relieve their vasomotor, genitourinary and sexual complaints.

24.3% women (n=35) accepted HRT. 9.7% of women (n=14) were apprehensive of HRT and were prescribed non-HRT.

With the increasing life expectancy in India, women are experiencing a longer phase of life in menopause. Studies such as this serve as starting point to conduct extensive research on awareness and accessibility of HRT among Indian women.

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