

CHAPTER 5

Discussion, Conclusion, Limitations, Implications and Recommendations

This chapter discusses the findings of the study, discussion , conclusion, limitations of the study, implications and recommendations.

5.1 Major Findings of the study

5.1.1 Background variables

- Most of the subjects, participated in the study were in the age group of 40 to 42 years. Majority (94%) of them were married and most of them got married between the ages of 19 to 22 (35.30%) and 23 to 26 years (38%).
- 34.7% of the subjects were educated up to graduation and only 2.3% up to primary and middle school levels. Majority (37.7%) of them were housewives.
- 30% subjects had monthly income > Rs 30,000 and almost equal representation (13.3 % to 16.7%) of women were found from the income group of Rs. 10001 to Rs. 30,000.
- 52% subjects attained menarche between the ages of 14 to 16 years. The duration of menstrual cycle for 35.3% of them was from 21 to 27 days . Mild to moderate bleeding was found among 27% of the subjects while 22.7% reported moderate and regular bleeding during menstruation. Majority (63%) of them had their last menstrual period between 0 – 1 month back and 22% of had already attained menopause.

- Majority (79.6%) of subjects said that, fruits are included in their daily diet other than regular food items. Only 24.7 % were found to be performing regular exercises and most of them (68%) preferred household chores as a medium of performing regular exercises.
- The Body Mass Index (BMI) indicated 44% subjects in the overweight category, 10% obese and 6% other category while 40% were identified with healthy BMI. The waist and hip ratio of 57% subjects were within normal limits whereas, 43% of them were categorized in to the health risk group.
- 60.3% did not have any medical problems, out of the remaining 39.7% subjects, who reported having medical problems hypertension was found in 16.6 % of them. From those who were taking medicine (42%), majority (30.7%) were following allopathic system of medicine.
- Only 34 % subjects reported regular medical checkup and only 42.7% reported performance of regular Breast Self Examination. Majority of them were unaware about regular lipid profile (77%) and regular PAP smear (88.7%) examination.
- Regarding basic knowledge of menopause 42% subjects rated their knowledge as fair and 35.3% little. It is noted that books /magazines (24%) internet (29%) and friends (24%) were identified as the common sources of seeking information on menopause.

5.1.2 Existing symptoms of menopause affecting HRQoL

- The existing symptoms of menopause affecting HRQoL reported by study subjects were mild awareness of heart beat (25.3%) and mild feeling of intense heat (17.3%). The symptoms like increased need to urinate and urine leak was commonly reported by more than 15% of the study subjects with mild to moderate intensity. Many of them reported mild to moderate decrease in performance (22%) and concentration (23%) while more than 50% reported that they are not at all affected. The reported symptoms of joint pains were found as mild (23%) to moderate (19.7) and very severe (4.7%). The severity of joint and muscular pain was reported more as compared to the other symptoms of menopause.

5.1.3 Comparison of overall knowledge and practices of subjects in relation to management of selected physical components of management of menopause during pre test and post test.

- In relation to overall knowledge, 87.7% of study subjects belonged to below average category during pre test while only 4.3 % of women were found in this category after post test.
- After post test the level of knowledge percentage was found to be increased significantly. 88.7 % of the women belonged to very good and excellent categories where as only 5.7% were in this category during pre test.
- In relation to overall practices 79.3% of subjects belonged to below average category during pre test while only 6.3% were found in this category after post test.

- After post test 76.3 % subjects were found in excellent category while only 2.7% were observed in this category during pre test.

5.1.4 Comparison of item wise knowledge in relation to management of selected physical components of menopause during pre test and post test.

- In relation to item wise knowledge on selected components of menopause such as female reproductive system (81.3%) menopause (83.7%), hot flashes and night sweats (88.6%) heart discomfort (89.7%), sleep disturbances (82%) and joint pain (89.9%) were found in average and below category, during pretest. Similar responses under same grades were also seen for urinary problem (85%), vaginal problem (88.7%), sexual problem (88.7%) gain in weight (78%) and health hazards (89.4%). Amongst all components 25.3% participants had excellent knowledge of health screening during pretest.
- There was a statistically significant improvement in all knowledge items in relation to management of selected physical components of menopause affecting HRQoL after post test (P value <0.05 at 5% level of significance).

5.1.5 Comparison of item wise practices in relation to management of selected physical components menopause during pre test and post test.

- The self expressed practices of the study subjects on selected components like hot flashes and night sweats 80.3%, heart discomfort 77.7%, and sleep disturbances 72.3% were found in categories average and below, during pre test.

- Among all the components majority (91.7%) had lowest knowledge and practices on management of urinary problems. Practices for vaginal problem (15.3%) and gain in weight (16%) have shown significantly higher percentage in excellent category during pre test.
- Self expressed practices during post test, revealed a significant increase in the percentage under good, very good and excellent category on all the components of management of menopause.
- There was a statistically significant improvement in all practice items in relation to management of selected physical components of menopause affecting HRQoL after post test (P value <0.05 at 5% level of significance).

5.1.6 Comparison of mean scores on knowledge and practices during pre and post test.

- A significant increase was found in overall knowledge mean scores to 76.4 during post test from pre test knowledge mean score of 23.2472. Similarly a significant increase in overall practice mean scores was also seen from pre test mean scores of 20.54863 to post test mean scores of 82.0533.

A highly significant difference was found between the overall pre test and post test mean scores on knowledge and practices ($P < 0.05$).

- There was a statistically significant improvement in all knowledge and practice items during post test in relation to management of selected physical components of menopause affecting HRQoL.
- The Planned teaching has significant effect on knowledge and practices in relation to all selected physical components of menopause as evident by the post test scores and p value was less than 0.05 at 5% level of significance.

5.1.7 Association between knowledge, practices and demographic and personal characteristics

- There was no significant association found between knowledge, self expressed practices and selected demographic characteristics (age, marital status, education,) and personal characteristics (medical checkup, breast self examination and PAP smear) of study subjects.
- Association between pre test knowledge and personal characteristics such as medical checkup breast self examination, regular lipid profile, and PAP smear was found statistically significant.

5.1.8 Views regarding information booklet

- Majority of subjects strongly agreed that the booklet was comprehensive, simple to understand, informative and illustrated with attractive pictures. They also said that the booklet was appropriate and useful for them.

5.2 Discussion

In this study most of participants were from the age group of 40 to 42 . Majority of women were housewives. This is consistent with the study in the outpatient department at Isra University hospital, Pakistan, conducted by Nisar N, Nisar,³³ where 95% of the participants were housewives.

The existing symptoms of menopause affecting HRQoL reported by study participants were mild awareness of heart beat (25.3%) and mild feeling of intense heat (17.3 %), mild to moderate increased need to urinate, mild sensation of dryness in the vagina (12.7%) and change in sexual desire (14.3%). Many of them reported experiencing mild to moderate decrease in performance (22%) and concentration (23%). Similar problems were found in a study conducted by Jahanfar Sh. Et al.⁷

The severity of joint and muscular pain was reported more as compared to the other symptoms of menopause. Common symptoms of menopause and its severity vary as compared with the reports of other studies conducted in India . Bairy L.et al,⁵⁵ India, reported that the study participants complained more about physical symptoms. More than 50% of women from this study complained of aches in muscles and joints. A Malaysian, multiracial study also found similar results. The most common symptom was found to be joint and muscle discomfort with 84.3% prevalence Jahanfar Sh. Et al⁷.

The planned teaching has a significant effect on knowledge and practices of perimenopausal women in relation to management of selected physical components of menopause. Regarding overall knowledge during pretest 87.7% of study participants belonged to below average category during pre test while only 4.3% of women were found

in this category after post test. The level of knowledge percentage was found to be increased significantly after planned teaching. After post test 88.7 % of the subjects were found to be belonging to very good and excellent, where as only 5.7% were in this category during pre test. The findings were similar to the previous studies by Tsao. LI et al.⁸⁷ They revealed that, women need more health education or reassurance and reliable information to manage their menopausal problems and concerns.

Regarding overall practices of perimenopausal women on management of menopause 79.3% belonged to below average category during pre test while only 6.3 % of women were found in this category during post test. This is consistent with the study conducted by Tsao. LI et al⁸⁷ in Northern Taiwan, where the women had lower scores on self care related to perimenopausal symptoms and depended more on physicians to help them find relief from their discomfort. An educational program for perimenopausal women by McDevitt et al²⁷ revealed a very positive outcomes. After attending the session women made changes in their diet, exercise practices and visited the health care providers to discuss alternative therapies.

A highly significant difference was found between the overall pre test and post test mean scores on knowledge and practices of perimenopausal women about management of selected physical components of menopause ($P < 0.05$).

Conclusions

The present study was conducted on women between the ages 40 and 55 years. Planned teaching program was conducted and reinforced by providing an information booklet. To find the effectiveness of planned teaching and to compare the pre and post interventional differences in the level of knowledge and practices, statistical analysis through frequency percentage, t test and Chi square was done. The conclusions drawn from this study are as follows:

Women suffer from mild to moderate symptoms of menopause affecting HRQoL. These symptoms are hot flashes, night sweats, bladder problem, decrease in performance, decrease in concentration, awareness of heart beat, dryness in the vagina, sexual problem, joint and muscular pains. The severity of joint and muscular pain was reported more as compared to the other symptoms of menopause.

The planned teaching was found to be very effective in improving knowledge and practices of women as evident by the post test scores. The comparison between pre test and post test knowledge on all nine symptoms and two components of health hazards have shown a significant improvement during post test. The statistical analysis illustrates a highly significant difference ($P < 0.05$ at 5% level of significance) between pre test and post test mean scores on knowledge of perimenopausal women. In relation to practices improvement is evident from the post interventional mean scores differences and P value ($p < 0.05$ at 5% level of significance).

The correlation findings were done using Pearson Chi square to find association between pre test and post knowledge, practices and selected demographic and personal characteristics of study subjects. A significant association between pretest knowledge and personal characteristics like regular medical checkup, breast self examination, regular lipid profile, and PAP smear examinations was found. No association between self expressed practices, post test knowledge and demographic, personal characteristics was found.

From this research, it is evident that the planned teaching for women during perimenopause on management of menopause definitely helps women in improving their awareness about short term, medium term and long term consequences of menopause, management of symptoms and prevention of health risks.

Limitations

1. Teaching sessions were planned in the evenings or on Sundays for working women and during day time for housewives, as it was difficult to collect all women on many occasions.
2. It is very difficult to isolate the effect of planned teaching from those of other sources like mass media, friends, internet magazine etc.
3. Managing large groups of women was difficult to manage especially while filling up the questionnaire.
4. Some women took long time to fill up the Self administered questionnaire while others had to wait.
5. Only physical symptoms were part of the study.

Implications

The study attempted to impart information to the perimenopausal women regarding management of menopause. The findings of this study have implications for nursing practice, nursing education, nursing administration, nursing research.

Nursing Practice

The present study has found that women suffer from mild to moderate symptoms of menopause. The study shows evidence s that teaching about short term, medium term and long term consequences of menopause will definitely help women in improving their awareness about reducing symptoms and preventing risks of developing diseases related to menopause.

Providing education about menopause symptoms and importance of health screening is central to nursing practice of midlife women. Presently many hospitals in India run menopause clinics. Women obtaining health monitoring or routine health screening may inquire about expected symptoms or seek information about current symptoms. Therefore nurses working in the hospital OPDs, menopause clinics , must keep abreast of current knowledge on management of menopause.

Health discussions with perimenopausal women can increase their knowledge about a natural phase of life, which could provide awareness about health promoting factors affecting them. Health discussions in turn, provide them with a possibility of participating

actively in their self care. The women's own resources could be realised and the capacity for taking responsibility for their own health would increase, as a result.

Perimenopause is a natural life process, not a disease. Not every woman seeks medical help. Therefore health information about perimenopause should be provided at places where women most frequently visit, not just in the hospitals or health departments. The community health nurses play a vital role as teachers, facilitators, counsellors and liaison between the community and health care services as well as change agent in promoting healthy behaviour among perimenopausal and menopausal women. Nurses can organize camps for perimenopausal, menopausal and post menopausal women for health assessment and health education.

The findings of this study, teaching module and A.V. Aid, prepared by the investigator can be used by the nurses in clinical and community settings.

Nursing Education

The syllabi of nursing courses provide very minimal emphasis on menopause; hence, a graduate nurse has very less knowledge regarding menopause symptoms and management, long term effects of menopause and its prevention. Nursing curriculum requires more emphasis on the content of various symptoms of menopause and its management. A well informed nurse can better prepare the women as they approach menopause and perhaps even reassure those who are surprised with various symptoms encountered.

Nursing Administration

The nurse administrators should take active and pivotal role in developing teaching modules, cost effective educational material and setting up of menopause clinics. The nurse administrators can collaborate with other organizations like schools, other educational institutions, medical care providers and health departments in organizing health screening camps and education sessions for women. This study will assist nurse administrators in organizing teaching programs in the hospital OPDs or community in order to deal with the problems of menopausal women.

Nursing Research

A very few studies conducted in India, were found during literature review as compared to studies done in western countries in relation to menopause health and education. More qualitative and quantitative research studies can be undertaken in the area of women's health and menopause.

Self

An extensive literature review has enabled the researcher to seek thorough knowledge on menopause management which will definitely help the researcher to manage her own menopause successfully and guide friends, relatives and others. From this study the investigator has acquired a thorough understanding of research methodology and statistical analysis which will certainly facilitate the investigator to conduct further research studies as well as to guide students and others. Typing the manuscript herself has helped the investigator to learn new computer operations and strengthen her skills.

Recommendation

On the basis of the findings of present study it is recommended that:

1. Similar study may be conducted with a larger sample size.
2. Similar study may be conducted focusing on management of psychological components of menopause.
3. An explorative study may be conducted on spouses of perimenopausal women to find their knowledge in relation to symptoms of menopause affecting quality of life during perimenopause.
4. A comparative study may be done on knowledge and practices of perimenopausal women living in rural and urban areas, in relation to management of selected physical components of menopause.
5. An experimental study may be conducted to find the knowledge and practices of perimenopausal women in relation to Breast Self Examination.
6. An exploratory study may be conducted to find the knowledge of nurses in relation to management of menopause.
7. A longitudinal study may be conducted to assess the impact of planned teaching on knowledge and practices of women after 6 months, one year, five years and 10 years.
8. Similar study may be conducted on women with younger age groups i.e. 30 years and above.
9. A study may be conducted for women with surgical menopause.
10. An exploratory study may be conducted to assess the knowledge of women in relation to cardiovascular diseases, osteoporosis and cancer.