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## Features and perceptions of menopausal women in Benin City, Nigeria

Page | 300

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### Abstract

**Background/Objective:** The features of menopause have always been assumed to occur only to a minor degree of significance in Nigerian women. Perceptions of menopausal symptoms are greatly influenced by social, cultural and economic settings and may influence the mode of treatment for menopausal symptoms. The aim of this study was to determine the features and perceptions of natural menopause among menopausal women in Benin-City, Edo State, Nigeria.

**Methods:** A descriptive cross-sectional study of 533 randomly selected Nigerian women in Benin City, Edo State who had experienced at least 24 continuous months of amenorrhea using a structured questionnaire.

**Results:** The ages of the women studied ranged between 47 and 78 years; mean  $57.4 \pm 6.3$  years. The mean menopausal and menses ages were  $49.8 \pm 2.6$  and  $15.2 \pm 2.0$  years. Most (80.7%) were currently married with 63.6% in monogamous relationships. Three hundred and fifty-six women (66.8%) have heard of the word menopause and correctly described it. Menopause was considered a normal event by 97.4%. Majority (407; 77.6%) adjusted very well to the events of menopause with none revealing any serious maladjustment. Three hundred and forty-six women (64.9%) were no longer sexually active. Joint pains (287; 53.8%), hot flushes (272; 51%) and night sweats (22; 4.2%) were the most common symptoms believed to be related to menopause. Three hundred and two women (56.7%) actually suffered at least one of the menopause symptoms. Joint pains (52.9%), hot flushes (43.3%) and night sweats (29.8%) were the commonest symptoms experienced. Freedom from monthly bleeding (50.7%) was the most commonly reported advantage of menopause. Only thirty nine (7.3%) were aware of hormone replacement therapy (HRT) and none were on /ever had HRT.

**Conclusion:** Although menopause is well-tolerated by women in our environment, it needs further investigation. Research priorities include the influence of socio-cultural beliefs on sexuality at menopause and evaluation of HRT benefits.

**Keywords:** Benin City, features, menopausal women, menopause, perceptions

### Résumé

**Contexte/objectif:** Les caractéristiques de la ménopause ont toujours été supposés se produire à un degré mineur d'importance en nigérianes. Perceptions des symptômes de la ménopause sont fortement influencées par les milieux sociaux, culturels et économiques et peuvent influencer sur le mode de traitement des symptômes de la ménopause. Le but de cette étude était de déterminer les caractéristiques et les perceptions de la ménopause naturelle chez les femmes ménopausées au Bénin-ville, état d'Edo, Nigeria.

**Méthodes:** Une étude descriptive transversale de 533 nigérianes choisies au hasard dans la ville de Bénin, état d'Edo qui avaient expérimentés au moins 24 mois continues d'aménorrhée à l'aide d'un questionnaire structuré.

**Résultats:** L'âge des femmes a étudié variaient entre 47 et 78 ans ; moyenne  $57,4 \pm 6,3$  ans. La moyenne ménopause et les âges de menses ont été  $49,8 \pm 2,6$  et  $15,2 \pm 2,0$  ans. Actuellement, la plupart (80,7 %) se sont mariées avec 63,6 % dans les relations monogames. Trois cent cinquante - six femmes (66,8 %) ont entendu parler de la ménopause

mot et il décrit correctement. La ménopause était considéré comme un événement normal de 97,4%. Majorité (407; 77,6%) très bien ajustés aux événements de la ménopause sans qu'aucun ne révélant toute inadaptation grave. Trois cent quarante - six femmes (64,9%) n'étaient plus actives sexuellement. En collaboration avec douleurs (287; 53,8%), bouffées de chaleur (272 ; 51%) et sueurs nocturnes (22 ; 42%) étaient les symptômes les plus courants soupçonnés d'être liés à la ménopause. Trois cents et deux femmes (56,7%) a effectivement subi au moins un des symptômes des ménopause. Douleurs articulaires (52,9%), les bouffées de chaleur (43,3%) et nuit sweats (29,8%) étaient les symptômes plus fréquentes expérimentés. La liberté du mensuel saignement (50,7%) était le plus souvent signalé avantage de la ménopause. Seulement trente neuf (7,3%) étaient au courant du traitement hormonal substitutif (THS) et aucun n'étaient sur / jamais eu THS.

**Conclusion:** Bien que la ménopause est bien tolérée par les femmes dans notre environnement, elle mérite d'être enquêta. Les priorités de recherche incluent l'influence des croyances socioculturelles sur la sexualité à la ménopause et l'évaluation des avantages THS.

**Mots clés:** Benin City, fonctionnalités, femmes ménopausées, ménopause, perceptions

## Introduction

Menopause is an inevitable milestone in the reproductive life of women. It refers to a woman's last menstrual period and a woman can be said to have reached menopause when she has had 1 year without menstruating.<sup>[1]</sup> The climacteric or climacterium is used to refer to the wide variety of changes occurring in years immediately surrounding menopause.<sup>[2]</sup>

The quality of life of perimenopausal and menopausal women are strongly influenced by social, cultural and economical settings in which they live. They face various challenges from coping with hot flushes and night sweats to dealing with the discomfort of vaginal dryness.<sup>[3]</sup> Every woman's experience of menopause is unique; she may experience all of the symptoms or none of them. Some women find the transition barely noticeable while others find it life altering.<sup>[1,4]</sup>

Differences in incidence of menopausal symptomatology among cultures may also reflect different modes of treatment sought for, or perception of vasomotor symptoms.<sup>[5]</sup> Most of our women pass through menopause as a normal physiological manifestation of the aging process and do not seek medical intervention. This is despite previous work among Nigerian women that showed high prevalence of symptoms of vasomotor instability and the similarity of their clinical features, hormone profile and biochemical indices of the menopause when compared with Caucasians.<sup>[6]</sup>

Hormone replacement therapy (HRT) has been used for the treatment of menopausal symptoms for over 50 years. Hot flushes and night sweats are the only symptoms universally reported to respond to oestrogen replacement almost immediately.<sup>[7]</sup> (HRT) is not common in Nigeria as women in our environment hardly ever visit the hospital or clinic

for these complaints.<sup>[8,9]</sup> Furthermore, it has been postulated that symptoms of menopause may be less severe in Nigerian women as a result of more favorable sociocultural circumstances in which our women live.<sup>[9]</sup>

The menopause has not been well-investigated in our environment. Even in settings where research on the menopause has been ongoing, women have identified lack of reliable accessible and current information on the menopause and related topics as a problem.<sup>[10]</sup> Women in our environment have always been assumed to adjust well to the changes caused by menopause. Such thinking derives support from the belief that the cultural background of our women contributes to their adjustment to menopausal changes. This study is to determine the features and perceptions of natural menopause among menopausal women in Benin City.

## Materials and Methods

This was a descriptive cross-sectional study from 1<sup>st</sup> September 2008 to 31<sup>st</sup> December 2008 in Benin City. Participants were interviewed using a structured questionnaire designed to enquire sociodemographic details, awareness/definition of menopause, features and perceptions of menopause.

Participants were Nigerian women who had experienced at least 24 continuous months of amenorrhoea selected by a random sampling technique. They were approached independently at home and in their places of work and requested to complete the prepared questionnaire. To ensure that all the social classes were involved, women in their homes, offices and markets were interviewed. Inclusion criteria were knowledge of age, amenorrhoea of at least 24 continuous months duration and age of 40 years or more. Women with history suggestive of surgical menopause were excluded from the study.

Data analysis was done using descriptive statistics. Categorical variables are expressed as frequency (percentage) and continuous variables as means ( $\pm$ Standard Deviation; SD) and ranges.

## Results

Five hundred and thirty-three women completed the questionnaire and thus form the study population. Their current ages ranged between 47 and 78 years with a mean  $\pm$  SD of  $57.4 \pm 6.3$  years. The mean menopausal age was  $49.8 \pm 2.6$  years while the mean menarcheal age was  $15.2 \pm 2.0$  years.

Most of the women (80.7%) were currently married with most (63.6%) in monogamous relationships. Their parity ranged between 0 and 15 with a mean of  $5.7 \pm 1.9$ . One hundred and thirty (24.4%) women had no formal education. Table 1 shows the sociodemographic characteristics of the study population.

Definition and perception of menopause among the study population is shown in Table 2. Three hundred and fifty-six (66.8%) women have heard of the word menopause and correctly described it as permanent cessation of menstrual bleeding. Most of them first came in contact with the word menopause from books (130; 24.4%) and through discussion with friends and coworkers (113; 21.4%).

Menopause was considered a normal event by 97.4% of the women while 2.6% believed it was a disease condition. Majority of the women (407; 77.6%) adjusted very well to the events of menopause: It did not affect their relationship with their spouse or children, and were happy about the event. One hundred women (18.8%) adjusted well to menopause while 26 (4.9%) adjusted fairly well to the events of menopause. None of the women studied revealed any serious maladjustment to the events of menopause.

Three hundred and forty-six women (64.9%) were no longer sexually active at menopause and up to the study period. One hundred and eighty-two women (34.1%) were still sexually active, while five (0.9%) did not say if they were still engaged in sexual activity.

Table 3 shows symptoms believed to be related to menopause. Three hundred and twenty-eight (61.5%) of the 356 women who have heard of the word menopause were aware that there were symptoms associated with menopause. Joint pains (287; 53.8%), hot flushes (272; 51%) and night sweats (22; 42%) were the most common symptoms believed to be related to menopause.

**Table 1: Sociodemographic characteristics of respondents**

Characteristics	Number	%
Age at menopause (years)		
40-44	-	-
45-49	25	4.7
50-54	180	33.8
>55	328	61.5
Level of education		
No formal	130	24.4
Primary	157	29.5
Secondary	109	20.5
Postsecondary	137	25.7
Type of marriage		
Monogamy	339	63.6
Polygamy	192	36.0
Not married	2	0.4
No of living children		
0	2	0.4
1-2	16	3.0
3-4	157	29.5
$\geq 5$	358	67.2

**Table 2: Definition and perception of menopause of respondents**

Characteristics	Number	%
What is the term menopause?		
Correct	356	66.8
Wrong	177	33.2
Degree of adjustment to menopause		
Poor/none	-	-
Fairly well	26	49.0
Well	100	18.0
Very well	407	76.4
Did menopause affect sexual activities?		
Yes	346	64.9
No	182	34.1
No response	5	0.9

**Table 3: Symptoms perceived by respondents to be related to menopause**

Symptom	Number	%
Joint pain	287	53.8
Hot flush	272	51.0
Night sweats	224	42.0
Headache	118	22.1
Fatigue	104	19.5
Anxiety	77	14.4
Insomnia	51	9.6
Loss of libido	45	8.4
Dizziness	24	4.5
Depression	23	4.3
Dyspareunia	10	1.9
Urine leakage	4	0.8

Three hundred and two women (56.7%) actually suffered at least one of the menopause symptoms. Two hundred and eighty-two (52.9%) women had experienced joint pains. This was followed by women who had experienced hot flushes (231; 43.3%) and night sweats (159; 29.8%). Other symptoms experienced were: Headaches (42; 7.9%),

fatigue (24; 4.5%), anxiety (22; 4.1%), insomnia (17; 3.2%), dizziness (16; 3.0%), loss of libido (9; 1.7%) and dyspareunia (4; 0.8%).

The most commonly reported advantage of menopause was freedom from monthly bleeding (50.7%). Some women reported that with menopause they felt they were complete women (2.4%). Eighteen (3.4%) women said with the advent of menopause, they no longer bear fears of getting pregnant. The possibility of having a child or having another child became a concluded issue in 1.3% of women with onset of menopause and they saw this as a major disadvantage of menopause. Only 39 (7.3%) of the women, all of whom had post secondary school level of education were aware of HRT. None of the women studied were on/ever had HRT.

## Discussion

A good proportion of the women studied were knowledgeable of what menopause is and conversant with its associated symptoms. The mean menopausal age of  $49.8 \pm 2.6$  years in this study compares favourably with those reported for Ibadan ( $49.36 \pm 5.0$  years) and Ile-Ife ( $48.4 \pm 5.0$  years)<sup>[8,9]</sup> These findings are in agreement with those of previous studies that suggest that women worldwide attain menopause at about 50 years.<sup>[9]</sup>

Regional and ethnic variations in the incidence of menopause-related vasomotor symptoms are well-established. Joint pains (52.9%), hot flushes (43.3%) and night sweats (29.8%) were the commonest symptoms experienced by the women studied. The prevalence of hot flushes in this study was similar to that in a study at the United Arab Emirates.<sup>[11]</sup> Okonofua *et al.* reported joint pains and hot flushes as the commonest symptoms amongst menopausal women studied at Ile-Ife.<sup>[9]</sup> In other studies conducted among Caucasian women, the prevalence of hot flushes was 74% in the United States of America,<sup>[12]</sup> 80% of Dutch women<sup>[13]</sup> and 87.2% in Denmark.<sup>[14]</sup> These differences may be due to higher level of symptoms awareness in Caucasian women.<sup>[9]</sup>

Freedom from monthly bleeding was cited by 50.7% of the respondent as the major benefit of the menopause, while in the study carried out in Ibadan,<sup>[8]</sup> 35.33% said freedom from monthly bleeding was the major benefit of menopause. Other advantages of menopause listed by the women were “feeling purer” and “now able to worship God better”, and no more fear of pregnancy. Menopause was seen as a major disadvantage by 1.3% of the women studied because it meant they were no

longer able to get pregnant, compared to 3.87% of women studied in Ibadan.<sup>[8]</sup>

In this study, only 34.1% were still sexually active during the years immediately before and after menopause. Earlier studies on menopausal women in Ibadan<sup>[8]</sup> and Ile-Ife<sup>[9]</sup> had reported sexual activity of 27.42% and 42%, respectively. The low incidence of sexual activity in our study could be culture related. The reasons given for sexual abstinence included lack of sexual desire, death of spouse, separation, presence of younger cowives who could satisfy their husband better and also been too old to engage in sexual activity. Deteriorating sex life had also been reported in other populations. In a study among 875 American women, sexual activity was decreased at menopause (70% among those aged 45–54 years and 60% among those aged 56–64 years).<sup>[15]</sup> This study among American women could not ascertain if reduction in sexual activity was solely related to menopause but revealed that there were reasons to believe that some menopause-related symptoms interfere with sexuality. Vaginal atrophy can lead to vaginal dryness and fragility which causes dyspareunia and in some women reduced arousal during sex.<sup>[15]</sup>

Awareness of HRT was very poor in this study; only 39 (7.3%) were aware of HRT, and 92.7% have not heard of the word. In a study in Mauritius, 85.5% of the women had never heard about HRT and of the 14.5% who said that they heard about it, over 30% said that they had no idea what it was.<sup>[16]</sup> None of the women studied was on HRT and this finding was similar to the finding in Ibadan where none of the participants was on HRT.<sup>[8]</sup> Okonofua *et al.* reported that six out of the 563 (1.1%) menopausal women studied at Ile-Ife were on HRT.<sup>[9]</sup> The poor awareness and lack of use of HRT could be partly attributed to the considerable variation in attitudes towards HRT among Physicians. One group view HRT as the universal remedy for almost all postmenopausal women<sup>[13]</sup> while others think it is unnecessary for the majority of women, and may even be harmful.<sup>[17]</sup>

This study suggests that majority of our women perceived menopause as a normal physiological event in their life that does not necessitate medical treatment. This finding is similar to that in Ibadan,<sup>[8]</sup> Ile-Ife,<sup>[9]</sup> Alexandra Egypt and Scotland.<sup>[3]</sup> Majority of the women showed a positive attitude toward menopause and regarded it as a normal physiological event.

In conclusion, while menopause is well-tolerated by women in our environment, it needs further investigation. Research priorities should include the effect of sociocultural beliefs on sexuality at menopause and HRT: Its efficacy, low awareness and utilization among our menopausal women.

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