

A Study on Menstrual Problems among Unmarried Hostellers - An Observational Study (Community Based)

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Abstract

Introduction:

Menstruation is nothing but a normal vaginal bleeding that occurs in a cyclic manner. It follows from menarche to menopause. Even though it is a normal process it will affect their quality of life when several issues associate with their menstrual cycle.

Objective:

Menstruation is one of the fundamental phenomenons of normal reproductive function in a woman. The aim of this study is to address the menstrual problems faced during every menstrual cycle among Bachelorette hostlers aged from 18 to 30.

Material and Methods:

A cross sectional study using a semi structured questionnaire was conducted in the ladies hostel nearby Tambaram Sanatorium. 100 unmarried women aged from 18 to 30 were selected by purposive random sampling for the study after getting informed consent.

Results:

Among 100 participants, 88 of them have their regular menstrual cycle. In the account of 88 members, 62 are in the age group of 20- 24($p < 0.04$). Dysmenorrhoea is the major problem faced by 76 members. No. of study participants with clinical entities such as Hypothyroidism, Anemia and PCOS are 4,14,8 respectively. 77 of them are taking junk food.

Conclusion:

This study states that dysmenorrhoea and anemia are more common menstruation related health problems among the hostellers. This may be because of their food habit and life style. This will affect their overall health. Healthy eating habits need to be promoted among the girls staying in hostel. Awareness should be created about their reproductive health.

Keywords: Hostellers, Unmarried women, Menstrual problems, Lifestyle changes

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Introduction

Menstruation, a normal physiological process under the control of the hypothalamic- pituitary- ovarian axis, behaves as cyclic hormonal changes. Several studies have exposed that menstrual related problems are experienced by large population of women that provides an evidence to give importance to the menstrual problems as a public health problem. ^[1]

Menarche is a natural process which is a hallmark in the transitional phase of reproductive life of women. A number of factors such as age, ethnicities, family history, physical activity and dietary habits can affect the menstrual patterns. ^[2] Puberty is an important stage of growth and development in females where in significant cognitive, psychological and physical change takes place ^[3]. During menstrual cycle, women are still considered as filthy, shameful or impure and since it is a taboo among various cultures ^[4]

Maia Schwarz stated that "Menstruation is the only blood that is not born from violence". Menstrual was derived from Latin word Menstrual which gives the meaning Monthly. Menstruation is an ancient French word derived from menstrual. Mental health and Menstruation correlates with each other, Menstruation can be related to mental

Materials and Methods

An observational study was planned among the unmarried hostellers. Before entering the study ethical clearance was got from the IEC members. Then, a cross sectional study was conducted among 18 to 30 year aged unmarried hostellers who stayed in and around Tambaram

health issues like stress, anxiety and depression ^[5]. Women with menstrual related problems also be concerned for mental health issues by the health care providers. Among men and women in reproductive age group, the rate of depression is approximately twice in women than in men ^[6]. An important indication of women's reproductive health is regular menstrual cycle. Some of the irregularities such as pain, discomfort, heavy discharge and absence of cycle may affect the general and reproductive life of females ^[7].

An uncorrected menstrual problem deserves for a careful evaluation, because it adversely affects the daily routine and quality of life of the women ^[8]. Dysmenorrhoea, Menorrhagia, Metorrhagia, Oligomenorrhoea , Premenstrual symptoms are the common problems faced and they are responsible for physical, behavioral and emotional changes around the menstruation^[9]This may affect their daily activities such as academic excellence ,loss of self confidence, achievements in sports, etc., ^[10] .This study is planned to observe and collect data about menstrual related problems among unmarried hostellers aged from 18 to 30 years by a questionnaire method.

sanatorium. The subjects who were willing to participate in the study with the with required criteria were included. Subjects with any anatomical problem in their reproductive organ were excluded. Before the conduct of the study, clear explanation about the study was given to all. Written informed consent was obtained and a token of promise was given for the privacy of

data. Then a pre designed questionnaire was distributed among the subjects. The questionnaire contains the details of socio demographic details of the subject, pubertal age, dietary habits, medical history and patterns of menstrual cycle.

Results

The data collected through the questionnaire was statistically analyzed and the following results were obtained. The age of observed subjects ranges from 21 to 30 with the mean of 24.0900. The pubertal age ranges from 10 to 17 with mean of 13.8400. The length of the cycle ranges from 13 to 90 days with the mean of 30.5200. The mean for duration of flow is 4.5700. 12 hostellers had attained the puberty at the early menarche age, 59 had attained the puberty at medium menarche age, 29 had attained the puberty at delayed menarche. The duration of cycle for 80 was between 28 -35 days, 9 of them have their cycle in every 35 days, 9 of the studied participants have their cycle length in between 21-27 days, 2 of the studied participants have their cycle in every 21 days. Menstrual flow was less than 4 days for 46 subjects, within 5-6 days for 43 subjects and above 7 days for 11 subjects.

76 % (76) was found to have pain during their menstrual cycle which ranges from mild to severe. Depicting the patterns of dysmenorrhea, 26 of them had mild dysmenorrhea, 36 of them had moderate dysmenorrhea and 14 of them had severe dysmenorrhea. It was classified by using

The details were entered in SPSS using Ms Excel. Data analysis was done with the help of statistician. Chi square test was used to test the significance of data. The level of significance was set at value <0.05.

universal pain scale.

Maximum of studied subjects had regular menstrual cycle of about 88% (88) whereas 12 had irregular menstrual cycle. 25 had medical conditions like hypothyroidism, PCOS and anemia. Among the subjects with associated diseases, 4 had hypothyroidism, 14 had anemia, and 8 had PCOS. 90 of them experienced pre menstrual symptoms such as head ache, bloating abdomen, constipation, loss of appetite and irritability. Pre menstrual symptom in the form of headache was found in 17, bloating abdomen was found in 25, constipation occurs for 4, loss of appetite was found in 5 and irritability was experienced by 35 subjects. The effect of menstrual problem causes 40 of the studied subjects to stay in the room itself. 16 of them had polymenorrhea, 16 of them had oligomenorrhea. 17 of them were taking medications for their menstrual problems, only 3 of them had consulted a Siddha physician for their menstrual problems, 77 of them were having the habit of taking junk food, 53 of them were taking oil bath regularly, 34 of them followed some traditional methods during their cycle, 10 of them have answered that they are taking some specific diet during their cycle. 40 of them faced interruption in their menstrual cycle.

Discussion and Conclusion:

This study was conducted as a cross sectional study among unmarried hostellers with the sample size of 100 subjects. Age criteria for inclusion were 18 to 30 years of age. Various transition happens in the reproductive life of women. In developing countries, women in reproductive age are significantly affected by menstrual disorders as they are not of threatening condition. It depends upon the genetic, environmental, familial and economic status.

A regular cycle with normal menstruation plays an important role in the reproductive part of their life and also in their general health. 88 of them have their regular cycle. 80 of them have the normal cycle length. Premenstrual syndrome which is a multi-factorial syndrome can be characterized by psychological, physical and behavioral symptoms. Among the participants 90 of them have experienced premenstrual symptoms.

Dysmenorrhoea is an important sign of functional disturbances in the hypothalamic-pituitary- ovarian axis. Among the participants 76 of them have dysmenorrhoea during their monthly cycle. Severity of the pain was documented among the participants using universal pain scale. 17 of them have the habit of taking medications for their menstrual pain. 64 of them had stayed in the room during their cycle due to their pain.

Anemia was one of the major associated manifestation among the participants. Anemia is

one of the leading cause in affecting the normal and mental health. Anemia will lead several complication for both mother and child during the gestational period. Oligomenorrhea and polymenorrhea was considerably found among the participants. There is a connection between the normal flow and hemoglobin concentration. 77 of them are having the habit of taking junk food. This will be the one of the reason for dysmenorrhea and anemia. Out of 100, 3 of them have consulted with the Siddha physician for their menstrual related problem. This has to be noted and further research should be made in this area to propagate the Siddha system in the field of gynecology.

Based on the study findings, it is concluded that considerable proportion of women of reproductive age group residing in hostel were experiencing menstrual problems. Though menstrual cycle is a natural process, Dysmenorrhea was one of the major problems among the studied subjects during their menstrual cycle. It makes them to stay in the room during their cycle. Anemia was found more among the participants. These criteria will affect their fertility rate in future. Existing health programs should be implemented in an effective way to address these problems.

The physical and emotional discomfort during menstruation caused most of the respondents to miss college or job every month. Habit of taking junk food is more among the subjects. Healthy food habits should be promoted

among the girls staying in hostel. Life style modifications should be advised for their healthy life. Awareness about their reproductive problems should be created. The study has been conducted within a limited area and with the small sample size. Similar studies can be done in larger

samples in future. The present study has been focused only on the menstrual problems. Further, the study can be extended by analysing the emotional and stress during menstrual cycle in future.

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