

Effect of Life Style Modification on  
the Health of Nurses Suffering  
from Menorrhagia

**Thesis**

Submitted in Partial Fulfillment of the Doctorate  
Degree Maternity and Neonatal Nursing

**By**

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**Submitted in Partial Fulfillment of the  
Doctorate Degree Maternity and Neonatal  
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## List of Abbreviations

|         |  |
|---------|--|
| BMI     | Body Mass Index                            |
| CBC     | Complete Blood Count                       |
| COC     | Combined Oral Contraceptive                |
| D&C     | Dilatation and Curettage                   |
| DUB     | Dysfunctional Uterine Bleeding             |
| FSH     | Follicular Stimulating Hormone             |
| GnRH    | Gonadotrophic Releasing Hormone            |
| HCGH    | Human Chorionic Gonadotrophin Hormone      |
| HRT     | Hormonal Replacement Therapy               |
| IUCDS   | Intra uterine Contraceptive Devices        |
| LAVH    | Laparoscopic Assisted Vaginal Hysterectomy |
| LH      | Lutenizing Hormone                         |
| LNG,IUS | Levonorgestrel Intrauterine System         |
| MBL     | Menstrual Blood Loss                       |
| MRI     | Magnetic Resonance Imagination             |
| NSAIDS  | Non Steriodal Anti inflammatory Drugs      |
| OCPs    | Oral Contraceptive Pills                   |
| PBAC    | Pictorial Blood Loss Assessment Chart.     |
| PCOD    | Poly Cystic Ovarian Disease                |
| ROC     | Receiving Operating Characteristics        |
| SLE     | Systemic Lupus Erythmatosis                |
| TLH     | Total Laparoscopic Hysterectomy            |
| USA     | United States of America                   |
| VH      | Vaginal Hysterectomy                       |
| WHO     | World Health Organization                  |

## **Effect of Life Style Modification on the Health of Nurses Suffering From Menorrhagia**

*By*

*Amal Talaat Abd El-Wahed*

### **ABSTRACT**

Healthy life behaviour resulting in health promotion through a holistic approach assessing and modifying menorrhagia impact on women's health. the aim of the study was to assess health problem among female nurses who have menorrhagia, modifying their life style health behaviours and evaluating the effect of change on their health. A total sample of 82 nurses complained of menorrhagia working at different units in Ain Shams Specialized Hospital. Data were collected through (1) an interviewing questionnaire for assessing the socio demographical characteristics, medical history and women's complaints related to menorrhagia (2) pictorial chart for assessment of menstrual blood loss (3) life style assessment scale. (4) Illustrated handout including instructions regarding healthy behavior. The findings revealed that most of nurses had unhealthy behaviour before intervention, but through gradual and regular emphasizing on healthy behaviour their improvement was highly significant. The study concluded that life style modification has a positive impact on the health of women with menorrhagia. The study recommended the need for developing orientation programmes and handouts regarding women's health issues as menorrhagia emphasizing on self care aspects and healthy life style .

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## Introduction

Excessive menstrual flow, is for many women, both a socially embarrassing and an incapacitating problem. Menorrhagia, that is, unacceptably heavy or prolonged loss of menstrual blood is a common complaint of women during their reproductive years and an important cause of iron deficiency anaemia in up to a quarter of women (*Lin, 2004*)

It is the commonest menstrual complaint accounting for 60% of the consultation for menstrual disorders in general practice and affect an about 30% of women at premenopausal age (*Wilson et al., 2001*), also, menorrhagia is not life threatening it has a significant impact on women's quality of life medical, social, economic and psychological wellbeing (*Kadir et al., 2002*).

Causes of menorrhagia can be divided into three groups: (1) pelvic diseases, such as myomata and adenomyosis. (2) systemic disorders as coagulopathies and hypothyroidism and (3) Dysfunctional uterine bleeding which is a diagnosis of exclusion (*Prentice, 1999*).

In the majority of cases no underlying causes such as polyps or fibroids could be found and treatment of these

cases consists of medications as well as surgery (*Cooke et al., 2000*).

Systemic medications including progesterone, mefenamic acid, darazol and tranexamic acid each agent was demonstrated to reduce the menstrual blood loss to a certain degree, but many women do not wish to have long term medications or are unsatisfied with the so called minor unwanted side effects of medical therapies (*Aberdeen, 2003*).

Poorly controlled menorrhagia has become the primary indication for hysterectomy, as a major operation for women of reproductive age, which constitute as reported by USA over 625000 cases performed annually (*RCOG, 1999*).

The midwife nursing role consider very important, especially in early detection of cases and prompt guidance and referral, also in motivating women regarding self-awareness and self care aspects which became the main issue of education today empowering patients and increase their role and responsibility about their health through focusing on positive life style health behavior, to ensure optimal achievement of women wellness (*Engstrom et al., 1999*).