

Quality of Life among Women during Climacteric Period

Thesis

*Submitted for Partial Fulfillment of the Master Degree
In Nursing Science
“Community Health Nursing”*

By

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List of Contents

<i>Subject</i>	<i>Page No.</i>
List of Abbreviations	i
List of Tables	ii
List of Figures	iv
Abstract	v
Introduction	1
Aims of the Study	5
Review of Literature	
Overview about climacteric period	6
- Factors influencing the onset of menopause	8
- Changes in women 'health during climacteric transition	11
- Complication of climictric on oer all health	17
-Treatment of climacteric symptoms	19
Quality of life during climacteric period	27
Community health nurse Role	33
Subjects and Methods	54
Results	64
Discussion	81
Conclusion and Recommendations	95
Recommendations	96
Summary	98
References	107
Appendices	134
Arabic Summary	—

List of Abbreviations

<i>Abbr.</i>	<i>Full-term</i>
BMI	Body Mass Index
CHD	Coronary Heart Disease
FMP	Final Menopausal Period
FPA	Female Pattern Alopecia
FSH	Follicle Stimulating Hormones
MHT	Menopause Hormonal Therapy
QOL	Quality Of Life
VMS	Vasomotor Symptoms
VTE	Venous Thromboembolism
WHO	World Health Organization

List of Tables

<i>Table No.</i>	<i>Title</i>	<i>Page No.</i>
------------------	--------------	-----------------

Tables in Results

Table (1):	Distribution of studied sample according to their Socio- demographic characteristics (n =209)	65
Table (2):	Distribution of the studied sample according to their Menstrual period (n=209).....	66
Table (3):	Distribution of the studied sample according to Reproductive history (n=209).....	67
Table (4):	Distribution of studied sample regarding to Health status (n=209).....	68
Table (5):	Distribution of studied sample according to their Knowledge about climacteric period (n=209).....	70
Table (6):	Distribution of studied sample according to their Favorite Source of Information during Climacteric Period (n=209).....	72
Table (7):	Distribution of studied sample according to their practices during climacteric period (n=209).....	73
Table (8):	Distribution of studied sample according to their Quality of life during climacteric period (n=209).....	75

Table (9):	Relation between women knowledge and demographic data.....	78
Table (10):	Relation between women practice and demographic data.....	79
Table (11):	Correlation between knowledge, practice and quality of life of women during climacteric period.....	80

List of Figures

<i>Figure No.</i>	<i>Title</i>	<i>Page No</i>
-------------------	--------------	----------------

Figures in Review:

Figure (1):	Menopause symptoms	12
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Figures in Results:

Figure (1):	Distribution of studied sample according to their total Knowledge about climacteric period (n=209)	71
Figure (2):	Distribution of studied sample according their total practices during climacteric period (n=209).....	74
Figure (3):	Distribution of studied sample according to their total Quality of life during climacteric period (n=209)	77

Quality of life among women during climacteric period

Laila Ezzat Hussein*, Seham Guirguis Ragheb**, and Nadia Ibrahim***

ABSTRACT

The transition through menopause is a life event that can profoundly affect quality of life. Menopause, the time when a woman stops having menstrual periods, is not a disease or an illness for most women, menopause is a normally occur between age range 48-55 years. Quality of life it encompasses several constructs including physical functional emotional social and sexual variables. **Aim of the study:** was to assess quality of life for women during climacteric period. **Research Design:** A descriptive research was used. **Setting:** "Ain Shams University "in Cairo, Egypt. All theoretical faculties (6 faculties). **Sample:** systemic random sample of (209) women aged more than 44 years. **Tools for data collection:** Data were collected through the following tools: *self-administer questionnaire* it consists of four parts; Socio-demographic characteristics for women, women' knowledge regarding the concept, symptoms, complication and hormonal therapy. Women' practices regrading menopause transition symptoms. Quality of life (physical, psychological, social and sexual). **Results:** the study revealed that less than half of the studied sample are highly qualified and less than half have unsatisfactory score level of knowledge (43%), and more than half of the practices (52.3%) have done. Moreover, the overall scores of menopausal quality of life for each domain are indicated that the highest mean score in psychological (33%) domain, following by sexual (31%), physical (26.2%) and social domain (14%). **Conclusion:** there was a significant positive relation between knowledge and practice of women and a significant positive relation between practice and quality of life of women. There is a significant relation between knowledge and occupation, educational level and monthly income. There is a significant relation between practice and age, occupation, and educational level. **Recommendation:** Implement appropriate a structure health educational programs with developing and dissemination of educational material to raise community awareness about menopausal.

Keywords: *quality of life, climacteric period*

Introduction

Climacteric period is the final normal menstruation in a woman's life, resulting from a complete loss of ovarian follicles, followed by a break of at least one year in menstrual bleeding. Natural menopause is a quantitative biological feature that indicates the end of a woman's reproductive capacity in the physiological process of aging (*Grochans et al., 2018*).

As suggested by the WHO, a woman's menopausal life can be divided into three successive stages: premenopausal, defined as the whole of the reproductive period prior to menopause, or as the one or two years immediately before menopause, which are associated with irregularity in menstrual bleeding; this usually takes place at about 45–49 years of age, perimenopause is the period immediately prior to menopause (when the endocrinological, biological, and clinical features of approaching menopause commence) and the first year after menopause; post menopause dates from the final menstrual period, regardless of whether the menopause was induced or was spontaneous (*Li et al., 2016*).

The healthcare of women during climacteric stage requires special attention to the identification of their health needs in order to provide competent care (*Gharaibeh et al., 2010*). Furthermore, North American Menopause *Society, (2008)* illustrated that menopausal symptoms are caused by changes in estrogen and progesterone levels. These symptoms as, hot flashes, night sweats, skin flushing, insomnia, less sex drive, mood swings including irritability, vaginal dryness, as well as painful sexual intercourse and vaginal infections. Moreover, the long-term effects of menopause may include bone loss, eventual osteoporosis, changes in cholesterol levels and greater risk of heart disease (*Esmat & Mohamed, 2013*).

The study of QOL in the post-menopause has become an essential component in clinical practice. Most studies on QOL of post-menopausal women exist from developed countries. A very little information exists about this in developing countries like Egypt. An estimated 80% of females experience physical or psychosocial symptoms while approaching menopause, leading to change in their quality of life (QOL). These physiological and psychological changes are due to estrogen deficiency. The World Health Organization defines QOL “as an individual’s perception of their position in life in the

context of culture and values system in which they live, in reference to their goals, standards, and concerns in life” (*Shukla et al., 2018*).

Menopause is known to bring about changes in an individual’s QOL through various factors, one of the major ones being the area of residence (rural or cities). Also, the level of education is indirectly affect the severity of symptoms. Otherwise when the education level increased, awareness toward menopause and its related problems also increased, leading to better QOL (*Sharma & Mahajan, 2015*).

Climacteric women interventions focused on informing /educating about preventing certain diseases. Previous studies have developed educational strategies to prevent osteoporosis, by improve healthy diet, physical activity in menopausal women, demonstrating the effectiveness of physical activity, improves muscle strength, blood pressure, bone density and health-related quality of life (*Doubova et al., 2011*).

The community nurse shows a central role in programs, improving women knowledge for both nature and Hormonal Replacement Therapy (HRT), the signs and symptoms of menopause, how to seek appropriate care and support when needed (*Jack-Ide et al., 2014*).

The significance of the Study:

The transition through menopause is a life event that can greatly affect the quality of life. More than 80% of women report physical and psychological indicators that commonly accompany menopause, with varying degrees of severity and life disturbance (*McKinney et al., 2017*). The mean age of the menopause in Egypt is 46.7 years, which is low compared to many countries, but this age has been growing newly (*Mohamed & Lamadah, 2015*).

The incidence of menopause-associated symptoms in Egyptian women is higher than in the West, probably because of the different ‘socio cultural attitudes’ towards the menopause in different communities. With increasing life expectancy, many women will spend up to 40% of their lives in the postmenopausal stage. Half of all women who reach age 50 will live to be at least age 80 (*Gharaibeh et al., 2010*). Therefore, this study was done to assess the relationship between quality of life for women during the climacteric period, furthermore, assess women’s knowledge, practices regarding menopausal period and its effect on their quality of life.

Aims of the Study

The aims of this study was to assess quality of life among women during climacteric period, through:

1. Identifying women's knowledge regarding climacteric period.
2. Assessing women's practices throughout this period.
3. Assessing changes of women's quality of life throughout menopausal transition (physical, psychological, social relationship, environmental, spiritual).

Research Questions:

1. Is there relation between women socio demographic characteristics and their knowledge about climacteric period?
2. Is there relation between women knowledge and their practice during climacteric period?
3. Is there relation between women knowledge and their quality of life during climacteric period?
4. Is there relation between women practice and their quality of life during climacteric period?

Part I

Overview about Climacteric Period

‘Climacteric’ is a Greek word derived from the ‘ladder’ or ‘steps of a ladder’. It is a period of alterations in women, transition from reproduction years to a non-reproductive stage. Etymologically, it means serious time; many women do not experience symptoms or major difficulties in this transition phase (*Rahman et al., 2010*).

Moreover, The International Menopause Society divides climacteric into three phases: pre menopause, which usually begins after age 40, with reduced fertility and either irregular or regular menstrual cycles, compared to what occurred in their reproductive period; perimenopause, which begins two years before the last menstrual period and extends for a year after and is usually marked by irregular cycles and endocrine disorders; and post menopause, which begins one year after the last menstrual period and is subdivided into early five years after menopause, or late “ more than five years after the last menstrual period” (*Rubinstein, 2013*).