

Knowledge and attitude towards menopause and Hormone Replacement Therapy (HRT) among postmenopausal women

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Abstract

Introduction: To determine the knowledge and attitude towards menopause and Hormone Replacement Therapy (HRT) among postmenopausal women.

Method: A descriptive cross sectional study based on sample of convenience was conducted at outpatient services of Jinnah Medical College Hospital Karachi from 1st January 2005 to 30th April 2005. One hundred and two postmenopausal women who came to outpatient department of Jinnah Medical College Hospital Karachi as a patient or as an attendant were interviewed after taking verbal consent. Sociodemographic characteristics, knowledge and attitude towards menopause and HRT were collected through a structured pretested questionnaire.

Results: The mean age of respondents was 55.1 ± 10 years (range 40 - 75 years). The mean age at menopause was 47.4 ± 3.3 years. Majority of respondents belonged to poor socioeconomic class (75.5%) and 62 (60.8%) had received no formal education. Ninety seven percent of women had heard about menopause and 29.4% were aware of the symptoms. Four (3.92%) knew the long term implications of menopause. Out of 102, only 02 (1.96%) respondents were aware of HRT. Most of respondents (94%) did not consider menopause to be a medical condition but a normal transition. Majority of respondents had positive (47%) or Neutral (39.2%) attitude towards menopause. Thirty six (35.29%) respondents were not sexually active. Decrease libido and frequency was reported by 33 (32.3%) respondents while 25(24.5%) reported no change.

Conclusion: Majority of women lacked sufficient knowledge on menopause and HRT. Women's attitude towards menopause showed that majority considered it a natural event and not a medical condition (JPMA 58:164;2008).

Introduction

Menopause is a physiological event occurring with ovarian failure and marks the end of women's reproductive life.¹ The average age of menopause is 51 years.¹ In 1960, the world population of women aged over 60 was below 250 million, but it is estimated that in the year 2030, 1.2 billion will be peri or postmenopausal and that this total will increase by 4.7 million a year.² The average woman in the developed world can now expect to spend approximately one third of her life in postmenopausal state.³ Because of these predicted changes in population structure, physicians are beginning to see that menopause is not a negligible phenomenon but a major public health problem.²

Attitudes, perceptions and expectations are part of the psychosocial phenomenon surrounding menopause.⁴ Women in midlife and health professionals believe that attitude plays a role in experience of menopause.⁵ Hormonal changes at menopause are associated with numerous physical and psychological symptoms like vasomotor symptoms, sleep disturbances, mood alteration, depression, urinary tract infection, vaginal atrophy and increased health risks for several chronic disorders including osteoporosis cardiovascular disease and loss of cognitive function. Menopausal symptoms are found to be less common in societies where menopause is viewed as a positive rather than negative event.⁴ The Massachusetts women health study did a longitudinal study on more than 2000 women between 45 and 55 years. This study showed that negative attitude towards menopause leads to less favourable mode of climacteric.⁶ This cultural aspect of menopausal symptoms has been discussed in a number of studies among Asian women including Japanese and Chinese population.¹

It is well established that HRT is an effective means of treating postmenopausal symptoms and preventing long term complications such as osteoporosis.⁷⁻¹⁰ The HRT usage rate is low largely because majority remain poorly informed about this therapy.^{11,12}

The aim of this study was to determine the knowledge and attitude towards menopause and HRT among postmenopausal women.

Subjects and Methods

A cross sectional study was conducted from 1st February 2005 to 30th April 2005 at Jinnah Medical College Hospital, Karachi. A structured questionnaire was used which was pretested in 15 respondents. A convenient sample of postmenopausal women coming to outpatient services of hospital as a patient or as an attendant was

used. A total of one hundred and ten postmenopausal women with menopause occurring either naturally or surgically induced, were approached for interview after taking verbal consent. The sociodemographic variables included the present age, parity, education level, marital status, social status, age of menarche and age at menopause. Age was measured in years. Education was divided in five levels Nil, Primary, Middle, Matric and Graduate. Marital status was coded in four categories single, married, widowed and divorced. Respondents were divided in poor, lower middle, upper middle if family income was less than Rs. 5000 per month, up to Rs. 15000 per month or more than Rs. 15000 per month respectively.

The respondents were asked if they had ever heard or knew about menopause. Questionnaire was in Urdu language and respondents were asked if they had the knowledge on menopause at the time when their periods stopped. Respondents were further questioned on the knowledge of menopausal symptoms, long term implications and different methods of treatment of menopause. Respondent's attitude towards menopause were asked and enquiry was made regarding their opinion about this life event whether it was positive, negative or neutral. Furthermore, they were asked if they considered menopause as a medical condition or a normal transition. Respondents were asked about their sexual relationships. All respondents were asked if they had ever heard of HRT. All respondents who had heard about HRT were additionally questioned about the source of information with the benefits and risks of its use. Data collected was analyzed utilizing statistical programme for social sciences (SPSS) version 10.

Results

Complete data from One hundred and two postmenopausal women were obtained. Eight questionnaires were not completed hence not used for analysis. The sociodemographic characteristics of the study population are shown in Table.

Mean age of respondents was 55.1 ± 10.1 years, with a range of 40 to 75 years. The mean age of menarche was 12.79 ± 0.79 years. The mean age at menopause was 47.4 ± 3.3 years. Majority of women were married (82.3%). Parity of the respondents ranged from 0 - 13 and 72 (70.5%) had 5 or more children. Only two respondents were nulliparous. Majority of respondents had received no formal education (60.8%) and belonged to poor socioeconomic group (75.5%).

Regarding their awareness of menopause, 97 (95%) women had previously heard of menopause. Most

of these women had heard about it from elders in family and friends. Thirty (29.4%) respondents had some knowledge of menopausal symptoms. Only 4 (3.92%) respondents were aware of long term implications of menopause. Out of 102, only 2 (1.96%) respondents knew about Hormone replacement therapy and source of their knowledge was their health professionals. Majority of women considered menopause as a positive (47%) or neutral change (39.2%) and indicated that it did not affect their relationship with their spouse and children. Most women (94%) did not perceive menopause to be a medical condition but a natural transition. Thirty-six (35.29%) respondents were not sexually active. Decrease libido and frequency was reported by 33 (32.3%) respondents while 25(24.5%) reported no change. Out of one hundred and two only four (3.92%) respondents were aware of treatment of menopause. Only one respondent realized that HRT could relieve menopausal symptoms and prevent long term health risks, while the rest had no knowledge of this aspect.

Discussion

Menopause marks a time of dramatic hormonal and often social change for women.² As life expectancy is rising, more women are exposed to the potential long term consequences of menopause. HRT can have significant benefits in postmenopausal women, yet rates of HRT use are low. Knowledge of menopause is a key predictor of HRT use. The attitudes of women to menopause are strongly influenced by social, cultural and economic settings in which they live and may also reflect the differences in modes of treatment for or perceptions of its symptoms.¹ Menopausal symptoms are observed in all countries of the world but prevalence varies from society to society. Hot flushes and night sweating is the commonest climacteric symptom experienced in Caucasian population.¹³ In Netherlands, Oldehave et al found that up to 85% of perimenopausal women experienced such complaints.¹⁴ Lock et al however reported that such complaints hardly existed in Japanese women.¹⁵ Majority (95%) of women had heard about menopause. This is comparable to other studies,¹⁶⁻¹⁸ but few females (29.7%) had knowledge about symptoms and long-term health risks (3.9%).

Attitudes towards menopause and aging differed across ethnic groups, with African women being the most positive and Chinese American and Japanese American women least positive.¹⁹ In this survey majority of women expressed either positive (47%) or neutral (39.2%) attitude towards menopause signalling freedom from cyclical bleeding and independence. This finding is similar to the findings of other studies.^{17,18,20} This is in

contrast to a study on Hispanic women who regret when their periods stop.¹² Another survey carried out with an aim of understanding views and values of Asian women of Indian origin living in UK, related to menopause and HRT. Of all the women surveyed, 33% felt happy and 46% felt afraid of menopause.²¹ In this study, majority of respondents (94%) did not perceive menopause to be a medical condition but a part of the natural aging. The same findings have been observed in other studies.^{22,23}

Majority of respondents in the study had never heard of HRT. Lack of information about HRT is the most important reason of not using it. This is comparable to findings in other studies.^{18,20} Lack of Knowledge being greatest in less educated, older and poor socioeconomic class. This finding is consistent with results of other studies.^{9,4} Well educated women may be more likely to read articles about HRT, have more substantive discussions with physicians about their personal benefits and risks of HRT use and thus seek treatment.²⁴ Lack of awareness about long-term implications of menopause among women may result in low HRT usage rate. Another reason for not having the knowledge on HRT was that women were not advised by their health care provider to use HRT. About 75% of nonusers of HRT would consider HRT if so recommended by their doctors.⁶

The benefit and risk profile of HRT varies greatly depending on the timing of its initiation, the kind of estrogen or progesterone used and their route of administration and dosing. Therefore in deciding to go for HRT, the risks and benefits should be weighed carefully in individual patients and informed consent obtained for its administration.²⁵

Conclusion

The study revealed a general lack of knowledge about menopause and HRT. Women's attitude towards menopause ranged from positive to neutral. Better education about menopause from media sources and healthcare providers is needed regarding the long-term risks associated with menopause and pros and cons of HRT so that women can take informed health decisions, which may result in improvement in quality of life.

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